

ECUO 10 YEAR

NARRATIVE AND FINANCIAL REPORT



ECUO 10-YEAR: NARRATIVE AND FINANCIAL REPORT

East Europe and Central
Asia Union of People
Living with HIV

2018



ACKNOWLEDGEMENTS

This publication provides a brief overview of the activities of the International Charitable Organization “East Europe and Central Asia Union of People Living with HIV” during its 10 years of work.

The author of this report wishes to thank and acknowledge the contributions made by colleagues on this analysis: Andrey Kossinov and Armen Aghajanov for providing all the relevant reports and documents used in this publication; Inna Gavrilova for her support in organizing and conducting interviews for this report; Nataliya Leonchuk, Vladimir Zhovtiak, Oksana Koval, Nofal Sharifov, Wojciech Tomczynski, Vladimir Mayanovskiy, Sevar Kamilova, and Olga Panfilova for providing information on their activities and about the organization, for meaningful interviews, expertise, and their huge contribution in the activities of ECUO.

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ACRONYMS AND ABBREVIATIONS

AIDS	Acquired immune deficiency syndrome
ALHIV	Adolescents living with HIV
ART	Antiretroviral therapy
ARV	Antiretroviral
CA	Central Asia
CAH	Children affected by HIV
CAR	Central Asian Republics
CCM	Country coordinating mechanism
CEE/CIS	Central and Eastern Europe and the Commonwealth of Independent States
CESCR	The Committee on Economic, Social and Cultural Rights
CLH	Children living with HIV
CRG	Community, rights and gender
EATG	European AIDS Treatment Group
EATG	European AIDS Treatment Group
ECOM	Eurasian Coalition on Male Health

ECUO	International charitable organization East Europe and Central Asia Union of People Living with HIV
EE	Eastern Europe
EECA	Eastern Europe and Central Asia
EECA CAB	Community Advisory Board of Eastern Europe and Central Asia
EHRN	Eurasian Harm Reduction Network
ENPUD	Eurasian Network of People Using Drugs
EU	European Union
EWNA	Eurasian Women's Network of AIDS
FPs	focal points
GA	General Assembly
GF/Global Fund	Global Fund to Fight AIDS, Tuberculosis, and Malaria
GIPA	Greater Involvement of People Living with HIV/AIDS
GM	General Meeting
GNP+	Global Network of People Living with HIV
GOs	governmental organizations
HE	HIV Europe
HIV	human Immunodeficiency virus
HTC	HIV testing and counselling
ICESCR	International Covenant on Economic, Social and Cultural Rights
IDU	injecting drug users
IP	intellectual property
ITPCru	International Treatment Preparedness Coalition in East Europe & Central Asia
KAPs	key affected populations
MARPs	most-at-risk populations
MDG	Millennium Development Goals
MSM	men who have sex with men
NGO(s)	non-governmental organization(s)
NHRI	National Human Rights Institutions

NSAs	non-state actors
PLHIV / PLWH	people living with HIV
PWUD	people who use drugs
PWID	people who inject drugs
RCNF	Robert Carr Civil Society Networks Fund
RP	regional platform
SW	sex workers
SWAN	Sex Workers' Rights Advocacy Network
TA	technical assistance
TB	Tuberculosis
TRIPS	(Agreement on) Trade-Related Aspects of Intellectual Property rights
TSWG	Treatment Support Working Groups
UDHR	The Universal Declaration of Human Rights
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNICEF	United Nations International Children's Emergency Fund
VCT	voluntary counseling and testing
WHO	World Health Organization
WTO	World Trade Organization



FOREWORD

DEAR FRIENDS,

We, at ECUO, are delighted to present our 10-Year Narrative and Financial Report, which offers a comprehensive insight into the activities of the organization. This document not only illustrates the history of our organization, but also the results of our work, the idea of establishing ECUO, the organization's path, its growth and development, as in the past 10 years we proved our dynamism and ability to address gaps in HIV responses and support communities of people living with HIV/AIDS in the region of EECA, to change and improve the quality of people's lives, to protect their human rights and interests.

We invite the readers to learn more about ECUO projects implemented over the past ten years, the structure of the organization, and its achievements, successes, as well as challenges. One can get acquainted with our organization publications within the

years of its existence, as well as the sources of funding and the amounts given to the organization.

Within all these years, we mobilized communities of people and organizations all throughout EECA to come together to improve access to prevention, treatment, care, and support for adults and children living with HIV. We provided technical assistance, trainings, and advocacy tools to increase the regional capacity in its response against the HIV/AIDS epidemic.

We are pleased that ECUO's accomplishments are contributing to a better quality of life for people living with HIV/AIDS. Despite all the challenges, both internal and external, we still operate and continue to tackle issues with the upmost respect and care, and we look forward to serving our goals and mission in the years to come.

HISTORY OF THE ORGANIZATION

1990s:

EPIDEMIC OF HIV/AIDS IN EECA AND THE BIRTH OF THE "ALL-UKRAINIAN NETWORK OF PEOPLE LIVING WITH HIV/AIDS"

In 1990s, HIV continued to spread around the world and showed increasingly threatening results, insinuating itself into new communities that were previously untouched by the epidemic. Until the mid-1990s, most Eastern European countries appeared to have been spared from the worst of the HIV/AIDS epidemic. The whole of Eastern Europe put together had around 30,000 infections among its 450 million people at the start of 1995¹. During this time period, Western Europe had over 15 times as many cases, while sub-Saharan Africa had over 400 times as many people were living with the virus.²

¹ UNAIDS, WHO, "Report on the global HIV/AIDS epidemic – June 1998", p. 7-8. Available from: http://data.unaids.org/pub/report/1998/19981125_global_epidemic_report_en.pdf [accessed 03 May 2018].

² *Ibid.*

However, the pattern of consistently low prevalence began to change in 1995 in several of the countries of the former Soviet Union. Belarus, Moldova, Russia, and Ukraine have all registered astronomical growth in HIV infection rates. By the end of 1997, some 190,000 adults in the region were living with HIV infection.³

Alarmed at the rapidly increasing HIV/AIDS epidemic and the lack of resources and support for PLWH, people living with HIV/AIDS in Ukraine initiated the All-Ukrainian Network of People Living with HIV/AIDS in the late 1990s. In 2000, the Network had already met as an informal association and discussed the problems that HIV positive people in Ukraine faced. The Network was formally registered in May 2001. Since 2003, HIV positive people from EECA have begun to address the Network with questions about how to organize effectively and to make the Network advocate for them. And so, from 2005 on, the Network began to share its resources.

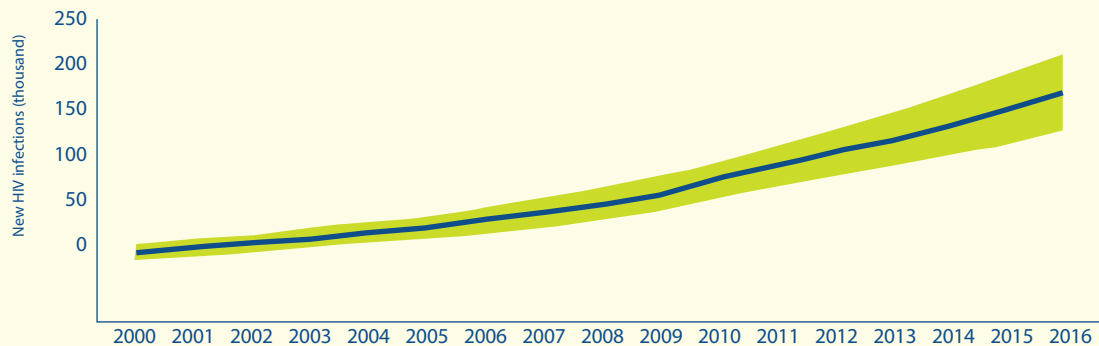
2005:

ECUO AS A WORKING MECHANISM

In 2005, the HIV/AIDS epidemic in EECA continued to expand, and movements of HIV positive people were established in each country of the former Soviet Union. Some 220,000 [150,000 – 650,000] people were newly infected with HIV in 2005, bringing the total to about 1.5 million [1.0 million – 2.3 million] people living with HIV—a twenty-fold increase in less than

³ UNAIDS, WHO, “AIDS epidemic update: Special Report on HIV Prevention – December, 2005”, p. 45. Available from: http://data.unaids.org/publications/irc-pub06/epi_update2005_en.pdf [accessed 03 May 2018].

HIV INFECTIONS CONTINUE TO CLIMB IN EASTERN EUROPE AND CENTRAL ASIA



NUMBER OF NEW HIV INFECTIONS, ADULTS (AGED 15 YEARS AND OLDER),
EASTERN EUROPE AND CENTRAL ASIA, 2000 - 2016

Source: UNAIDS 2017 estimates

a decade.⁴ The epidemic's death toll was rising sharply, as well. AIDS killed an estimated 53,000 [36,000 – 75,000] adults and children in 2005—almost twice as many as in 2003⁵. The majority of PLWH in EECA reside in two main countries: Ukraine, where the annual number of new HIV diagnoses kept rising, and Russia, where it had the biggest AIDS epidemic in all of Europe.

Consequently, in each country there were set initiatives and activities aimed at improving of the quality of life of PLWH. But, as an indicator, the majority of these populations were isolated from Regional and International initiatives. The lack of coordination between PLWH communities in the field of advocacy and peer-to-peer expert support influenced the efficiency decrease of these activities in various countries.

⁴ UNAIDS, WHO, "Report on the global HIV/AIDS epidemic – June 1998", p. 7-8. Available from: http://data.unaids.org/pub/report/1998/19981125_global_epidemic_report_en.pdf [accessed 03 May 2018].

⁵ *Ibid.*

"AND SINCE 2005 A SEPARATE DEPARTMENT IN THE NETWORK - AN INTERNATIONAL DEPARTMENT WAS CREATED. SEVERAL PEOPLE WORKED THERE. AND, AS AN INTERNATIONAL DEPARTMENT, IT WAS JUST ENGAGED IN THE ACTIVITIES OF SHARING EXPERIENCES, DELIVERING BEST PRACTICES THAT WERE IN UKRAINE TO OTHER PEOPLE, OTHER ORGANIZATIONS OF HIV-POSITIVE PEOPLE".

Interview with Vladimir Zhovtiak, conducted on 30 March, 2018 in Kyiv

In June 2005, the first meeting of PLWH representative organizations from Ukraine, Russia, Kazakhstan, Kyrgyzstan, Uzbekistan, and Moldova was held in Foros, Crimea. The idea of establishing a regional union that would allow strengthening the political position of HIV positive people in the decision-making process on the national and international levels was born during that meeting. In the same year, the establishment of a union for PLWH was initiated by the founders of ECUO.

WE WANTED TO CREATE AN ASSOCIATION THAT, ON THE ONE HAND, WOULD BE A RESOURCE FOR A COMMUNITY OF PEOPLE LIVING WITH HIV FROM DIFFERENT COUNTRIES, THAT WOULD HELP THEM STRENGTHEN THEIR CAPACITY AND DEVELOPMENT, AND ALSO THAT COULD ENGAGE IN ADVOCACY AT THE INTERNATIONAL AND REGIONAL LEVEL AND, SIMILARLY, HELP ORGANIZATIONS, CARRY OUT ACTIVITIES AT THE NATIONAL LEVEL.

Interview with Nataliya Leonchuk, conducted on 28 March, 2018 in Kyiv

Another factor that influenced the creation of ECUO was the numerous international frameworks ratified by the countries that took immediate effect but did not fully take into account the peculiarities of the region of EECA. The newly established ECUO was to be a link between international and national initiatives.⁶ This initiative was supported by the UNAIDS Secretariat.

⁶ Interview with Nataliya Leonchuk, conducted on 28 March, 2018 in Kyiv.

Thus, in 2005, ECUO has already been a working mechanism and had an organizational structure.⁷ During that time, the ECUO developed and operated on the basis of the All-Ukrainian Network. The Network, being one of the strongest community organizations in the region of EECA, established and maintained contacts with different organizations from other countries working in the field of HIV/AIDS, and collaborated with these organizations at numerous international conferences, meetings, seminars, etc. Many participants from other countries have turned to the Network for experience and resources and indirectly participated in the organization's initiatives.

In September 2005, the Network joined with many organizations of people living with HIV/AIDS from nine different countries in order to create the ECUO. One year later, its membership had increased to 12 groups (Azerbaijan, Belarus, Estonia, Kazakhstan, Kyrgyzstan, Latvia, Lithuania, Mongolia, Moldova, Tajikistan, Ukraine and Uzbekistan). The organization's Secretariat was based in the Network's offices in Kyiv and was performed by the international department of the Network. The Network also helped coordinate funding for ECUO, part of which it is used to provide technical assistance and training for its own human resources.⁸

In 2006, ECUO took part in the regional AIDS conference in Moscow, Russia in 15-17 May, and used that international platform to strategically profile itself as a growing and maturing indigenous movement of people living with HIV/AIDS

⁷ Interview with Vladimir Zhovtiak, conducted on 30 March, 2018 in Kyiv.

⁸ UNAIDS, "A Nongovernmental Organization's National Response to HIV: the Work of the All-Ukrainian Network of People Living with HIV", p. 39. Available from: http://www.unaids.org/sites/default/files/media_asset/jc1305_ukraine_full_en_0.pdf [accessed 03 May 2018].

in the region. As an Union, it gave a fair analysis of the access to treatment in the region; it voiced several key concerns and needs of its constituency; and increasingly, the ECUO spoke of the responsibility of people living with HIV/AIDS for better access to treatment and care.

2007:

ESTABLISHMENT AND GROWTH OF THE ECUO AS AN INTERNATIONAL ORGANIZATION

There were many different bureaucratic challenges registering a regional organization in Ukraine, and by October 2007, thanks to the support of UNAIDS and All-Ukrainian Network, ECUO received its official legal status – International Charitable Organization “East Europe and Central Asia Union of People Living with HIV”.

The establishment of ECUO was a response to the HIV/AIDS epidemic in EECA. The composition of the Union included a network of 14 distinct countries that spoke eloquently about the topicality and timeliness of such initiatives. The organization had a lot of work to do, and so set itself at least ambitious, but feasible tasks.

At the time of its creation, the number of organizations of national networks of people living with HIV/AIDS in the EECA countries was quite small. The establishment of ECUO has made a positive influence on communities’ development in the countries of EECA as it contributed to the creation and development of national networks inside these various countries,

because as an estimated 150,000 people [70,000 – 290,000] people were newly infected with HIV in 2007, bringing the number of people living with HIV in Eastern Europe and Central Asia to 1.6 million [1.2 million – 2.1 million] compared to 630,000 [490,000 – 1.1 million] in 2001, a 150% increase over that 6 year period.⁹

ECUO was soon represented in major international forums and conferences: Global Consultation on Reproductive Health, Conference of International Campaign to Fight AIDS, HIV in Europe in Europe 2007, and Organizing Committee of the Second AIDS Conference in Eastern Europe and Central Asia. Four members participated in the European Union AIDS Summit in Bremen, Germany in 2007.

Prior to receiving its first project funds, ECUO ran its daily operations inside an small office space of the Network. It started as a small three-person team: Executive Director, Chief Accountant, and President. However, the President was not included on its staffing roster, as the budget was so small it could not cover a lot of employees at the time.¹⁰ As one of the first employees states, *We rented a separate decent room, about 18 square meters, arranged tables at the corners; we were already at home.*¹¹ Thanks to the support of UNAIDS, the ECUO website was soon developed and operating, which allowed the sharing of information in Russian with its partner organizations and other PLWH.¹²

From the very beginning, as expected from its member organizations, ECUO became an important resource to strengthen the capacities of national organizations. National organizations were gaining experience and skills from the ECUO:

⁹ UNAIDS, WHO, “AIDS epidemic update, December 2007”, p. 26. Available from: http://data.unaids.org/pub/epislides/2007/2007_epiupdate_en.pdf [accessed 03 May 2018].

¹⁰ Interview with Oksana Koval, conducted on 30 March 2018 in Kyiv.

¹¹ Ibid.

¹² Interview with Nofal Sharifov, conducted on 29 March 2018 in Kyiv.

AND IT DID ORGANIZE MANY TRAININGS AND SEMINARS, IN WHICH WE TOOK PART. WE RECEIVED VARIOUS TECHNICAL ASSISTANCE, EXPERT ASSISTANCE, FINANCIAL ASSISTANCE, SO THAT OUR ORGANIZATION WOULD WORK IN THIS DIRECTION AND GIVE THE NECESSARY HELP TO PLWH.

Interview with Nofal Sharifov, conducted on 29 March 2018 in Kyiv

ECUO has, undoubtedly, grown enormously since its establishment. Several projects have aided in the growth and development of the organization, as donors took 'a risk' and trusted and supported the newly registered ECUO. For instance, with the support of the Oxfam Novib Project, the organization developed the potential of networks and organizations in EECA since 2008. During the implementation of that project, the number of national networks has increased in size and scope. Naturally, ECUO is engaged in developing its full potential and immersed itself in advocacy initiative opportunities related to the access of ARV treatment. As of today, ECUO unites People Living with HIV organizations from 16 countries in the EECA region. ECUO is an organization founded by PLWH for PLWH and it strives not to duplicate existing efforts at the national level, but rather, to promote PLWH human rights in an open political space where their voices are being heard.

I LIKE HOW THE ORGANIZATION IS GROWING, THAT IT IS BECOMING STRONGER, THAT OUR ACTIVITIES COVER THE REGION A LOT MORE THAN EARLIER IN THE DAYS WHEN WE WERE DOING SMALLER PROJECTS MAINLY BASED HERE IN UKRAINE, AND WHEN THERE WERE EVENTS CONCERNING THE REGION, PEOPLE FROM REGIONS CAME TO US, AND HERE ON THE SITE IN KIEV THERE WERE TRAININGS, EVENTS ORGANIZED, EXPERIENCE EXCHANGE, ETC. BUT 10 YEARS LATER WE HAVE REACHED THE LEVEL THAT WE GRANT SUB GRANTS TO COUNTRIES, AND THEY IMPLEMENT THESE PROJECTS WITHIN COUNTRIES AND SEND US THEIR REPORTS.

Interview with Oksana Koval, conducted on 30 March 2018 in Kyiv

The increased capacity is, for sure, beneficial. And not only in the context of the organization, but in general, as the world has changed nowadays, and it *is not enough for activists to go out onto the square and shout about their rights to be respected.*¹³ Progress does not happen that way anymore, and now, it is rather important to *show the problem, to argue it, to show the solution. The change now happens in the level of dialogue and partnership,*¹⁴ which the organizations have obtained enough skills and expertise throughout the years.

The organization is going through different stages of development. In terms of the level of discussion, the organization is now taking part in certain meeting at prominent international institutions, like the WHO committee, where people defend the interests through diplomatic strategies:

ON THE ONE HAND, IT SHOWS THE GROWTH OF THE ORGANIZATION, AND ON THE OTHER HAND, IT IS SAD THAT THE IDEA AND SPARK GET SOMEHOW LOST. WHEN THERE ARE DISCUSSIONS OF SUCH LEVEL, THE FUSE, THE ENERGY OF THE ACTIVISTS DECREASE, WHO ARE ALL UNITED BY ONE COMMON GOAL - THE IMPROVEMENT OF THE QUALITY OF LIFE OF PEOPLE WE REPRESENT IN OUR COUNTRIES.

Interview with Vladimir Zhovtiak, conducted on 30 March, 2018 in Kyiv

The scope of the work, including the spheres in which ECUO acts have expanded over time and the process continues to this day. The number of strategic initiatives has increased during the last ten years; more programmes confirmed are covering more countries in the region; and ECUO is also started integrating adolescents living with HIV/AIDS into its

¹³ Interview with Nataliya Leonchuk, conducted on 28 March, 2018 in Kyiv.

¹⁴ Ibid.

programmes. Focusing special attention on HIV-positive adolescents and creating the regional group of parents and guardians, who raise HIV-positive children, is a bright example of expansion of ECUO activities and target groups. Later on, ECUO has been expanding its outreach and discussion targets into HIV-related aging issues. In the near future, the first meeting of people aging with HIV is planned to take place.¹⁵

ECUO:

ENSURING THE RIGHT TO HEALTH AND INCLUSION

The human right to health means that everyone has the inherent right to the highest attainable standard of physical and mental health.¹⁶ Nested in the right to health, access to essential medicines is well founded in countless international and regional laws and treaties, UN declarations, and national laws.¹⁷ The WHO and resolutions of the Human Rights Council, and the Doha Declaration on TRIPS and Public Health reaffirm access to essential medicines as a human right must be available “for all”. And realizing the right to access to medicines is contingent upon the realization of four interrelated elements: medicines must be (1) available, (2) accessible (with accessibility implying affordability, physical accessibility, and accessibility of information), (3) acceptable, and (4) of good quality.¹⁸

¹⁵ Interview with Wojciech Tomczynski, conducted on 26 March 2018 in Kyiv.

¹⁶ UN General Assembly, International Covenant on Economic, Social and Cultural Rights, 16 December 1966, United Nations, Treaty Series, vol. 993, p. 3, article 12. Available from: <http://www.refworld.org/docid/3ae6b36c0.html> [accessed 03 May 2018].

¹⁷ The 1946 Constitution of the World Health Organization and the 1948 Universal Declaration of Human Rights (UDHR) both expressly recognize the right to health. The 1966 International Covenant on Economic, Social, and Cultural Rights (ICESCR), which has 164 states parties, elaborates that the right to health includes “access to health facilities, goods, and services.”

¹⁸ UN Committee on Economic, Social and Cultural Rights (CESCR), General Comment No. 14: The Right to the Highest Attainable Standard of Health (Art. 12 of the Covenant), 11 August 2000, E/C.12/2000/4. Available from: <http://www.refworld.org/docid/4538838d0.html> [accessed 03 May 2018]

Violating the human rights and dignity of PLWH through multiple avenues, such as stigmatization, discrimination, and violence, is increasingly recognized as a central problem that is impeding the fight against HIV/AIDS.¹⁹ Furthermore, organizations and human rights advocates working in the sphere of HIV/AIDS epidemic prevention have demonstrated that human rights violations increase the prevalence of HIV.²⁰ Whereas human right to health is for all, and the principle of non-discrimination is underlying in the realization of all human rights, key affected populations have largely been rejected and ignored from the realization of their right to health and participating in several HIV programmes. As a response to social, political, and institutional discrimination, people living with and/or at risk of HIV were denied their right to health because of who they are or what they do—SW, PWUD, gay men and other MSM, women and young girls, and transgender people. They were denied their right to vital health services, their right to medicines, and their right to protect themselves from infections.²¹

Similar to many organizations in the field, ECUO gradually started with the mission to become a leading resource for organizations and communities, so that they could have the equal basis to overcome the epidemic in their countries. That is one big direction encompassing ECUO's big scope of activities and frameworks.

¹⁹ Richard Parker, Peter Aggleton, "HIV and AIDS-related stigma and discrimination: a conceptual framework and implications for action", *Social Science & Medicine* 57 (2003) 13–24. Available from: <https://canadianharmreduction.com/sites/default/files/2003%20Parker-HIV%20and%20AIDS-related%20stigma%20and%20discrimination%20a%20conceptual%20framework%20and%20implications%20fo%22action.pdf> [accessed 03 May 2018].

²⁰ Mann JM, "AIDS and human rights: where do we go from here?", *HEALTH AND HUMAN RIGHTS*. 1998; 3(1):143-9; Mann J, Gruskin S, Grodin MA, Annas GJ, "Health and Human Rights: A Reader", England: Routledge; 1999.

²¹ UNAIDS, "Right to Health", 2017, p. 17. Available from: http://www.unaids.org/sites/default/files/media_asset/RighttoHealthReport_Full_web%2020%20Nov.pdf [accessed 03 May 2018].

Having access to treatment is an important component to exercise their right and freedom to health for communities of PLWH. With full access to treatment, ECUO took into account its broad meaning: access to all types of services and care that are needed to take antiviral treatment for it to be effective. Over time, advocating for treatments and services that are needed in disparate countries within the region has become an important direction and priority for the organization.

Consequently, an argument must be emphasized due to the fact that other groups that belong to PLWH are PWUD, SW, and gay men or other MSM, including children and women. Each of these groups has their peculiarities, which must be taken into account so that people can have access to the appropriate treatment. ECUO started communicating and cooperating with all communities in order for the issue of HIV and AIDS to be relevant in these groups, some of whom were, unfortunately, not interested in being integrated. And therefore, the organization gave priority consideration for ALL PLWH to have access to ARV treatment.



ECUO IN BRIEF: WHO WE ARE AND WHAT WE DO

We are the the regional “network of networks” connecting PLWH communities form 15 EECA countries to increase communities’ impact on expanding access to treatment, care and support through strengthening of capacity of PLWH organizations and advocacy efforts at national and international levels.

MISSION

WE ARE THE UNION OF PLWH ORGANISATIONS, AN INSPIRING AND EDUCATIONAL RESOURCE FOR THE PLWH COMMUNITIES IN THEIR PROMOTION AS LEADERS, EQUAL PROFESSIONALS RESPONSIBLE FOR OVERCOMING HIV/AIDS EPIDEMIC IN EASTERN EUROPE AND CENTRAL ASIA (EECA).

GOAL

INCREASE THE INFLUENCE OF THE PLWH COMMUNITY ON IMPROVING ACCESS TO TIMELY, COMPREHENSIVE AND QUALITY TREATMENT, CARE AND SUPPORT FOR ADULTS AND CHILDREN LIVING WITH HIV IN EECA COUNTRIES THROUGH EFFECTIVE PARTNERSHIP AND ACTIVE ADVOCACY EFFORTS.

VALUES

WE ARE THE LIKE-MINDED PEOPLE CONSOLIDATING THE PLWH COMMUNITY IN EECA REGION.

WE BELIEVE THAT EVERY PERSON LIVING WITH HIV IS ELIGIBLE TO HAVE EQUAL ACCESS TO QUALITY TREATMENT AND SOCIAL AND MEDICAL SERVICES, REGARDLESS OF AGE, GENDER, NATIONALITY, RELIGION, RACE, SEXUAL ORIENTATION AND GENDER IDENTITY, DISABILITY, AND OTHER CHARACTERISTICS FOR WHICH DISCRIMINATION IS POSSIBLE.

