## UNAIDS Programme Acceleration Fund (PAF) UNAIDS Strategic Planning and Development Fund (SPDF)

# National Strategic Plan of Action for HIV/AIDS Prevention in Georgia

2003-2007

Joint United Nations Programme on HIV/AIDS (UNAIDS)
United Nations Children's Fund (UNICEF)
Infectious Diseases, AIDS and Clinical Immunology Research Center (IDACIRC)







September 2002

## LIST OF ACRONYMS

AIDS	Acquired Immunodeficiency Syndrome							
ARV	Anti-Retroviral							
ССМ	Country Coordination Mechanism							
CSW(s)	Commercial Sex Worker (s)							
GEL	Georgian Lari							
NCW	Health Care Workers							
HIV	Human Immunodeficiency Virus							
IEC	Information, Education, Communication							
IDACIRC	Infectious Diseases, AIDS and Clinical Immunology Research Centre							
IDU	Intravenous Drug Use							
IT	Information Technology							
MIS	Management Information System							
MLHSA	Ministry of Labour, Health and Social Affairs							
MOE	Ministry of Education							
MPSRC	Medical, Preventive and Social Rehabilitation Center							
MSM	Men having Sex with Men							
NAC	National AIDS Centre							
NGO	Non-Governmental Organization							
NSPA	National Strategic Plan of Action							
PAF	Programme Acceleration Fund							
PCR	Polymerase Chain Reaction							
PE	Peer Education							
PLWHA	Peoples Living With HIV/AIDS							
(P)MTCT	(Prevention of) Mother-To-Child-Transmission							
РРАНА	People Personally Affected by HIV/AIDS							
PSI	Population Service International							
SPDF	Strategic Planning and Development Fund							
STD/STI	Sexually Transmitted Diseases/Infections							
тот	Training of Trainers							
UNAIDS	United Nations Joint Programme on HIV/AIDS							
UNDP	United Nations Development Programme							
UNFPA	United Nations Population Fund							
UNICEF	United Nations Children's Fund							
UNTG	United Nations Theme Group							
UNTWG	United Nations Technical Working Group							
USAID	United States Agency for International Development							
USD	United States Dollar							
VCT	Voluntary Counselling and Testing							
WAD/WAVD	World AIDS Day/World AIDS Victims Day							
WHO	World Health Organization							

## **FOREWARD**

The present document – 2003-2007 National Strategic Plan of Action on HIV/AIDS Prevention in Georgia – is the outcome of the expanded national strategic planning process on HIV/AIDS launched in the country in 1999. The Plan of Action is the 3<sup>rd</sup> step of NSPP, following a comprehensive Situation and Response Analysis undertaken by the programme partners over the last biennium - 2001-2002.

The first draft of the National Strategic Plan of Action for HIV/AIDS Prevention in Georgia has been elaborated by the country delegation (Government, NGO, UN and international agency representatives) at the Caucasus Area Meeting on HIV/AIDS National Response, supported by UNI-CEF/UNAIDS/USAID in June 2000 - Odessa, Ukraine.

Revision of the national strategic interventions has been undertaken at the USAID/PSI supported second Caucasus Area Meeting on HIV held in November 2001 in Vienna, Austria.

However within the period through close partnership of CCM and UNTG partners, Situation Analysis on HIV/AIDS (2001) and National Response Analysis (2002) have been undertaken. The two analytical documents, with sound technical expertise and relevant recommendations gave a comprehensive data for refinement and finalization of the NSPA for YY2003-2007.

The National Strategic Plan of Action on HIV/ADS Prevention in Georgia targets at mainstreaming the key programmatic priorities and recommendations of the global and regional policy and strategy frameworks - Declaration of Commitment (outcome document of the UNGASS on HIV/AIDS in June 2001), Millennium Development Goals and the World Fit for Children (UNGASS for Children, May 2002).

The NSPA as the outcome document of the 3-year partnership programme has been finalized at the NSPP workshop (9-12 September 2002 - Tbilisi, Georgia) with participation of the multi-sectoral working group – national experts' team from CCM and UNTG member agencies. The w-shop was facilitated by Dr. Alexander Busel, the UNAIDS Consultant and the National Experts Team is taking this opportunity to extend the high appreciation and acknowledgements for his valuable support in formulation of document.

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## NATIONAL STRATEGIC PLAN OF ACTION FOR HIV/AIDS PREVENTION IN GEORGIA

## YY 2003-2007

(Budget total – estimated 15,408,653 USD)

## The Overall Goal of the NSPA:

Reduction of further spreading of HIV/AIDS epidemic in Georgia through development and implementation of effective control and prevention interventions in the high priority areas identified by the HIV/AIDS situation and response analysis.

#### Background:

Georgia is among the countries with relatively low HIV/AIDS prevalence but high potential risk for development of wide spread epidemic. By September 1, 2002 total of 320 HIV cases have been registered officially in the country. The prevalence and incidence of HIV/AIDS have progressively increased over the last 6 years with 8 HIV positive cases reported in 1996, 21 in 1997, 25 in 1998, 35 in 1999, 79 in 2000 and 93 in 2001. In January-September 2002 total of 67 new HIV positive cases have been registered officially. HIV/AIDS incidence rate increased from 0.16 (per 100,000 population) in 1996 to 1.82 in 2001. The prevalence rate was also raised substantially. The country has witnessed 15-fold increase in the disease prevalence - from as low as 0.37 (per 100,000 population) in 1996 to 5.68 by September 2002.

However, the official statistics does not reflect the actual situation in the country. According to the national and international experts' estimates the current number of HIV/AIDS cases in Georgia exceeds 1,500.

Major routes of the infection transmission: 71% through intravenous drug use, 22% and 3.6% - heterosexual and homosexual contacts, respectively, 1.4% - blood transfusions, 0.7% - MTCT and 0.7% - unknown.

Intravenous drug use (IDU) has been widespread. By 2001 total of 14,000 IDUs have been registered in the country as per official statistics, however the estimated number is considered to be reaching 120,000. 73% of IDUs report needle/syringe sharing and 87% non- or rare use of condoms. 71% of the registered HIV/AIDS cases in Georgia are attributed to intravenous injection of drugs. HIV prevalence among IDUs was 0.54% in 2000, however, high prevalence of Hepatitis C (58%) indicates for high potential risk of HIV transmission among the IDU population in the country.

The epidemiological studies have revealed 1.4% of HIV prevalence among CSWs, however the steadily increasing number of CSWs with high prevalence of STIs also indicates at the increased risk of HIV/AIDS transmission in this group. A survey carried out among 300 CSWs in 1998 revealed 68% STI prevalence, with 93.7% of investigated CSWs reporting non- or rare use of condoms.

Government of Georgia has fully realized the importance and urgency of undertaking effective proactive measured for HIV/AIDS prevention and control in the country. The Governmental commitment has been demonstrated in elaboration (1994) and implementation of the National Programmes on Safe Blood, Prevention of HIV/AIDS and STIs. In 1999 the HIV/AIDS National Programme was united with Safe Blood and STI programmes as a single national programme that envisages HIV/AIDS and STI epid-surveillance, testing of donated blood, public education,, provision of free diagnostics, treatment, out-patient and in-patient care to HIV/AIDS patients.

The programme also pays special attention to protection of the rights of PLWHA and support for care and rehabilitation of the patients and their families.

Establishment of the Governmental Commission on HIV/AIDS/STI and Other Socially Dangerous Diseases in 1996 targeted at improvement of the national response towards prevention of wide scale HIV/AIDS/STD epidemic in the country. The Commission coordinates all relevant activities planned/implemented within the national programmes considered as high priority areas of the public health sector in Georgia.

The second multi-sectoral coordination mechanism functioning in the country is the United Nations Theme Group (UNTG) on HIV/AIDS and UN Technical Working Group (UNTWG) established in 1999 and 2000, respectively. The UNTG and UNTWG with representation from UNAIDS cosponsor agencies –UNDP, UNICEF, UNFPA, WHO and World Bank, National government and NGO partners have been actively supporting the national strategic planning process on HIV/AIDS in Georgia and have been engaged in the expanded Governmental Commission on HIV/AIDS/STI.

The HIV/AIDS/STI prevention and control in Georgia within the overall scope of the global and regional strategy frameworks has been prioritized by the following national health policy documents:

- Georgian National Health Policy for 1999-2010 adopted by the Government of Georgia in 1999:
- ◆ Strategic National Health Plan for Georgia 2000-2009;
- Presidential Decree on "Improvement of HIV/AIDS/STI prevention activities in Georgia" issued in 1998, amended in February 2002;
- ◆ Poverty Reduction Strategy Paper 2001-2002;
- ♦ National Multi-Sectoral Programme on HIV/AIDS prevention for 2003-2007.
- ♦ Caucasus Declaration on Strengthening the National Responses to HIV/AIDS adopted by the Governments of Georgia, Armenia and Azerbaijan in June 2000 in Odessa, Ukraine

## **Major Priority Areas for Interventions**

Based on the finding and recommendations of the HIV/AIDS Situation and National Response Analysis performed in 2001 and mid-2002, respectively (supported within the scope of UNAIDS SPDF and PAF projects), the following key priority areas have been identified for design and planning of the policy and programmatic framework of 2003-2007 National Strategic Plan of Action on HIV/AIDS in Georgia:

- 0. Advocacy for development of adequate legislative basis for implementation of effective prevention interventions targeted at vulnerable groups of the population;
- 1. HIV/AIDS Prevention among IDUs, including IDUs in the penitential system;
- 2. HIV/AIDS and STI prevention among CSWs, MSM and their partners;
- 3. HIV/AIDS prevention among youth;
- 4. Safety of blood and blood products;
- 5. Prevention of Mother to Child Transmission of HIV infection;
- 6. Care and Support for People Personally Affected by HIV/AIDS, and
- 7. Prevention of HIV transmission within the health care facilities.

## Major Priority Areas, Key Strategies and Activities:

### **Priority 1:**

Advocacy for development of adequate legislative basis for implementation of effective prevention interventions targeted at vulnerable groups of the population.

(Total estimated budget for 2003-2007 - 52,000 USD)

## Overall Goal:

To develop adequate - supportive legislative and administrative basis for implementation of HIV/AIDS prevention interventions targeted at high-risk behavior groups of the population (IDUs, CSWs, MSM)

## Strategy 1.1.

Advocacy to initiate amendments in the current legislation for development of supportive legal environment for HIV prevention programmes among high-risk behavior groups (IDUs, CSWs, MSM)

- ◆ Organization of a national conference for key stakeholders with participation of national and international experts;
- Organization of round-table discussions, workshops, formal and informal meetings with government and NGO sector;
- Organization of workshops and press conferences for mass media representatives for creation of supportive policy and social attitudes towards revision of the legislative framework;
- Organization of thematic IEC campaigns to build public support for creation of supportive social environment for the new legislation.

