







Newsletter

GRANTS FOR HIV, TUBERCULOSIS AND MALARIA

EXYRGYZSTAN June 2014



HIV Grant

A Day to Celebrate Children

International Children's Day is an annual holiday to honour, love and celebrate children. Observed on June 1 in Kyrgyzstan, it also serves as a reminder that we need to protect and respect children's human rights. After all, every child deserves the right to an education, to be safe and to be healthy.

However, the rights of some children in Kyrgyzstan are not respected and their futures may not look that bright, especially children with HIV.

According to official data from the Kyrgyzstan Ministry of Health, the cumulative number of registered children with HIV (aged 0 to 19 years) as of May 2014 was 569. Many experts believe that these figures are underreported and should be multiplied several times to get a clear picture of the HIV eoidemic.



To understand some of the challenges that a child with HIV faces, as well as the support available, we interviewed a parent whose child is HIV-notifie:

Please tell us how your child contracted HIV?

I was in a long-term relationship with a man from Russia who was working in Kyrgyzstan. In 2009, I became pregnant with his child. Two weeks before the delivery, he told me that his wife had been diagnosed with HIV. While my test came back HIV-negative, his result was positive. He claimed that he most likely was infected in Russia during a dental procedure. We both qot tested.

Six months after giving birth, the doctors re-tested me and tested my baby. We both tested positive. The doctor performed additional testing and my daughter's HIV-positive status was officially confirmed. As residents of Bishkek, we were registered at the Bishkek AIDS centre and both began receiving antiertorius I terestment (ART). Today, my daughter is five-years old. Because she started ART early, her physical health is good. When she was a baby, it was difficult toget frev to take the medicines, but now, although she doesn't understand HIV, she realizes that she needs to take daily medicine to stay healthy. Thanks to ART, she does not lag behind her peers and she enjoys the same activities as other children her age. Additionally, ART has kept mehealthy and allowed me to be the mother! want to be tom y daughter. Have you faced status or discrimination for mosciety and/of ordctors?

We have not experienced any stigma or discrimination from doctors. But I am fearful that people in the community might not accept our HIV status. For that reason, I prefer not to tell anyone. I told the kindercarten that my daughter takes onlist for anaemia. I don't know how we

will continue to hide her HIV-positive status when site ages to school full time. The only one in my family who looves is my mother. I've been dismissed from several so once they learned that I have HIV Propole do not understand how HIV is transmitted and are worned that they may contract if from shaking hands, sharing dishes or using the same bathroom facilities. Because I haven't been able to keep a job, I don't have a steady income and sometimes we experience severe financial difficulties.



Do you get any support or some kind of compensation from the state?

Yes. There is a monthly allowance for children living with HIV that comes to about 3,000 Som (SSB USD), and as a single mother! get a monthly allowance of 490 Som (\$9.50 USD). Still, life is too expensive and this money is not enough, especially right now as I am out of work. Howdo you cope with these difficulties?

My retired parents help me. Also, the father of my child provides assistance. The PF Prosvet funded by UNDP gives us monthly food packages, I would like to express my gratitude to the Global Fund for receiving free ART and other support for people living with HIV provided through various non-governmental organizations. Despite all the difficulties that we face, we do not give up and we believe in a bright future.

Thanks for the interview!

Note:

- Anti-retroviral drugs for PLWHIV are purchased and distributed for free under the framework of the Global Fund grant.
- Several non-governmental organizations work with PLHIV, in addition to other HIV and AIDS services and health institutions. In particular, these NGOs work on motivating the start of treatment, building treatment adherence, and providing psychological and social assistance and support
- In honour of Children's Day, UNDP, under the Global Fund HIV grant, purchased educational and developmental books for all Children living with HIV in Kyrgyzstan. These books will be distributed throughout regional HIV centres. Look forward to feedback from the hildren reagrafing these dist in future newsletters.
- The Association of Solidarity of PLHIV and Osh AIDS Centre, with the support of the Osh's Mayor's Office and the charity Good Samaritan, distributed toys, stationery and school supplies to 115 children living with HIV in celebration of Children's Day.



Supplemental agreements of UNDP with RCN, SSEP and Preventive Medicine

Under the Global Fund grant implementation, supplemental agreements between UNDP and the Republican Centre of Narcology (RCNI), State Service for Execution of Punishments (SSEP), and the NGO Preventive Medicine were signed in June. These agreements focus on training activities for the second half of 2014.

Trainings for medical nurses and doctors at Opioid Substitution Therapy (OST) points, field coordinators and outreach workers at needle exchange points (NEPs), as well as informational mini-sessions for RCN clients will be implemented.