WE ARE THE UNION OF ORGANIZATIONS OPEN FOR COOPERATION WITH ANY PUBLIC, STATE AND COMMERCIAL ORGANIZATIONS SHARING ECUO MISSION, VISION AND VALUES.

WE STRIVE FOR RESPONSIBLE PARTNERSHIP; HENCE, ONE OF THE MAIN INDICATORS OF OUR WORK IS ACTIVITY TRANSPARENCY.

WE DEVELOP PLWH COMMUNITY THROUGH KNOWLEDGE EXCHANGES, SKILLS AND EXPERTISE FORMATION, TRAINING AND PRACTICE, IN ORDER TO USE A HIGHLY PROFESSIONAL APPROACH TO WORK BASED ON PERSONAL EXPERIENCE.

WHAT WE DO

WE COOPERATE

We partner with governments, international organizations, and civil societies.

WE MONITOR, ANALYZE, AND ADVOCATE

We talk about existing obstacles, propose solutions, and participate in their implementation.

WE PROMOTE BEST PRACTICE AND INITIATIVES

We implement international declarations and actively participate in the formation of policies that are in the interests of PLWH.

WE ESTABLISH RELATIONS AND DEVELOP

We cooperate between communities and organizations of PLHIV, as well as other structures of civil society.

WE STRENGTHEN THE CAPACITY OF PLWH COMMUNITIES

We provide information, technical, financial, and political support.

WE DEVELOP LEADERSHIP AND STRENGTHEN CONTACT

We combat the HIV/AIDS epidemic within the PLHIV community and in our society.

ECUO MEMBERS



Armenia

NGO "REAL WORLD, REAL PEOPLE"

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Georgia

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Kazakhstan

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Kyrgyzstan

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**COMMUNITIES (ORGANIZATIONS)
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WORKING TOGETHER

*"IT IS THE UNIQUENESS OF THE ECUO THAT EVERYONE CAN BRING SOME OF THEIR
UNIQUE AND REMARKABLE EXPERIENCE TO THE ACTIVITIES OF THE ORGANIZATION"*

Interview with Nataliya Leonchuk, conducted on 28 March, 2018 in Kyiv

ECUO is a regional organization, encompassing 15 countries, consortiums, and networks of associations. When the organization first started, it did not have the experience of a regional organization, as members, who had extensive experience at national level, had difficulties applying the mechanisms they had acquired at the national level to the regional level.²² Naturally, each country is unique and with its own features and specificities; nonetheless, the healthcare systems have many similarities due to its common past. Political tensions and rising and existing con-

licts within the countries can also hinder the broad advocacy work that ECUO conducts. However, what unites ECUO, in spite of different political attitudes and situations between countries, is that it manages to build and coordinate effective relationships between member countries, which is very encouraging for country teams. Friendships, amiable relations, and joint goals stand behind the unity of ECUO members²³.

Inclusion and diversity is about working together at ECUO. Group consciousness con-

²² Interview with Nataliya Leonchuk, conducted on 28 March, 2018 in Kyiv

²³ Interview with Nofal Sharifov, conducted on 29 March 2018 in Kyiv

tributes to the effective work of the organization. Obviously, there have been many times when it is becoming difficult to hear each other and find mutual solutions. The diverse, unique expertise and backgrounds of the people helps function ECUO's operations smoothly. The work that ECUO provides to various communities does not feel like intensive labor, but its underlying mission and values reflect the soul of the organization, which makes communication within the organization easier²⁴.

ECUO succeeds in creating a positive work culture, which is essential in developing employees' satisfaction. Devotion towards the work, ECUO's mission, and positive and healthy relations are constantly mentioned by its employees. In fact, despite the organization growth and development, ECUO still maintain sincere relations with its human resources and employees' satisfaction remains the top priority for the organization, as ECUO works for the people²⁵.



ECUO members, 2017

²⁴ Interview with Vladimir Zhovtiak, conducted on 30 March, 2018 in Kyiv

²⁵ Interview with Oksana Koval, conducted on 30 March 2018 in Kyiv





PROJECTS IMPLEMENTED

Below, the projects implemented by ECUO in the period of 2007-2017 are presented. Each projects underlied ECUO conviction, which is through strengthening the capacity of PLWH organizations and joint advocacy efforts, it is possible to increase

communities' impact on expanding access to treatment, care, and support. The description of each projects implemented by ECUO and its overall goal and outcomes are summarized in a manner corresponding to its implementation years.



Better advocacy and services provision skills through experience exchange for PLWH from Eastern Europe and Central Asia

IMPLEMENTATION PERIOD: OCTOBER 2007 – JUNE 2008

With the support of Oxfam Novib KIC (Knowledge Infrastructure Development With and Among Partners) this project was launched in 2007. The overall objective of the project was to improve advocacy skills on PLHIV rights and service provision for PLHIV through recording and sharing best practices among 14 separate countries of Eastern Europe and Central Asia.

For this purpose, ECUO collected, analyzed, and shared best practices of its members in the fields of PLWH's rights advocacy and decreasing level of PLWH stigma and discrimination, participation in national HIV/AIDS policy development, and models of care and support provision for PLWH. It hosted 14 internships in the organizations and disseminated gained experience among PLWH organizations from EECA.

The outcomes of the project can be summarized as follows: 28 activists of the

ECUO gained the necessary experience and advocacy skills needed in the fields of models of care and support for PLWH and PLWH rights, including involvement of PLWH into the decision-making process and the creation of national networks of PLWH. ECUO members gained valuable experience in documenting best practices and information exchange in a peer-to-peer setting. The knowledge and experience gained as a result of the study tours were disseminated in ten different regions of Ukraine. More than 1,000 civil society representatives familiarized themselves with best practices in the field of services provision for PLWH, rights advocacy, and PLWH's involvement into the process of national HIV/AIDS policy development. In total, 14 action plans were developed in order to implement best practices in 14 organizations whose representatives participated in the aforementioned internships.

Regional Initiative of PLHIV in East Europe and Central Asia

IMPLEMENTATION PERIOD: OCTOBER 2007 – SEPTEMBER 2010

The project, “Regional Initiative of PLHIV in East Europe and Central Asia”, was launched in 2007. The project themes were broad and served ECUO’s main functions – to act in the role of regional controller for access to treatment, to be a community representative at key regional and international forums, to develop opportunities for local organizations of people living with HIV/AIDS, and to conduct fund-raising to provide sustainable support of PLHIV at the national and regional level.

The outcomes of the project can be summarized as follows: A sustainable national networks in 9 different countries with distinct gender equity was formed. The already existing PLHIV national networks in the framework of this work direction in countries of Eastern Europe and Central Asia (Ukraine, Moldova, Kazakhstan, Estonia, and Belarus) were strengthened. It was encouraged to form national PLHIV networks in 5 different countries at their launch stage (Armenia, Azerbaijan, Kyrgyzstan, Tajikistan, and Uzbekistan).

From June 2008 on, project activities were aimed at improvement the qualification of leaders of organizations and the work of Focal Points on the base of already existing organizations and national networks of Moldova, Azerbaijan, Uzbekistan, and Tajikistan.

By 2009, ECUO has become a credible, strong, and effective regional and international advocacy organization. The capacity of the Union was strengthened in the frames of this direction through educating 40 ECUO members on work methods of advocacy and gender, enlargement of access for PLHIV communities to strategic information, and PLHIV interests advocacy at the international and national levels.

The next planned project task focused on advocacy of meaningful involvement of PLHIV in national and regional decision-making forums. Hence, to serve this point, research was conducted on the level of involvement of PLHIV into the already existing structures, such as working in the

HIV/AIDS sphere at national level and their influence on forming HIV/AIDS policy. Moreover, mechanisms of effective participation of PLHIV in national and regional forums based on the results of the research were developed. As it is indicated in the GIPA principles, the role of

PLHIV in decision-making organizations is viewed as critical in overcoming the HIV/AIDS epidemic, in forming national policies and also in the implementation and monitoring of the programmes



Mobilization and Strengthening of Possibilities of People, Living with HIV in Eastern Europe and Central Asia

IMPLEMENTATION PERIOD: 15 FEBRUARY 2008 – 31 DECEMBER 2008

With the support of UNAIDS, the project, “Mobilization and Strengthening of Possibilities of People, Living with HIV in Eastern Europe and Central Asia”, was launched in the first half of 2008. This project was meant to support the ECUO Secretariat that guarantees the completion of all tasks and implemented in the frames of all ECUO projects. The overall objective of the grant was to strengthen the possibilities of PLHIV organizations to advocate and promote achievement of the Universal Access to HIV/AIDS prevention, treatment, care, and support.

Oxfam Novib (ECUO 2010-2012)

IMPLEMENTATION PERIOD: OCTOBER 2010 – MARCH 2012

Supported by Oxfam Novib, this project was aimed at increasing the influence of the PLHIV community in the region on expanding access to treatment, with a special focus on Central Asia. ECUO's main initiatives in this project were aimed at strengthening the capacity of PLHIV organizations to participate more effectively in the work of key HIV/AIDS committees in order to advocate for the interests of the PLHIV community; study the situation with regard to the treatment in the countries of the region; and develop and launch a regional advocacy campaign aimed at national governments to increase their responsibility for providing timely, comprehensive, and high-quality treatment and care and support for adults and children living with HIV in the EECA countries.

The outcomes of the project were as follows: 4 PLHIV organizations in Central

Asia (CA) were recognized at the national level (which led to the successful participation in key committees and involved these organizations into the process of decision-making, etc) and were able to assert PLHIV rights for both children and adults.

ECUO implemented advocacy strategy based on the data of countries' advocacy plans and aimed at the national governments to increase their responsibility for provision of timely, comprehensive, and high-quality treatment and care and support for children and adults, living with HIV in the EECA region, especially in Central Asia.

Mechanisms of public monitoring (watch dog) were improved and implemented at the national and regional levels within the CA region.

Advocacy of PLWH Rights in Action (Core Funding)

IMPLEMENTATION PERIOD: 1 JANUARY 2011 – 31 DECEMBER 2012

Core funding is vital for all new and start-up community-based organizations. It enables an organization to develop service provision and to build a sustainable donor base through demonstrable achievements. The goal of this project was to support the capacity and capability development of ECUO through provision of core funding. This core funding has been used to enable ECUO to continue performing its core functions and to deliver the strategic objectives of the Union.

Activities within the scope of ECUO's strategic objectives have been undertaken with the support of this core funding. Such activities included:

Creating advocacy structure/unit to engage and educate professional personnel responsible for the content and high-quality execution of regional advocacy plan;

Collecting and analyzing countries' plans identifying the main/crucial activities in the countries, which should be supported and strengthened at regional level of ECUO;

Developing and implementing the ECUO regional advocacy plan based on the results of the analysis; conducting regional advocacy activities;

Analyzing the best practices of the public monitoring in the ECUO member-states;

Developing the Tool on public monitoring;

Conducting a meeting for CAR representatives on the Tool implementation, and a public monitoring service for ECUO countries.

A Real Improvement of the Quality of Life of People Living with HIV/AIDS

IMPLEMENTATION PERIOD: APRIL 2011 – JULY 2014

The goal of this project was to strengthen the impact of PLWH communities through effective partnerships and advocacy efforts and to improve access to timely, comprehensive, and quality ARV treatment and care and support for children and adults living with HIV/AIDS in Eastern Europe.

This project was developed by ECUO as the lead organization, in cooperation with Real World, Real People (RWRP) – Armenia, Public Union Against AIDS (PUAA) – Azerbaijan, Belarussian PLWH Community – Belarus, Real People, Real Vision (RPRV) – Georgia, League of People Living With HIV – Moldova, All-Russian Union of PLWH – Russian Federation, and All-Ukrainian Network of PLWH – Ukraine. The project was developed as the response to the need for further solidification of the partnership of PLWH organizations working in the target region, improving the coordination of regional activities and strengthening organizational capacity of participating organizations. All of these efforts were designed to facilitate the provision of uninterrupted access

to ARV treatment for all in need and improve governmental policies in providing testing and treatment for patients in participating countries. In addition, the project concentrated on implementing regional advocacy campaign to counsel decision makers, governmental organizations, and/or other stakeholders to develop effective mechanisms in ensuring access to ARV treatment.

Within the framework of this project, ECUO managed to enhance in-country networks and strengthened capacities of local partners. It succeeded to raise awareness of the issue and influenced the necessary policy adjustments in respective countries. It has built on the previously established in-country network of the organizations and elevated their level of cooperation to the point of regional collaboration. The widely participatory approach allowed the project to create the first in-country level action plans and later the regional action plan that defined the approach for regional cooperation in providing solutions for access to ARV treatment.

Throughout the project implementation, all qualitative targets set by the proposal were achieved. 29 training sessions with 325 participants were organized to strengthen the capacity of participating local partners. Through numerous advocacy efforts, the project influenced state funding increases (in non-Global Fund funded countries) in Ukraine and Russia

by 54% and 53% respectively. Information sharing within the network and for a wider group of interested persons was the important outcome of this project. An online resource library was established with access to over 140 publications. The project was instrumental in providing assistance to its beneficiaries and helped them in dealing with many problems.

Strategic planning of "Real World, Real People" (RWRP), 2012, Armenia



Mobilization of Adolescents Affected by HIV/AIDS in EECA Region

IMPLEMENTATION PERIOD: OCTOBER 2011 – AUGUST 2012

The focus of this UNICEF funded project was adolescents affected by HIV/AIDS in the region. Its primary objective was the mobilization of adolescents affected by HIV/AIDS in Ukraine, Russia, Kazakhstan, Uzbekistan, Belarus, and Kyrgyzstan.

The project foresaw several objectives, which was the development of the Internet platform to strengthen links between adolescents affected by HIV/AIDS in the EECA region, development of communication and training materials for adolescents affected by HIV/AIDS to enable them to stand for the rights of adolescents living with HIV/AIDS through public speeches at various events and other initiatives, and advocating for adolescents living with HIV/AIDS to stand for their rights through participation in various events, including those related to the MDG-6 Forum and the World AIDS Day on December 1st.

Several outcomes have been achieved: a new resource section “For Adolescents” was created on the ECUO website, closed social media groups were initiated where adolescents of the EECA region could communicate with each other, a unique book, “Story like Yours,” was initiated and published by adolescents, and several adolescents took part and gave speeches in press-conferences and round table discussions on the issues of preventive education and on defense of rights for students and education officials’ affected by HIV/AIDS, and performed at the concert “Don’t Give AIDS a Chance!” Two adolescents took part in the MDG-6 Forum in October 2011. And for the first time, adolescents spoke publicly about the difficulties they and their HIV-positive peers encountered in the EECA region and shared their dreams and plans for the future. Moreover, “best practices” on supporting adolescents affected by HIV/AIDS were collected and the exchange of experience between PLWH organizations of the EECA region was ensured.

Strong Community through Partnership

IMPLEMENTATION PERIOD: 2012-2013 (24 MONTHS)

Specific objectives of this Project were as follows:

- Strengthening and sustaining the organizational and technical capacity of the PLWH networks at national as well as regional levels;
- Implementing regional advocacy campaign to support relevant authorities and stakeholders to develop effective approaches to ensure the provision of safe and affordable antiretroviral medicines and care and support services to all people in need;
- Increasing participation of PLWH in the national forums and combat stigma;
- Creating an alliance as a focal point in the EECA region for exchange of experience and best practices; and to be a source of consistent, reliable, and free information available to PLWH communities across the region.

This project was aimed at organizational capacity strengthening of PLHIV communities and implementation of advocacy campaigns in support of national advocacy plans on access to ARV-treatment in 7 countries of the region (Armenia, Azerbaijan, Belarus, Georgia, Moldova, Russia, and Ukraine).

Project overall impact can be summarized as a real improvement on the quality of life of People Living with HIV in EU neighboring countries through improved stronger coalition and exchange of best practices and access to safe and affordable medicines using gender-sensitive approach and broad integration of PLHIV in HIV/AIDS National policy development, implementation, and assessment.

Cross-Border Cooperation for HIV/AIDS Prevention and Impact Mitigation in the Southern Caucasus and Russian Federation

IMPLEMENTATION PERIOD: 1 APRIL 2012 TO 31 MARCH 2014

The overall objective of this project was the launch of the Joint Regional Advocacy Action to tangibly enhance HIV/AIDS prevention, treatment and care, and impact mitigation for migrant workers and mobile populations (including MARPs and PLWH) in the Southern Caucasus and Russian Federation. The project was aimed to mobilize the non-state actors along with national government organizations and international organizations in the Southern Caucasus and Russian Federation for joint actions in order to help mitigate HIV/AIDS risks/vulnerabilities among migrant workers and mobile populations (including MARPs and PLWH) from the Southern Caucasus, ensuring improved access to prevention, treatment,

and care and support services in both source and destination countries.

This project engaged 59 governmental, non-governmental, and international organizations from the countries of the South Caucasus and the Russian Federation to strengthen the response to HIV among migrants and mobile populations. It helped to build the partnership with the relevant stakeholders in the field of HIV/AIDS in the region. In order to address revealed problems, the project equipped and mobilized health care providers, teachers, youth workers, church leaders, and social workers to educate people about the spread of HIV/AIDS awareness in a way that was both accurate and effective. It is

worth noting that the impact of this project beyond the implementation countries was ensured due to ECUO's successful involvement in the project, with its member organizations in 16 countries.

Accordingly, the project outcomes are as follows: Partnership and cooperation of GOs and NSAs to address mobility exacerbated HIV/AIDS issues at the country

level with emphasis on availability and accessibility of rights based prevention, treatment, and care and support services are strengthened and ensured; the quality and sustainability of Partners, NSAs, GOs and Community stakeholders' capacity is strengthened to address mobility exacerbated HIV/AIDS issues; and regional Network mechanism is established and takes joint actions for learning and advocacy.



Armen Agadzhanov, strategic information specialist for the charity East Europe and Central Asia Union of People Living with HIV (ECUO), Armenia

Rapid Needs Assessment for Children Affected by HIV/AIDS in South Caucasus

IMPLEMENTATION PERIOD: JULY 2012 — DECEMBER 2012

The goal of this project was to conduct rapid assessment to analyze existing situation of children affected by HIV/AIDS in Armenia, Azerbaijan, and Georgia and to identify the most urgent service needs and the development of a set of action plans to satisfy them.

The project objectives:

- Development of analytical overview of previous studies in the field of service provision for children and adolescents affected by HIV/AIDS in South Caucasus;
- Methodology development that combines qualitative assessment methods;
- Conduction of consultations with national PLWH networks and WV country offices to identify the list of potential respondents of the express assessment;
- Conduction of interview with key stakeholders;
- Provision of TA in South Caucasus countries;
- Development of the rapid assessment report and action plan based on the results of the rapid assessment and consultations;
- Discussion on feasibility of using different approaches and activities that can solve urgent needs and improve support of children and adolescents affected by HIV/AIDS in South Caucasus.

Promoting Universal Access to Treatment as a Basic Human Right for PLWH

IMPLEMENTATION PERIOD: 01 JANUARY 2013 - 31 DECEMBER 2014

This project focused exclusively on advocacy for increasing national funding of ARV drug procurement and maximizing allowances granted in respect to international intellectual property rights.

In order to equip regional PLWH communities with evidence-based advocacy tools, ECUO committed funding for a desk review of the current legislative/regulatory basis as it pertained to the integration of five selected TRIPS flexibilities into the project legislation which targeted EE countries (Belarus, Georgia, Moldova, and Ukraine). Within the framework of this project, ECUO brought assessment findings/outputs on parliamentary agenda through calling a meeting with respective Parliamentarian Committee(s) re a possible intervention on a revised IP regime for pharmaceutical products. Together with country-level national PLWH organizations, ECUO undertook advocacy actions for the establishment of the TSWG, which

became a body to initiate the process with regards to the incorporation of TRIPS flexibilities in national patent laws, contribute to the formation of the National budget as it regards to ARV drug procurement and increased access to treatment, and revise all available mechanisms to reduce drug prices.

In order to build capacity in national PLWH networks for this sort of evidence-based advocacy, trainings sessions were provided for partner countries' organizations for the engagement of PLWH communities in formulating and monitoring the national HIV/AIDS strategies. As well as to enhance understanding of specific TRIPS flexibilities, the sessions educate on how amending national patent laws incorporates the full range of TRIPS flexibilities, and enhance availability of affordable generic medicines nationally (as well as regionally).

This project equipped regional PLHIV communities with evidence-based advocacy tools and knowledge to secure ARVs availability, enabling them to act as triggers for needed changes. Through its advocacy efforts, the project strived to achieve increased national budget financing for ARV procurement and successful TRIPS flexibilities utilization. Advocacy actions with NGOs focus on human rights and other NGOs were aimed at responding to the HIV/AIDS epidemic, in the form of press releases, press meetings, petition(s), and request letter(s) for draft legislation

in order to attract public attention to increased access to treatment and wide utilization of TRIPS flexibilities, etc.

Additionally, ECUO organized a study tour trip to Brazil for Ukrainian legislators and public authorities to learn more about international best practices on the adoption of straightforward, easy-to-use domestic provisions in order to facilitate the use of TRIPS flexibilities and to consider the perspectives and experiences of Brazil government of including PLWH communities in topic-related decision-policy-making processes.



Акция Эстонской Сети ЛЖВ
ко Всемирному Дню Борьбы со Спидом, 2013 год

Strengthening the Impact of PLWHA Regional Communities to Improve Access to Timely, Comprehensive, Quality ARV Treatment in EE Region

IMPLEMENTATION PERIOD: 01 JANUARY 2013 - 01 JANUARY 2014

The goal of this project was to strengthen PLWH community impact at the local level through targeted regional efforts, capacity building, and advocacy efforts for the improvement of access to timely, comprehensive, and quality treatment for children and adults living with HIV in Eastern Europe.

The project targeted the following countries: Armenia, Azerbaijan, Belarus, Georgia, Moldova, Ukraine, and Russia. It served to strengthen ECUO's organizational and advocacy capacity and targeted PLWH & PLWH national networks to support meaningful PLWH participation in influencing policy at the regional and national levels in meeting ARV treatment universal access targets. With technical

assistance and mentorship of the ECUO Secretariat, National PLWH Networks had strengthened their organizational and advocacy capacity to improve advocacy plans and facilitate advocacy events at the national level and envisioned running annual regional meetings for PLWH communities for coordination of efforts within the framework of joint advocacy actions aimed at securing more coverage by ARV treatment in the region.

This project also included a possibility to deliver exchange visits between the countries and joint work meetings/trainings. Capacity strengthening of PLWH Networks at all levels improved the ability to run effective advocacy for PLWH inclusion into the decision-making process

and advocacy for universal access to treatment. This project tasked itself to have an average level of 50% state funding for ART treatment and improved the effectiveness of national programs in line with the “price-quality” principle and WHO protocols for European region.

Within the framework of this project, ARV Treatment Support Working Group was established for advising the Ministry of Health and other relevant ministries re budget development for ARV medicines procurement and further advocacy work at the parliamentary level. Additionally, the following actions were implemented:

a) participation of PLWH organization representatives at all stages of the budgetary cycle;

b) monitoring of deadlines for HIV/AIDS state budget implementation;

c) participation of PLWH organization representatives in development, monitoring, and evaluation of the National HIV/AIDS plan including country proposals to the Global Fund.

На VI Международной конференции по ВИЧ/СПИДу
в Восточной Европе и Центральной Азии, Москва, 2018.



Core Funding

IMPLEMENTATION PERIOD: 18 MARCH 2013 – 31 DECEMBER 2014

ViiV Healthcare provided financial support to ECUO for the 2013 and 2014 calendar years. ECUO used the funding to further the following objectives:

- Made sure that publically available research results and ECUO grassroots-level fact findings are used for advocacy efforts in order to ensure governments comply with their public health obligations;
- Conducted public, national, and regional campaigns to scale up access to ARV treatment;
- Built capacity levels of national PLWH networks around organizational development and advocacy, including provision of technical guidance and mentorship to improve country-level advocacy plans;
- Conducted educational seminars, meetings, and consultations of ECUO representative member states and identified key/critical activities in countries that need to maintain and strengthen on the regional level on such issues;
- Helped collect good practices from the region and important international documents and made them available at the national level for advocacy purposes.



Strengthening Community-Based Service Networks and Leadership Skills of Adolescents affected by HIV/AIDS

IMPLEMENTATION PERIOD: 25 JULY 2013 – 30 JUNE 2015

Adolescents aged 13-19 represents one-fourth of children living with HIV in the CEE/CIS Region. With improved access to ARV therapy, the increasing number of HIV positive children are surviving into adolescence and transitioning into adult care services. Children who acquire HIV perinatally have had generally longer exposure to medical services, including ART. They need support facing several difficult issues including but not limited to coping with disease, isolation, stigma and rejection, family problems, transition from paediatric to adult care, problems with adherence to treatment, disclosure of HIV status, issues related to positive sexuality, prevention, and other HIV and non-HIV related issues. In contrast, those adolescents living with HIV who acquired the HIV infection through their own risk behaviors are less likely to be informed about their HIV status and have access to any kind of health and social services. Their needs include awareness of HIV

status, risk reduction, care, treatment, as well as broader social needs such as housing and finding a supportive help system, which includes family and peer acceptance, health care, emotional attachments, basic living necessities, etc.

Realizing the rights of children and adolescents living with HIV requires strengthening the systems for the provision of care and support for these vulnerable adolescents and families and ensuring that AL-HIV are able to take a leadership role in all decisions affecting their lives. This is what the project targeted. Therefore, the project goal established a platform for community action and advocacy to strengthen policies and service provision to address the needs of adolescents living with HIV in CEE/CIS, while ensuring their full participation and involvement in the process.

ECUO conducted stakeholders' analysis and assessment of availability and quality of services for adolescents living with

HIV as well as delivered TA for 21 oblasts of Ukraine. These advocacy efforts were initiated in order to inform local governments on the strategies related to the inclusion of services for HIV-positive adolescents into governmental services system to correspond with the medical, emotional, and psychological needs of adolescents. Based on this analysis, a report was developed called “Access to Ongoing Support for HIV-Positive Adolescents in Ukraine”.