Strategy1.1: Advocacy Implementation Plan (Preliminary) and Partnership

	Activity Decemention		Prograr	nme/Fisca	al Years		I wanta wa antina Dantu ana
	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	Organization of conference for main stakeholders with participation of national and international experts						Governmental Commission, Institute of drug addiction, IDACIRC, International Experts, UN TG, local/international NGOs, Media
2.	Organization of round-table discussions, workshops, formal & informal meetings with GOV/NGO sector						Governmental Commission, Institute of drug addiction, IDACIRC, International Experts, UN TG, local/international NGOs, Media
3.	Organization of workshops and press conferences for mass media representatives						Governmental Commission, UN TG, local and international NGOs, Media
4.	Organization of thematic IEC campaigns for public attitude formation						Governmental Commission, UN TG, Media

Strategy1.1: Advocacy
Preliminary Budget - Available Resources vs. Gaps

	Activity Description		Fi	iscal Year	'S	Total in		Available source/Ga	os	
		2003	2004	2005	2006	2007	USD	GOV/ NGO	DONOR	GAPS
1.	Organization of conference for main stake- holders with participation of national and international experts	20,000	-	-	-	-	20,000	1,000	2,000	17,000
2.	Organization of round-table discussions, workshops, formal & informal meetings with GOV/NGO sector	8,000	8,000	1	1	-	16,000	2,000	2,000	12,000
3.	Organization of workshops and press conferences for mass media representatives	3,000	3,000	-	-	-	6,000	1,000	1,000	4,000
4.	Organization of thematic IEC campaigns for public attitude formation	5,000	5,000	-	-	-	10,000	-	1,900	8,100
	TOTAL	36,000	16,000			-	52,000	4,000	6,900	41,100

## **Priority 2:**

## HIV/AIDS prevention among IDUs

(Total estimated budget for 2003-2007 - 3,980,500 USD)

## **Overall Goal:**

## Reduction of HIV prevalence and incidence among IDU population in Georgia;

- Strategy 2.1: Expansion of drug harm reduction programmes:
- Strategy 2.2: Peer education and outreach programmes targeted at IDU groups;
- Strategy 2.3: HIV prevention among IDUs within the penitential system.

## Strategy 2.1:

## Expansion of drug harm reduction (needle-exchange/methadone substitution therapy) programmes

#### **Activities:**

- Building of government and public support for implementation of harm reduction programmes through organization of workshops, round-table discussions, meetings with participation of external experts and key stakeholders government, local and international NGOs, UN and international agencies, community representatives;
- Expansion of needle exchange programmes (target 14 programmes by 2007);
- Development of VCT and medical, psychological and social rehabilitation centers (MPSRC) for IDUs (target - 5 centers by 2007);
- Provision of VCT and medical rehabilitation services for IDUs, and
- Implementation of methadone substitution therapy through VCT and MPSRC centers.

#### Strategy 2.2:

## Peer education and outreach programmes targeted at IDUs

## **Activities:**

- Development and printing of IEC materials (posters, booklets, leaflets) for PE among IDUs;
- Recruitment and training of IDUs for peer education programmes;
- Recruitment and training of outreach workers;
- Provision of vehicles for implementation of outreach programmes;
- Implementation of peer education activities with IEC materials, needle/syringe and condom distribution:
- Implementation of outreach work;

## Strategy 2.3

## HIV prevention among IDUs within the penitential system

- Organization of meetings and workshops for achievement of consensus and development of joint programme plans with the Ministry of Justice and officials of penitential system – IEC, needle-exchange programmes, etc.
- Arrangement of training sessions for health care workers within the penitential system for effective implementation of VCT and needle exchange programmes;
- Production and distribution of IEC materials on HIV prevention within the penitential system;
- Pilot needle exchange programmes within the selected prisons.

Strategy 2.1: Expansion of Harm Reduction Programmes Implementation Plan (Preliminary) and Partnership

	Activity Description		Prograi	nme/Fisca	al Years		Implementing Partners
		2003	2004	2005	2006	2007	
1.	Workshops, roundtable meetings to build government/public support						Governmental comm., UNTG, MLHSA, Institute of Drug addiction, OSGF, "Bemoni", "Tanadgoma"
2.	Needle exchange programmes						OSGF, Institute of drug addiction, IDACIRC, "Bemoni", "Sasoeba", PHD Ajara
3.	Development of VCT and MPSRC centers' network for IDUS						"Bemoni", "Tanadgoma""Sasoeba", IDACIRC
4.	VCT services						"Bemoni", "Tanadgoma", "Sasoeba", IDACIRC
5.	Medical-rehabilitation services						Institute of Drug Addiction, "Bemoni", Saseoba
6.	Methadone substitution therapy						Institute of Drug Addiction, "Bemoni", Saseoba

## Strategy 2.1: Expansion of Harm Reduction Programmes Preliminary Budget - Available Resources vs. Gaps

	Activity Description			Fiscal Year	rs	Total in USD	R	Available esource/C	_	
		2003	2004	2005	2006	2007		GOV/ NGO	DONOR	GAPS
1.	Workshops, roundtable meetings to build government and public support	4,000	3,000	-	-	-	7,000	1,000	2,000	4,000
2	Needle exchange programmes	216,000	236,000	256,000	276,000	296,000	1,280,000	-	500,000	780,000
3.	Development of VCT and MPSRC centers' network for IDUS	80,000	120,000	160,000	200,000	240,000	800,000	-	200,000	600,000
4.	VCT services	30,000	45,000	60,000	75,000	90,000	300,000	-	80,000	220,000
5.	Medico-rehabilitation services	40,000	50,000	70,000	70,000	70,000	300,000	-	95,000	205,000
6.	Methadone substitution treatment	40,000	55,000	72,000	125,000	125,000	417,000	35,000	-	382,000
	TOTAL	410,000	509,000	618000	746000	821000	3,104,000	36,000	877,000	2,191,000

Strategy 2.2: Peer Education and Outreach Targeted at IDUs Implementation Plan (Preliminary) and Partnership

	Activity Description		Progran	nme/Fisca	al Years		Implementing Partners
		2003	2004	2005	2006	2007	
1.	Development and printing of IEC materials						Institute of Drug addiction, NGOs - OSGF, "Bemoni", "Sasoeba", "Tanadgoma"
2.	Recruitment and training of IDUs for peer education						IDACIRC, "Tanadgoma", "Bemoni", "AIDS Patients Support Foundation"
3.	Recruitment and training of out- reach workers						IDACIRC, "Tanadgoma", "Bemoni", "AIDS Patients Support Foundation"
4.	Provision of vehicles for outreach programmes (5 vehicles in total)						Institute of Drug addiction, "Bemoni", "Tanadgoma", "Sasoeba", IDACIRC
5.	PE with IEC materials, needle/ syringes and condom distribution						Institute of Drug Addiction, IDACIRC, "Bemoni", Saseoba, "Tanadgoma"
6.	Implementation of outreach work						Institute of Drug Addiction, IDACIRC, "Bemoni", Saseoba, "Tanadgoma"

## <u>Strategy 2.2</u>: Peer Education and Outreach Targeted at IDUs Preliminary Budget - Available Resources vs. Gaps

	Activity Description		S		Total in USD	Re	Available source/Ga			
		2003	2004	2005	2006	2007		GOV/ NGO	DON	GAPS
1.	Development and printing of IEC materials	7,000	9,000	11,000	14,000	14,000	55,000	5,000	5,000	45,000
2	Recruitment and training of IDUs for peer education	7,000	7,000	8,000			22,000	2,000	2,000	18,000
3.	Recruitment and training of outreach workers	7,000	7,000	8,000			22,000	2,000	5,000	15,000
4.	Provision of vehicles for outreach programmes (5 vehicles in total)	40,000	30,000	25,000			95,000			95,000
5.	PE with IEC materials, needle/ syringes and condom distribution	27,000	32,000	37,000	42,000	47,000	185,000	10,000	20,000	155,000
6.	Implementation of outreach work	32,000	42,000	52,000	62,000	72,000	260,000	10,000	50,000	200,000
	TOTAL	120,000	127,000	141,000	118,000	133,000	639,000	29,000	82,000	528,000

<u>Strategy 2.3:</u> HIV Prevention among IDUs within the Penitential System Implementation Plan (Preliminary) and Partnership

	Activity Description		Prograi	mme/Fisca	al Years		Implementing Partners
		2003	2004	2005	2006	2007	
1.	Organization of round-table meet- ings with the Ministry of Justice and officials of the penitential system						Governmental Commission, MLHSA, Institute of Drug addiction, IDACIRC, UNTG, NGOs - OSGF, "Bemoni", "Sasoeba", "Tanadgoma"
2.	Arrangement of training sessions for HCWs within the penitential system						IDACIRC, "Tanadgoma", "AIDS Patients Support Foundation"
3.	Distribution of IEC materials on HIV prevention penitential system						IDACIRC, "Tanadgoma", "AIDS Patients Support Foundation"
4.	Pilot needle–exchange programmes within the selected sites (3 prisons)						"Tanadgoma", "Bemoni", "Sasoeba", "AIDS Patients Support Foundation", OSGF

## <u>Strategy 2.3:</u> HIV Prevention among IDUs within the Penitential System Preliminary Budget - Available Resources vs. Gaps

	Activity Description			Fiscal Yea	rs		Total in Available USD Resource/Ga			_
		2003	2004	2005	2006	2007		GOV/ NGO	DO- NOR	GAPS
1.	Organization of round-table meetings with the Ministry of Justice and officials of the penitential system	6,000	4,000	-	-	-	10,000	4,000	1	6,000
2	Arrangement of training sessions for HCWs within the penitential system	4,000	4,000	1	i	1	8,000	1	1	8,000
3.	Distribution of IEC materials on HIV prevention within the penitential system	7,000	7,500	8,000	8,500	8,500	39,500	-	1	39,500
4.	Pilot needle–exchange programmes within the selected sites (3 prisons)			50,000	60,000	70,000	180,000	-	-	180,000
	TOTAL	17,000	15,500	58,000	68,500	78,500	237,500	4,000	-	233,500

#### **Priority 3:**

## HIV/AIDS and STI prevention among CSWs, MSM and their Partners

(Estimated total for 2003-2007 - 1,970,760 USD):

### **Overall Goal:**

Prevention of HIV/AIDS and STIs incidence and prevalence among CSWs, MSM and their partners;

Strategy 1: Development of network of centers for Voluntary Counseling and Testing (VCT) on HIV and STIs and provision of free STI treatment for CSWs and MSM;

Strategy 2: Development of targeted outreach and PE programmes for CSWs and MSM;

Strategy 3: Development of HIV/AIDS and STI prevention programmes for regular partners of CSWs (ref.: HIV/AIDS situation analysis – majority of CSWs' partners are policemen and transit truck drivers).