The organization of trainings for OST point doctors and NEP workers was included into SSEP plans.



RCN and SSEP training will be carried out jointly with the International Centre for Aids Care and Treatment Programs at Columbia University Project (ICAP). ICAP will co-fund the training and provide trainers.

For Preventive Medicine, trainings on infection control for health care organizations in various regions of the Kyrgyz Republic, as well as trainings on medical waste management for health care organizations in Bishkek and Osh will be carried out.

Preventive Medicine plans to continue training seminars to improve the quality of laboratory diagnosis of HIV for AIDS service laboratories.

Direct agreements with NGO's under the HIV grant

Amendments to agreements dated on January 1, 2014, were signed in June. These agreements will allow 11 NGO's to organize training activities from June to December 31, 2014.

Details on agreements:

- Aman Plus \$972
- PF Parents Against Drugs –\$ 1,669.97
- PF Peer to Peer-\$472.50
- PF Ranar-\$432
- Harmony plus \$501
- Plus Centre \$945
- Sotsium \$672.71
 Association Harm Reduction Network \$17.438
- Association namined detionive:
- PF Alternative in Narcology -\$987
- PF Musaada \$1,106.10
 Avan Delta \$4,572.60

2013 round table IRRS results for HIV

To monitor HIV, understand the trends, and improve planning and evaluation of prevention activities, Kyrgyzstan carries out HIV sentinel surveillance. The results of the 2013 HIV sentinel surveillance in the Kyrgyz Republic were presented during a round table in Bishkek on fune 17.

The conference included representatives from government agencies, national and regional AIDS centres, NGOs, and international organizations such as the WHO and the CDC.

'Along with a system on the registration of cases, sentined surveillance is an important component of the epidemiological surveillance, system, monitoring and planning are spond plann

In 2013, sentinel surveillance was conducted at a higher level. In addition to employees of the National AIDS Centre, representatives of non-governmental and community organizations were involved in the process. Representatives of community organizations were trained as interviewers, and observers were present at sites where the surveys were taken. Collection information was done voluntarily and anonymously.

Research was carried out among three key groups; people who inject drugs (PWID), men who have sex with men (MSM), and women involved in sex work (SW). The study was carried out in skprovinces of the country, and in Bishkek.



The report concluded that HIV remains concentrated among key populations, with the injection of drugs as the main mode of HIV transmission. These results corroborate previous findings.



Volleyball tournament to mark Day Against Drugs

To mark the United Nations' International Day against Drug Abuse and Illicit Trafficking, the Association of Harm Reduction Network, supported by UNDP and Global Fund, hosted volleyball tournaments at Penal Colony 31 in Moldovanovka and Penal Colony 3 in Novopokrovka on Monday June 30.

Each prison yard was converted into a volleyball court and, despite the intense heat the competition was fierce.

In Penal Colony 31, a combined team of prisoners recovering from tuberculosis (TB) and those on the methadone maintenance treatment program (MMT) defeated prisoners on the Atlantis programme in the first round. The TB/methadone team went on to outplay the prison staffeam to win the tournament. At Penal Colony 3, prisoners triumphed over the prison staff in their game.

In an effort to combat drug use and HIV, both prisons have on-site methadone programmes, Atlantis programmes, and needle exchange programmes. Penal Colony 31 also has a tuberculosis (TB) treatment facility. Between the two prisons, 102 prisoners are on the methadone programme and 26 participate in the Atlantis programme. Prisoners involved in any of these programmes are required to attend mini-sessions to educate them about HIV and of these programmes are required to attend mini-sessions to educate them about HIV and the second of the second s



These tournaments are very important because they not only encourage prisoners to lead a healthy lifestyle and not use drugs, but they help to reduce the tension which may arise between prisoners and prison staff, 'said Zhenish Sakelov, head of Penal Colony's.



Before the tournament at Penal Colony 31, Irina Galkina, a social consultant from Harm Reduction Network, quizzed prisoners on HIV transmission, prevention, stigma and discrimination. Prisoners who answered questions correctly received a box of cookies.

"The day wasn't just about the prizes," said Galkina. "It was also about having fun and playing sports."

A crowd of inmates assembled to watch the tournament at Penal Colony 31 and many prisoners decided they wanted to participate. "Although they didn't have a uniform and wouldn't be receiving any prizes, they still wanted to play," said Malabaeva Gulbarchyn, a social consultant from the Harm Reduction Network. The tournament demonstrated to the prisoners that ecoole are still thinkin a about them."