It produced baseline documentation on the existing services in each of the district sites, and communicated findings resulting from the interviews with ALHIV and their families, interviews with authorities, service providers, etc, which were shared in relevant outlets. Moreover, within the framework of the project, the following was carried out:

- A national mechanism was developed to influence change and strengthen coordination between government institutions, as well as between government agencies and partners working on adolescents health and HIV issues;
- A national round table discussion was organized and led by ALHIV across Ukraine;
- TA visits to Uzbekistan were conducted to assess HIV-affected adolescents’ needs for multidisciplinary case management and care, and age appropriate approaches in health care settings;
- In addition, five trainings have been conducted for 60 specialists from 13 oblasts of Ukraine. Training participants were medical workers from Oblasts Aids Centers, representatives of HIV-service NGO, and adolescents-activists. Trainings covered issues related to the delivery of quality support of HIV-positive adolescents, including HIV-status reveal, adherence to ART, prevention of tiredness related to treatment, etc.

Hence, the project contributed to the establishment of a common policy base between relevant ministries and agencies; facilitated a networking and communication platform among ALHIV; ensured their contributions and active engagement in the platform; and ensured an effective operation of an online information space for HIV+ adolescents from the entire EECA region, which is partly run by adolescents themselves.

Treatment for All

IMPLEMENTATION PERIOD: FEBRUARY 2014 — MAY 2015

This GIZ supported project was designed to increase the influence of PLWH communities on the efficient transition of funding from the Global Fund to the governmental financing of the treatment projects with a specific focus on the procurement and sustainable supply of ARV drugs for people in need of them. This project tasked itself to involve PLWH communities to contribute to national policies with regard to access to ARV treatment through evidence-based advocacy for increasing national funding for ARV drug procurement and the adoption of TRIPS flexibilities. For this purpose, a rapid assessment was conducted on the countries' TRIPS+ adoption status. ECUO and its project partners worked to sensitize the host country authorities on the importance of the TRIPS agreement.

Activities such as lobbying and raising awareness of Members of Parliaments of project countries (Georgia, Moldova and Ukraine) on TRIPS flexibilities and bringing project findings/outputs on the parliamentary agenda were conducted.

ECUO facilitated the development of normative legal documents, such as the Patent law in Ukraine, to allow the import of ARVs and other life-saving medicines in the interest of public health and respecting IP rights but exercising maximum allowable flexibilities. A regional advocacy campaign, "Health can be bought. Price is included in budget!" was initiated and aimed at increased public financing for high-quality ARV medicines efficient procurement and at making changes to country legislation to enable optimization of HIV treatment. Advocacy actions were done for the participation of PLWH in the development of the country proposal for the Global Fund for 2015 — 2017 (Georgia & Moldova), with major emphasis on the development and endorsement of the country sustainability strategy for the ART patients enrolled through the GF grants to be picked up/ transferred to the public funding, and joint advocacy actions were done with NGOs with human rights expertise and other NGOs responding to HIV, in the form of press releases, press meetings, petitions, and request letters for draft leg-



Regional advocacy campaign
“Health can be bought. Price is included in budget!”

isolation, in order to attract public attention to increased access to treatment and wide utilization of TRIPS flexibilities.

Nation-wide awareness campaign was done in Ukraine on ART availability and treatment adherence targeting both PLWH and the general population of Ukraine. These efforts further strengthen collaborative ties with the Medicines Patent Pool, which is to ensure that civil society concerns are taken on board with this International body, while undertaking discussions with pharmaceutical com-

panies to obtain access-friendly licenses. Continued advocacy from PLWH treatment advocates is important to ensure that more pharmaceutical companies are willing to license to the Pool on better terms and conditions.

Promotion of HIV Testing and Treatment Programs among the Key Affected Populations and Reduction of Stigma and Discrimination towards HIV-Positive People in the Medical Settings

IMPLEMENTATION PERIOD: 9 JUNE 2014 — 31 DECEMBER 2015

The general objective of this project was to create the demand for testing / treatment of HIV and contribute to the establishment of accessible and effective systems for support and redress in cases of health care—related to discrimination and consequently narrow the gaps in access to testing & treatment. National networks of people living with HIV were directly involved in the planning and implementation of the project activities.

Within the framework of this project, HIV testing week events were held in a number of countries of EECA region with an active involvement of PLHIV community representatives;

- an information campaign called, “Do Tell Your Neighbor” was conducted over the EECA region;

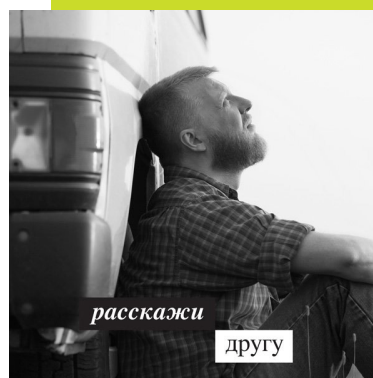
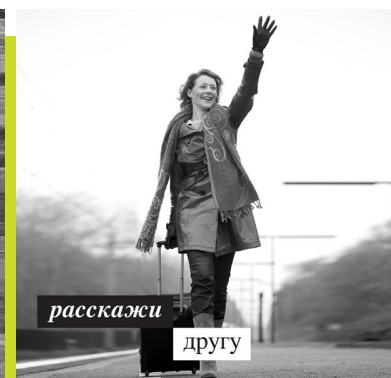
- “Doctor-Patient” Community Advisory Boards (CABs) was established in Kazakhstan;

- over 30 journalists from 5 different countries were trained on writing articles about HIV-related issues within the frame of the journalist award establishment, which resulted in over 25 articles being published in 5 separate countries located throughout the region on the need for testing and early initiation of ART;

- and an analytical report on the best regionally available practices and mapping of the legal and policy environment constraints to community-based HTC was developed.

This project also contributed to the establishment of collaborative ties between PLWH community organizations and human rights advocates/National Human Rights Institutions (NHRI). 4 PLWH treatment advocates were educated on the algorithm of collecting HIV-positive human rights violations cases at the medical settings; a policy brief on the situation with stigma and discrimination at the medical settings in the EECA region based on the result of the regional dialogue was developed; and illustrative cases of human rights violations related to HIV status at the medical settings were published in mass & social media platforms.

As a result of this project, access to community based HTC services for KAPs in targeted countries scaled-up; the aware-



Information campaign
“Do Tell Your Neighbor”

ness of KAPs on the necessity of timely HIV testing and benefits of timely initiation of the treatment is increased; and the registration of successful referral of new patients receiving care or treatment services, which resulted in the reduced level of stigma and discrimination against PLWH by medical workers.

Development of the European Communications Platform

IMPLEMENTATION PERIOD: SEPTEMBER 2014 – DECEMBER 2015

Development of the European Communications Platform is a project that is part of the already agreed cooperation outlined in the existing Memorandum of Understanding signed between the ECUO, the European AIDS Treatment Group (EATG), HIV Europe (HE), and the GNP+. This project supported the development and operational work of the European Communications Platform in the following ways:

- Maintaining liaison with all the ECUO country organizations (Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kirgizstan, Latvia, Lithuania, Moldova, Mongolia, Poland, Russia, Tajikistan, Uzbekistan, Ukraine, and Estonia) for the European Communications Platform project to provide and ensure involvement and close partnership working;
- Devising and developing the communication and marketing strategy to promote the use of the site, ensuring that the materials are available in appropriate languages;
- Developing and devising a series of potential e-questionnaires on issue of access to HIV treatment, care and support that were put on the site throughout the first year of it going live.

A beta version of the web site has been launched by the end of this project. The website (+Voice) enabled national and regional networks of people living with HIV/AIDS from all over Europe to share information aimed at improving communications between European networks and activists, so there can be effective collaboration and coordination and less duplication among these groups.

I Have a Power. The Power to Live

IMPLEMENTATION PERIOD: OCTOBER – DECEMBER 2014

Social programm "I Have a Power. The Power to Live"



The project was implemented within the framework of ECUO's Regional Advocacy Campaign, "Health can be bought. Price is included in budget!" For the first time in Ukrainian history, thanks to ARV therapy, four HIV-positive people live fulfilling and meaningful life: work and build a career, give birth to children, travel, play sports, enjoy hobbies, create the future of our country, and share their unique stories and vital energy.

The new outdoor social campaign advertising turned out to be very personal indeed. After all, instead of employing famous people, the activists themselves, who managed to find the strength to live with their HIV-positive status and to give their unyielding support to others, are featured in the campaign. Headlines campaign "I can strike power. Force to live!" concentrated on the inner strength of the characters in these stories. Heroes in this campaign show us that HIV is no longer a fatal virus, but fighting the disease is a hard day-to-day job, and thanks to antiretroviral treatment, one can live a long and fulfilling life!

Core Funding

IMPLEMENTATION PERIOD: DECEMBER 2014 – DECEMBER 2015

ViiV Healthcare provided financial support to ECUO for the 2015 calendar year to further the following objectives:

- Ensured direct dialogue at the regional level between and among communities of people living with HIV/AIDS and other diseases and representatives of pharmaceutical companies and regulatory bodies;
- Increased the role of the Communities in the processes relating to the conduct of clinical trials in member countries of the project;
- Established a regional resource center for the EECA CAB with an aim to build capacity of the Communities with respect to availability of treatment;
- Increased the role of the Communities in the pricing processes and procurement mechanisms in the countries of EECA;
- Represented the interests of the Communities of the region of EECA and engaged at the international level.

Online Counseling Platform for Adolescents Living with HIV

IMPLEMENTATION PERIOD: DECEMBER 2014 – DECEMBER 2015

Adolescents and young people are one of the groups that often remain excluded from HIV/AIDS programs, which mean very limited services for adolescents and young people affected by the HIV/AIDS epidemic. For this purpose, this small project supported the creation of an online platform for counseling adolescents living with HIV.

The budget of the project covered the establishment and functioning of the online platform, and about 40 hours of psychological counseling a month were made available for young people through this online platform.

«Teenergizer»





unicef



Ensuring Access of Children Living with HIV in Chernivtsi Oblast to Quality Psychological Services

IMPLEMENTATION PERIOD: 01 MAY 2015 – 20 DECEMBER 2015

In recent years, there is a growing understanding of the fact that development of services that facilitate integration of children into foster families should be a key area of support to children with special needs, especially Ukrainian children living with HIV. The main goal is to avoid isolation of children in a state-owned institution and to integrate them into the society through the provision of support to families. As of 2015, 130 children with confirmed HIV status lived in the Chernivtsi oblast, which is the largest number of HIV positive children in the Western region of Ukraine. 400 orphaned children, including 82 HIV positive children, lived in family type housing under the guardianship of a monastery in a small village within the Chernivtsi oblast. The institutional capacity on both the oblast and family type orphanage level to provide comprehensive service to HIV positive children to ensure their development and health care, however, need further improvement. Within this project's framework, activities, such

as trainings for different target groups (health and social workers, teachers, and guardians) and professional supervisions, provisions of psychological support and counselling on medical issues with HIV positive children were conducted.

This project's goal was to improve the quality of lives of HIV positive children, who live in the Chernivtsi oblast through the creation of favorable social environment and the development of their knowledge and skills related to treatment adherence and healthy lifestyles. The project outcomes can be summarized as follows: the capacity of service providers, namely employees of the Oblast AIDS Prevention Center and family-type orphanage teachers and health workers of health care facilities to provide quality medical, social, and psychological services has been developed and improved and the quality of life of HIV positive children raised under the guardianship of family-type orphanage has significantly improved.

Access of Adolescents Affected by HIV/AIDS to Quality Services to Meet Their Medical, Emotional and Psychological Needs

ПЕРИОД ВНЕДРЕНИЯ: 15 ИЮЛЯ 2015–15 МАРТА 2016

Launched in 2015 thanks to UNAIDS-Ukraine support, this project targeted the establishment of the Network of HIV-service organizations working with adolescents in Ukraine; the leadership development among adolescents to protect their rights; and the development of the online platform “Children” to share timely, quality, and accurate information for medical workers, psychologists, and social workers.

Improving Technical and Organizational Capacities for Providing HIV / AIDS Services in Ukraine

IMPLEMENTATION PERIOD: 14 AUGUST 2015 – 12 SEPTEMBER 2015

The aim of this project was to conduct national meetings to create a network of organizations to work with adolescents living with HIV/AIDS.

The main objectives of the project were the development of professional qualifica-

tions of HIV/AIDS service organizations and state/municipal institutions, improvement of program effectiveness of HIV/AIDS-service organizations, and amplification of the influence and the viability of HIV/AIDS-service organizations in state and municipal institutions.



Program for the Activation and Effective Involvement of the Patient Community in National Response to the Epidemic of HIV in the Countries of EECA

IMPLEMENTATION PERIOD: OCTOBER 2015 – MARCH 2016

Program for the Activation and Effective Involvement of the Patient Community in National Response to the Epidemic of HIV in the Countries of EECA

The goal of this project was the capacity building of the patient community and public organizations for effective participation in the medium and long-term processes of national strategic planning and policy on HIV/AIDS.

Within the scope of this project, three shadow reports were written with the efforts of patient communities related to the monitoring of national policies and strategies for preventing the further spread of the HIV/AIDS epidemic. The reports were distributed among authorities, government structures, NGOs, and international organizations.



Partnership for Equitable Access to HIV Care Continuum in EECA

IMPLEMENTATION PERIOD: 1 NOVEMBER 2015 — 31 OCTOBER 2018

Regional project “Partnership for equitable access to HIV care continuum in EECA” was developed by ECUO in partnership with EHRN with technical support of WHO and UNAIDS, and it was approved by the within the framework of its New Funding Model. The goal of the regional project is to increase efficiency, accessibility and sustainability of the HIV-infection treatment programs through promoting the continuum of HIV care to PLWH with the special focus on key populations in EECA region. This project was discussed during a number of regional consultations and supported by a wide circle of stakeholders including the representatives of CCMs and KAPs from the EECA region.

The project is being implemented at the moment.

The aim of the project is expected to be achieved by means of combining actions at the regional and national levels, and by

means of strengthening the cooperation among organized consortium of communities, relevant ministries, departments and institutions, international and national organizations and technical partners.

Expected Results by the End of The Project: As a result of the “Partnership for Equitable Access to HIV Care Continuum in EECA” Regional Program implemented by ECUO, it ensured the increase in efficiency, accessibility, and sustainability of the HIV-infection treatment programs through promoting the HIV care continuum provision to people living with HIV (PLWH) with special focus on KAPs in the EECA region. The project goal and tasks are achieved through conducting several regional and national level assessments on the activities directed at the removal of barriers preventing from the access to HIV care continuum and the promotion of providing the transition to sustainable state funding of HIV care continuum.

Unifying the efforts of different communities — PWID, SW, MSM, and PLWH/TB — into a united movement in order to ensure the access to HIV care continuum makes this program a unique and outstanding one. Building the capacity of the communities within this program's framework are implemented by applying the 'learning by doing' approach. In general, the project activities cover 15 countries from the EECA region. Consortium of 7 countries — Azerbaijan, Belarus, Estonia, Kazakhstan, Kyrgyzstan, Russia and Uzbekistan have the opportunity to participate in the open call for proposals on the development and implementation

of country plans on the removal of barriers preventing from the sustainable and high-quality access to HIV care continuum. Consortia of Armenia, Georgia, Moldova and Tajikistan have got the opportunity to implement mini-grants within the framework of this Regional Project.

Regional project “Partnership for equitable access to HIV care continuum in EECA”



#ПАРТНЁРСТВО

Основные активности

- БАЗОВАЯ ОЦЕНКА БАРЬЕРОВ ПО ДОСТУПУ К КОНТИНУУМУ ВИЧ УСЛУГ, А ТАКЖЕ АНАЛИЗ ФИНАНСОВЫХ ПОТРЕБНОСТЕЙ 2015-2016 ГОДА (ПОВТОРНАЯ 2018 ГОД)

- АДВОКАЦИОННЫЕ УСИЛИЯ, НАПРАВЛЕННЫЕ НА СНИЖЕНИЕ ЦЕН НА АРВ ТЕРАПИЮ И УСТРАНЕНИЕ ЗАКОНОДАТЕЛЬНЫХ БАРЬЕРОВ В НАЦИОНАЛЬНЫХ ПРАВИЛАХ, КАСАЮЩИХСЯ ЦЕНООБРАЗОВАНИЯ НА АРВ

- РЕГИОНАЛЬНЫЕ И НАЦИОНАЛЬНЫЕ ПЛАНЫ АДВОКАЦИИ, РАЗРАБОТАННЫЕ НА ОСНОВЕ РЕЗУЛЬТАТОВ ОЦЕНОК СТРАН

- СОЗДАНИЕ И ПОДДЕРЖКА РЕГИОНАЛЬНОЙ ОНЛАЙН-ПЛАТФОРМЫ ПО ДОСТУПУ К УХОДУ И ЛЕЧЕНИЮ ВИЧ В СТРАНАХ ВЕЦА MINUSVIRUS.ORG – МИНУС ВИРУС

- ПРЕДСТАВИТЕЛИ КОНСОРЦИУМОВ 6 СТРАН (АЗЕРБАЙДЖАН, КАЗАХСТАН, КЫРГЫЗСТАН, МОЛДОВА, ТАДЖИКИСТАН, ЭСТОНИЯ) ПРИНЯЛИ УЧАСТИЕ В РАЗРАБОТКЕ НОВЫХ ПРОТОКОЛОВ.

- 24 ПРЕДСТАВИТЕЛЯ СТРАНОВЫХ КОНСОРЦИУМОВ ИЗ 8 СТРАН ПРИНЯЛИ УЧАСТИЕ В РАБОТЕ СКК.

ПЕРВАЯ ЦЕЛЬ

Расширение доступа к услугам

- ПРИНЯТО ИЛИ НАХОДИТСЯ НА РАССМОТРЕНИИ **20** ЗАКОНОДАТЕЛЬНЫХ АКТОВ.
- **27** ВЕДОМСТВЕННЫХ ДОКУМЕНТОВ
- **28** МЕТОДРЕКОМЕНДАЦИЙ

ВТОРАЯ ЦЕЛЬ

Финансирование

- БЮДЖЕТЫ ГОСОЦЗАКАЗА НА НПО В СФЕРЕ ВИЧ – С 2017 ПО 2019 В **15** РАЗ ВЫРОСЛО ГОСФИНАНСИРОВАНИЕ НПО В СФЕРЕ ВИЧ (предварительные данные)

ТРЕТЬЯ ЦЕЛЬ

Повышение потенциала сообществ

- **15** ГОСУДАРСТВЕННЫХ ГРАНТОВ ПОЛУЧЕНО В 5 СТРАНАХ В ПЕРИОД РАБОТЫ ПО ПРОЕКТУ #ПАРТНЁРСТВО

#ПАРТНЁРСТВО

Основные достижения проекта

Грузия

- Интеграция услуг равных консультантов на базе СПИД-центров в национальную стратегию по ВИЧ/СПИДу
- Вынесение в Список ЖВП Ралтегавира
- Представители НПО в СКК 3 человека



Таджикистан

- «Спецификация и стандарты социальных услуг. Социальная адаптация людей, живущих с ВИЧ и их окружения». Документ направлен на согласование 30 августа 2018 года
- Принято Новое положение об НКК, из 26 членов 6 от НКО



Армения

- Изучение дискриминации в отношении ЛЖВ, ЛГБТ-людей в различных сферах общественной жизни.
- Социальный эксперимент: «У меня ВИЧ»



Беларусь

- Проведено стратегическое планирование для консорциума
- Разработан обучающий модуль «Школа Пациента», что в дальнейшем позволит сформировать приверженность у ЛЖВ к АРТ
- Представители РОО «Люди ПЛЮС» входят в СКК, межведомственные районные комиссии по профилактике ВИЧ-инфекции и социально-опасных болезней.

Молдова

- Участие в разработке нового Закона о лекарствах, Операционного руководства, Этического Кодекса, Процедур контроля деятельности НКС
- Представители консорциума входят в состав рабочей группы по разработке новых протоколов
- При активной адвокации со стороны Консорциума в схемы лечения включены инновационные препараты Ралтегравир, Долутегравир. Из схем лечения детей исключен Эфавиренз
- Впервые в регионе ВЕЦА утвержден протокол по до контактной профилактике



Узбекистан

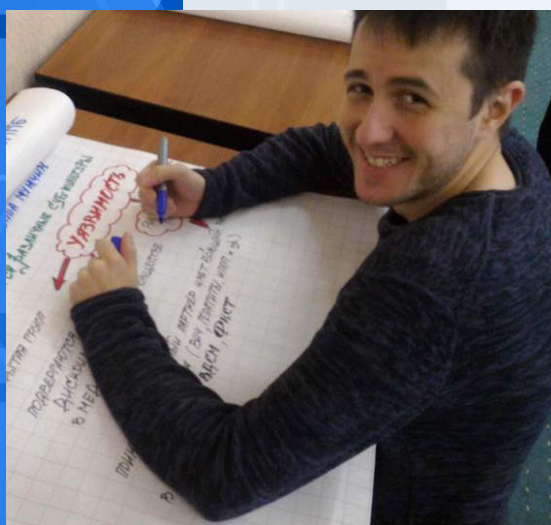


- Обновлен и принят Приказ Министерства Здравоохранения Республики Узбекистан «О внедрении в практику национальных клинических протоколов по ВИЧ-инфекции».
- Разработаны Национальные планы действий сообществ, Стратегический план и Операционный план ННО «Ишонч ва Хаёт» Объединения ЛЖВ/ОЗГН, Национальный план по преодолению стигмы, дискриминации и выработке толерантного отношения к ЛЖВ/ОЗГН.
- Представители Консорциума вошли в составы Координационных Комиссий по ВИЧ
- На данном этапе идет процесс согласования условий договора о создании сети социально-ориентированных ННО в Узбекистане в целях оказания качественных социальных услуг уязвимым группам населения



Россия

- Участие в Национальной стратегии по ВИЧ “Об утверждении стандарта первичной медико-санитарной помощи взрослым при болезни, вызванной вирусом иммунодефицита человека (ВИЧ) (предпочтительные схемы первого ряда антиретровирусной терапии)”
- Об утверждении стандарта первичной медико-санитарной помощи взрослым при болезни, вызванной вирусом иммунодефицита человека (ВИЧ) (первичная диагностика)”
- Участие в Разработке типовой межведомственной программы по вопросам профилактики ВИЧ-инфекции в ключевых группах населения
- Получен Президентский грант “ЦЕНТР ПЛЮС 20 000 \$



Азербайджан



- Стандарты оказания ВИЧ услуг на базе сообществ (аутрич-работа, ВИЧ консультирование и тестирование, поддержка приверженности, интеграция лечения ВИЧ/зависимости/ТБ) и механизмы перенаправления в медицинские сервисы для КГН (ЛЖВС, ПИН, СР, МСМ) которые на данный момент находятся в процессе утверждения
- Инструменты по проведению мониторинга качества услуг предоставляемые сообществами
- Анализ ситуации в области правового регулирования борьбы с ВИЧ/СПИД-ом в Азербайджанской Республике. Даны рекомендации по усовершенствованию
- СКК: 3 представителя от Консорциума являются членами СКК



Эстония



- «Государственная программа по ВИЧ на 2017 – 2025 гг.»
- «Руководство по оказанию услуги равного консультирования на 2017-2019 год», документ был принят и утверждён Институтом Развития Здоровья
- «Национальный план действий сообществ Эстонии на 2017-2020 год»
- «Обзор опыта внедрения тестирования на ВИЧ силами сообщества и рекомендации по внедрению этих практик в странах ВЕЦА – описание рекомендуемой оптимальной модели тестирования, сопровождения и лечения ВИЧ силами сообществ на примере Эстонии»



Кыргызстан



- Принят закон «О лекарственных средствах» заключительные поправки были приняты в мае 2018 года. Государственная программа по преодолению ВИЧ в Кыргызской Республике на 2017 – 2021 гг.
- Утверждена и реализуется «дорожная карта» по переходу на государственное финансирование.
- Клинический протокол по лечению ВИЧ
- Утверждена программа Государственного социального заказа в сфере здравоохранения, включая ВИЧ и ТБ.
- Издан приказ о предоставлении пациентам, живущим с ВИЧ и вирусным гепатитом С лечения вирусного гепатита С препаратами прямого действия за счет государственных средств
- В 2018 году был пересмотрен ПЖВЛС. При активной адвокационной деятельности консорциума, в него вошли все препараты для лечения ВИЧ. Помимо этого, за период 2017 – 2018 года, была зарегистрирована практически вся линейка APB препаратов



Казахстан



- Приказ Министра здравоохранения Республики Казахстан от 14 апреля 2017 года №164 «Дорожная карта реализации мер по предотвращению ВИЧ-инфекции в Республике Казахстан на 2017 - 2020 годы».
- Клинические протоколы диагностики и лечения ВИЧ-инфекции у взрослых (одобрено Объединенной комиссией по качеству медицинских услуг Министерства здравоохранения и социального развития. Данный протокол соответствует рекомендациям ВОЗ «Тестируй - Лечи»
- Участие в разработке Дорожной карты по совершенствованию и реализации программы поддерживающей терапии агонистами опиоидов в Республике Казахстан 2018-2019 годы.
- Клинические протоколы диагностики и лечения ВИЧ-инфекции у взрослых и детей
- Данный протокол соответствует рекомендациям ВОЗ «Тестируй - Лечи»



Money Can Buy Health If You Budget For It

IMPLEMENTATION PERIOD: JANUARY 2016 – DECEMBER 2018

This project is supported by RCNF and being implemented by the Eurasian Regional Consortium which brings together three regional networks: EHRN - which addresses the needs of PWUD; ECOM - which addresses the needs of gay men and MSM, and of transgender people; and the ECUO - which addresses the needs of PLWH. The project aims to build the capacity of regional networks and their members who represent PWUD, MSM, TG, and PLHIV and those who work in their interest in EECA to influence investment in sustainable, effective responses to HIV, addressing the needs of KAP, and to advocate for strategic, sufficient, and sustainable investments in responses to HIV, which address the needs of PWUD, MSM, transgender people and PLHIV.

Project Goal: Representatives of PLWH, MSM, transgender people, and PWUD and their allies in EECA will influence the mobilization of resources for effective and sustainable responses to HIV.