## Strategy 3.1:

Development of network of centers for VCT on HIV and STIs and provision of free-of-charge STI treatment for CSWs and MSM;

#### **Activities:**

- ♦ Establishment of new centers for VCT and free STI treatment, with a demonstrated effectiveness from working experience of the NGO "Tanadgoma" and "Healthy Cabinet" (target -6 centers by 2007).
- Training of programme staff for the effective operation of new centers;
- Provision of face to face and hot-line counseling to CSWs and MSM;
- Provision of free testing on HIV and STIs;
- Provision of free treatment on STIs;
- Development and dissemination of IEC materials for the target group;
- ◆ Free condom distribution;
- Promotion of female condoms.

## Strategy 3.2:

Development of targeted outreach and peer education programmes for CSWs and MSM

## **Activities:**

- Conducting surveys, mapping exercises and spot cites for peer education and outreach interventions;
- Recruitment and training of CSWs and MSM as peer educators;
- Recruitment and training of programme staff for outreach work among CSWs and MSM;
- Procurement of vehicles for outreach programmes;
- Implementation of outreach programmes among CSWs and MSM;
- Distribution of IEC materials and condoms (free).

## Strategy 3.3:

Development of HIV/AIDS and STI prevention programme for regular partners (clients) of CSWs (ref.: HIV/AIDS situation analysis – majority of CSWs' partners are policemen and transit truck drivers).

- ◆ Development and printing thematic IEC materials for CSWs partners (clients) e.g. transit truck drivers and police workers;
- Distribution of IEC materials and condoms through custom service and police departments;
- Organization of seminars/workshops on HIV/AIDS/STI prevention for police departments.

Strategy 3.1: Development of Network of Centers for VCT Implementation Plan (Preliminary) and Partnership

	Activity Description		Prograr	nme/Fisca	al Years		Implementing Partners
		2003	2004	2005	2006	2007	
1.	Establishment of new centers for VCT and free STI treatment (6 centers by 2007)						"Tanadgoma", IDACIRC, STI institute, Health Cabinet at the STI Institute
2.	Training of the staff within the new centers						"Tanadgoma", IDACIRC, STI institute, Health Cabinet at the STI Institute
3.	Provision of VCT for CSWs and MSM						"Tanadgoma", IDACIRC, STI institute, Health Cabinet at the STI Institute
4.	Provision of free treatment on STIs						Healthy Cabinet at the STI Institute, newly established centers
5.	Development and disseminate IEC materials						"Tanadgoma", IDACIRC, STI institute, Health Cabinet at the STI Institute
6.	Free condom distribution						"Tanadgoma", IDACIRC, STI institute, Health Cabinet at the STI Institute
7.	Promotion of female condoms						"Tanadgoma", IDACIRC, STI institute, Health Cabinet at the STI Institute

Strategy 3.1: Development of Network of Centers for VCT Preliminary Budget - Available Resources vs. Gaps

	Activity Description		F	iscal Years	5	Total in USD	F		Available source/Gaps	
		2003	2004	2005	2006	2007		GOV/ NGO	DONOR	GAPS
1.	Establishment of new centers for VCT and free STI treatment (6 centers by 2007)	84,460	232,000	146,000	146,000	146,000	754,460	-	-	754,460
2	Training of the staff within the new centers	45,000	67,000	84,000	102,000	110,000	408,000	20,000	40,000	348,000
3.	Provision of VCT for CSWs and MSM	1,000	1,500	1,000	1,000	1,000	5,500	-	5,500	-
4.	Provision of free treatment on STIs	7,000	14,000	18,000	21,000	24,000	84,000	40,000	-	44,000
5.	Development and disseminate IEC materials	500	1,000	1,500	1,500	1,500	6,000	1,000	5,000	-
6.	Free condom distribution	6,000	10,000	14,000	18,000	22,000	70,000	-	20,000	50,000
7.	Promotion of female condoms	1,000	2,000	3,000	4,000	5,000	15,000	-	5,000	10,000
	TOTAL	144,960	327,500	267,500	293,500	309,500	1,342,960	61,000	75,500	1,206,460

Strategy 3.2: Targeted Outreach and Peer Education Programmes for CSWs and MSM Implementation Plan (Preliminary) and Partnership

	Activity Description		Progran	mme/Fisca	al Years		Implementing Partners
		2003	2004	2005	2006	2007	
1.	Surveys, mapping exercises and spot cites for peer education and outreach interventions						"Tanadgoma", newly established centers
2.	Recruitment and training of CSWs and MSM as peer educators;						"Tanadgoma", newly established centers
3.	Recruitment and training of programme staff for outreach work among CSWs and MSM;						"Tanadgoma", newly established centers
4	Provision of vehicles for outreach programmes						"Tanadgoma", newly established centers
5.	Outreach programme for CSWs and MSM						"Tanadgoma", newly established centers
6.	Distribution of IEC materials and free condoms						"Tanadgoma", newly established centers

<u>Strategy 3.2</u>: Targeted Outreach and Peer Education Programmes for CSWs and MSM Preliminary Budget - Available Resources vs. Gaps

	Activity Description			Fiscal Yea	ars		Total in USD	Re	Available source/G	
		2003	2004	2005	2006	2007		GOV/ NGO	DONOR	GAPS
1.	Surveys, mapping exercises and spot cites for peer education and outreach interventions	3,000	-	6,000	-	-	9,000	2,000	2,000	5,000
2.	Recruitment and training of CSWs and MSM as peer educators;	800	1000	1000	1000	1000	4,800	800	2,000	2,000
3.	Recruitment and training of programme staff for outreach work among CSWs and MSM;	1,500	1,500	1,500	1,500	1,500	7,500	1,500	3,000	3,000
4.	Provision of vehicles for outreach programmes	-	10,000	10,000	5,000	5,000	30,000	-	-	30,000
5.	Outreach programme for CSWs and MSM	25,000	40,000	50,000	65,000	85,000	265,000		25,000	240,000
6.	Distribution of IEC materials and free condoms	6,000	8,000	10,000	12,000	14,000	50,000	5,000	5,000	40,000
	TOTAL	36,300	60,500	78,500	84,500	106,500	366,300	9,300	37,000	320,000

Strategy 3.3: HIV/AIDS/STI Prevention Programme for Partners of CSWs

Implementation Plan (Preliminary) and Partnership

	Activity Description		Progran	mme/Fisca	al Years		Implementing Partners
		2003	2004	2005	2006	2007	
1.	Development and printing of IEC materials for CSW partners (clients) – e.g. transit drivers and policemen						IDACIRC, "Tanadgoma"
2.	Distribution of IEC materials and free condoms through state custom service and police departments						IDACIRC, "Tanadgoma", newly established centers, "AIDS Patients Support Foundation"
3.	Training/workshops for police departments on HIV/AIDS/STI						IDACIRC, "Tanadgoma", newly established centers, "AIDS Patients Support Foundation"

## Strategy 3.3.: HIV/AIDS/STI Prevention Programme for Partners of CSWs Preliminary Budget - Available Resources vs. Gaps

	Activity Description			Fiscal Yea	ars	Total in USD	R	Available esource/Ga		
		2003	2004	2005	2006	2007		GOV/ NGO	DONOR	GAPS
1.	Development and printing of IEC materials for CSW partners (clients) – e.g. transit drivers and policemen	15,000	15,000	15,000	15,000	15,000	75,000	-	-	75,000
2.	Distribution of IEC materials and free condoms through state custom service and police departments	25,000	30,000	35,000	40,000	45,000	175,000	-	-	175,000
3.	Training/workshops for police departments on HIV/AIDS/STI	4,500	-	3,500	-	3,500	11,500	-	-	11,500
	TOTAL	44,500	45,000	53,500	55,000	63,500	261,500	-	-	261,500

#### **Priority 4:**

## Prevention of HIV/AIDS among Young People (14-25 year age group)

(Estimated total for 2003-2007 - 2,527,000 USD):

Overall Goal: Prevention of HIV/AIDS epidemic among youth through awareness rising and skills building for promotion of healthy life style

- Strategy 1: HIV/AIDS education at schools, universities and among displaced youth;
- Strategy 2: Voluntary Counselling and Testing (VCT) services for young people;
- Strategy 3: Awareness-raising on HIV/AIDS and promotion of safe sexual behavior among youth

## Strategy 4.1:

## HIIV/AIDS education at schools, universities and displaced youth

Objective 1: To ensure 80 percent coverage of secondary school (14-16 years old), high school and university students by HIV/AIDS/STI prevention education and communication programmes;

### Component 1:

Elaboration of the curriculum on HIV/AIDS education at schools and universities (life skills based health education and peer education);

#### **Activities:**

- Establishment of a working group to review the best practice experience and lessons learned from other countries implementing HIV/AIDS education at schools and to elaborate the education curriculum with appropriate teaching/reference materials (life skills based health education and peer education);
- ◆ Testing of life skills based health education and peer education curriculum through piloting at selected schools;
- Revision and development of the final educational curriculum for implementation at a national level:
- ♦ Elaboration of HIV/AIDS education guidelines and programmes for ToT and peer education training;

#### Component 2:

Training of trainers (TOT);

#### **Activities:**

- ♦ Selection of candidates for ToT;
- ◆ Invitation of external experts/trainers to facilitate the ToT;
- Organization of ToTs at central and regional levels;

### Component 3:

Training of teachers, peer educators and outreach workers;

## **Activities:**

- Selection of candidates for training teachers, youth representatives from schools, universities and out of school/displaced youth;
- Training of school teachers in life skills health education with emphasis on HIV/AIDS communication:
- Training of peer educators and outreach workers;

#### Component 4:

Piloting of the HIV/AIDS education curricula at schools (80 schools);

### **Activities:**

- Selection of schools for piloting HIV/AIDS education within life skills and peer education programmes;
- Development and printing of information-education-communication materials;
- Piloting of HIV/AIDS education curricula in selected schools;
- Evaluation of the pilot project results.

### Component 5:

Mobilization and advocacy for building supportive environment for life skills based health education among parents/care givers.

#### **Activities:**

- Organization of workshops and round-table discussions among parents for consensus building and creation of supportive environment and attitudes to HIV/AIDS education in schools;
- Development, printing and dissemination of IEC materials on HIV/AIDS education for parents/care providers;

#### Component 6:

Wide-scale implementation of HIV/AIDS education at schools (750 schools countrywide);

#### Activities

- ♦ Expansion of the ToT and teachers' training programmes ;
- Revision and printing of the teaching materials;
- ♦ National-scale implementation of HIV/AIDS education curricula at schools (life skills and peer education approaches).