A HIV diagnosis transforms a patient into an ART advocate

While undergoing drug detox in 2009, Marat* learned that he was HIV positive. When told his test result, Marat announced, "thank god." Pre and post-test counselling wasn't prevalent in Kyrqyzstan at that times of Marat assumed.

that "HIV positive" meant good news. Once he understood the significance, he left the centre in tears. He was 38 years old, married and had a daughter.

After the initial shock of being diagnosed as HIV positive subsided, Marat vowed that he would never return to using heroin again. Six months later he began volunteering at Mutanazzif, an NGO working in the HIV sector since 1997, but he was opposed to beginning antiretroviral herapy (ART), the treatment that suppresses HIV and stops the progression of the disease.



"I felt physically fine," said Marat. "I

distrusted ART because I understood it to be similar to chemotherapy and that it had side effects. Also, idlink vant to take medication twice daily for the rest of my life."

But then he becan losing weight. Acute acne appeared on his face and painful shingles

developed on his back. Marat realized that ignoring the disease wasn't going to make it go away.

A coordinator at Mutanazzif explained the advantages of antiretroviral drugs and

emphasized the minimal side effects to Marat. She showed him photos of famous people who were receiving ART and leading normal lives.
Having a supportive person who understood HIV motivated Marat to begin ART in 2011.

All raing a supportive person who understood HIV motivated Marat to begin ARI in 2011. After six months his shingles disappeared, his CP4 count increased, and he began to gain weight. In addition, his emotional wellbeing also improved. Marat became a believer in the advantages of ART. He delived into HIV literature to understand as much as possible about the virus. As part of a multi-disciplinary team, he travelled to remote villages in Chui province to provide informational and educational services. He counselled patients and did outreach work with people whoinject drugs (PWID) inject drugs (PWID).

"By helping others," Marat said, "I was helping myself."

In 2011, Marat, along with a psychologist/coordinator and two outreach workers, founded the public fund Prosvet. This volunteer based group collaborated with organizations to educate people about HIV in Bishkek. In 2012, Prosvet received sub-recipient funding from the UNDP implemented Global Fund HIV grant.



The Global Fund HIV grant focuses on preventing HIV by promoting human rights and gender equality, strengthening the governance component, and mainstreaming AIDS issues into national policies. One of its goals is to improve the treatment, care and support for people living with HIV (PLHIV) and promote measures to prevent HIV among populations at higher risk.

Now Prosvet has eight staff members. It has expanded its presence beyond Bishkek to three towns nearby. Kara-Batts, Atant and Sokuluk, increasing its client coverage he organization provides counselling, psychological testing, services on rehabilitation and entergration into society as well as legal advice. Because 60 per cent of Prosvet's staff is HIV positive, they can relate to their clients. While patients may not trust doctors, Marat says, they trust their equals, which is apparent with the success of peer-to-peer conselling.

Provet encourages clients to not only begin ART, but to strictly adhere to the therapy. From January to March 2014, Prosvet had ART commitment from 129 PLIVII. In addition, provide has developed measures to prevent inefficient use of ART. The organization works with medical personnel and family of PLHIV to combat HIV stigman and discrimination, Knowing one's traction of the status is vital to get medical treatment early and to minimize the risk of spreading the infection roothers.

As a result of increased access to prevention and treatment services through organizations like Prosvet, 1,196 adults and children received ART in May 2014, compared with 778 in May 2013.

Today, Marat exudes confidence and determination that would have been impossible a few years earlier. "People need me," Marat said. "Clients look forward to my visits. They wait for my consultations and to bring them motivational packages."

Although Marat is now divorced, he has a good relationship with his daughter. And with support from people like Marat and organizations like Prosvet, no one needs to go through the same confusion and anxiety he endured when he was diagnosed with HIV.

*Not his real name.

May 2014 rapid saliva-based HIV testing results

For the first time since November 2012, under the UNDP initiative, NCO's working with vulnerable groups participated in rapid based HIV testing. The rapid salve-based oral test allows for the testing of more individuals and does not require special equipment. Because results are available in minutes, people with HIV-positive results can begin treatment some and take steps to prevent transmission of the virus. (Clients with positive results will need to be confirmed by an additional test.)

Below is a summary of the rapid saliva-based HIV testing results from 10 NGOs during May 2014.