Within its first year, assessment of investments and services for people living with HIV, people who use drugs, men who have sex with men, and transgender people were conducted. Evaluation of services helped to identify the priority for each of the target groups set of services to support where it is necessary to carry out budget advocacy. Valuation of investments were made in order to calculate the costs of planning and funding needs that help communities operate with facts and reliable data through budget negotiations. The results will be used for future strategic advocacy and adequate and sustainable investments to respond to HIV, which meet the needs of people living with HIV, teenagers, people who use drugs, men who have sex with men, and transgender people.

It is expected that the project will empower PLWH and representatives of other communities to conduct state budget monitoring and advocacy around services along the continuum of HIV care. The



Regional advocacy campaign "Money Can Buy Health If You Budget For It"

goals and objectives of this project are in line with the principles developed during EECA's recent Regional Consultation on Transition and Sustainability of HIV and TB Responses. In particular, one of 9 key "Transition and Sustainability Principles" was identified as "Key populations must be central to all transition efforts. They must serve as leaders of the process..." By giving PLWH and KAPs the tools, as well as the experience collaborating with each other and advocating for their governments, technical agencies, and donors,

it will equip them with skills, credibility, knowledge, and partnerships that will contribute to their future meaningful involvement in HIV resource mobilization and accountability.

Regional Civil Society and Community Support, Coordination and Communication Platform – EECA

IMPLEMENTATION PERIOD: FEBRUARY – DECEMBER 2016

This unique coordination mechanism for the Regional Platform was developed by four regional technical support and community support providers: the Regional Technical Support Hub for EECA of the International HIV/AIDS Alliance in Ukraine, in consortium with Alliance Ukraine Consultancy, the Eurasian Harm Reduction Network (EHRN), and the East Europe and Central Asia Union of PLWH (ECUO).

The Regional Platform EECA aimed to support and strengthen civil society and community engagement at all levels of the Global Fund processes, in particular in the areas of Community, Rights, and Gender. The priority focus of the Regional Platform was to increase the communities' knowledge and understanding on the Global Fund related programs and Technical Support in general and to be able to

serve as the expertise source in the Global Fund programs on HIV, TB, and Malaria more broadly. Besides, the RP worked on developing a strong communication and cooperation among all players included in the processes: from KAP representatives to Technical Assistance providers, governmental bodies, civil society organizations, and donors.

Project results can be summarized as follows: The creation of the demand for the CRG technical support in the EECA region and specifically for expertise from communities and civil society organizations. The development of an unique web-based resource that became a low threshold mechanism to shape technical support needs and help establish the connection between requestors and providers of technical support. The RP was developed and maintained a web-based multifunctional

resource, which includes the most comprehensive set of information/tools/references available. Capacity building and support was provided for civil society and communities representatives to be able to serve as experts in the development and evaluation of programs to fight AIDS, Tuberculosis, and Malaria.



Regional Platform EECA

Regional Civil Society & Community
Support, Coordination & Communication Platform

Increasing Resource Accountability and Sustainability for HIV Treatment and Critical Health Services that Influence the Quality of Lives of People Living with HIV in Asia, Caribbean, Eastern Europe Central Asia and Western Africa Region

IMPLEMENTATION PERIOD: APRIL-DECEMBER 2016

This project's goal was to increase the standard of accountability on financing for HIV/AIDS response that leads to intensive policy discussions on resource sustainability in financing HIV/AIDS treatment and other health services that influence the quality of lives of people living with HIV/AIDS.

This project's framework was designed to focus on increasing domestic financing and strategic investments (including allocation of the investments) particularly around HIV treatment & related services by mobilizing communities groups and actors to monitor the use of available resources and engaging in policy discussions with governments and relevant stakeholders.

Due to the nature of the project, regions that consist of numerous countries with issues around access to medicines, rapidly (or concrete risks of) declining international funding, low level of commitment from governments, and low level of funding to communities group, were prioritized.

Within the framework of this project, the organization documented, analyzed, and interpreted the data related to the use of available resources in the provision of HIV/AIDS treatment and other health-care services that influence the quality of lives of people living with HIV/AIDS; created coordination, communication, and planning platform for communities, key populations, and other civil society groups

to discuss and plan action around sustainable use of resource on HIV treatment and other health services that influence the quality of lives of people living with HIV; initiated and maintained intensive policy dialogues, particularly with governments and donors, on the issue of sustainable investment of various resources; and overseen the transition and coordination plans around international funding and domestic financing.



Core Funding

IMPLEMENTATION PERIOD: 1 MARCH 2016 – 31 DECEMBER 2018

ViiV Healthcare has provided a financial contribution to the ECUO to further the following objectives:

- Expands the access to HIV care and improves linkages between the main elements of the continuum of HIV care for key populations in the EECA region;
- Promotes the sustainable funding of HIV care continuum from the state budget for key populations in the EECA region.

Award of Appreciation “Thank You!”

SINCE 2008

Since 2008, at the meeting of ECUO members, a new idea, an annual “Thank You!” award recognition, was initiated. The award was presented to activists, doctors, politicians, and others for their help, support, and participation in improving the quality of life for PLWH in the countries of EECA region.

ECUO continues the initiated “Thank You” award ceremony to enlist authorities’ support on the issue of ensuring the treatment for PLWH for the state budget means. ECUO decided to say thank you, because so many people have worked really hard to help and support people living with HIV/AIDS. It was an amazing and sincere event.







CHALLENGES, ACHIEVEMENTS, AND ACCOMPLISHMENTS WITHIN THE FRAMEWORK OF ECUO'S STRATEGY IMPLEMENTATION

The expansion of the access to treatment, care and support for PLWH, increasing the involvement of PLWH in the decision-making process on key aspects against the HIV/AIDS epidemic and eliminating its consequences on all levels, as well as strengthening the capacity of the PLWH community organizations, and adhering to the protection of human rights in the context of HIV/AIDS have been the primary areas of ECUO's activities since its establishment. Thanks to the efforts and hard work put by all the members, the secretariat, and all the bodies involved, ECUO develops as a credible, strong, and effective regional, international advocacy organization.

The strategic task of the organization since 2015 was to have national PLWH organizations implement advocacy programs for access to comprehensive and high quality treatment, care, and support for adults and children living with HIV in the EECA region. ECUO realized, that in the EECA

region, the rights of HIV positive adults and children are often abused and PLWH are denied medical services at specialized facilities and access to ARV treatment for many is limited. But it also realized that the PLWH communities can influence the current realities, drawing attention of political leaders and the international community to the complexity of overcoming the HIV/AIDS epidemic in the countries of EECA. ECUO undertook responsibility for its role in policy changes, acting at the regional and international levels, and hence it developed advocacy campaigns in support of the national efforts to better inform political leaders and other stakeholders about the pressing issues. For over ten years, ECUO has been promoting dialogue between government, civil society actors, and other important stakeholders in the field of HIV/AIDS through increased representation in various national, regional, and international structures.

In this section of the report, ECUO's achievements and accomplishments within its strategic plan are discussed. The Strategic Plan for 2016-2020 is ECUO's main document denoting all long-term goals of the organization, tasks, activities, and expected results. It defines the priority tasks for EECA countries and is developed by the ECUO Regional Strategy for achieving sustainable and universal access to quality ARV treatment for HIV in the EECA basis, which includes revised and updated tasks. It is

agreed that the Strategic Plan should be a single ECUO strategic document including the main and final stages of the Regional Strategy. This document takes into account the new global strategies and initiative priorities and aims to implement new approaches in providing access to HIV care continuum based on respect for human rights. The ongoing strategic goal of the organization is to provide access to a continuum of HIV services for 100% in the EECA region. The strategic tasks are as follows:

- Ensuring / advocating the allocation of 100% of state funding in 15 EECA countries on the continuum of HIV-related services;
- Advocating the provision of quality treatment cascade and links between all stages of the continuum of HIV services by the states of EECA countries;
- Strengthening the advocacy capacity and mobilizing communities of PLWH and vulnerable groups in EECA countries;
- Developing the capacity of ECUO.

CHALLENGES

Financial resources:

There had been times when the ECUO had problems with funding, and the Secretariat had to work for free, or for minimal payment. The staff's main task was to fulfill the organization's goals. By being committed to the mission above finances and investing in their own time and energy into the organization, the staff increased the strength and commitment of the organization to its original purpose. However, relying on donor funding still remains an underlying problem for the organization. To achieve the strategic goals of the organization, it is necessary to ensure sufficient financial sustainability, both for the ECUO in general, but also for member country representatives.



Optimizing resources:

On the background of declining funding, there was some resistance to the need for closer interaction with other communities within the organization. However, as Natalia Leonchuk, the Senior Advisor of the ECUO explains, the fears about reducing funding were unfounded, as the whole world is striving for being united and optimizing resources. However, this challenge was dealt with and succeeded, as it allowed for more access to ART in different communities. In fact, there was enough work to be done for all and no competition within different community organizations made sense. Rather, a simple mapping on the role of different communities made their engagement become apparent.

Stigma and discrimination:

A serious problem remains the level of stigma and discrimination, as well as human rights violations of both PLHIV and representatives of key populations. Stigma and discrimination are among the foremost barriers to HIV/AIDS prevention, treatment, care, and support. It undermines HIV/AIDS prevention efforts and the fear of violence discourages people living with HIV to disclose their status – undermining their ability and willingness to access and adhere to treatment. And despite significant efforts and achievements

in this field, the situation with stigma, discrimination, and human rights in connection with HIV infection varies vastly in different countries and requires constant attention.

Other challenges:

The politically unstable situation of many countries within the region hinder the work in advocacy field. Misclassification of the World Bank - which does not reflects the real situation of the countries' economy and their real potentials and solvency, which is used by international structures for estimating ability of countries to receive support and pharmaceutical companies for pricing - led to significant constraints and reduced opportunities for the majority of countries in the region to expand access to treatment.



ANALYSIS ON MAIN ACHIEVEMENTS AND ACCOMPLISHMENTS

Strengthening the Capacity of PLWH commu- nities in EECA:


ECUO is a leading regional organization that unites PLWH communities in the region for the achievement of common goals. By taking into account the varying national contexts and opportunities, ECUO reacts to the needs of its communities. Thanks to the creation of a common information platform, the community of PLWH in the EECA region has the opportunity to share experiences and information, to conduct information campaigns in their countries under a single slogan within the EECA region, and to take part in countless joint projects. The specialists of the ECUO provide technical assistance to the member organizations in accordance with their requests and needs.

Continuous sharing of advocacy community-driven best practices among PLHIV organizations and partners in EECA region are being ensured.

Relevant to this context, the ECUO, together with ITPCru, created the Community Advisory Board of Eastern Europe and Central Asia (EECA CAB) to join efforts with PLWH in the region on scaling-up access to treatment and support, as well as securing direct dialogue between PLWH communities and representatives of pharmaceutical companies and regulatory agencies at the regional level. EECA CAB includes treatment access activists from the following countries: Azerbaijan, Armenia, Belarus, Georgia, Kazakhstan, Kyrgyzstan, Latvia, Lithuania, Moldova, Russia, Tajikistan, Ukraine, Uzbekistan, and Estonia.


The voice of the regions has become heard:

Due to ECUO activities and efforts, the voice of the regions has become amplified at the international and regional level, which is unambiguous. ECUO played a major role in attracting attention to the region not only in terms of the number of people that have died but the growth rate of the epidemic, which is much higher than in all other regions of the world. ECUO first started voicing its concerns since 2010, when it took the data from UNAIDS and made its own map on the prevalence of HIV infection and not the



mortality map or the number of people who live there. And on this map the EECA region was an alarming red spot.

Unfortunately, given many reasons, the situation did not change much. At the international level, this issue could no longer be ignored, because the ECUO had already been very loud about it. And thanks to the active involvement of the ECUO and the effective work of PLWH member-organizations, partner organizations, and other stakeholders, the EECA region was reflected for the first time in the Political Declaration of the UN General Assembly Special Session on HIV/AIDS, which was adopted in June 2011. Continuously, the ECUO ensures the attention on the region in all possible international platforms.



The active struggle of HIV positive people in access to treatment, care, and support

The community of people living with HIV has served as a catalyst for change, but it has not reflect reform changes in the public health system yet. ECUO was the first to develop the standard of social support for people living with HIV.




Solidarity among ECUO members:

NGOs often have the tendency to work in isolation. The consolidation and solidarity among member organizations, valuing and appreciating each other's efforts at the ECUO have been inspiring. Solidarity among member organizations at the regional level presumes the presence of a healthy atmosphere and good will. PLWH communities express solidarity with campaigns and other members' actions, promote the effectiveness and success of other member organizations, and exchange best practices. Some member organizations have also pointed out that cooperation between PLWH organizations strengthens the structures of their own countries and that ECUO contributes to that development.



Unity of PLWH groups within the community:

Before, as an organization of people living with HIV, to a greater extent, ECUO worked with people who did not use drugs and/or did not engage in sex work. Nevertheless, all of these communities were very much isolated and self-orga-




nized in its own direction separately. As a result, there was a big gap. It took about 4-5 years, and despite some resistance at first from the side of some organizations, ECUO tried and succeeded to join forces with all the various communities and organizations in order to develop some kind of a common strategy and to interact more with each other in order to ensure people's access to treatment. This is a great achievement and a very unique outcome compared to the other regions. EECA now has a fairly strong consortium and interaction between regional organizations of PLHIV, Sex workers, MSM, and PWUD.



Expansion of work areas:

Since 2010, the ECUO has focused special attention on HIV-positive adolescents. The regional group of parents and guardians, who raise HIV-positive children, was created with the support of the UNICEF regional office to help safeguard their rights. The ECUO Parents Union has been a priority area of ECUO activities for the protection of children's rights uniting at the creation of separate organizations from five different EECA countries. It has the purpose to mobilize the potential for improving the life quality of HIV/AIDS affected children and their legal representatives in the region. In the recent years, the matter of HIV/AIDS and aging has also become an area of discussion at ECUO. Previously, it would not be sufficient to take this issue as a priority area, but now, thanks to ART, HIV-positive people may live a long and meaningful life, and it is



important to develop recommendations on how to take care of one's health properly. The formation of a new group at ECUO to focus on HIV/AIDS and aging is now solely under way.

Increased access to ART:

The mistrust of the groups most vulnerable to HIV/AIDS and the high cost of the antiretroviral treatment have caused the epidemic to expand in the region. Little has changed in ten years with regards to access to antiretroviral treatment, and since 2007, the number of people in need of antiretroviral treatment has increased by 13%.

Other advocacy achievements:

In general, ECUO is a recognized leader in the field of regional advocacy. ECUO is leading joint efforts of community organizations at the regional level to ensure sustainable access to the continuum of HIV-related services. ECUO influences the trends of advocacy in the region. ECUO's priority objective for the transition of ART treatment programs to state funding has become a priority for both the Global Fund and other donors of the region. Moreover, new legislations have been adopted in various member countries aimed

at counteracting HIV / AIDS at national levels. In other countries, the states have begun financing the types of services that were not financed before either by the government or other international organizations. In some countries, new treatment protocols have been adopted due to the advocacy efforts and support of ECUO.

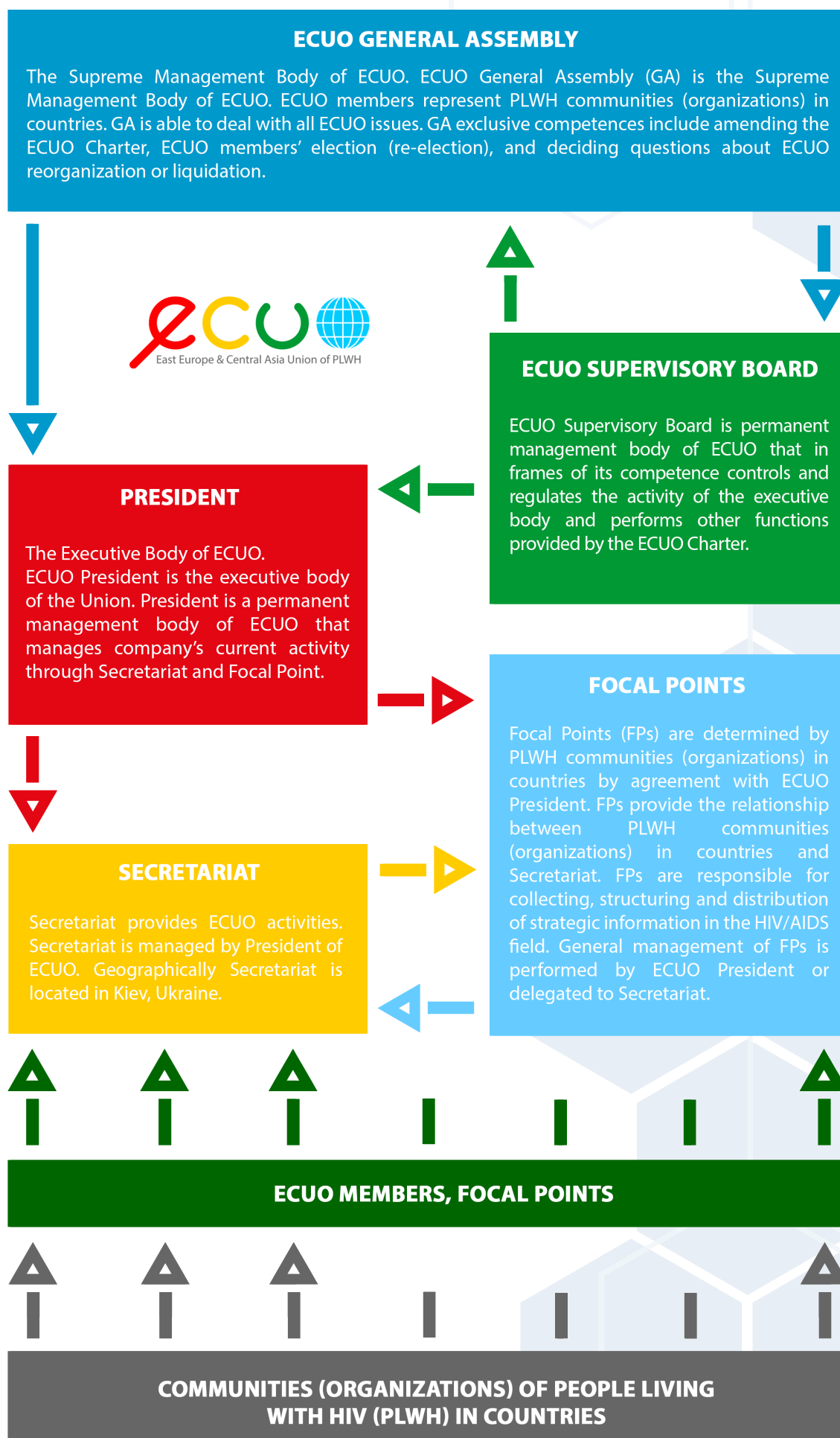
Due to ECUO activities, the PLHIV communities are represented both in the Global Fund delegation and other international events, which have created new opportunities for advocacy.

Another achievement is the development, promotion, and implementation of the ECUO Regional strategy for providing access to ART in the EECA region. This strategy has been taken into account by key partners and international organizations.

Strategic meeting of ECUO, Kyiv, 2018

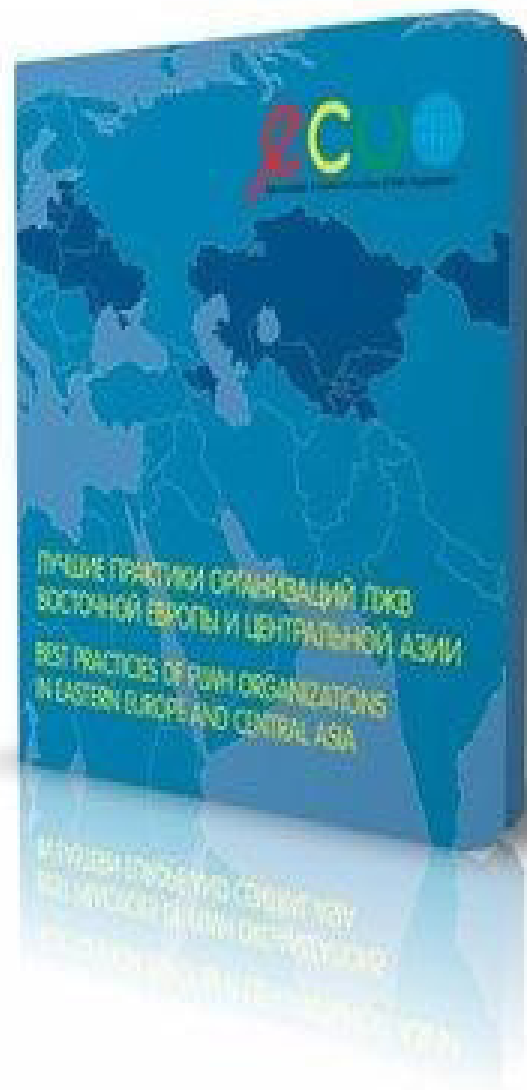


Structure of the Organizations



Publications

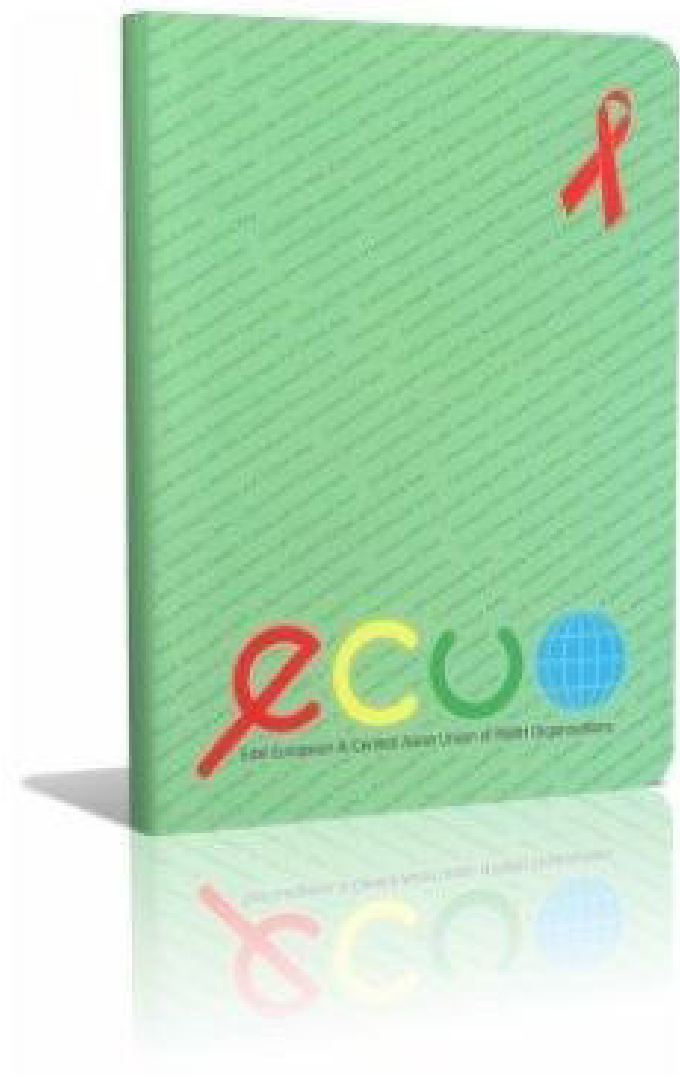
Best Practices of PLWH Organizations in Eastern Europe and Central Asia, 2008



Each of the 14 member organizations of ECUO has its remarkable, unique, and successful work experience in the most diverse areas of overcoming the HIV/AIDS epidemic.

The best practices of organizations and communities of PLWH, presented in the project cover four countries: Armenia, Estonia, Poland, and Ukraine. Each of the

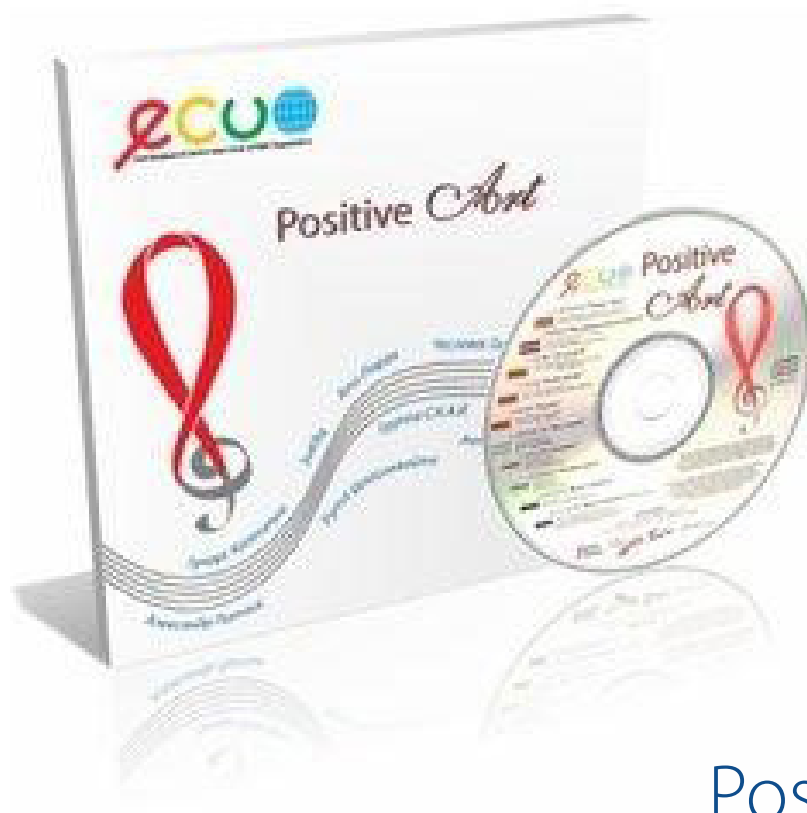
organizations of PLWH in these countries were visited by several internship participants who had an opportunity to get acquainted with the work of their colleagues, seen how successful practices and effective programs are implemented, and formed a vision of the possibility of using the acquired knowledge in their country. This report presents the implementation of the first project by ECUO.



ECUO 2008, Participants, Plans, Achievements

2007 was a really important year for ECUO – it became an officially registered organization uniting PLHIV communities of countries in the EECA region. In a short period of time, ECUO has already started strengthening the capacity of the organizations involved, shared experiences and best practices, provided opportunities for development, and supported initiatives.