## Component 7:

Outreach and peer education for youth at higher education institutions and for street/displaced youth;

- Implementation of peer education programmes at schools;
- Implementation of peer education programme among university students;
- Conducting KAP surveys and development of database on out of school/displaced youth;
- Development and implementation of special outreach and peer education programmes among out of schools/displaced youth.

Strategy 4.1: HIV/AIDS Education at Schools and Universities and for Displaced Youth Implementation Plan (Preliminary) and Partnership

	Activity Description	•	Prograi	mme/Fis	cal Years		
		2003	2004	2005	2006	2007	Implementing Partners
1.	Establishment of a working group and elaboration of the education curriculum (life skills health education and peer education);						Ministry of Education, MLHSA, IDACIRC, Graduate/Post-graduate training institutions for teachers, Groups parents, religious leaders
2.	Testing of the curriculum through piloting at selected schools;						Ministry of Education
3.	Revision and development of the final educational curriculum for implementation at a national level						Working group – national experts under coordination of the Ministry of Education
4.	Elaboration of HIV/AIDS education guidelines and programmes for ToT and PE training;						Working group, Ministry of Education
5.	Selection of candidates for ToT (life skills health education and peer education);						Working group, Ministry of Education
6.	Invitation of external experts/trainers to conduct ToT;						Working group, Ministry of Education
7.	Organize ToTs at central and regional levels;						Working group, Ministry of Education
8.	Selection of candidates for training – teachers, youth representatives from schools, universities and out of school/displaced youth;						Working group, Ministry of Education
9.	Training of school teachers to deliver pilot education on HIV/AIDS;						Working group, Ministry of Education, ministry of health, IDACIRC, Graduate training centers for teachers
10.	Training of peer educators and outreach workers;						IDACIRC, AIDS Patents Support Foundation, "Tanadgoma"
11	Selection of schools for piloting;						Working group, Ministry of Education,
12.	Production/printing of pilot educational materials;						Working group, MOED, MOH, IDACIRC, Graduate training centers for teachers

13.	Piloting of HIV/AIDS education curricula in selected schools;	Working group, Ministry of Education
14.	Evaluation of the pilot phase results	Working group
15.	Workshops for parents/care providers	MOE, MLHSA, IDACIRC, Graduate and Post- graduate training institutions for teachers, Groups of parents, religious leaders
16.	Development and disseminate IEC materials on HIV/AIDS education for parents/care givers;	Working group
17.	Expansion of teachers' training programmes	Working group, Ministry of Education, MLHSA, IDACIRC, post-graduate training centers for teachers
18.	Revision and production of teaching materials;	Working group, Ministry of Education
19.	Wide-scale implementation of HIV/AIDS education curricula at schools	Working group, Ministry of Education
20.	Implementation of peer education programmes at schools	Working group, Ministry of Education
21.	Implementation of peer education programme among university students	IDACIRC, "AIDS Patients Support Foundation", "Tanadgoma"
22.	KAP surveys and development/regularly update of database on out of schools/displaced youth.	Working group, Ministry of Education
23.	Development and implementation of special outreach and peer education programmes among out of schools/displaced youth.	Working group, "Tanadgoma", NGOs working on out of street /displaced youth, to be established

Strategy 4.1: HIV/AIDS Education at Schools and Universities and for Displaced Youth Preliminary Budget - Available Resources vs. Gaps

	Activity Description		Fi	iscal Years	3		Total in USD	Available Resource/Gaps		
		2003	2004	2005	2006	2007		GOV/ NGO	DONOR	GAPS
1.	Establishment of a working group and elaboration of the education curriculum (life skills health education and peer education);	3,000	•	1	-	1	3,000	-	3,000	-
2.	Testing of the curriculum through piloting at selected schools;	in kind	in kind	-	-	-	-	in kind	-	-
3.	Revision and development of the final edu- cational curriculum for implementation at a national level	1	1,500	1	1	-	1,500	-	1,500	-
4.	Elaboration of HIV/AIDS education guide- lines and programmes for ToT and PE training;	1,500	1	1	1	1	1,500	-	1,500	-
5.	Selection of candidates for ToT (life skills health education and peer education);	in kind	-	-	-	-	-	-	-	-
6.	Invitation of external experts/trainers to conduct ToT;	6,000		1	-	-	6,000	-	-	6,000
7.	Organize ToTs at central and regional levels;	36,000	-	36,000	-	-	72,000	-	20,000	52,000
8.	Selection of candidates for training – teachers, youth representatives from schools, universities and out of school/displaced youth;	in kind	in kind	in kind	in kind	in kind	-	in kind	-	-
9.	Training of school teachers to deliver pilot education on HIV/AIDS;	20,000	20,000	-	-	-	40,000	-	-	40,000
10.	Training of peer educators and outreach workers;	20,000	20,000	20,000	15,000	15,000	90,000	-	20,000	70,000

11.	Selection of schools for piloting;	in kind	-	-	-	-	-	in kind	-	-
12.	Production/printing of pilot educational materials;	27,000	27,000	-	-	-	54,000	-	20,000	34,000
13.	Piloting of HIV/AIDS education curricula in selected schools;	50,000	50,000	-	-	-	100,000	-	10,000	90,000
14.	Evaluation of the pilot phase results	-	1,500	-	-	-	1,500	1,500	-	-
15.	Workshops for parents/care providers	10,000	10,000	20,000	20,000	20,000	80,000	-	20,000	60,000
16.	Development and disseminate IEC materials on HIV/AIDS education for parents/care givers;	4,000	4,000	20,000	20,000	20,000	68,000	5,000	15,000	48,000
17.	Expansion of teachers' training programmes	1	•	52000	60000	68000	180,000	-	-	180,000
18.	Revision and production of teaching materials;	-	-	70,000	78,000	84,000	232,000	-	-	232,000
19.	Wide-scale implementation of HIV/AIDS education curricula at schools	-	-	80,000	100,000	120,000	300,000	-	-	300,000
20.	Implementation of peer education programmes at schools	15,000	20,000	30,000	30,000	30,000	125,000	-	15,000	110,000
21.	Implementation of peer education programme among university students	20,000	20,000	20,000	20,000	20,000	100,000	-	10,000	90,000
22.	KAP surveys and development/regularly update of database on out of schools/displaced youth.	5,000	1,500	5,000	1,500	1,500	14,500	1,500	5,000	8,000
23.	Development and implementation of special outreach and peer education programmes among out of schools/displaced youth.	30,000	16,000	20,000	20,000	20,000	106,000	-	-	106,000
	TOTAL	247,500	191,500	373,000	364,500	398,500	1,575,000	8,000	141,000	1,426,000

## Strategy 4.2:

## Voluntary Counseling and Testing (VCT) services for young people

### **Objective:**

By 2007 ensure accessibility and affordability of voluntary counseling and testing on HIV/AIDS for >90 percent of young people throughout Georgia.

#### Component 1:

Establishment of youth friendly VCT centers network throughout the country

#### **Activities:**

- Establishment/expansion of VCT services for youth at regional/district levels;
- Ensure access to VCT services for youth at central and regional/district levels;
- ♦ Training of centres' staff on voluntary counseling and testing service provision;
- Operation of HIV/AIDS hot-lines at youth VCT centers;

#### Component 2:

To support the VCT with appropriate IEC materials

## **Activity:**

• Development, printing and provision of IEC materials to VCT centers

#### Component 3:

Outreach work for university students and out of school youth.

#### **Activity:**

• Conduct outreach programmes for university students and out of school youth.

## Component 4:

Condom distribution

## **Activity:**

distribute condoms free of charge among attendees of VCT centers and during outreach sessions;

## Strategy 4.3:

Awareness-raising on HIV/AIDS and promotion of safe sexual behavior among youth

## **Objective:**

To increase awareness on HIV/AIDS among youth and promote safer sexual behavior;

#### Component 1:

To conduct wide scale IEC campaigns on HIV/AIDS/STI prevention targeted at youth;

## **Activities:**

- To organize cultural and sport events to deliver HIV/AIDS education messages for youth;
- ◆ To commemorate WAD and WAVD;
- ◆ To Develop and disseminate IEC materials;
- ◆ To organize talk-shows, radio and TV programmes on HIV/AIDS for youth.

### Component 2:

Condoms social marketing campaign

- To develop and broadcast TV and radio commercials;
- ◆ To organize events for free condom distribution.

## **Strategy 4.2:** VCT Services for Youth

Implementation Plan (Preliminary) and Partnership

	Activity Description		Prograr	nme/Fisca	Implementing Partners		
		2003	2004	2005	2006	2007	
1.	Establish/expand youth friendly health services with VCT on HIV at regional/district level;						CCM, UNTG (UNICEF, UNFPA), partner NGOs, IDACIRC, regional/district NGOs, "Tanadgoma" center and regional branches
2.	Ensure access to VCT services for youth at central and regional/district levels;						CCM, UNTG (UNICEF, UNFPA), partner NGOs, IDACIRC, regional/district NGOs, "Tanadgoma" center and regional branches
3.	Staff training on voluntary counseling and testing;						"Tanadgoma", IDACIRC
4.	Operation of HIV/AIDS hot-lines at youth VCT centers;						CCM, UNTG (UNICEF, UNFPA), partner NGOs, IDACIRC, regional/district NGOs, "Tanadgoma" center and regional branches
5.	Development, printing and supply of VCT centers with IEC materials						Implementing partners at re- gional/district levels, "Tanadgoma", IDACIRC
6.	Implementation of outreach for university students & out-of-school youth						Implementing partners at regional/district levels
7.	Distribution of condoms among attendees of VCT centers and during outreach work;						Implementing partners at regional/district levels, "Tanadgoma", IDACIRC

## Strategy 4.2: VCT Services for Youth Preliminary Budget - Available Resources vs. Gaps

	Activity Description			Fiscal Yea	ars	Total in USD	Re	Available esource/G		
		2003	2004	2005	2006	2007		GOV/ NGO	DONOR	GAPS
1.	Establish/expand youth friendly health services with VCT on HIV at regional/district level;	60,000	30,000	20,000	25,000	25,000	160,000	-	20,000	140,000
2.	Ensure access to VCT services for youth at central and regional/district levels;	30,000	40,000	50,000	60,000	60,000	240,000	20,000	20,000	200,000
3.	Staff training on voluntary counseling and testing;	1,000	1,000	2,000	3,000	3,000	10,000	-	10,000	-
4.	Operation of HIV/AIDS hot-lines at youth VCT centers;	included in 2.	included in2.	included in 2.	included in 2.	included in 2.	-	-	-	-
5.	Development, printing and supply of VCT centers with IEC materials	5,000	5,000	8,000	12,000	12,000	42,000	5,000	10,000	27,000
6.	Implementation of outreach for university students & out-of-school youth	7,000	7,000	8,000	8,000	8,000	38,000	5,000	10,000	23,000
7.	Distribution of condoms among attendees of VCT centers and during outreach work;	5,000	5,000	7,000	10,000	10,000	37,000		10,000	27,000
	TOTAL	108,000	88,000	95,000	118,000	118,000	527,000	30,000	80,000	417,000

Strategy 4.3: Awareness rising on HIV/AIDS/STI and safe sexual behavior promotion among youth Implementation Plan (Preliminary) and Partnership

	Activity Description		Progran	mme/Fisca	al Years	Implementing Partners	
		2003	2004	2005	2006	2007	
1.	To organize cultural and sport events to deliver HIV/AIDS education messages for youth						CCM, IDACIRC, UNICEF, UNFPA, UNDP, WHO, PSI, Save the Children, "AIDS Patients Support Foundation", "G+G", "Tanadgoma", Media
2.	WAD and WAVD Campaigns						CCM, IDACIRC, UNICEF, UNFPA, UNDP, WHO, PSI, Save the Children, "AIDS Patients Support Foundation", "G+G", "Tanadgoma", Media
3.	Development and dissemination of IEC materials;						CCM, IDACIRC, UNICEF, UNFPA, UNDP, WHO, PSI, Save the Children, "AIDS Patients Support Foundation", "G+G", "Tanadgoma", Media
4.	Talk-shows, radio and TV programmes on HIV/AIDS for youth.						CCM, IDACIRC, UNICEF, UNFPA, UNDP, WHO, PSI, Save the Children, "AIDS Patients Support Foundation", "G+G", "Tanadgoma", Media
5.	Development/broadcast of TV and radio commercials;						CCM and UNTG partners, IDACIRC, Media
6.	Organization of events for free condom distribution						CCM and UNTG partners, IDACIRC, Media
7.	Free condom distribution						CCM and UNTG partners, IDACIRC, Media

Strategy 4.3: Awareness rising on HIV/AIDS/STI and safe sexual behavior promotion among youth Preliminary Budget - Available Resources vs. Gaps

	Activity Description		i	iscal Year	rs .	Total in USD	Available Resource/Gaps			
		2003	2004	2005	2006	2007		GOV/ NGO	DO- NOR	GAPS
1.	Organization of cultural and sport events to deliver HIV/AIDS education messages for youth;	20,000	25,000	25,000	25,000	25,000	120,000	5,000	20,000	95,000
2.	To commemorate WAD and WAVD;	5,000	5,000	7,000	7,000	7,000	31,000	2,000	10,000	19,000
3.	To Develop and disseminate IEC materials;	15,000	15,000	20,000	20,000	25,000	95,000		20,000	75,000
4.	To organize talk-shows, radio and TV programmes on HIV/AIDS for youth;	5,000	5,000	7,000	7,000	7,000	31,000		10,000	21,000
5.	To develop and broadcast TV and radio commercials;	10,000	10,000	15,000	20,000	20,000	75,000		10,000	65,000
6.	To organize events for free condom distribution;	5,000	7,000	7,000	7,000	7,000	33,000	1,000	15,000	17,000
7.	Free condom distribution	5,000	5,000	10,000	10,000	10,000	40,000		10,000	30,000
	TOTAL	65,000	72,000	91,000	96,000	101,000	425,000	8,000	95,000	322,000

# **Priority 5:**

# Safety of Blood and Blood Products

(Total estimated budget for 2003-2007 - 2,267,625 USD)

#### **Overall Goal:**

Prevention of HIV transmission through securing safety of blood and blood products during transfusion.

# Strategy 1:

To ensure HIV testing of donated blood

#### Objective:

By 2007 ensure testing of >95 percent donated blood on HIV.

# Component 1:

Procurement of quality test-systems for testing of donated blood

#### **Activity:**

- Procurement of test-systems and equipment;
- Quality control of test-systems for screening and conformation testing of blood on HIV;

#### Component 2:

Testing of donated blood on HIV

#### **Activity:**

- Screening of donated blood on HIV by ELISA and rapid/simple tests;
- Confirmation of ELISA positive samples by Western Blot;
- ◆ Confirmation by PCR;

# Strategy 2:

Increase share of voluntary donations of blood

# **Activities:**

- Planning and implementation of IEC campaigns for promotion of voluntary blood donation;
- Development, printing and dissemination of thematic IEC materials;
- Development of incentives for voluntary donation of blood;

# Strategy 3:

Development of state of art system for safe blood programme

# Component 1:

Enhance capacities of HIV testing labs

#### **Activities:**

- Enhance ELISA testing capacity within the blood testing labs at the central level;
- Enhance ELISA testing capacity at the regional labs.

# Component 2:

Improvement of logistics support - blood transportation systems

#### Activity:

Procurement of vehicles for blood banks and HIV testing labs in Tbilisi and regional centers;

# Component 3:

Development of the Management Information System (MIS)

#### Activities

- Development of Blood Bank Database for MIS;
- Procurement of IT equipment and server for HIV diagnostic labs in Tbilisi and regional centers for establishment of IT/MIS network;
- Establishment of the Safe Blood MIS network;

# Component 4:

Capacity building of national staff in IT/MIS operation

# **Activities:**

- Training of Lab personnel on MIS operation at central and regional levels;
- Training of lab personnel on screening and confirmation methods of testing on HIV at central and regional levels;
- Organization of workshops on management of blood safety and effective blood (blood product) transfusion systems;
- Revision of guidelines for health care workers on proper indications and safety of blood (blood product) transfusion;

Strategy 5: Safety of Blood and Blood Products
Implementation Plan (Preliminary) and Partnership

	Activity Description		Prograr	nme/Fisca	al Years		Implementing Partners
		2003	2004	2005	2006	2007	
1.	Quality control of test-systems for screening and conformation testing of blood on HIV;						IDACIRC, central and regional Lab management
2.	Screening of donated blood on HIV by ELISA and rapid/simple tests;						IDACIRC, HIV diagnostic labs in Tbilisi and regional levels
3.	Confirmation of ELISA positive samples by Western Blot;						IDACIRC
4.	Confirmation by PCR;						IDACIRC
5.	Planning and implementation of IEC campaign to promote voluntary donation of blood;						MLHSA, Blood banks, Institute of Hematology and Transfusiology, IDACIRC, NGO "Amagleba",
6.	Development, printing and dissemination of thematic IEC materials;						MLHSA, Blood banks, Institute of Hematology and Transfusiology, IDACIRC, NGO "Amagleba"
7.	Developing incentives for voluntary donation of blood;						MLHSA, Blood banks, Institute of Hematology and Transfusiology, IDACIRC
8.	Enhance ELISA testing capacity within the blood testing labs at the central level;						MLHSA, IDACIRC
9.	Enhance ELISA testing capacity at the regional labs.						MLHSA, IDACIRC, regional public health departments
10.	Procurement of vehicles for blood banks and HIV testing labs in Tbilisi and in regions						MLHSA
11.	Development of Database for MIS						IDACIRC, Blookd banks in Tbilisi and regional centers
12.	Procurement of PC and server for HIV diagnostic labs in Tbilisi/regions						MLHSA, IDACIRC
13.	Development of Safe blood MIS network;						MLHSA, IDACIRC, Regional Public Health Departments
14.	Training of Lab personnel on MIS operation;						IDACIRC

15.	Training of lab personnel on screening and confirmation methods of testing on HIV;			IDACIRC
16.	Organization of workshops on issue of safe and effective blood transfusion;			MLHSA, Blood banks, Institute of Hematology and Transfusiology
17.	Revision of guidelines for health care workers on indications and safety of blood transfusion;			MLHSA, Blood banks, Institute of Hematology and Transfusiology

# Strategy 5: Safety of Blood and Blood Products Preliminary Budget - Available Resources vs. Gaps

	Activity Description			Fiscal Yea	ars	Total in USD		lvailable ource/Ga		
		2003	2004	2005	2006	2007		GOV/NG O	DON	GAPS
1.	Quality control of test-systems for screening/conformation testing of blood on HIV;	In kind	In kind	In kind	In kind	In kind	-	In kind	-	-
2.	Screening of donated blood on HIV by ELISA and rapid/simple tests;	350,000	350,000	390,000	390,000	400,000	1,880,000	1,475,300	-	404,700
3.	Confirmation of ELISA positive samples by Western Blot;	2,000	2,000	2,000	2,000	2,000	10,000	10,000	-	-
4.	Conformation by PCR;	4,925	4,925	4,925	4,925	4,925	24,625	24,625	-	-
5.	Planning and implementation of IEC campaign to promote voluntary donation of blood;	10,000	15,000	15,000	15,000	15,000	70,000	-	-	70,000
6.	Development, printing and dissemination of thematic IEC materials;	20,000	20,000	15,000	15,000	15,000	85,000	5,000	10,000	70,000

	Activity Description	Fiscal Years					Total in USD		vailable ource/Ga	ps
		2003	2004	2005	2006	2007		GOV/ NGO	DO- NOR	GAPS
7.	To develop incentives for voluntary donation of blood;	In kind	1	1	1	-	-	In kind	-	-
8.	Enhance ELISA testing capacity within the blood testing labs at the central level;	20,000	-	-	-	-	20,000	20,000	-	-
9.	Enhance ELISA testing capacity at the regional labs.	15,000	15,000	-	-	-	30,000	-		30,000
10.	Procurement of vehicles for blood banks and HIV testing labs in Tbilisi/regions	40,000	30,000	30,000	-	-	100,000	-	-	100,000
11.	Development of Database for MIS	3,000	-	-	-		3,000	3,000	-	-
12.	Procurement of PC and server computer for HIV diagnostic labs in Tbilisi/regions	8,500	7,500	-	-	-	16,000	-	6,000	10,000
13.	Development and maintenance of Safe blood MIS network;	3,000	3,000	3,000	3,000	3,000	15,000	2,000	-	13,000
14.	Training of Lab personnel on MIS operation;	2,000	2,000		-	-	4,000	-	-	4,000
15.	Training of lab personnel on screening and confirmation methods of testing on HIV;	In kind	In kind	In kind	In kind	In kind	-	In kind	-	-
16.	Organization of workshops on issue of safe and effective blood transfusion;	3,000	1,500	1,500	1,500	1,500	9,000	1,000	-	8,000
17.	Revision of guidelines for health care workers on indications and safety of blood transfusion;	500	-	500		-	1,000	1,000	-	-
	TOTAL	481,925	450,925	461,925	431,425	441,425	2,267,625	1,541,925	16,000	709,700

# **Priority 6:**

#### Prevention of Mother to Child transmission (MTCT) of HIV

(Total estimated budget for 2003-2007 - 489,748 USD)

#### Overall Goal:

Prevention of mother to child transmission (MTCT) of HIV infection through ensuring access and provision of quality counseling (antenatal, perinatal and during breast-feeding) to > 90% of pregnant women and their families

Strategy 1: Provide VCTs on HIV for pregnant women;

Strategy 2: Lab diagnostic and monitoring of HIV positive mothers and their newborns;

Strategy 3: HIV Prophylactic treatment for HIV positive mothers to prevent MTCT.