This brochure covers the HIV/AIDS epidemic in the EECA region since the early 2000s and summarizes the organization's establishment, its founding members, and plans for the future.



Positive ART - Joint Musical Album and Brochure, 2009

In frames of this unique project, “Positive ART”, ECUO cooperated with artists from Belarus, Latvia, Lithuania, Uzbekistan, Ukraine, and Estonia. These remarkable artists changed societal attitudes toward people living with HIV/AIDS by their own support and personal example. Joint musical album is another chance for people living with HIV/AIDS to not just say,

but scream — this is a way to sing that we love, feel, rejoice, and suffer as everyone who lives in our world!

Access to ARV Treatment in 7 Countries of the Former Soviet Union in 2007, 2009

The study, “Access to ARV Treatment in 7 countries of the Former Soviet Union in 2007”, was conducted jointly by EATG, ECUO, EHRN, ITPCru, and All-Russian Union of People Living with HIV.

This is the first civil society effort in the region to collect data and assess the impact of existing planning, financing, and procurement systems for HIV/AIDS treatment on access to ARV treatment in 7 countries. Despite the fact that all the

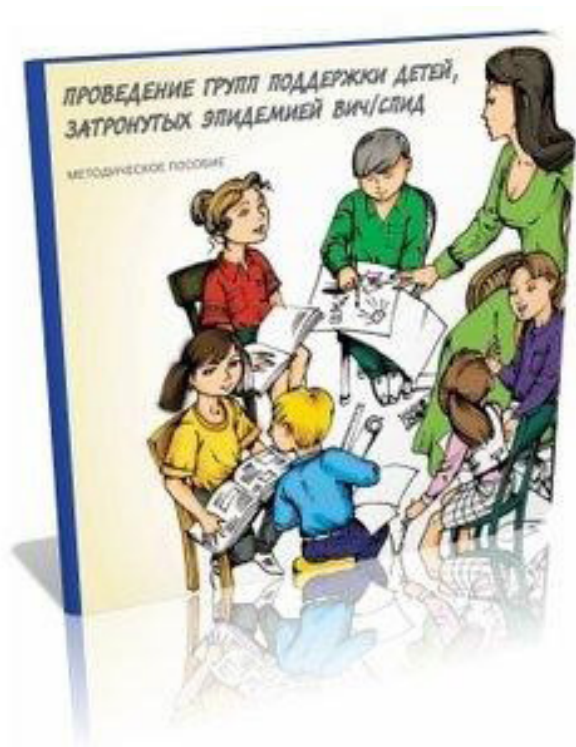


data presented in this report corresponds to the situation with access to treatment from December 2007, most of the findings and recommendations still remain relevant today.

Diary of Health for Youth, 2009



In order to be healthy and ensure one well-being, it is useful to keep a unique personal diary. The diary is assumed to be used for those who live with HIV/AIDS and felt they did not have anyone to talk about their health. This brochure helps to keep track of one's health. The diary, reprinted with the support of UNICEF, keeps the results of all the tests, shows whether there is a weight lost or recovering, and also monitors the viral load.



Methodological Tools for Working with Children Affected by the Epidemic, 2009

DISCLOSING THE STATUS OF A CHILD LIVING WITH HIV/AIDS (FOR MULTIDISCI- PLINARY TEAMS)

The manual describes the main aspects that should be taken into account when working with a child - the safety steps needed to disclose the HIV status and preparation and psychological support of parents on the way to disclose the status. The last section includes information on the proposed support during the disclosure of the status according to a plan agreed in advance with the parents and constant support after the disclosure of the status, as children acquire new knowledge and understanding of their health and HIV status.

CONDUCTING SUPPORT GROUPS OF CHILDREN AFFECTED BY HIV/AIDS EPI- DEMIC

The manual provides information on one of the ways to help children who are affected by the HIV/AIDS epidemic - the formation of a support group. The manuals are intended for psychologists, social workers, and teachers who have completed the course, “Fundamentals of Psychology”, and have worked previously with HIV-positive children.



The first report on ECUO activities (2007-2010), 2011

This report tells about the purposes, tasks, and directions of ECUO, for what and for whom we work for and for what we aspire, and shares our most significant achievements, as well as plans for the future. We share our most significant achievements during this three year period.

Moreover, the report also presents the structure of the organization, awards initiated, and implemented projects. What's noteworthy is that the report also compiles some personal stories of people, including children living with HIV/AIDS.



Assessment of Organizational Capacities of ECUO Members, 2011

This report summarizes the results of the assessment of the organizational capabilities of ECUO member organizations. The manual details the methodology and evaluation process. The analysis is presented with regards to management, management processes, advocacy, fundraising, and communication with the beneficiaries, public and media, authorities, and

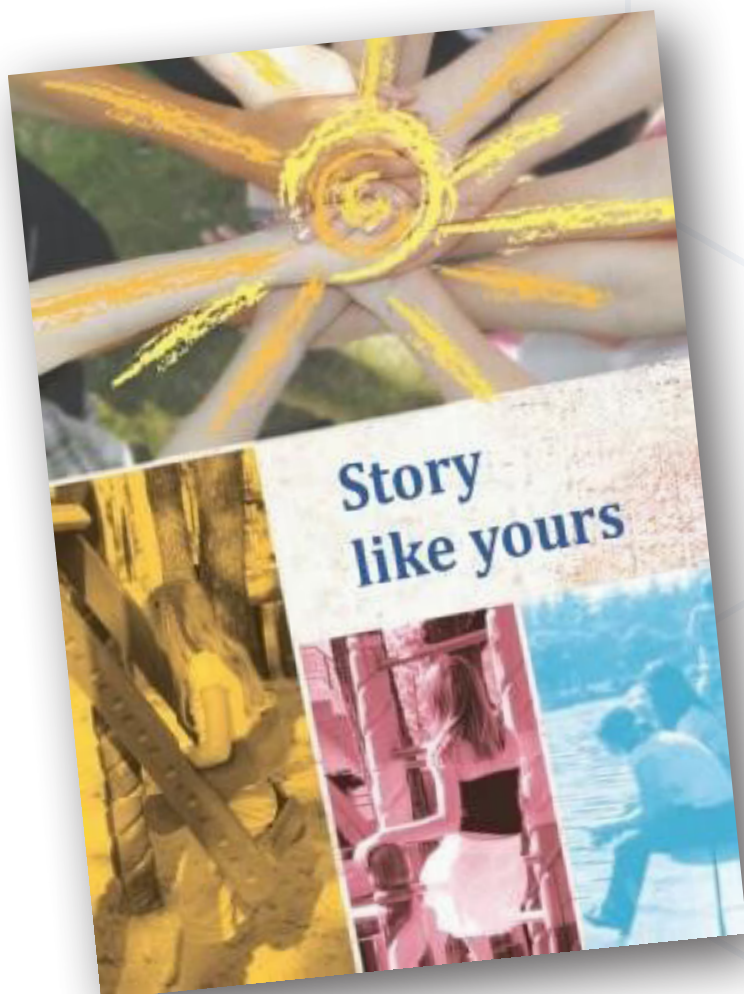
donors. General recommendations for the ECUO Secretariat and for each country are drawn up in this report.

ARV Treatment in the Countries of Eastern Europe and Central Asia, 2011



Based on the experience of our Russian colleagues, the Simona + project, and the All-Ukrainian Network of PLHIV, the ECUO conducted a quarterly monitoring of access to ARV treatment in the EECA region. Focal points on advocacy provided a survey of more than 40 health professionals from specialized medical institutions and approximately 100 patients receiving ART in 25 cities in 13 countries within the region.

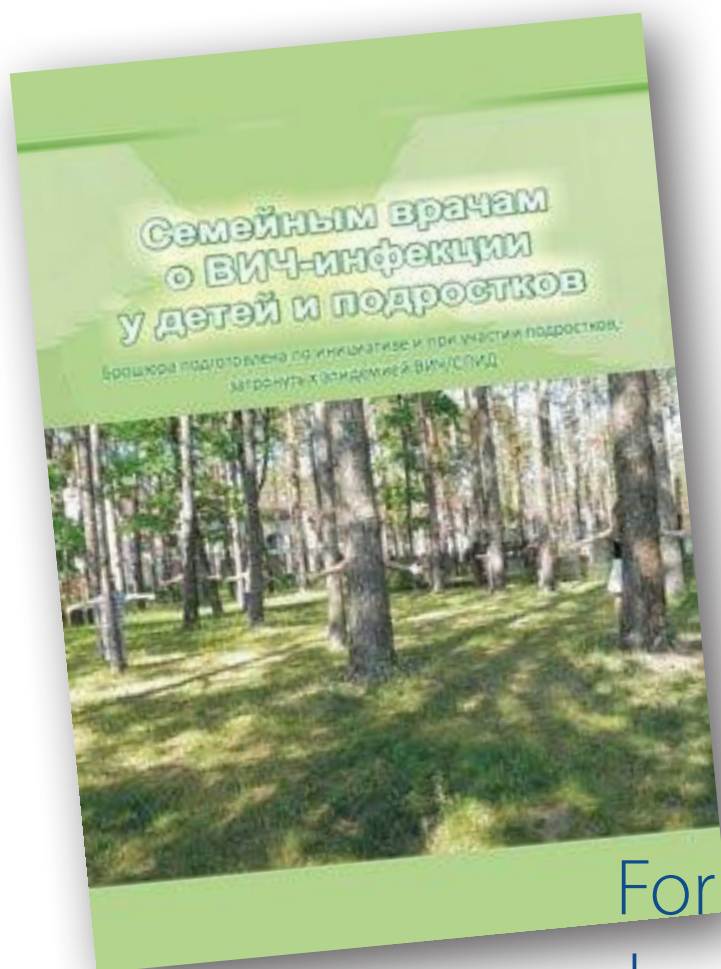
For the first time, ECUO monitored access to ART and created an evidence-based database for dialogue with all stakeholders that influence and/or affect the provision of continuous, comprehensive, and quality treatment and care for adults and children living with HIV/AIDS in our countries.



Story like Yours, 2011

“Story like Yours” is not just a collection of stories and descriptions of life situations, but a truly Big Book of Hopes - hopes for a better life for adolescents affected by HIV/AIDS in the Eastern Europe and Central Asia region, which is the only region in the world where the epidemic has not stopped its growth.

This publication comprises of courageous stories of young people living with HIV/AIDS, who made a leap towards peace and presented us with an inspiring gift by sharing their life on the pages of this book



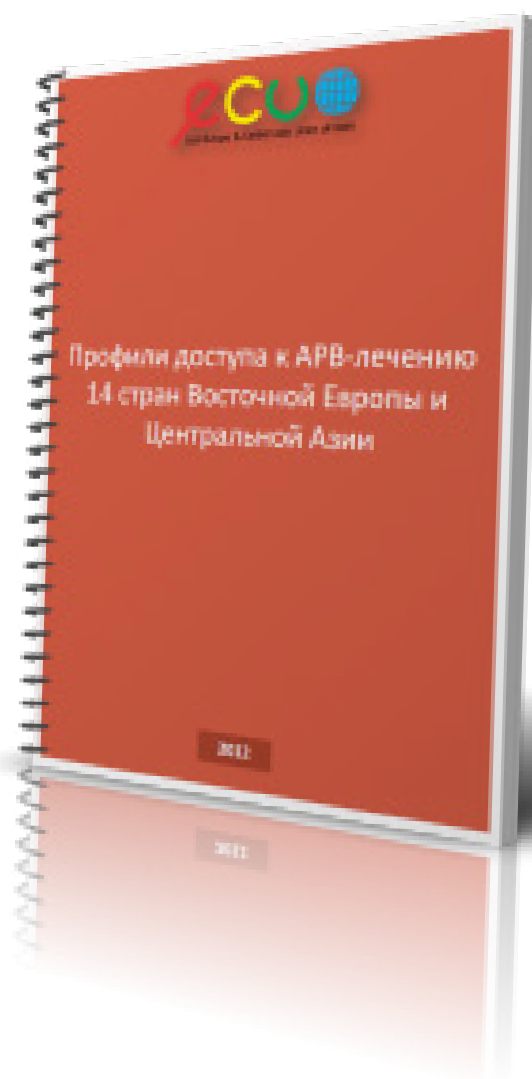
For Family Doctors about HIV Infection in Children and Adolescents, 2012

Adolescents living with HIV/AIDS from Simferopol, Crimea have developed a brochure for pediatricians and family doctors so they can have a better understanding of their young patients. “For us, adolescents living with HIV,” the children write in the brochure, “it is important to be understood, and not to regret accepting us, or be afraid. We ask you to remember that we are just children and we want to be loved, to be friends with us, we want to meet our soul mate in the future, so that we have a

close and strong family and healthy children.”

The brochure describes the lives of HIV-positive adolescents live, the difficulties they face, and explains how to provide for a child born to an HIV-positive mother, what laws protect HIV-positive babies and adolescents, etc.

Profiles of 14 countries in the Eastern Europe and Central Asia region on access to ARV treatment, 2012



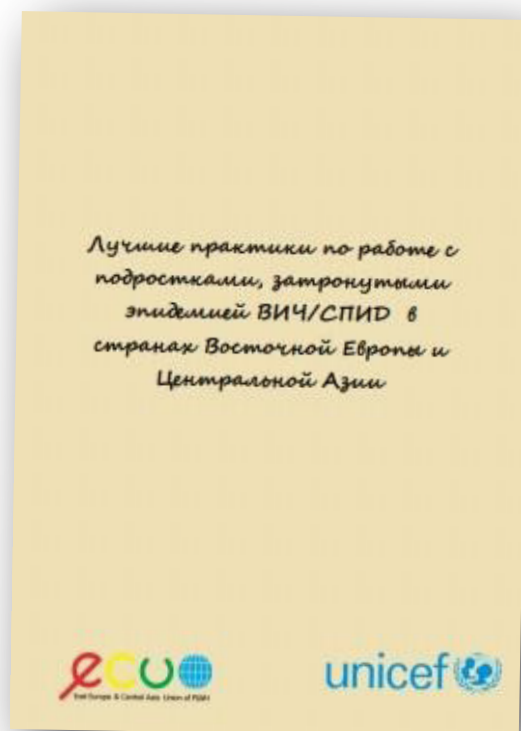
Focal points in each ECUO member countries helped prepare this document which profiled 14 different countries in the EECA region on access to ARV treatment. In this document, each profile contains the following information: the number of people taking ART by years (from 2004 to 2011) with progression by sex and age; the estimated number of people who needed treatment and estimated treatment coverage of PLWH; the increase number of people receiving treatment in 2010 and 2011; the percentage of PLWH on treatment 12 months after the initiation of ARV thera-

py; the regulatory documents and criteria of initiating treatment; the ART treatment of children, etc.

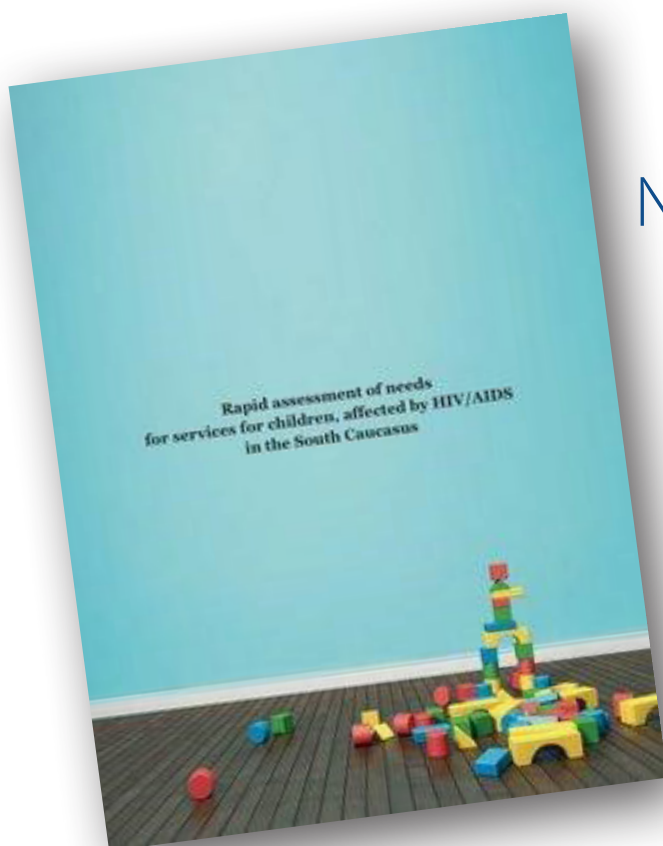
Best Practices for Working with Adolescents, 2012

For the first time, the ECUO presents best practices for working with adolescents affected by the HIV/AIDS epidemic in Eastern Europe and Central Asia.

Unfortunately, there are very few materials written about our region. The scarcity of such publications is due to the fact that the subject topic of adolescents affected by the HIV/AIDS epidemic is only of interest to people working in the sphere of HIV/AIDS and there are no successful, implemented programs working with this age group. This manual comprises of information on the creation of support groups for



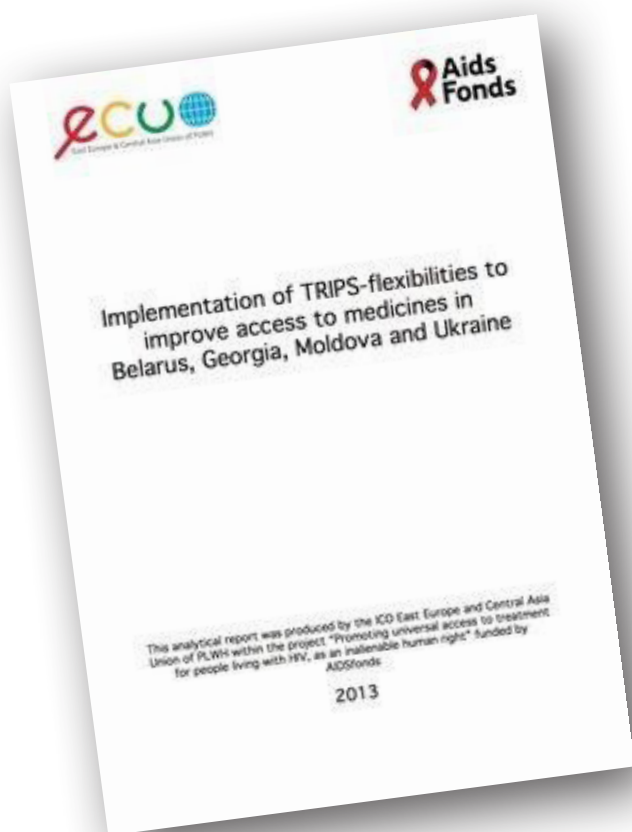
adolescents living with HIV/AIDS in Uzbekistan, a round table discussion in Simferopol, Crimea on World Remembrance Day of AIDS Victims with youth participation affected by the HIV/AIDS epidemic, a training for doctors with participation of adolescents on “Peculiarities of Social-Psychological Adaptation and Treatment of Children and AL-HIV” in the Crimean city of Feodosia, the development of essential leadership skills among adolescents living with HIV/AIDS in the South Kazakhstan region, and more practices from Russia, Ukraine, etc.



Rapid Assessment of Needs for Services for Children, Affected by HIV/AIDS in the South Caucasus, 2013

ECUO published the report, “Rapid Assessment of Needs in the Provision of Services to Children Affected by HIV/AIDS in the South Caucasus,” to identify the most important needs in the provision of health services. This report prepared an action plan to address the needs in the main objective of a rapid assessment and to identify the most important needs of children affected by HIV/AIDS, as well as the obstacles for the realization of children’s rights in relation to HIV/AIDS status of children and/or their parents. Rapid evaluation considered children’s rights as the right to health and education, the right to upbringing in the family, and the right to special care and assistance. As a result of the rapid assessment, areas of a child’s life and the human rights most vulnerable to HIV/AIDS were identified. According to the assessment, rights violations were primarily in the healthcare and education sector. Parents and guardians of CLH

and CAH who were involved in the rapid assessment mentioned cases of discrimination against children in the context of HIV/AIDS status in countless medical institutions. In educational institutions, discrimination occurred less frequently, but it is explained by rare cases of the disclosed status of the child and/or parent in schools or daycare centers. Access to antiretroviral therapy for children is inadequate to the needs of all children in need of treatment. The serious problem in the ARV treatment for children is the difficulty of adherence for various reasons - the most common being the reluctance of the child to take the medication.



Implementation of TRIPS-Flexibilities to Improve Access to Medicines in Belarus, Georgia, Moldova, and Ukraine, 2013

The Analytic Report “Implementation of TRIPS-Flexibilities to Improve Access to Medicines in Belarus, Georgia, Moldova, and Ukraine” was developed to inform all parties concerned about possible ways to decrease ARV prices and understand the importance of legislative changes guaranteeing access to ARV. Its own analyses - which focused on access to medicines - landscape, and some major issues are related to the implementation of the TRIPS Agreement in Belarus, Georgia, Moldova, and Ukraine. The document provided an overview of the international obligations of states in relation to ensuring access to essential medicines. Next, it described how the situation in the field of intellectual property for pharmaceutical products changed with the adoption of the TRIPS Agreement. Furthermore, the authors firstly described flexibilities contained in the TRIPS Agreement that were important for ensuring balance between patent holders’

rights protection and public health interests. Secondly, the authors identified frequently used TRIPS-plus provisions which were adopted by some states as a result of pressure during WTO accession negotiations or bilateral agreements with the US or EU. The provisions had negative effect on access to medicines.

Consequently, the authors analyzed the legislation of Belarus, Georgia, Moldova, and Ukraine to define what the TRIPS flexibilities are, how the TRIPS-plus provisions exist, and its implementation in the respective national legislation. Based on the results of the analysis, recommendations were provided on how to improve national patenting and medicine legislation with regard to access to medicines within the framework of the TRIPS Agreements.

Practical Advocacy Tool for Increasing the State Budget for HIV Treatment Programs, 2013

Практический Инструмент по
адвокации увеличения
государственного бюджета на
программы лечения ВИЧ-инфекции

The allocation of funds by the state for the treatment of HIV infection, as well as for other purposes, is only possible on the basis of the law on the state budget. Therefore, for the fulfillment of the set goal - the allocation or increase of state funding for HIV treatment programs - it is necessary to clearly understand the budgetary process. Based on this, the member states must prepare and implement their own advocacy activities.

In this document, created by the ECUO, we provided the basic information on the possibility of advocating for the allocation and/or increasing government funding for HIV treatment programs in the form of a practical step-by-step tool and using the principle of “learning by doing”.

Best Practices of Implementation of Public Health Related Flexible Provisions of the WTO TRIPS Agreement in Belarus, Georgia, Moldova, Ukraine and Steps Forward for Advocacy, 2015



Best Practices of Implementation of Public Health Related Flexible Provisions of the WTO TRIPS Agreement in Belarus, Georgia, Moldova and Ukraine and Steps Forward for Advocacy

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Authors: Sergiy Kondratyuk, AS-Ukrainian Network of PLWHA
Reviewers: Victoria Tymoshenko IIP Ukraine (OIP), Natalia Leonidova and Sergiy Kondratyuk, ECUO

This ECUO manual of best practices has been prepared for government representatives, international organizations, non-governmental organizations, and patient communities throughout Eastern Europe and Central Asia, including HIV/AIDS activists advocating for expanding access to HIV/AIDS treatment.

The purpose of this manual is to describe the successful experience in the target countries and increase the availability of ARVs at the international level on the implementation of public health related flexible provisions of the WTO TRIPS Agreement. This manual attempts to outline priorities for further advocacy for HIV/AIDS activists in Belarus, Georgia, Moldova, and Ukraine, as well as other countries in Eastern Europe and Central Asia. For this purpose, public health-related flexible provisions of the WTO TRIPS Agreement, which can be used by countries to address the critical problems in public health (the “TRIPS flexibilities”),

and potential threats to access to ARVs contained in the free trade agreements are briefly described in the manual. Furthermore, the manual describes the experience of the compulsory licensing mechanism implementation and experience in resisting introduction of TRIPS-plus provisions in the draft European Union association agreements, which are signed by Georgia, Moldova, and Ukraine. Also, the international experience and potential priorities for patent law reform and patent oppositions are described in the report. The final chapters of the manual outline the main conclusions and recommendations for further work in advocating for the treatment expansion using the TRIPS flexibilities. A compilation of model legislative provisions for promoting usage of TRIPS flexibilities are included in the manual’s annexes.

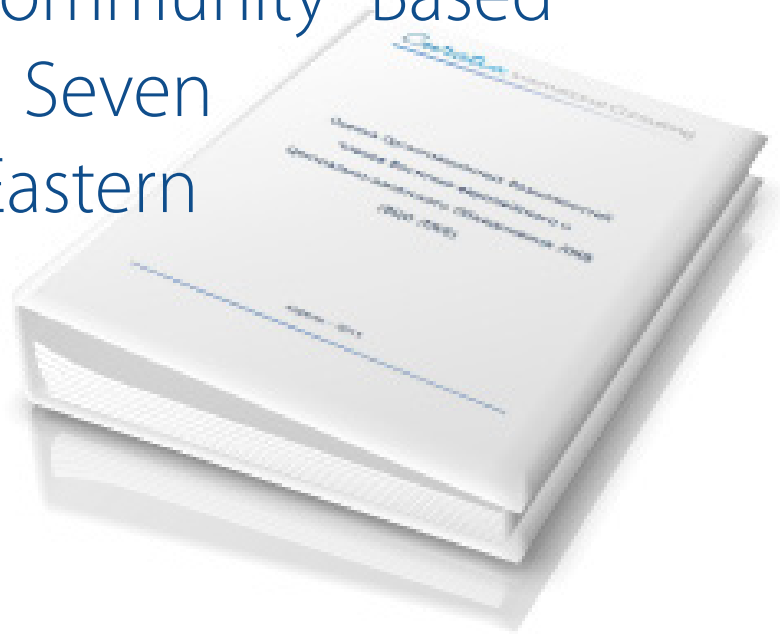


Access to Continuous Care for HIV Positive Adolescents in Ukraine, 2015

This Report provides a situational analysis of services provided to HIV positive adolescents in Ukraine in order to help meet their health, emotional, and psychological needs. Primarily, it reviews and describes in detail the results of analysis of the following issues: cases of ARV treatment interruption among adolescents; availability of regional mechanisms to resolve crisis situations related to the ARV treatment interruption by adolescents; reasons to refuse and/or discontinue taking ARV drugs among adolescents; and availability of work experience with HIV positive adolescents in the regions of the country.