# Strategy 6.1:

Provide VCTs on HIV for pregnant women

#### Component 1:

Training of HCWs of Women Health Canters and obstetrics on provision of quality VCT services

#### **Activities:**

- Development of training curricula and educational materials on VCT for pregnant women
- Organization of training sessions on VCT for pregnant women among personnel of women consultation centers and maternity hospitals.

# Component 2:

Development and dissemination of IEC materials on HIV prevention for pregnant women

# **Activities:**

- ◆ Develop IEC materials on prevention of HIV MTCT
- ♦ Disseminate IEC materials among pregnant women attending women health centers

#### Component 3:

Provision of VCTs to pregnant women at women health centers

#### **Activity:**

Provision of VCT to pregnant women at women health centers

#### Strategy 6.2:

Lab diagnostics and clinical monitoring of HIV positive mothers and their newborns

#### **Activities:**

- Development of the national standard on lab diagnostics and clinical monitoring of HIV positive mothers and newborns;
- Clinical monitoring of HIV positive mothers:
- Lab diagnostics and follow-up to newborns of HIV positive mothers.

#### Strategy 6.3:

HIV Prophylactic treatment for HIV positive mothers to prevent MTCT

# **Activities:**

- Development of the national standards on prophylactic treatment of HIV positive mothers and newborns for prevention of MTCT;
- Provide HIV positive mothers with HIV Prophylactic treatment (retrovir for 22-week) PMTCT
- Provide newborns of HIV positive mothers with HIV Prophylactic treatment (6-week)

**Priority 6: Prevention of MTCT Implementation Plan (Preliminary) and Partnership** 

	Activity Description		Progran	nme/Fisca	al Years		Implementing Partners
		2003	2004	2005	2006	2007	
1.	Development of training curricula and educational materials on VCT for pregnant women						IDACIRC, MCH Department , MLHSA
2.	Training sessions on VCT for pregnant women for personnel of Women health Centers and obstetrics						IDACIRC, MCH Department, MLHSA
3.	Development and printing of IEC materials on PMTCT						IDACIRC, MCH Department, MLHSA
4.	Disseminate IEC materials among preg- nant women attending women health centers						IDACIRC, MLHSA, women health centers
5.	Provide VCT to pregnant women at women health centers						Women consultation centers and maternity hospitals at central, regional and district levels
6.	Development of the national standards on lab diagnostics and clinical monitoring of HIV positive mothers and newborns						IDACIRC, MCH Department, MLHSA
7.	Clinical monitoring of HIV positive mothers						IDACIRC, MCH services
8.	Lab diagnostics and monitoring of newborns of HIV positive mothers						IDACIRC, MCH services, diagnostic labs at central, regional and district levels
9.	Development of the national standards on prophylactic treatment of HIV positive mothers and newborns to prevent MTCT						IDACIRC, MCH Department, MLHSA
10.	Provide HIV positive mothers with HIV Prophylactic treatment (retrovir for 22-week) to prevent MTCT						IDACIRC
11.	Provide newborns of HIV positive mothers with HIV Prophylactic treatment (6-week)						IDACIRC

<u>Priority 6</u>: Prevention of MTCT Preliminary Budget – Available Resources vs. Gaps

	Activity Description	Fiscal Years						Re	Available source/Ga	ıps
		2003	2004	2005	2006	2007		GOV/ NGO	DONOR	GAPS
1.	Development of training curricula and ed. materials - VCT for pregnant women	in kind	-	-	-	-	in kind	in kind	-	-
2.	Training sessions on VCT for pregnant women for personnel of Women health Centers and obstetrics	21,000	10,500	10,500	-	-	42,000	-	12,000	30,000
3.	Development and printing of IEC materials on PMTCT	6,000	6,000	6,000	6,000	6,000	30,000	-	6,000	24,000
4.	Disseminate IEC materials among pregnant women attending WCSs	in kind	in kind	in kind	in kind	in kind	in kind	in kind	1	-
5.	Provide VCT to pregnant women at women health centers	34,149	54,215	64,830	77,245	97,311	327,750	-	-	327,750
6.	Development of the national standards on lab diagnostics and clinical monitoring of HIV positive mothers and newborns	in kind	-	-		-	in kind	in kind	1	
7.	Clinical monitoring of HIV positive mothers	1,500	2,500	5,000	7,500	8,500	25,000	5,000	-	20,000
8.	Lab diagnostics and monitoring of new- borns of HIV positive mothers	178	300	600	900	1,020	2,998	2,998	-	-
9.	Development of the national standards on prophylactic treatment of HIV positive mothers and newborns to prevent MTCT	in kind	-	-		-	in kind	in kind	1	
10.	Provide HIV positive mothers with HIV Prophylactic treatment (retrovir for 22-week) to prevent MTCT	3,600	6,000	12,000	18,000	20,400	60,000	-	-	60,000
11.	Provide newborns of HIV + mothers with HIV Prophylactic treatment (6-week)	120	200	400	600	680	2,000	2,000	-	-
	TOTAL	66,547	79,715	99,330	110,245	133,911	489,748	9,998	18,000	461,750

### **Priority 7:**

# Care and Support for People Personally Affected by HIV/AIDS

(Total estimated for 2003-2007 - 4,060,220 USD)

#### Overall Goal:

# Improvement of the life quality of People Personally Affected by HIV/AIDS

Strategy 1: Comprehensive Treatment for PLWHA, including ARVs;

Strategy 2: Services for People Personally Affected by HIV/AIDS;

Strategy 3: Advocacy and Social Mobilization;

Strategy 4: Resource Mobilization.

#### Strategy 1:

#### **Comprehensive Treatment including ARVs**

# Objective:

By 2007 ensure accessibility and affordability of testing, combination and symptomatic therapy for all AIDS patients (130 patients).

#### Component 1:

Provision of combination drug regimens - generic products to all AIDS patients

#### **Activities:**

- ♦ Continue to provide testing and symptomatic treatment for all PLHA through Government funding National AIDS Prevention Programme
- ♦ Continuous provision (non-interrupted) of HAART to 5 Patients living with AIDS within the National AIDS Prevention Programme (since 1996)
- ♦ Mobilize external support and internal resources for ensuring accessibility and affordability to HAART for all PLHA

# Component 2:

Ensuring availability of adequate diagnostic on HIV/AIDS for determination of the individual case management regimens

#### **Activities:**

- ♦ Institutional capacity building provision of the diagnostic equipment (resistance determination) to the National AIDS Center, the central referral service for all PLHA
- Establishment of regional diagnostic centers with CD4 and Viral Load determination capacity in Batumi and Zugdidi (regions with the highest incidence rates)
- Human capacity building in-service staff training for utilization/maintenance of the diagnostic equipment and provision of quality diagnostic and counseling services for individual case management. 3 Training in Tbilisi, Batumi and Zugdidi.

# Component 3:

Provision of qualified counseling for PLHA and family members before starting treatment (regimen, schedule, side effects, resistance, nutrition, monitoring, etc.)

#### **Activities:**

- ◆ Human capacity building development of local master trainers' group (4 specialists 2 from Tbilisi, 1 - Batumi and 1 - Zugdidi) and ToT course through exchange training programmes
- Cascade training on testing/counseling services at the central, regional and district levels (69 laboratories throughout the country) facilitated by Maters Trainers;
- Supporting establishment of counseling centers for PPAHA at central and sub-national levels;
- Awareness raising among PPAHA on the proper follow-up and compliance to treatment and continuous monitoring through self-support groups, PLHA networks, etc.

#### Component 4:

Provision of Monotherapy and quality counseling during infant feeding for HIV+ mothers and their families (ref.: strategy 3 - PMTCT).

# Component 5:

Inclusion of Hep C treatment for management of co-infections among PLHA

### **Activity:**

• Development of resource mobilization strategy for ensuring treatment regimens for HepC case management for all PLWHA with co-infection (see monitoring indicators & budget details).

### Component 6:

Advocacy and coordination for rational utilization of available scarce resources for meeting the ARV treatment requirements for all PLWHA

#### **Activities:**

- Arrangement of regular round-table discussions and consultations for key decision-makers (CCM member agencies) on exploring possibilities for alternative procurement mechanisms of HAART regimens. Seeking opportunities for provision of generics or advocating for signing TRIPS Agreement could increase the state funded HAART treatment coverage from 5 patients (2002) to 20 (with generics) or even all patients (through TRIPS Agreement).
- Assessment and research on demonstrated effectiveness (best practices) or failures (lessons learned) from introduction of generics regimens in other countries.
- Mobilization of private sector for phasing-in with their resource contributions to ARV treatment for PLHA.

# Monitoring and evaluation:

Interim and final Outcome Indicators:

- 1. Percentage of PLHA receiving testing and symptomatic treatment through the National Programme funds, including Hep C treatment (target 100%)
- 2. Percentage of AIDS patients receiving HAART (target 100%)
- 3. Percentage of PPAHA with access to qualified counseling services 20% by 2003, 40% 2004, 60% 2005, 80% 2006 and 100% by 2007.
- 4. Percentage of staff trained in diagnostics and testing/counseling services at the laboratory centers operating throughout Georgia 30% by 2003 and 100% by 2004.
- 5. Percentage of PLHA integrated in the national network for PPAHA at least 60% by 2007.

<u>Strategy 7.1</u>: Comprehensive Treatment including ARVs and Monitoring of AIDS Patients <u>Implementation Plan (Preliminary)</u> and Partnership

	Activity Description		Prograi	mme/Fisca	I Years		Implementing Partners
		2003	2004	2005	2006	2007	
1.	Testing and Symptomatic Treatment for PLWHA						MLHSA, National AIDS Center
2.	HAART for PLWHA						MLHSA, National AIDS Center
3.	Hep C treatment for all PLWHA with co-infection						MLHSA, National AIDS Center
4.	Diagnostic Equipment for the National AIDS Center						MLHSA, National AIDS Center
5.	Diagnostic Equipment for Batumi & Zugdidi Centers						MLHSA, National AIDS Center
6.	In-service Training for 3 centers – Tbilisi, Batumi and Zugdidi						National AIDS Center
7.	Exchange programme for Masters Trainers (4)						National AIDS Center; Regional AIDS Centers in Zugdidi and Batumi
8.	Cascade Training by Master Trainers Central/Regional/District Levels						Masters Trainers, NAC Central/Regional/District Centers
9.	Establishment of a counseling center at the central level (Tbilisi)						"Georgian + Group"
10.	Expansion of the counseling centers for PPAHA at regional levels						"Georgian + Group"; NAC Central/Regional/District Centers
11.	Assessment and research on best- practices/lessons learned - generics						Governmental Commission – GOV, NGO, International Agencies
12.	Advocacy and coordination meetings						Governmental Commission – GOV, NGO, International Agencies
13.	Achievement of final CCM agreement re: generics/TRIPS						Governmental Commission – GOV, NGO, International Agencies
14.	Continuous monitoring and evaluation						Governmental Commission – GOV, NGO, International Agencies

<u>Strategy 7.1</u>: Comprehensive Treatment including ARVs and Monitoring of AIDS Patients Preliminary Budget - Available Resources vs. Gaps

Activity Description		F	iscal Yea	rs		Total in USD	Re	Availabl source/0	
	2003	2004	2005	2006	2007		GOV/ NGO	DO- NOR	GAPS
Testing and Symptomatic Treatment for PLHA	106,600	159,000	236,000	359,000	415,400	1,276,000	200,000	-	1,076,000
2. HAART for PLHA	79,342	126,743	205,625	331,626	520,884	1,264,220	300,000	-	964,220
3. Hep C treatment for all PLHA with co-infection	42,000	82,000	103,000	126,000	147,000	500,000	-	-	500,000
4. Diagnostic Equipment for the National AIDS Center	409,000	28,500	28,500	28,500	28,500	523,000			523,000
5. Diagnostic Equipment for Batumi & Zug- didi Centers	-	25,000	25,000	-	-	50,000	-	-	50,000
6. In-service Training for 3 centers – Tbilisi, Batumi and Zugdidi – 500 USD/training	1,500	-	-	-	-	1,500	-	-	1,500
7. Exchange programme for Masters Trainers (4 trainers * 2,000 USD)	12,000	-	-	-	-	12,000	-	-	12,000
8. Cascade Training by Master Trainers Central/Regional/District Levels – total 70 trainings * 2 masters trainers * 2 days	10,000	10,000	-	-	-	20,000	-	-	20,000
9. Establishment of a counseling center at the central level (Tbilisi)	15,000	2,500	2,500	2,500	2,500	25,000	10,000	-	15,000
10. Expansion of the counseling centers for PPAHA at regional levels (3 centers)	25,000	6,000	6,000	6,000	6,000	49,000	-	-	49,000
11. Assessment and research on best- practices/lessons learned - generics	In kind	In kind	-	-	-	-	In kind	In kind	1
<ul><li>12. Advocacy and coordination meetings –</li><li>12 meetings per year</li></ul>	In kind	In kind	In kind	In kind	In kind	In kind	In kind	In kind	1
13. Achievement of final CCM agreement re: generics/TRIPS	In kind	In kind	In kind	In kind	In kind	In kind	In kind	In kind	-
14. Monitoring and Evaluation	3,000	3,000	3,000	3,000	3,000	15,000	2,000	2,000	11,000
TOTAL	703,442	442,743	609,625	856,626	1,120,284	3,735,720	512,000	2,000	3,221,720

# Strategy 7.2:

# Service for People Personally Affected by HIV/AIDS

### **Objective**

By 2007 ensure availability of accessible, affordable and confidential counseling, psychological and informational services for all PLHA and their family members:

#### Component 1:

Provision of Post-test counseling to all PPAHA both at central and regional/district levels – by physician psychologist and/or self-support groups' volunteers.

- 1. Ensure availability of at least one physician/psychologist or volunteer for post-test counseling at each 69 testing laboratories throughout the country;
- 2. In-service staff and/or volunteers' training for development/improvement of quality post-test counseling skills throughout Georgia;
- 3. Establishment of the national network for PPAHA and ensure continuous networking and coordination for provision of regular office and outreach (house) counseling services.

#### Component 2:

Continuous patients' education and education for family members

- Ensure availability or support establishment of accessible, affordable and confidential counseling services for PPAHA;
- Establishment of confidential and free 24 h hotline services at central or regional/local levels
- ♦ Equip all available and operating psychosocial and health counseling services at central/regional/district levels and provision of proper referral for PPAHA (specialized services, self-support organizations, counseling services, other health facilities);
- Development and distribution of information-education materials for counseling and psychological services to PPAHA;
- Organization of communication and peer education w-shops for PPAHA facilitated by Masters Trainers and international experts;
- Organization of annual meetings with representatives of regional/district centers and national PPAHA network for analysis of the achievements, constraints and identification of gaps and opportunities for further improvement of the programme performance.

# **Component 3: Information Services**

- Development and production of printed information-education-communication materials (series for PLWHA, production of periodical journals and publications for PLWHA);
- Organization of round-table meetings, seminars, w-shops for PPAHA;
- Development of a comprehensive communication programme for media advocacy TV/radio programes, talk shows and press articles.

# Monitoring and evaluation:

Interim and Final Outcome Indicators:

- 1. Percent coverage of the PPAHA with accessibility to affordable and confidential information-counseling services 20% by 2003, 40% 2004, 60% 2005, 80% 2006 and 100% by 2007.
- 2. Percent of PPAHA involved in the round-table meetings, seminars and w-shops 40% by 2005, 60% by 2007.
- 3. Percentage of adolescent and adult population covered by IEC materials 10%
- 4. Percentage of professional groups covered by IEC materials 40%
- 5. Percentage of PLWHA involved in job-opportunity initiatives at least 10% annually

Strategy 7.2: Service for People Personally Affected by HIV/AIDS Implementation Plan (Preliminary) and Partnership

	Activity Description		Prograi	mme/Fisca	al Years		Implementing Partners
		2003	2004	2005	2006	2007	
1.	Assessment of the existing staffing structure at regional/district labs and recruitment process						National AIDS Center, Georgina Positive Group, "AIDS Patients Support Foundation", Volunteers
2.	Training of service staff and volunteers (as the component of the cascade training course)						Masters Trainers, NAC, Central/Regional/ District Centers, Georgina Positive Group, "AIDS Patients Support Foundation"
3.	Establishment of the national PPAHA network and services						Georgina Positive Group
4.	Establishment of the central/ regional/district hotline service						NAC, Central/Regional/District Centers, Georgina Positive Group, "AIDS Patients Support Foundation"
5.	Inventory of all services and development of the referral list						NAC, Central/Regional/District Centers, Georgina Positive Group, "AIDS Patients Support Foundation"
6.	Development/production and distri- bution of IEC materials for counsel- ors						National AIDS Center, "Georgian Positive Group", "AIDS Patients Support Foundation"
7.	Communication and peer education w-shops (4 seminars)						National AIDS Center, "Georgian Positive Group", "AIDS Patients Support Foundation", other NGOs
8.	Annual meetings – w-shops for PPAHA						"Georgian Positive Group"
9.	Development of a comprehensive media advocacy and communication programme						Governmental Commission – GOV, NGO, International Agencies
10.	Continuous monitoring and evaluation						Governmental Commission – GOV, NGO, International Agencies

Strategy 7.2: Service for People Personally Affected by HIV/AIDS Preliminary Budget - Available Resources vs. Gaps

	Activity Description		Fisc	al Years			Total in Available Resource/Gaps			
		2003	2004	2005	2006	2007		GOV/ NGO	DO- NOR	GAPS
1.	Assessment of the existing staffing structure at regional/district labs and recruitment process	In kind	In kind	-	-	-	In kind	In kind	-	-
2.	Training of service staff and volunteers (as the component of the cascade training course)	See Budg. for Str. 7.1	See Budg. for Str. 7.1	1	1	1	See Budg. for Str. 7.1	1	1	-
3.	Establishment of the Nat. PPAHA network and services. Establishment of web-site & networking between regional centers	See Str. 7.1 Plus 1,000 for web-site	See Str. 7.1 Plus 1,000 for web-site	500	500	1000	See Str. 7.1 Plus 4,000 for web-site	1	1	4,000
4.	Establishment of the central/regional/ district hotline service	7,000	7,000	7,000	7,000	7,000	35,000	-	5,000	30,000
5.	Inventory of available services and development of the referral list	In kind	1	-	-	-	In kind	In kind	-	-
6.	Development/production and distribution of IEC materials for counselors	5,000	5,000	2,000	2,000	2,000	16,000	-	-	16,000
7.	Communication and peer education w-shops (12 seminars)	10,500	7,000	-	-	-	17,500	-	4,500	13,000
8.	Annual meetings – w-shops for PPAHA	3,000	3,500	3,500	3,500	3,500	17,000	-	-	17,000
9.	Development of a comprehensive media advocacy and communication programme	7,500	7,500	5,000	5,000	5,000	30,000	-	-	30,000
10.	Continuous monitoring and evaluation	2,000	3,000	3,000	3,000	3,000	14,000	2,000	2,000	10,000
	TOTAL	36,000	34,000	21,000	21,000	21,500	133,500	2,000	11,500	120,000

#### Strategy 7.3:

# **Advocacy and Social Mobilization**

# Objective:

Combat stigma and discrimination to PPAHA through formation of supportive social environment and attitudes among key policy makers and population in general.

# Component:

Advocacy and communication campaign for supportive attitude formation among the society to PPAHA.

# **Activity:**

- Communication programme for social attitude formation: mass media campaigns, talk shows, forums, actions, conferences, commemoration of WAD and WAVD campaigns, exhibitions.
- ♦ Organization of seminars, workshops for all key stakeholders policy makers, social and health service providers, population in general. Support arrangement of 12 seminars (monthly) with facilitation of international and local experts.
- ♦ Supporting exchange training programmes for provision of quality health and social services for PLHA (policy makers and health-social services providers 10 persons).
- ♦ Resettlement of PLHA for creation of job opportunities for PLHA establishment of professional/carrier training programmes (IT, language, management course training) in Tbilisi, Batumi and Zugdidi (3 centers).
- Supporting involvement of PLHA in exchange training or post-graduate education programmes.

# Strategy 7.4:

#### **Resource Mobilization**

### Objective:

Ensure development and implementation of a comprehensive resource mobilization plan for securing adequate human, technical and financial resources for effective implementation of the activities planned for 2003-2007.

#### **Activity:**

- 1. Mobilization of human resources for voluntary and professional work with PLHA organizations or counseling-psychological services
- 2. Mobilization of technical resources for administrative capacity building of PLHA organizations, including assistance for formation of regional branches
- 3. Development of a long-term fund-raising strategy with involvement of government, NGO, UN and other international organizations, private sector for programme sustainability with emphasis on accessibility and availability of ARV treatment for all PLWHA.
- 4. Organization of resource mobilization meeting with national/international GOV/NGO and private sector partners quarterly meetings through CCM or retreat meetings (annual).