Also, the Report contains a brief description of ECUO's online platform initiatives as a timely response activity for HIV positive adolescents in the condition of limited resources. In the end, the Report provides recommendations on how to find alternative funding sources and methods to develop adherence of HIV positive adolescents to ARV therapy and prepare them on the transfer to adult clinics.

Analysis of Legislative and Policy Barriers in the Application and Effective Implementation of HIV Testing and Community- Based Counseling in Seven Countries in Eastern Europe and Central Asia, 2015



The purpose of the analysis is to identify legislative and political barriers which make it difficult to implement and scale up community-based HIV testing and consultation. The analysis studies factors that facilitate access to services in connection with HIV testing and counseling, which must be taken into account when planning and monitoring initiatives in community-based HIV testing and counseling.

The defining factors considered in this analysis include matters of ensuring confidentiality in testing and diagnostics, human rights issues, legislative and policy aspects regarding the criminalization of vulnerable groups of population, and restrictions on the right to freedom of movement of people living with HIV/AIDS.

This analysis contains recommendations for government officials, international organizations, technical partners, donor organizations, NGOs, and local communities to take the necessary measures to expand community-based HIV testing and consultation in the EECA region. The implementation of these recommendations will allow significant progress in the shortest possible time in the field of HIV/AIDS response in the EECA countries.

Current Practices in Community-Based HIV Testing and Counselling in Eastern Europe and Central Asia Region in 2014, 2015

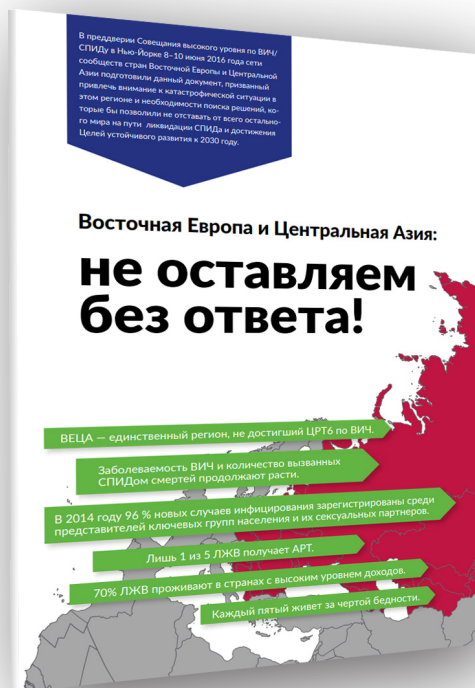


Recently, a global scale-up of HTC is commonly considered to be an integral part of HIV prevention. Thus, effective counseling helps prevent HIV-infection; people living with HIV who are aware of their HIV status can take measures to reduce the risk of transmitting the virus to their sexual partners and/or partners of injecting drugs; and pregnant women who are aware of their HIV status may reduce the risk to infect their child with almost to zero level.

The Report is designed to marshal the evidence around effective community-based HTC models in the EECA countries and to summarize and describe the most successful or/and interesting HTC models, which could be adapted and launched in other countries of the region in order to

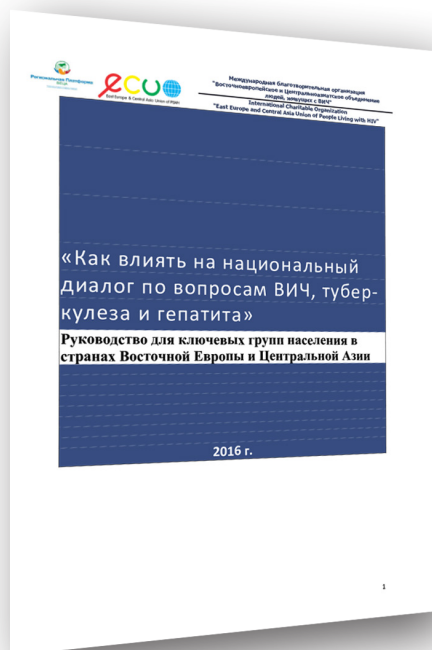
support advocacy for the better implementation models for HIV testing as part of scale-up towards the 90-90-90 target. Data related to the eight current HTC practices implemented in the five EECA countries were collected and analyzed. Five practices were selected for the detailed description in the given Report based on the following criteria: effective linkage from testing to further treatment/prevention services; successful coverage/reach of the target group with HTC services; effective management of HTC projects, including cost-effectiveness; and important lessons learnt and experiences gained throughout the implementation of HTC projects.

Eastern Europe and Central Asia: Let's Not Lose Track! 2016



Prominent leaders of the HIV/AIDS response gathered in New York, USA for the 2016 High-Level Meeting on HIV/AIDS. Civil society networks from the EECA region prepared the “East Europe & Central Asia: Let’s Not Lose Track” report to draw attention to the catastrophic situation in the EECA region. It also provides solutions that would enable the region to catch up with the rest of the world and be on the track to move towards ending the HIV/AIDS epidemic and achieve the Strategic Development Goals by 2030. The document clearly demonstrates the fact that as the global community registers the decrease in the widespread rates of HIV/AIDS and AIDS related deaths, the situation in Eastern Europe & Central Asia remains grave. The appeal of the communities in “East Europe & Central Asia: Let’s Not Lose Track” brings up the issues of HIV/AIDS programs as it transi-

tion to domestic funding. In particular – a problem of the transition of the programs for KAP remains, which emphasizes the crucial importance of prevention services and linkage to testing, treatment, and care which would be impossible to reach the 90-90-90 UNAIDS goal in the EECA region. The issue of decreasing medical costs and reforming and funding the healthcare system in order to ensure the smooth transition to the targeted care provision is stated as a crucial importance in the report. A particular attention in the Position of the EECA communities is drawn to the recommendations which can advantageously contribute to the stabilization of the HIV/AIDS epidemic in the region. The following regional networks contributed to the development of this document: ECUO; ECOM; EHRN; ENPUD; EWNA; EATG; ITPCru; and SWAN.



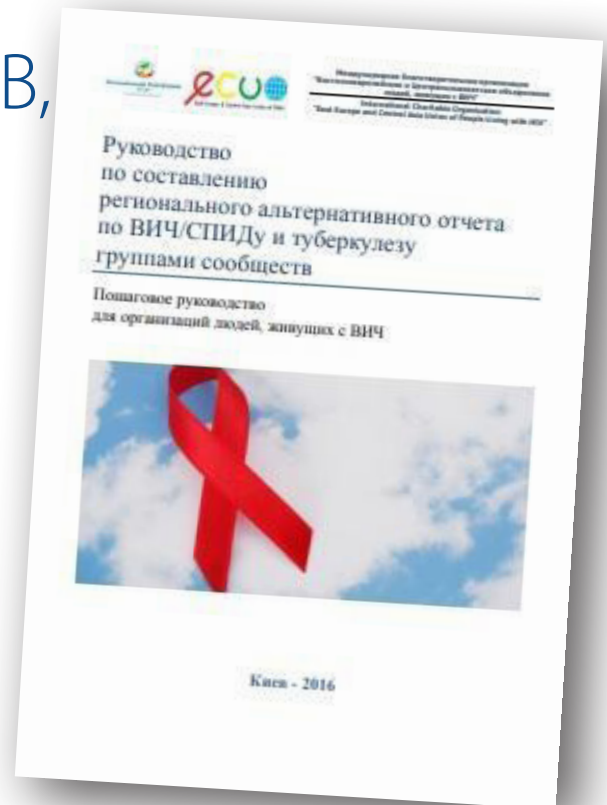
A Manual for Key Populations in Eastern Europe and Central Asia on the Process of Influencing the National Dialogue on HIV, Tuberculosis and Hepatitis, 2016

Within the framework of the “Regional Platform-EECA” project, ECUO has developed a Manual for key populations in Eastern Europe and Central Asia on the process of influencing the national dialogue on HIV, tuberculosis, and hepatitis. The purpose of the publication is to help answer questions on how to improve the participation and influence of key groups in the work of national committees on HIV/AIDS, tuberculosis, and hepatitis and the Country Coordinating Mechanisms. The publication outlines processes of planning and implementation of the national strategy, as well as projects supported by the Global Fund, in particular - how to elect a representative to commit-

tees and how to define their priorities and promote them, including budget advocacy.

This document contains 6 main sections: Community Systems, Interaction with CCM and national coordinating authority, Participation in national strategic planning and in the development of concept note, Impact on negotiations after approval of the concept note and before allocation of GF grant, Budget advocacy, and Implementation of the grant/national program. In addition, the Manual provides guidance on its use and information on the useful resources of the Global Fund.

Community Guidelines: Compiling a Regional Alternative Report on HIV / AIDS and TB, 2016



Within the framework of the project, “Regional Platform-EECA”, ECUO has developed a step-by-step guideline for organizations of people living with HIV/AIDS to compile a regional alternative report on HIV / AIDS and tuberculosis.

The aim of the publication is to help PLHIV organizations in the EECA region to present their vision of the progress made in their countries and in the region as a whole in implementing measures to counteract the HIV/AIDS and TB epidemics.

This document consists of 4 main parts, corresponding to the report preparation stages: preparation, collection and analysis of information, direct preparation of the report, and subsequent actions, which are mainly advocacy and communication activities.

Preliminary Report: Review of Barriers to Access to HIV-Related Services for People Living with HIV, People Who Use Drugs, Sex Workers, and Men Having Sex with Men, 2016



Within the frameworks of the regional project, “Partnership for Equitable Access to HIV Care Continuum in EECA”, with the support of the Global Fund, the ECUO conducted an assessment of barriers to access to continuous HIV/AIDS care for PLHIV, PWUD, SW, and MSM to help national NGOs develop effective advocacy strategies.

In 2014, the EECA region took the top position on the number of new HIV/AIDS infection cases. Heterosexual transmission of HIV prevails in most countries;

heterosexual transmission has increased by 165%. The number of new HIV/AIDS infections among MSM has increased by 305% over the past 10 years.

Data analysis was conducted in 7 EECA countries (Azerbaijan, Belarus, Kazakhstan, Kyrgyzstan, Russia, Uzbekistan, and Estonia). The estimated number of PLHIV in this group of countries is estimated at more than one and half million PLHIV, which no more than 55% are informed about their status.



A Compendium of Successful Practices to Improve Access to the Continuum of HIV-Related Services for All Who Need It in the EECA Region, 2016

This compendium is prepared for decision makers to increase access to the continuum of HIV/AIDS services at the state, community, and international level in Eastern Europe and Central Asia, including HIV/AIDS activists advocating for improved access to treatment. The purpose of the compilation is to share experiences to improve the effectiveness, improve accessibility, and strengthen the sustainability of HIV/AIDS treatment programs by helping to provide continuous HIV/AIDS care (continuum of services) for people living with HIV/AIDS, with a special focus on key populations within the EECA countries.

In recent years, significant changes have taken place in the countries of the region in favor of liberalization of legislation. Amid some improvements, stigmatization and discrimination of representatives of the key populations remains a problem in the EECA region. In fact, the level of stigma is higher for MSM in Central Asian countries, which leads to a decrease in official MSM testing data.



Regional Action Plan of Communities on Scale Up of Access to High Quality and Continuous HIV Care for all who needs it in the Region of Eastern Europe and Central Asia, 2017

Regional Community Action Plan for 2017-2020 has been developed based on the initiatives of the ECUO, within the Regional Program, “Partnership for Equitable Access to HIV Care Continuum in EECA”, with financial support of Global Fund to Fight AIDS, Tuberculosis, and Malaria.

The developed Regional Plan is an unique joint coordinated response of regional networks to the catastrophic situation with access in the EECA to HIV/AIDS care continuum for PLWH; IDU; SW; MSM; Transgender people; Persons without documents and other migrants; and Prisoners and PLWH affected by TB. The Action Plan's main goal is to define priorities and stages of the following actions that communities have agreed to implement

jointly. By doing so, everyone living with HIV/AIDS, regardless of whether they know about their status and regardless of their religion, sexual and other preferences, age, gender, and/or citizenship have access to high quality and continuous HIV/AIDS care.

The Action Plan has been developed based on the results of research and consultations with the communities' representatives, regional networks, governmental agencies, international organizations, and UN agencies. It provides basis for joint planning, fundraising, and public campaigns. Various networks implement and coordinate different components of the Plan, depending on available resources and experience.

The Results of the Baseline Assessment within the Regional Program “Partnership for Equitable Access to HIV Care Continuum in EECA”, 2017



The main objective of assessment is to collect key data reflecting the current situation with sustainable access to the continuum of HIV services in the participating countries of the project, on the basis of which the impact of the project will be assessed after its completion.

In addition, the baseline assessment facilitates the development of an evidence base for dialogue with key partners at the national and regional levels and helps to identify the focus of advocacy efforts at

the national levels. This assessment was carried out (fully) in Azerbaijan, Belarus, Kazakhstan, Kyrgyzstan, Russia, Estonia and Uzbekistan. In other countries of the project implementation (Armenia, Georgia, Latvia, Lithuania, Moldova, Tajikistan, Ukraine), a partial assessment was carried out and covered the definition of a cascade of services and the identification of barriers to achieving the objectives of the “90-90-90” strategy.

A Compendium of the Best Practices to Improve Access to the Continuum of HIV-Related Services for All Who Need It in the EECA Region, 2017



This compendium is prepared for decision makers to increase access to the continuum of HIV/AIDS services at the state, community, and international level in Eastern Europe and Central Asia, including HIV/AIDS activists advocating for improved access to treatment. The purpose of the compilation is to share experiences to improve the effectiveness, improve accessibility, and strengthen the sustainability of HIV/AIDS treatment programs by helping to provide continuous HIV/AIDS care (continuum of services) for people

living with HIV/AIDS, with a special focus on key populations within the EECA countries.

This study presents cases of best practices from Azerbaijan, Armenia, Kyrgyzstan, Latvia, Russian Federation, Ukraine, and Estonia. It discusses the success stories, gives detailed information on the cases, the tasks and goals, methods used to reach the goals, and presents the results.



Концепция по доступу к лечению 2017

Международная благотворительная организация «Восточноевропейское и Центральноеазиатское объединение людей, живущих с ВИЧ» об использовании современных препаратов в лечении ВИЧ-инфекции в странах Восточной Европы и Центральной Азии, как обязательного условия для остановки эпидемии в регионе.

Концепция по доступу к лечению была разработана в рамках проекта «Партнёрство ради равного доступа к континууму услуг в связи с ВИЧ-инфекцией для всех, кто в этом нуждается в регионе ВЕЦА» при финансовой поддержке Глобального фонда для борьбы со СПИДом, туберкулёзом и малярией.



Обзор законодатель- ной базы Республики Казахстан, 2018

Обзор законодательной базы Республики Казахстан в области лекарств и государственных закупок, включая патентные барьеры и степень их влияния на процесс обеспечения АРВ терапии, в соответствии с международными стандартами лечения ВИЧ.

Доступность АРВ-препаратов в Кыргызстане, 2018



В данном обзоре представлены ключевые аспекты законодательства, регулирующие оборот лекарственных средств, знание которых будет необходимо для последующей деятельности по обеспечению доступности лечения ВИЧ.

Структура отчета включает в себя описание ситуации по ВИЧ-инфекции, обзор механизмов, обеспечивающих доступность лекарств для лечения ВИЧ, нормативно-правовых актов, регулирующих лекарственное обеспечение, описание барьеров к доступности лекарственной помощи и возможных путей решения.

Уровень доступности современных препаратов в Литве 2017



Государственные закупки, патентные барьеры и их влияние на процесс обеспечения АРВ-терапии, в соответствии с международными и национальными ВИЧ-стандартами.

Собранная для этого отчета информация отражает существующую ситуацию в лечении ВИЧ в Литве и положение

в сфере системы государственных закупок, регистрации и апробации цен на лекарства, включая патентные барьеры. Также в отчете оценена степень влияния на процесс обеспечения АРВ терапией, в том числе инновационными препаратами.



Уровень доступности современных АРВ-препаратов в Молдове 2018

Собранная для этого отчета информация отражает существующую ситуацию в Молдове в сфере системы государственных закупок лекарств, регистрации лекарств и апробации цен на лекарства, включая патентные барьеры и оценена степень влияния на процесс обеспечения АРВ терапии, в том числе инновационными препаратами.

Документ предназначен для всех, кого может заинтересовать лекарственное обеспечение ЛЖВ в Молдове, кто сталкивается с проблемами в этой области и ищет варианты улучшения ситуации.

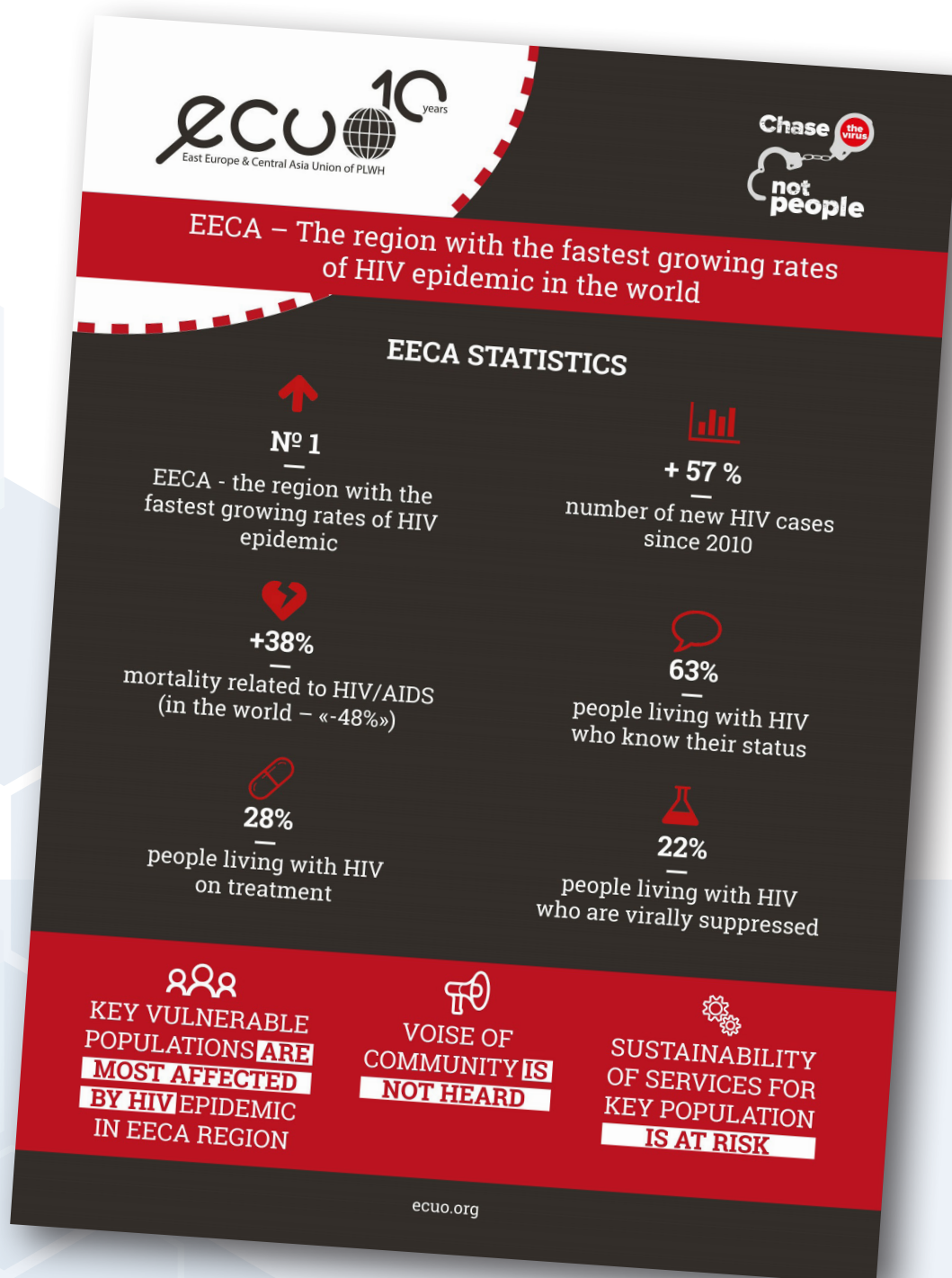


Сборник лучших практик по улучшению доступа к лечению ВИЧ для всех, кто нуждается в этом, в регионе ВЕЦА, 2018

Сборник лучших практик организаций региона Восточной Европы и Центральной Азии, реализованных в рамках проекта «Партнерство ради равного доступа к услугам в связи с ВИЧ-инфекцией в регионе Восточной Европы и Центральной Азии». Проект реализовывался с 1 ноября 2015 г. до 31 октября 2018 г., и это последний сборник лучших практик, подготовленный в рамках данного проекта.

Свои достижения в этот раз представили организации сообществ и консорциумы организаций из десяти стран региона: Азербайджана, Армении, Беларуси, Грузии, Казахстана, Кыргызстана, Молдовы, России, Таджикистана и Эстонии.

Regional policy-brief to AIDS-2018



We, International Charitable Organization "East Europe and Central Asia Union of People Living with HIV" (ECUO) is a regional "network of networks" connecting PLWH communities from 15 EECA countries! We believe that

QUALITY HIV TREATMENT SHOULD NOT HAVE BORDERS!

FOR ENDING EPIDEMIC IN OUR REGION, WE STRONGLY RECOMMEND:

Introduce the principles of the "patient-oriented approach" in the treatment programs, including on the basis of the GIPA principle!

Governments should assume responsibility and allocate funds from the government budget for HIV treatment, with most of the budget of HIV programs should be channeled to achieve the goals of the UNAIDS strategy "90-90-90"!

National programs should provide access to quality antiretroviral therapy for all PLHIV, and the principle "Test and treat!" should be implemented in all EECA countries!

Governments should create transparent, flexible and innovative systems for purchasing ARV drugs to ensure stable access to quality HIV treatment for the greatest number of PLHIV in need who needs it!

Cooperation between civil organizations and the government during the national dialogue should not be a formality!

Governments should eliminate laws, policies and practices aimed at criminalizing, stigmatizing, marginalizing and discriminating against key populations!

Governments should take measures to remove barriers to access to HIV and TB health care for all vulnerable groups, including prisoners and migrants!

The vicious practice of changing the treatment regimen for PLHIV for non-medical indications must be stopped!

Transnational pharmaceutical companies should apply greater flexible in decision-making in matters of pricing and voluntary licensing!

International donors should increase support for civil society and key population-led advocacy work!

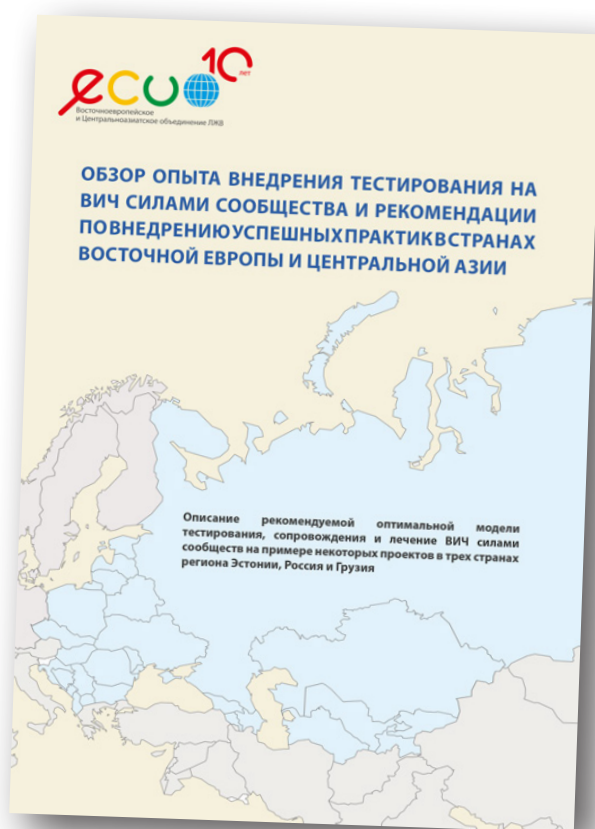


"Вступление в пору зрелости". Пособие по благополучному старению с ВИЧ 2014

Третье издание руководства JUSTRI для людей, стареющих с ВИЧ. Многие люди, живущие с ВИЧ, некоторые из них более 25 лет, вступают в фазу жизни, когда последствия старения начинают ощущаться. Другие пожилые люди, которым недавно был поставлен диагноз ВИЧ-инфекции, сталкиваются с перспективой нового медицинского диагноза, с которым им придется научиться жить по мере старения.

Раньше ВИЧ-инфекция означала, что дожить до старости маловероятно.

Однако эффективная антиретровирусная терапия (АРТ) изменила ситуацию. Увеличение ожидаемой продолжительности жизни изменяет приоритеты как мониторинга здоровья, так и терапии, чтобы компенсировать наложение возрастных состояний и заболеваний из-за ВИЧ-инфекции, ее осложнений и побочных эффектов антиретровирусного лечения. Цель этого руководства – выявить проблемы старения с ВИЧ и предоставить практические советы.