**Strategy 7.3:** Advocacy and Social Mobilization Implementation Plan (Preliminary) and Partnership

	Activity Description		Progran	nme/Fisc	al Years		Implementing Partners
		2003	2004	2005	2006	2007	
1.	Communication programme for social attitude formation						Gov. Commission – GOV, NGO, International Agencies, Mass Media
2.	Organization of 12 workshops for all key stakeholders						Gov. Commission – National AIDS Center, GPG, AIDS PSF, Int. Experts
3.	Supporting exchange training programmes for 10 policy makers and health-social services providers						Governmental Commission - GOV, NGO, International Agencies
4.	Establishment of professional/carrier training programmes in Tbilisi, Batumi & Zugdidi						Governmental Commission – "Georgian + Group"
5.	Exchange training or post-graduate education for PLWHA						Governmental Commission – "Georgian + Group"

# Strategy 7.3: Advocacy and Social Mobilization Preliminary Budget - Available Resources vs. Gaps

	Activity Description	Fiscal Years					Total in USD	Re	Available source/G	
		2003	2004	2005	2006	2007		GOV/ NGO	DONOR	GAPS
1.	Communication programme for social attitude formation	See St. 7.2	-	-	-					
2.	Organization of 6 workshops for all key stakeholders (6 * 500 USD) per year	4,000	4,000	4,000	4,000	4,000	20,000	-	-	20,000
3.	International Consultancy for facilitation of 4 2-day w-shops	4,000	-	-	-	-	4,000	-	4,000	-
4.	Supporting exchange training programmes for 10 policy makers and health-social services providers	20,000	10,000	1	-	-	30,000	-	-	30,000
5.	Establishment of professional/carrier training programmes in Tbilisi, Batumi & Zugdidi	30,000	6,000	6,000	7,000	10,000	59,000	-	10,000	49,000
6.	Exchange training or post-graduate education for PLWHA	10,000	10,000	10,000	10,000	10,000	50,000	-	-	50,000
	TOTAL	68,000	30,000	20,000	21,000	24,000	163,000	-	14,000	149,000

**Strategy 7.4:** Resource Mobilization

Implementation Plan (Preliminary) and Partnership

	Activity Description	Programme/Fiscal Years		Implementing Partners			
		2003	2004	2005	2006	2007	
1.	Development of a long-term fund-raising strategy						Governmental Commission - GOV, NGO, UN and other International Agencies
2.	Organization of resource mobilization meeting with key players through CCM						Governmental Commission - GOV, NGO, UN and other International Agencies
3.	Retreat meetings with national/international GOV/NGO and private sector partners (annual)						Governmental Commission - GOV, NGO, UN and other International Agencies

Strategy 7.4: Resource Mobilization Preliminary Budget - Available Resources vs. Gaps

	Activity Description		Fi	scal Year	'S		Total		Partners	
		2003	2004	2005	2006	2007	in USD	GOV/ NGO	DONOR	GAPS
1.	Development of a long-term fund-raising strategy for human, technical and financial resource mobilization	In kind	In kind	In kind	In kind	In kind	In kind	In kind	In kind	-
2.	Organization of resource mobilization meeting with key players through CCM	3,000	3,000	3,000	2,000	2,000	13,000	1,000	2,000	10,000
3.	Retreat meetings with national/ international GOV/NGO and private sector partners (annual)	3,000	3,000	3,000	3,000	3,000	15,000	-	5,000	10,000
	TOTAL	6,000	6,000	6,000	5,000	5,000	28,000	1,000	7,000	20,000

#### **Priority 8:**

# Prevention of HIV transmission within health care facilities

(Total estimated for 2003-2007 - 60,800 USD)

#### **Overall Goal:**

# Prevention of HIV transmission within health care facilities

Strategy 1: Revision, amendment and dissemination of the national standards and protocols on universal precautions within health care facilities;

Strategy 2: National capacity building – provision of training for health care workers on universal precautions;

Strategy 3: Patients' education

#### Strategy 8.1:

Revision, amendment and dissemination of the national standards and protocols on universal precautions within health care facilities;

#### **Activities:**

- Establishment of experts' task force for revision of the existing national standards on universal precautions;
- Bringing the national standards in compliance with international standards and guidelines and adaptation within the local situation/capacities;
- Dissemination of the new standards/protocols within the health care facilities.

#### Strategy 8.2:

National capacity building – provision of training for health care workers on universal precautions:

# Activity:

• Organization of training sessions for HCWs at the central and regional levels;

# Strategy 8.3:

Patients' education

# Activity:

• Development and dissemination of thematic IEC materials on universal precaution measures among patients attending health care facilities;

Priority 8: Prevention of HIV transmission within health care facilities Implementation Plan (Preliminary) and Partnership

	Activity Description	Programme/Fiscal Years				Implementing Partners	
		2003	2004	2005	2006	2007	
1.	Establishment of experts' task force for revision of the existing national standards on universal precautions;						MLHSA, IDACIRC
2.	Bringing the national standards in compliance with international standards and guidelines and adaptation within the local situation/capacities						MLHSA, IDACIRC
3.	Dissemination of new standards/protocols within the health care facilities.						MLHSA
4.	Organization of training sessions for HCWs at the central and regional levels;						MLHSA, IDACIRC
5.	Development and dissemination of thematic IEC materials among patients attending health care facilities						IDACIRC, municipal and regional public health departments

Priority 8: Prevention of HIV transmission within health care facilities Preliminary Budget - Available Resources vs. Gaps

	Activity Description		F	Fiscal Years				Re	Available source/Gap	os
		2003	2004	2005	2006	2007		GOV/ NGO	DONOR	GAPS
1.	Establishment of experts' task force for revision of the existing national standards on universal precautions;	in kind	in kind	in kind	in kind	in kind	in kind	in kind	in kind	-
2.	Bringing the national standards in compliance with international standards and guidelines and adaptation within the local situation/capacities	2,000	-		1	-	2,000	2,000	-	-
3.	Dissemination of new standards/protocols within the health care facilities.	3,000		-	-	-	3,000	3,000	-	-
4.	Organization of training sessions for HCWs at the central and regional levels;	13,600	13,600	13,600	-	-	40,800	40,800	-	-
5.	Development and dissemination of thematic IEC materials among patients attending health care facilities	3,000	3,000	3,000	3,000	3,000	15,000	15,000	-	-
	TOTAL	21,600	16,600	16,600	3,000	3,000	60,800	60,800	-	-

# **Expected outcomes of the 2003-07 NSPA**

Full-scale implementation of the strategies and activities outlined within the proposed Strategic Plan of Action on HIV/AIDS prevention for YY2003-2007 would enable achievement of following results and expected outcomes:

#### Outcome indicators:

- 1. Percent of IDUs covered by needle-exchange programme, outreach and peer education intervention, target >60%;
- 2. Percent of young people having access to VCTs on HIV, target >90%;
- 3. Percent of school youth of age 14-16 covered by HIV education programme, target >90%:
- 4. Percent of CSWS and MSM having access to VCT, target > 35%;
- 5. Safe blood transfusion, target > 97%;
- 6. Percent of pregnant women having access to VCT, target > 90%;
- 7. Percent of AIDS patients receiving HAART, target 100%.

#### **Monitoring and Evaluation:**

Monitoring and Evaluation would be the integral part of the NSPA throughout the 5-year period. Daily monitoring of the NSPA implementation would be ensured by the partner organizations identified within the National Strategic Plan. Overall coordination and monitoring will be undertaken by the Governmental Commission on HIV/AIDS/STI and Other Socially Dangerous Diseases (CCM), the executive body.

Quarterly performance and financial reports on programme implementation would be submitted to the country coordination mechanism (CCM) by implementing partners. For evaluation of the strategic plan implementation epidemiological, sociological and biological surveys will be conducted enabling to measure the outcome and impact of the supported activities/interventions versus initial (baseline) process/output/outcome and impact indicators.

# Financing and management:

The estimated total budget for the 8 key components of the 2003-2007 National Strategic Plan of Action is 15,408,653 USD, including:

- ◆ 2,317,023 USD funded by the Government and local NGO resources (National Programme on Safe Blood and HIV/AIDS/STI Prevention, programme/projects implemented through local NGOs).
- ♦ Substantial part of resources in terms of institutional and human capacities allocated as the in kind contribution through the existing National Programmes on Safe Blood and HIV/AIDS/STI Prevention, IDUs and CSWs targeted prevention programmes funded through GOV/NGO sectors, national expertise for policy and curricula formulation, etc.
- 1,462,900 USD allocated/planned from international donor organizations UN Theme Group member agencies (UNICEF, UNFPA, WHO, UNDP), other international bilateral and multilateral donors - USAID and international NGOs - Save the Children, Population Service International.
- ◆ The Financial Gaps outlined in the budget sections of each priority area comprise total estimated 11,628,730 USD for the 5-year period.

The work performed within the National Strategic Planning Process in Georgia – the Situation Analysis (2001), National Response Analysis (June 2002) and the presented Strategic Plan of Action (September 2002) has built a sound framework for development of a comprehensive resource mobilization strategy. The latter would target at securing adequate human, financial and technical resources for effective implementation of the priority interventions outlined in the 5-year National Plan of Action.

Elaboration of a sound fund-raising strategy with involvement of all key stakeholders – national government, NGOs and international community is crucial if the National Strategy Plan

of Action is to become effective in control and prevention of developing wide scale HIV/AIDS epidemic in Georgia.

The Governmental Commission on HIV/AIDS/STI and Other Socially Dangerous Disease, as the Country Coordination Mechanism (CCM) will be responsible for overall coordination of the NSPA implementation and the resource mobilization strategy. Implementing partners as outlined in the preliminary implementation plan of the NSPA will be accountable through interim financial and performance reports to the CCM. UN Theme Group agencies – UNDP, UNICEF, UNFPA, WHO, WB will provide financial and technical contribution to the NSPA, as well as expertise for policy formulation, programme design, curriculum development, etc.

The IDACIRC, as the secretary of the CCM, coordinator of the National Programme on Safe Blood, HIV/AIDS and STI prevention, in close consultation with CCM and UNTG partners will ensure overall coordination, supervision, M & E of the NSPA implementing process throughout the YY2003-2007 period. The implementing partners (national Government and NGOs, international agencies) as outlined within the relevant priority areas will be closely cooperating with the IDACIRC and other CCM and UNTG partners for continuous coordination, decision making and review/refinement of the current strategies and activities.

The National Strategic Plan of Action elaborated by the National Experts Team assigned by the CCM partners has been approved by the Ministry of Labour, Health and Social Affairs on 15 September 2002.

The CCM member agencies realize the importance for continuous monitoring, assessment and analysis of the activities undertaken within the 5-year Plan of Action and agree to revise and, if considered reasonable through joint consultation, refine the strategies and activities outlined in the 2003-2007 NSPA document. Annual revision of the plan would enable the partners to analyse the performance of the programme activities, identify the major achievements/constraints and the challenges for further refinement and improvement of the national response to HIV/AIDS prevention and control in Georgia.