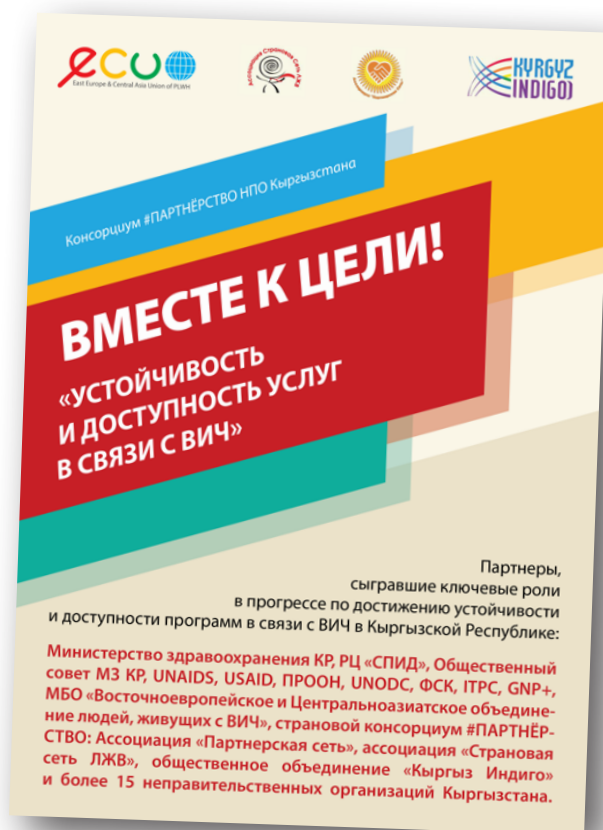


Обзор опыта внедрения тестирования на ВИЧ силами сообществ ВЕЦА 2018

В ходе настоящего обзора изучались материалы по опыту внедрения экспресс тестирования силами сообществ с фокусом на трех ключевых странах, информация по реализации подобных программ в других странах региона, а также опыт развитых Европейский стран. «Консолидированное руководство ВОЗ по тестированию на ВИЧ» (2015) использовалось как базовый документ, включающий ключевые меж-

дународные рекомендации по организации систем тестирования на ВИЧ среди ключевых групп.

Устойчивость и доступность услуг в связи с ВИЧ в Кыргызстане, 2018



"В связи с тем, что внешнее финансирование стало иссякать, и нам определенно сообщили, что необходимо рассчитывать на свои силы, мы не знали, что будет после 2020-го года. Поэтому мы инициировали разработку «дорожной карты» по переходу на государственное финансирование. Впоследствии она стала частью Программы Правительства КР по противодействию эпидемии ВИЧ. План включил в себя вопросы бесперебойного обеспечения лекарствами, действия по увеличению государственного финансирования, улучшению законодательства в части устойчивости услуг, поддержку профилактических

программ среди ключевых групп через реализацию государственного социального заказа.

Мы все вместе, государственные, международные и неправительственные организации, активно работаем над реализацией данного плана. За два года пройден немалый путь и есть определенные достижения".

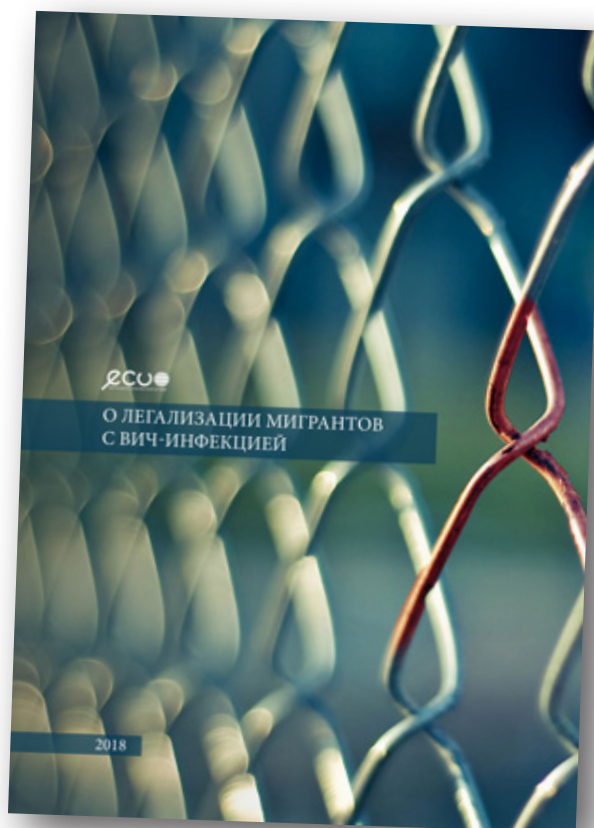
Айбар Султангазиев, исполнительный директор Ассоциации «Партнерская сеть».

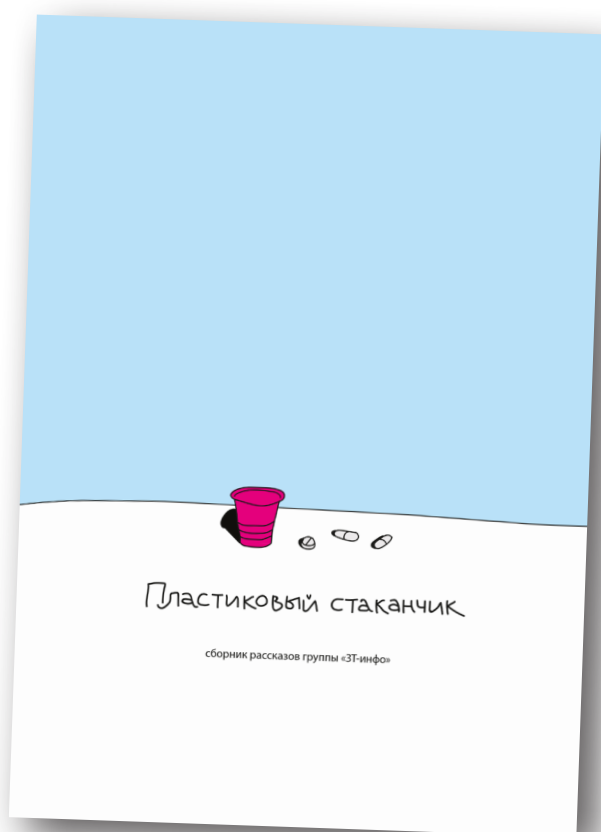
О легализации мигрантов с ВИЧ-инфекцией 2018

В случае декриминализации мигрантов с ВИЧ в России, удалось бы не только снизить распространение ВИЧ-инфекции в одной из ключевых групп населения, но отчасти решить экономические и демографические проблемы, поскольку мигранты представляют не только трудовой, но и репродуктивный потенциал. Декриминализация мигрантов способствует снижению эпидемии ВИЧ-инфекции в России, так как позволит многим иностранным гражданам с ВИЧ-инфекцией, годами находящимся на территории России нелегально, выйти из «тени», и, таким образом, на эту группу будет распространяться эпиде-

миологический надзор. При этом, основные страны-поставщики мигрантов готовы взять на себя обязанность их обеспечения терапией.

Исключение ВИЧ из перечня опасных для окружающих заболеваний также облегчит судьбу будущих студентов. Однако, возможно, главным достижением декриминализации лиц, живущих с ВИЧ, стало бы признание их свободы передвижения, права на неприкосновенность частной жизни и свободы от дискриминации.



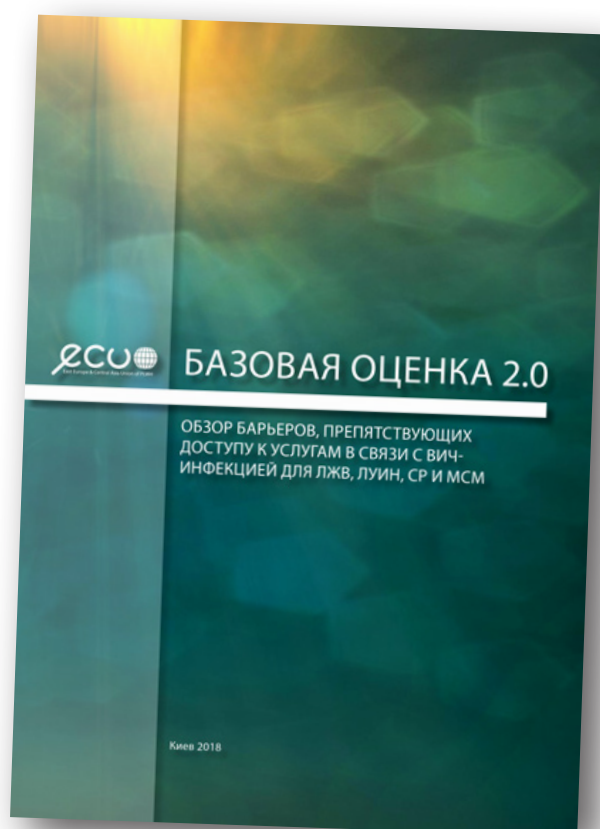


"Пластиковый стаканчик". Сборник расска- зов группы "ЗТ-инфо" 2018

Первая публикация сборника посвящена памяти Давида Ананиашвили, главного инициатора литературного конкурса «Пластиковый стаканчик».

Истории, стихи, рассказы и воспоминания, представленные в данном сборнике, достаточно сложны для прочтения и восприятия, авторы используют не литературное изложение, применяют, порой, непристойную лексику. Но все представленные истории – правдивы и откровенны; здесь авторы делятся своими воспоминаниями, рассказывают о реально прожитых событиях, чувствах, ощущениях, жизненных ошибках и вынесенных уроках.

"Мы верим, что ни один из описанных сюжетов и воспоминаний не оставит равнодушным никого. Ведь самое главное в жизни каждого из нас – это получить шанс...", - подчеркивают авторы сборника.



Обзор барьеров, препятствующих доступу к услугам в связи с ВИЧ-инфекцией для ЛЖВ, ЛУИН и МСМ, 2018

В 2018 году Восточноевропейским и Центральноеазиатским объединением людей, живущих с ВИЧ (ВЦО ЛЖВ), выполнен обзор барьеров, препятствующих доступу к услугам в связи с ВИЧ-инфекцией, для ЛЖВ, ЛУИН, СР и МСМ.

Обзор подготовлен в рамках проекта «Партнёрство ради равного доступа к континууму услуг в связи с ВИЧ-инфекцией для всех, кто в этом нуждается, в регионе Восточной Европы и Центральной Азии» (#Партнерство).

Методологический справочник "Вовлечение сообществ в процессы мониторинга, оценки и исследования качества услуг" 2018



Данное методологическое руководство было разработано при финансовой поддержке

Robert Carr civil society Networks Fund (RCNF) в рамках программы «Здоровье можно купить за деньги, если выделен бюджет», реализуемой Восточноевропейским и Центральноазиатским объединением людей, живущих с ВИЧ (ВЦО ЛЖВ) в партнерстве с Евразийским Региональным Консорциумом.

Документ является результатом рабочей встречи по выработке общей позиции о роли ключевых групп сообществ в исследованиях, мониторинге и оценке качества услуг в регионе ВЕЦА. В рабочей встрече принимали участие представители ключевых групп сообществ, неправительственных, исследовательских и донорских организаций.

Национальный план действий сообществ Эстонии на 2017-2020 гг

Рамочный документ настоящего Плана был разработан по итогам Национальной консультации сообществ в Эстонии, которая 17-18 ноября 2016 года собрала 26 представителей сообществ и организаций, предоставляющих помощь людям, затронутым ВИЧ-инфекцией. Мероприятие послужило своевременному объединению усилий более опытной Эстонской сети людей, живущих с ВИЧ, (ЕНРВ) и представителей недавно созданных групп сообществ, таких как «ЛУНЭСТ» – людей,



употребляющих наркотики, и ВЕК-ЛГБТ (лесбиянок, геев, бисексуалов и трансгендеров), а также отдельных лидеров сообществ и организаций, тесно работающими с сообществами в контексте ВИЧ-инфекции.

Дальнейшая разработка и структуризация данного Плана была продолжена уже Эстонским Консорциумом сообществ, затронутых ВИЧ, - объединением страновых НПО, созданном в 2017 году, и включающим в себя Эстонскую сеть людей, живущих с ВИЧ, ЛУНЭСТ и ВЕК-ЛГБТ.

FINANCIAL REPORT

Ideally, in terms of financial portfolios, a strong NGO will have the following characteristics: a wide variety of donors (both small and large), mostly unrestricted funds, an endowment for self sustainability, and finally a mixture of both national and international donors. Throughout ten years, ECUO was able to ensure less vulnerability in its financial relationships with donors. This comes in the obvious form of having a diverse funding base so that the organization is not completely reliant on a single international or a government donor for the majority of its funds.

The Network's budget has grown sharply every year since it was founded. This has enabled it to expand across the country and provide additional grants to local groups, especially member networks and affiliated organizations. And in order to make successful adjustments, ECUO was able to balance donor and organization demands, and stay true to the origins of their mission and goals.

Below, main funding sources of the organization during the ten years are listed. The list is presented in an increasing manner according the years the projects where implemented. The projects' titles, donors and amounts in original currency are provided.



REGIONAL INITIATIVE OF PLHIV IN EAST
EUROPE AND CENTRAL ASIA

Funded by Oxfam Novib

Amount: € 350, 000



BETTER ADVOCACY AND SERVICES PRO-
VISION SKILLS THROUGH EXPERIENCE
EXCHANGE FOR PLWH FROM EASTERN
EUROPE AND CENTRAL ASIA

Funded by Oxfam Novib KIC

Amount: € 48,240



MOBILIZATION AND STRENGTHENING OF
POSSIBILITIES OF PEOPLE, LIVING WITH HIV
IN EASTERN EUROPE AND CENTRAL ASIA

Funded by UNAIDS

Amount: \$ 114,800



OXFAM NOVIB (ECUO 2010-2012)

Funded by Oxfam Novib

Amount: € 220,000



A REAL IMPROVEMENT OF THE QUALITY OF
LIFE OF PEOPLE LIVING WITH HIV

Funded by European Commission

Amount: € 996,069



MOBILIZATION OF ADOLESCENTS AFFECT-
ED BY HIV/AIDS IN THE EECA REGION

Funded by UNICEF

Amount: \$ 75,000



ADVOCACY OF PLWH RIGHTS IN ACTION (CORE FUNDING)

Funded by ViiV Healthcare Ltd.

Amount: \$ 75,000



STRONG COMMUNITY THROUGH PARTNERSHIP

Funded by the European Union

Amount: € 1.244,034



RAPID NEEDS ASSESSMENT FOR CHILDREN AFFECTED BY HIV/AIDS IN THE SOUTH CAUCASUS

Funded by World Vision

Amount: \$ 24,975



CROSS-BORDER COOPERATION FOR HIV/ AIDS PREVENTION AND IMPACT MITIGATION IN THE SOUTHERN CAUCASUS AND RUSSIAN FEDERATION

(Sub-Grant) Funded by World Vision
Deutschland e.V. (WVD)

Amount: € 75,650



PROMOTING UNIVERSAL ACCESS TO TREATMENT AS A BASIC HUMAN RIGHT FOR PLWH

Funded by AIDS Fonds

Amount: € 199,593



STRENGTHENING COMMUNITY-BASED SERVICE NETWORKS AND LEADERSHIP SKILLS OF ADOLESCENTS AFFECTED BY HIV/AIDS

Funded by UNICEF

Amount: \$ 73,418



DEVELOPMENT OF THE EUROPEAN COMMUNICATIONS PLATFORM

Funded by the Global Network of People Living with HIV (GNP+)

Amount: \$ 15,000



ACCESS OF ADOLESCENTS AFFECTED BY HIV/AIDS TO QUALITY SERVICES TO MEET THEIR MEDICAL, EMOTIONAL, AND PSYCHOLOGICAL NEEDS

Funded by UNAIDS

Amount: \$ 14,847



STRENGTHENING THE IMPACT OF PLWHA REGIONAL COMMUNITIES TO IMPROVE ACCESS TO TIMELY, COMPREHENSIVE, AND QUALITY ARV TREATMENT IN THE EE REGION

Funded by Robert Carr Fund for civil society networks

Amount: € 154,683



CORE FUNDING

Funded by ViiV Healthcare Ltd.

Amount: \$ 84,575



PROMOTION OF HIV TESTING AND TREATMENT PROGRAMS AMONG THE KEY AFFECTED POPULATIONS AND REDUCTION OF STIGMA AND DISCRIMINATION TOWARDS HIV-POSITIVE PEOPLE IN THE MEDICAL SETTINGS

Funded by UNAIDS

Amount: \$ 129,061



CORE FUNDING

Funded by ViiV Healthcare Ltd.

Amount: \$ 10,000



ONLINE COUNSELING PLATFORM FOR ADOLESCENTS LIVING WITH HIV/AIDS

Financed by Johnson & Johnson Ukraine LLC

Amount: ₴ 211,724



TREATMENT FOR ALL

Funded by GIZ

Amount: € 100,894



I HAVE A POWER. THE POWER TO LIVE

Financed by Representative Office of AbbVie
Biopharmaceuticals GmbH in Ukraine

Amount: ₴ 1,039,054



IMPROVING TECHNICAL AND ORGANIZA- TIONAL CAPACITIES FOR PROVIDING HIV / AIDS SERVICES IN UKRAINE

Funded by the Initiative Center to Support
Social Action "Ednannia"

Amount: \$ 6000



CONFERENCE ATTENDANCE SPONSORSHIP TO ENABLE ATTENDANCE AT THE EASTERN EU- ROPEAN AND CENTRAL ASIAN COMMUNITY ADVISORY BOARD MEETING HELD ON 22ND – 24TH OCTOBER 2014 IN TBILISI, GEORGIA.

Funded by GILEAD Sciences Europe LTD

Amount: \$ 15,000



ENSURING ACCESS OF CHILDREN LIVING WITH HIV IN CHERNIVTSI OBLAST TO QUALITY PSYCHOLOGICAL SERVICES

Funded by UNICEF

Amount: ₴ 467,865,42



PROGRAM FOR THE ACTIVATION AND EFFECTIVE INVOLVEMENT OF THE PATIENT COMMUNITY IN NATIONAL RESPONSE TO THE EPIDEMIC OF HIV/AIDS IN THE COUNTRIES OF EECA

Financed by Johnson & Johnson LLC

Amount: \$ 7,697



CONFERENCE ATTENDANCE SPONSORSHIP TO ENABLE ATTENDANCE AT THE EASTERN EUROPEAN AND CENTRAL ASIAN COMMUNITY ADVISORY BOARD MEETING HELD ON 3RD AND 4TH NOVEMBER 2015 IN KIEV, UKRAINE

Funded by GILEAD Sciences Europe LTD

Amount: \$ 15,000



PARTNERSHIP FOR EQUITABLE ACCESS TO HIV CARE CONTINUUM IN THE EECA

Funded by Global Fund to fight AIDS, Tuberculosis and Malaria

Leading sub recipient: Eurasian Harm Reduction Network (EHRN)

Amount: € 4,044,467



INCREASING RESOURCE ACCOUNTABILITY AND SUSTAINABILITY FOR HIV TREATMENT AND CRITICAL HEALTH SERVICES THAT INFLUENCE THE QUALITY OF LIVES OF PEOPLE LIVING WITH HIV IN ASIA, CARIBBEAN, EASTERN EUROPE CENTRAL ASIA, AND WESTERN AFRICA REGION

Funded by Robert Carr Civil Society Networks Fund (RCNF)

Sub-Recipients: Global Network of People living with HIV (GNP+)

Amount: \$ 167,606



CORE FUNDING

Funded by ViiV Healthcare Ltd.

Amount: \$ 40,000



REGIONAL CIVIL SOCIETY AND COMMUNITY SUPPORT, COORDINATION AND COMMUNICATION PLATFORM – EECA

Funded by Global Fund

Amount: \$ 129,150



CONFERENCE ATTENDANCE SPONSORSHIP TO ENABLE ATTENDANCE AT THE EASTERN EUROPEAN AND CENTRAL ASIAN COMMUNITY ADVISORY BOARD MEETING HELD ON 22ND NOVEMBER 2016 IN KIEV, UKRAINE

Funded by GILEAD Sciences Europe LTD

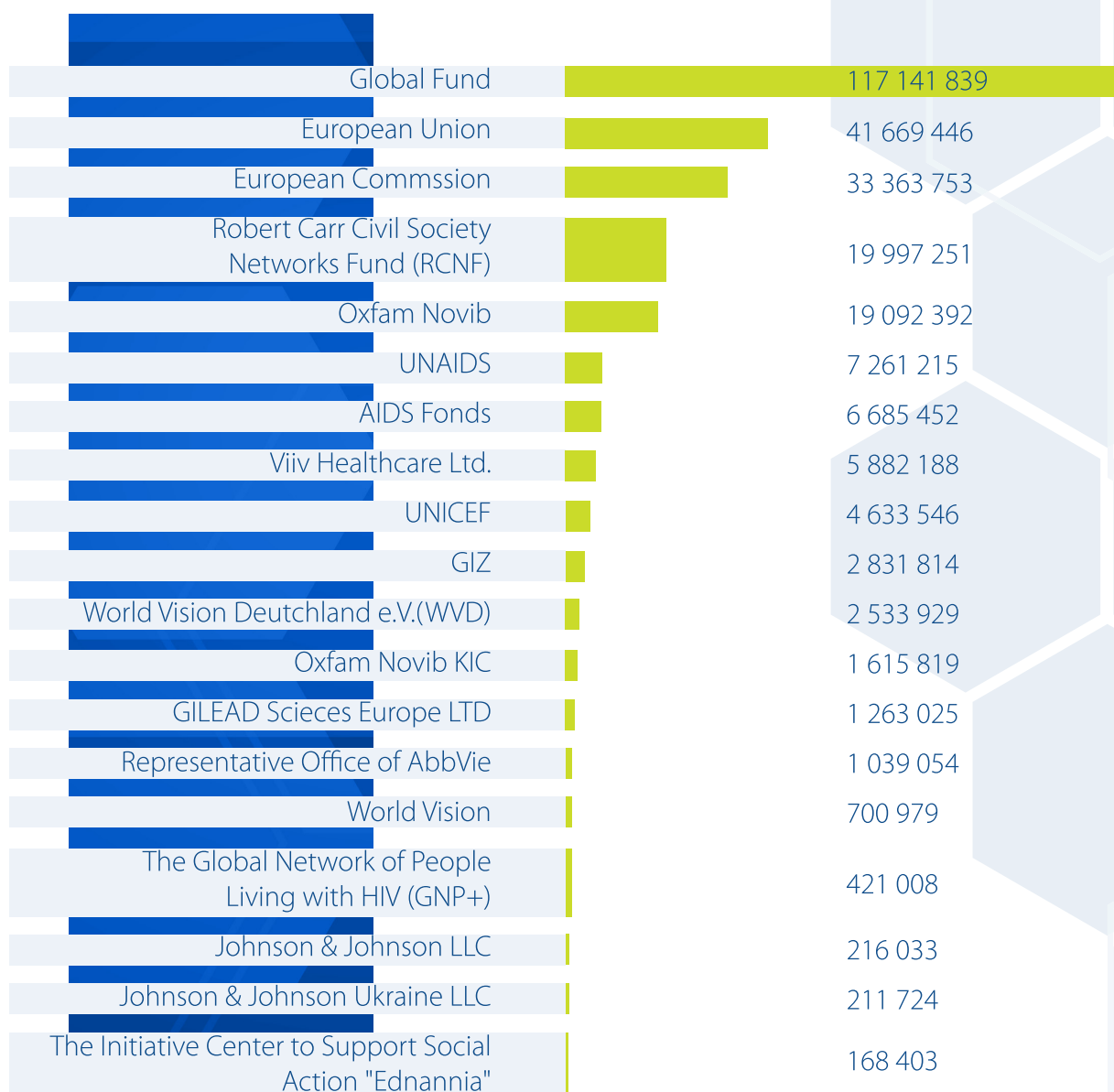
Amount: \$ 15,000



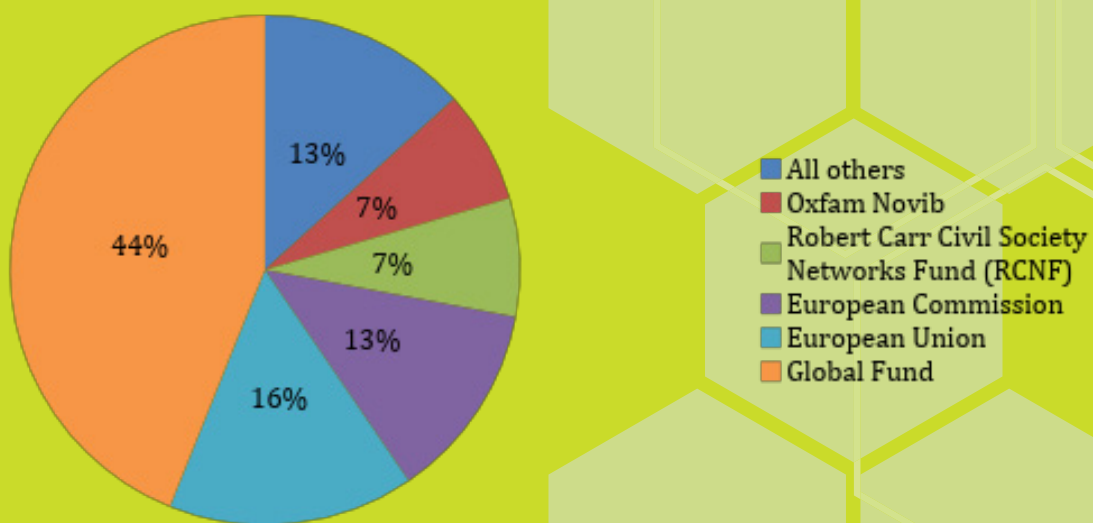
MONEY CAN BUY HEALTH IF YOU BUDGET FOR IT

Funded by Robert Carr Civil Society Networks Fund (RCNF)

Amount: \$ 390,188



The official exchange rates of Hryvnia against Foreign Currencies as of December 31, 2017 were considered to translate the original amounts in EUR and USD with the purpose of presenting the charts. Please note that the amounts might have varied in Hryvnia given the difference of exchange rates of different time periods. The source of the exchange rate is the National Bank of Ukraine. The translated amounts and rates are presented in detail in ANNEX I.



The official exchange rates of Hryvnia against Foreign Currencies as of December 31, 2017 were considered to translate the original amounts in EUR and USD with the purpose of presenting the charts. Please note that the amounts might have varied in Hryvnia given the difference of exchange rates of different time periods. The source of the exchange rate is the National Bank of Ukraine. The translated amounts and rates are presented in detail in ANNEX I

LOOKING AT THE FUTURE

Throughout the 10 years, ECUO has overcome many difficult situations, but always found the right approach to get out of crisis and evolve further.

As ECUO members state, One is not a warrior in the field. ECUO members acknowledge and appreciate its role in unifying the efforts in national levels, and believe in ECUO to push further for national organizations to come together and carry out joint activities aimed at preventing the spread of the epidemic.

According to Nataliya Leonchuk, the governance structure limits the influx of new ideas, new leaders, which might need changes. It is important to reconsider the structure of the membership of the organization so that more people have the opportunity to get involved in the organizational process.

ECUO is going to continue and expand its work with regard to changing the legislations, paying more attention to anti-discrimination laws, because that is one of the biggest obstacles that no amount of condoms will solve and make long-term changes.

The organization is and will continue to be transparent, understandable for everyone, both inside and outside. It affects the ending of the HIV epidemic, AIDS in the region of EECA, and so to speak, takes it under control. ECUO is going to continue being a watch dog for respecting the rights of HIV-positive people in the countries of EECA and ensuring an improvement in the quality of life of PLWH, and it will work hard to expand the provision of universal access to treatment, care and support for all HIV-positive people in the region.

²⁶ Interview with Sevar Kamilova, conducted on 28 March, 2018 in Kyiv.

²⁷ Ibid.

²⁸ Interview with Nataliya Leonchuk, conducted on 28 March, 2018 in Kyiv.

²⁹ Ibid.

³⁰ Interview with Vladimir Zhovtiak, conducted on 30 March, 2018 in Kyiv.

³¹ Ibid.





ANNEX 1

Project Name	Funded By	Amount	UAH Amount
CROSS-BORDER COOPERATION FOR HIV/AIDS PREVENTION AND IMPACT MITIGATION IN THE SOUTHERN CAUCASUS AND RUSSIAN FEDERATION	World Vision Deutschland e.V. (WVD)	€ 75,650	2,533,929
PROGRAM FOR THE ACTIVATION AND EFFECTIVE INVOLVEMENT OF THE PATIENT COMMUNITY IN NATIONAL RESPONSE TO THE EPIDEMIC OF HIV/AIDS IN THE COUNTRIES OF EECA	Johnson & Johnson LLC	\$ 7,697	216,033
ONLINE COUNSELING PLATFORM FOR ADOLESCENTS LIVING WITH HIV/AIDS	Johnson & Johnson Ukraine LLC	₴ 211,724	211,724
I HAVE A POWER. THE POWER TO LIVE	Representative Office of AbbVie Biopharmaceuticals GmbH in Ukraine	₴ 1,039,054	1,039,054
PROMOTING UNIVERSAL ACCESS TO TREATMENT AS A BASIC HUMAN RIGHT FOR PLWH	AIDS Fonds	€ 199,593	6,685,452
A REAL IMPROVEMENT OF THE QUALITY OF LIFE OF PEOPLE LIVING WITH HIV	European Commission	€ 996,069	33,363,753

Project Name	Funded By	Amount	UAH Amount
CONFERENCE ATTENDANCE SPONSORSHIP TO ENABLE ATTENDANCE AT THE EASTERN EUROPEAN AND CENTRAL ASIAN COMMUNITY ADVISORY BOARD MEETING HELD ON 22ND – 24TH OCTOBER 2014 IN TBILISI, GEORGIA	GILEAD Sciences Europe LTD	\$ 15,000	421,008
CONFERENCE ATTENDANCE SPONSORSHIP TO ENABLE ATTENDANCE AT THE EASTERN EUROPEAN AND CENTRAL ASIAN COMMUNITY ADVISORY BOARD MEETING HELD ON 3RD AND 4TH NOVEMBER 2015 IN KIEV, UKRAINE	GILEAD Sciences Europe LTD	\$ 15,000	421,008
CONFERENCE ATTENDANCE SPONSORSHIP TO ENABLE ATTENDANCE AT THE EASTERN EUROPEAN AND CENTRAL ASIAN COMMUNITY ADVISORY BOARD MEETING HELD ON 22ND NOVEMBER 2016 IN KIEV, UKRAINE	GILEAD Sciences Europe LTD	\$ 15,000	421,008
TREATMENT FOR ALL	GIZ	\$ 100,894	2,831,814

Project Name	Funded By	Amount	UAH Amount
REGIONAL CIVIL SOCIETY AND COMMUNITY SUPPORT, COORDINATION AND COMMUNICATION PLATFORM – EECA	Global Fund	\$ 129,150	3,624,882
Partnership for Equitable Access to HIV Care Continuum in the EECA	Global Fund	\$ 4,044,467	113,516,957
OXFAM NOVIB (ECUO 2010-2012)	Oxfam Novib	€ 220,000	7,368,993
REGIONAL INITIATIVE OF PLHIV IN EAST EUROPE AND CENTRAL ASIA	Oxfam Novib	€ 350,000	11,723,398
BETTER ADVOCACY AND SERVICES PROVISION SKILLS THROUGH EXPERIENCE EXCHANGE FOR PLWH FROM EASTERN EUROPE AND CENTRAL ASIA	Oxfam Novib KIC	€ 48,240	1,615,819
MONEY CAN BUY HEALTH IF YOU BUDGET FOR IT	Robert Carr Civil Society Networks Fund (RCNF)	\$ 390,188	10,951,494

Project Name	Funded By	Amount	UAH Amount
INCREASING RESOURCE ACCOUNTABILITY AND SUSTAINABILITY FOR HIV TREATMENT AND CRITICAL HEALTH SERVICES THAT INFLUENCE THE QUALITY OF LIVES OF PEOPLE LIVING WITH HIV IN ASIA, CARIBBEAN, EASTERN EUROPE CENTRAL ASIA, AND WESTERN AFRICA REGION	Robert Carr Civil Society Networks Fund (RCNF)	\$ 167,606	4,704,235
STRENGTHENING THE IMPACT OF PLWHA REGIONAL COMMUNITIES TO IMPROVE ACCESS TO TIMELY, COMPREHENSIVE, AND QUALITY ARV TREATMENT IN THE EE REGION	Robert Carr Civil Society Networks Fund (RCNF)	\$ 154,683	4,341,522
STRONG COMMUNITY THROUGH PARTNERSHIP	the European Union	€ 1,244,034	41,669,446
DEVELOPMENT OF THE EUROPEAN COMMUNICATIONS PLATFORM	the Global Network of People Living with HIV (GNP+)	\$ 15,000	421,008
IMPROVING TECHNICAL AND ORGANIZATIONAL CAPACITIES FOR PROVIDING HIV / AIDS SERVICES IN UKRAINE	the Initiative Center to Support Social Action "Ednannia"	\$ 6,000	168,403

Project Name	Funded By	Amount	UAH Amount
ACCESS OF ADOLESCENTS AFFECTED BY HIV/AIDS TO QUALITY SERVICES TO MEET THEIR MEDICAL, EMOTIONAL, AND PSYCHOLOGICAL NEEDS	UNAIDS	\$ 14,847	416,714
MOBILIZATION AND STRENGTHENING OF POSSIBILITIES OF PEOPLE, LIVING WITH HIV IN EASTERN EUROPE AND CENTRAL ASIA	UNAIDS	\$ 114,800	3,222,117
PROMOTION OF HIV TESTING AND TREATMENT PROGRAMS AMONG THE KEY AFFECTED POPULATIONS AND REDUCTION OF STIGMA AND DISCRIMINATION TOWARDS HIV-POSITIVE PEOPLE IN THE MEDICAL SETTINGS	UNAIDS	\$ 129,061	3,622,384
STRENGTHENING COMMUNITY-BASED SERVICE NETWORKS AND LEADERSHIP SKILLS OF ADOLESCENTS AFFECTED BY HIV/AIDS	UNICEF	\$ 73,418	2,060,639
MOBILIZATION OF ADOLESCENTS AFFECTED BY HIV/AIDS IN THE EECA REGION	UNICEF	\$ 75,000	2,105,042

Project Name	Funded By	Amount	UAH Amount
ENSURING ACCESS OF CHILDREN LIVING WITH HIV IN CHERNIVTSI OBLAST TO QUALITY PSYCHOLOGICAL SERVICES	UNICEF	€ 467,865	467,865
CORE FUNDING	ViiV Healthcare Ltd.	\$ 10,000	280,672
CORE FUNDING	ViiV Healthcare Ltd.	\$ 40,000	1,122,689
ADVOCACY OF PLWH RIGHTS IN ACTION (CORE FUNDING)	ViiV Healthcare Ltd.	\$ 75,000	2,105,042
CORE FUNDING	ViiV Healthcare Ltd.	\$ 84,575	2,373,785
RAPID NEEDS ASSESSMENT FOR CHILDREN AFFECTED BY HIV/AIDS IN THE SOUTH CAUCASUS	World Vision	\$ 24,975	700,979



ANNEX 2

Interview Questionnaire

GENERAL QUESTIONS

What is your name? What is your background (both academic and experience)?

What is your connection with ECUO?

How long have you worked in this field?

What incident/event made/influenced you to set up or join this organization?

ABOUT THE ORGANIZATION

What is the history of the organization?

What priority projects have, so far, been implemented?

What would you identify as the core activities of the organization?

Can you recall some key strategic initiatives?

What are the greatest achievements of the organization according to you?

What are the challenges facing ECUO? What constraints, such as funding, make the job more challenging?

ECUO is a regional organization and encompasses so many countries and organizations. Is it easy to work so broad and take care of the needs of each member in light of all the similarities and differences?

Would you say that the organization is growing? If so, in what areas?

Does ECUO work with opinion forming in relevant subjects? How? How effective is that communication?

What are the major conferences and training sessions that ECUO organized or took part in? What was its contribution?

LEADING THROUGH VISION AND VALUES/ DIVERSITY IN THE WORKPLACE

Is ECUO a diverse workplace? How important is diversity to you, and what value does it bring?

How would you describe the overall mission and goals of the organization?

What are the characteristics and competencies of people who are making the work of the organization successful?

FINANCES

Does the organization have a financial policy?

How is the budget of the organization generated?

How is the financial stability and independence of the organization maintained?

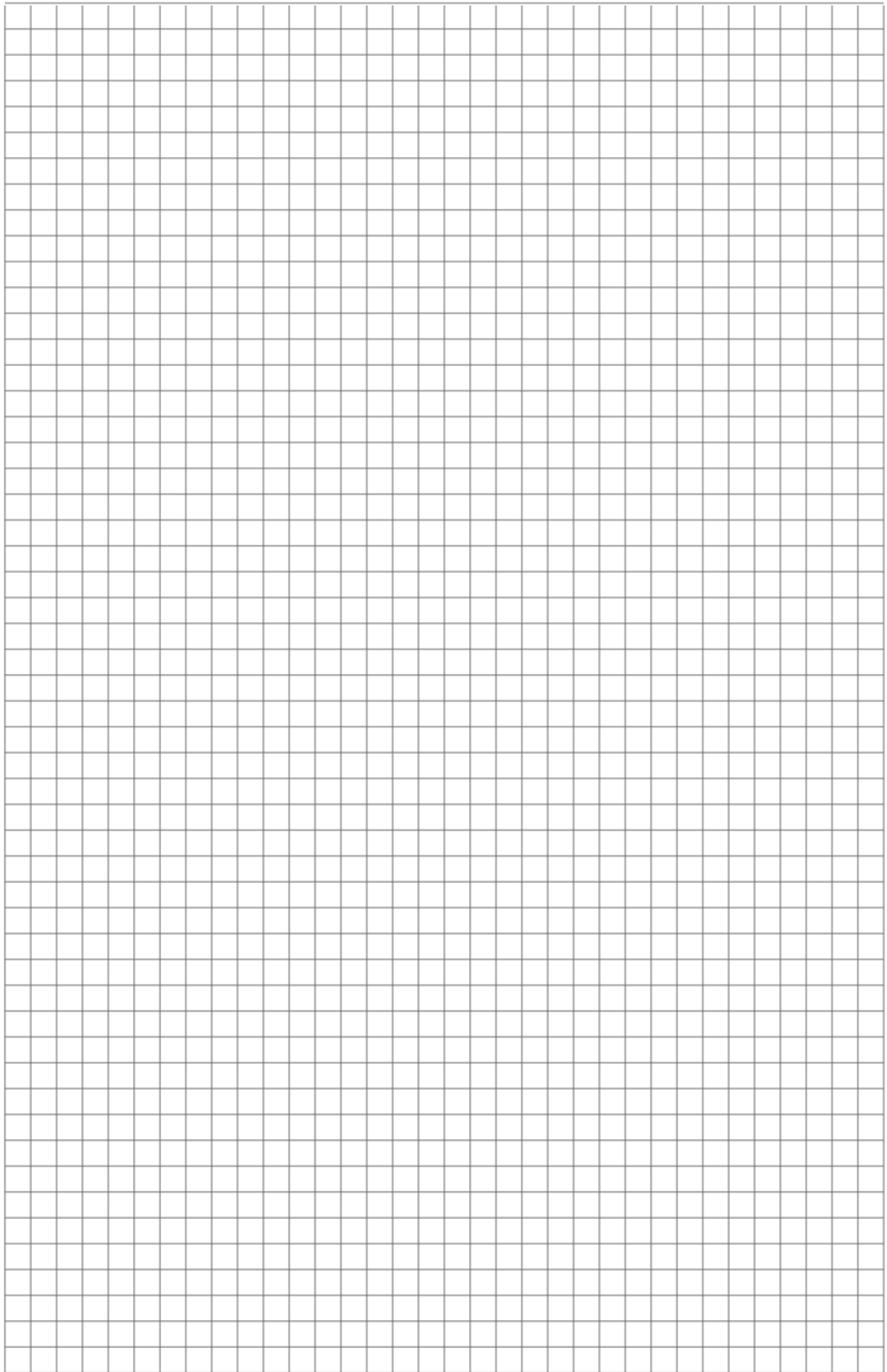
What kind of financial reporting systems are in place?

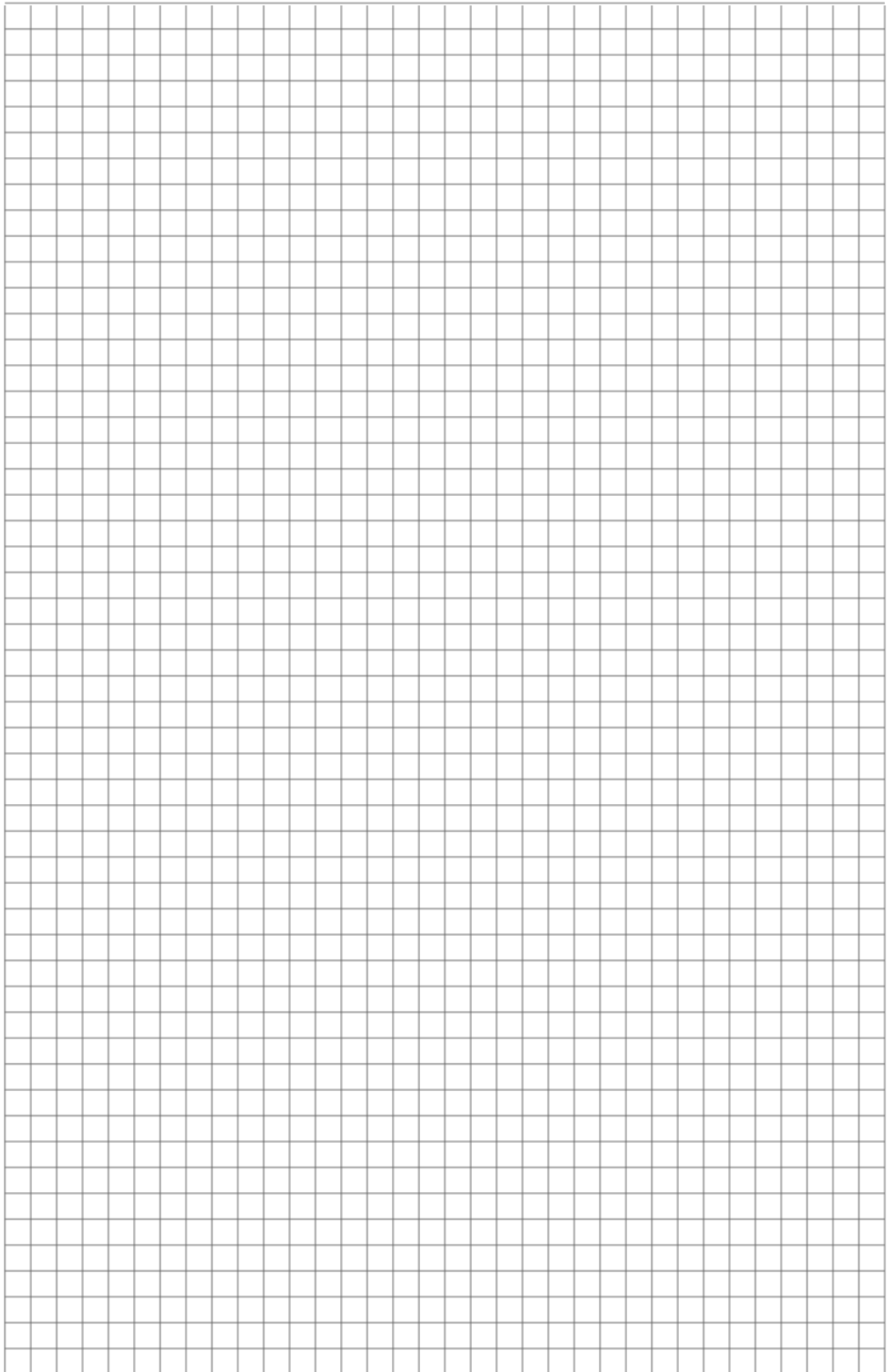
FINAL QUESTIONS

What is the most challenging/rewarding aspect of your work with ECUO?

Where do you see growth or change occurring in the organization?

What is your vision on the future of the organization?





VLADIMIR ZHOVTIAK • EVGENIA SMIRNOVA • NOFEL SHARIFOV • ELINA AZARYAN • ALIAKSANDR KHADANOVICH • LASHA TVALIASHVILI • ELENA BILOKON • LILIYA MALTSEVA • ANDRIS VEIKENIEKS • RAMUNAS RAGALINSKAS • IGOR CHILCEVSCHII • WOJCIECH TOMCZYNSKI • VLADIMIR MAYANOVSKIY • SEVAR KAMILOVA • EVGENIYA KOROTKOVA • EVHENII KRIVOSHEYEV • LATSIN ALIJEV • FARID MALIKOV • HOVHANNES MADOYAN • ALENA KHADANOVICH • DAVID ANANIASHVILI • KANAT ALSEITOV • EVGENIYA KALINICHENKO • ALDIS YUKSEYS • SVETLANA KULSIS • LUDMILA UNTURA • WOJCIECH TOMCZYNSKI • MIHAIL BAKULIN • JONONA MANSUROVA • SERGEY UCHAEV • OLGA KOTIK • ELENA ANTONOVA • NURALI AMANZHOLOV • LILIA AMANZHOLOVA • EVGENI SPEVAK • EHTIRAM PASHAYEV • ZOYA RUZHNIKOVA • LYUDMILA AMANZHOLOVA • IVARS KOKARS • PURAVZHAV ZARANDANDOV • ELENA TOKARYUK • ANNA TERESHKINA • KAMILA FATYKHOVA • IVAN ILYIN • IGOR SOBOLEV • ANASTASIA PETERSON • SANDRIS CLAVINS • JURGIS ANDRYUSHKA • MAXIM KASIANCZUK • MARIA GRISHINA • TATYANA KHAN • OLGA PANFILOVA • YANA PANFILOVA • VICTORIA 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• NATALIYA OLESHCHENKO • VALERIY TROFIMOV • MYKHAILO RIEZNIK • EVGENIY GONCHAR • ARTEM GOLOBOKOV • NATALIYA MOYSEEVA • ARMEN AGHAJANOV • OLEG DYMARETSKY • ROXSANA OLIINYK • ALENA LYTVYN • OLEKSANDRA IATSURA • OLGA MOROZ • LADA DEKAN • DANIEL KASHNITSKY • VLADIMIR ZHOVTIAK • EVGENIA SMIRNOVA • NOFEL SHARIFOV • ELINA AZARYAN • ALIAKSANDR KHADANOVICH • LASHA TVALIASHVILI • ELENA BILOKON • LILIYA MALTSEVA • ANDRIS VEIKENIEKS • RAMUNAS RAGALINSKAS • IGOR CHILCEVSCHII • WOJCIECH TOMCZYNSKI • VLADIMIR MAYANOVSKIY • SEVAR KAMILOVA • EVGENIYA KOROTKOVA • EVHENII KRIVOSHEYEV • LATSIN ALIJEV • FARID MALIKOV • HOVHANNES MADOYAN • ALENA KHADANOVICH • DAVID ANANIASHVILI • KANAT ALSEITOV • EVGENIYA KALINICHENKO • ALDIS YUKSEYS • SVETLANA KULSIS • LUDMILA UNTURA • WOJCIECH TOMCZYNSKI • MIHAIL BAKULIN • JONONA MANSUROVA • SERGEY UCHAEV • OLGA KOTIK • ELENA ANTONOVA • NURALI AMANZHOLOV • LILIA AMANZHOLOVA • EVGENI SPEVAK • EHTIRAM PASHAYEV • ZOYA RUZHNIKOVA • LYUDMILA AMANZHOLOVA • IVARS KOKARS • PURAVZHAV ZARANDANDOV • ELENA TOKARYUK • ANNA TERESHKINA • KAMILA FATYKHOVA • IVAN ILYIN • IGOR SOBOLEV • ANASTASIA PETERSON • SANDRIS CLAVINS • JURGIS ANDRYUSHKA • MAXIM KASIANCZUK • MARIA GRISHINA • TATYANA KHAN • OLGA PANFILOVA • YANA PANFILOVA • VICTORIA BILOUS • SERGEY KOVBASYUK • VLADIMIR MEDIC • ROMAN ISCHENKO • SASHA VOLGINA • GEORGE MATARADZE • JULIA RASKEVICH • NATASHA ZOZULINSKAYA • OKSANA KOVAL • MARINA MYSHKOVSKAYA • ZHENYA MAYILYAN • TATYANA ZHURAVSKAYA • BUKIN RUSLAN • LILIT ALEKSANYAN • ZARINA YUMATOVA • EVGENY ANICHIN • ANDRIY AGAFONOV • INNA GAVRYLOVA • OKSANA DOBROSKOK • NATALIYA LEONCHUK • ANDRIY KOSINOV • NATALIYA OLESHCHENKO • VALERIY TROFIMOV • MYKHAILO RIEZNIK • EVGENIY GONCHAR • ARTEM GOLOBOKOV • NATALIYA MOYSEEVA • ARMEN AGHAJANOV • OLEG DYMARETSKY • ROXSANA OLIINYK • ALENA LYTVYN • OLEKSANDRA IATSURA • OLGA MOROZ • LADA DEKAN • DANIEL KASHNITSKY • VLADIMIR ZHOVTIAK • EVGENIA SMIRNOVA • NOFEL SHARIFOV • ELINA AZARYAN • ALIAKSANDR KHADANOVICH • LASHA TVALIASHVILI • ELENA BILOKON • LILIYA MALTSEVA • ANDRIS VEIKENIEKS • RAMUNAS RAGALINSKAS • IGOR CHILCEVSCHII • WOJCIECH TOMCZYNSKI • VLADIMIR MAYANOVSKIY • SEVAR KAMILOVA • EVGENIYA KOROTKOVA • EVHENII KRIVOSHEYEV • LATSIN ALIJEV • FARID MALIKOV • HOVHANNES MADOYAN • ALENA KHADANOVICH • DAVID ANANIASHVILI • KANAT ALSEITOV • EVGENIYA KALINICHENKO • ALDIS YUKSEYS • SVETLANA KULSIS • LUDMILA UNTURA • WOJCIECH TOMCZYNSKI • MIHAIL BAKULIN • JONONA MANSUROVA • SERGEY UCHAEV • OLGA KOTIK • ELENA ANTONOVA • NURALI AMANZHOLOV • LILIA AMANZHOLOVA • EVGENI SPEVAK • EHTIRAM PASHAYEV • ZOYA RUZHNIKOVA • LYUDMILA AMANZHOLOVA • IVARS KOKARS • PURAVZHAV ZARANDANDOV • ELENA TOKARYUK • ANNA TERESHKINA • KAMILA FATYKHOVA • IVAN ILYIN • IGOR SOBOLEV • ANASTASIA PETERSON • SANDRIS CLAVINS • JURGIS ANDRYUSHKA • MAXIM KASIANCZUK • MARIA GRISHINA • TATYANA KHAN • OLGA PANFILOVA • YANA PANFILOVA • VICTORIA BILOUS • SERGEY KOVBASYUK • VLADIMIR MEDIC • ROMAN ISCHENKO • SASHA VOLGINA • GEORGE MATARADZE • JULIA RASKEVICH • NATASHA ZOZULINSKAYA • OKSANA KOVAL • MARINA MYSHKOVSKAYA • ZHENYA MAYILYAN • TATYANA ZHURAVSKAYA • BUKIN RUSLAN • LILIT ALEKSANYAN • ZARINA YUMATOVA • EVGENY ANICHIN • ANDRIY AGAFONOV • INNA GAVRYLOVA • OKSANA DOBROSKOK • NATALIYA LEONCHUK • ANDRIY KOSINOV • NATALIYA OLESHCHENKO • VALERIY TROFIMOV • MYKHAILO RIEZNIK • EVGENIY GONCHAR • ARTEM GOLOBOKOV • NATALIYA MOYSEEVA • ARMEN AGHAJANOV • OLEG DYMARETSKY • ROXSANA OLIINYK • ALENA LYTVYN • OLEKSANDRA IATSURA • OLGA MOROZ • LADA DEKAN • DANIEL KASHNITSKY • VLADIMIR ZHOVTIAK • EVGENIA SMIRNOVA • NOFEL SHARIFOV • ELINA AZARYAN • ALIAKSANDR KHADANOVICH • LASHA TVALIASHVILI • ELENA BILOKON • LILIYA MALTSEVA • ANDRIS VEIKENIEKS • RAMUNAS RAGALINSKAS • IGOR CHILCEVSCHII • WOJCIECH TOMCZYNSKI • VLADIMIR MAYANOVSKIY • SEVAR KAMILOVA • EVGENIYA KOROTKOVA • EVHENII KRIVOSHEYEV • LATSIN ALIJEV • FARID MALIKOV • HOVHANNES MADOYAN • ALENA KHADANOVICH • DAVID ANANIASHVILI • KANAT ALSEITOV • EVGENIYA KALINICHENKO • ALDIS YUKSEYS • 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