- 325 clients of the NGO's underwent saliva-based rapid testing
 - 10 clients tested positive
 - Three out of 10 clients with positive rapid test results were directed to AIDS centres (awaiting results from confirmation tests)
 - Two out of 10 clients with positive results were accompanied by NGO consultant to AIDS centres PF Podruga and Association of Legal Entities Anti-AIDS (awaiting results from confirmation tests)
 - The remaining five out of 10 clients with positive results had confirmation tests at AIDS Centres, which confirmed the rapid testing results
 - Two out of those five people were registered as newly diagnosed cases of HIV at PF Plus-Centre

AIDS Centres employees, together with NGO consultants, are working to further screen HIV-positive clients and begin them on ART.



In an effort to expand and implement rapid saliva-based HIV testing, UNDP asked its subrecipients and NGO's if they would like to be involved with testing. Nine organizations expressed interest

At the end of June, the UNDP, in conjunction with Republican AIDS Centre, had prepared and submitted an order to the Ministry of Health to include these nine new organizations in the list of existing organizations eligible to receive training to provide rapid HIV testing to their clients.

Tuberculosis (TB) Grant

Monitoring visit to Talas province

Nine healthcare facilities were reviewed during a monitoring visit to Talas Province between June 16 and 19. NUR9 specialists and the National TB Centre assessed the implementation of the agreement between UNDP and the Talas TB Centre, as well as analyzed and verified programme indicators under the grant.

Overall improvements were found in work areas, treatment success rates among patients with multi-resistant tuberculosis, and the detection of sputum smear-positive TB cases. But, even with the availability of the required range of medicines procured with the grant funds, the healthcare facilities did not reach the target indicator levels in the treatment and prevention of side effects during the outpaint treatment phase.

Monitoring results and recommendations were presented to primary health care managers and the Talas TB Centre. Healthcare workers have been provided practical assistance aimed at improving clinical and programs kills.



Malaria Grant

Trainings during malaria-free certification of the country

Trainings of health care workers were carried out with the Global Fund malaria grant implementation and under orders from the Ministry of Health.

As Kyrgyzstan continues to prepare for World Health Organization (WHO) malaria free certification, healthcare workers are being trained on improving the system of malaria epidemiological surveillance during the elimination period. These trainings focus on four areas.





- 44 healthcare professionals were trained on the effective management of the malaria elimination program according to WHO standards
 - 19 doctors of primary health care (PHC) were trained on the provision of full access to early diagnostics and adequate malaria treatment
- 109 laboratory doctors of PHC were trained on improving the capacity for early malaria diagnostics and appropriate treatment
- 32 healthcare professionals were trained on entomological surveillance and vector control measures during the period of elimination and on preventing its return.



A total of 204 healthcare workers were trained and awarded completion certificates.

$Partnership\,development\,and\,population\,involvement\,in\,malaria\,elimination\,activities$

The Association on Health Promotion (AHP) conducted trainings for members and volunteers of rural health committees (RHC) to implement and execute the strategy on partnership development and population involvement in malaria elimination activities in the Kyrqyz Republic.

The goal of the training was to introduce and use preventive programs with participation from the population in addressing issues during the malaria elimination phase. The training covered RHC members residing in areas where malaria project activities had been carried out (insecticide treated nets and internal residual spraying). As of today, more than one thousand rural health committees have been formed.

Trainings were carried out in the following areas:

- Enabling the healthcare system (PHC, public health service) to work in partnership with communities on malaria prevention
- Enabling rural communities to act independently in promoting health in the community and on preventing malaria
 Expanding partnership to address issues
- of malaria prevention with local governments and public organizations at the village and district levels



During the reporting period from June 1 to June 30, a total of 366 members of RHC were trained.

Providing the population with long lasting insecticide bed nets.

Under this year's malaria grant, 35,000 long-lasting insecticide-treated mosquito bed nets (LIMS) were purchased and distributed across Kyrgyrstan. Supported by the Global Fund in accordance with the LLIM's 2014 distribution program, 6,797 bed nets were given to pregnant women, 22,732 to children under five years old, and 5,471 to adults.



The distribution of bed nets was conducted according to an order from the Department of Disease Prevention and SSES and was carried out by health workers at Family Medicine Centres, health workers at Cabinet for Health Promotion, and members of rural health committees.

Seminars on malaria prevention and the importance and use of bed nets were held before distribution.



A prestigious award to mark health care worker's day!

Congratulations to UNDP's own Malaria Monitoring and Evaluation Specialist, Kubanych Almerekov. To mark healthcare workers day on July 4, Kubanych was honoured with an award

from the Ministry of Health for his contribution to the development of the healthcare industry and his high level of professionalism. Tolo Isakov General Director of the State

Sanitary Epidemiological Department in Kyrgyzstan had nominated Kubanych to the Minister of Health for this award.

Kubanych has been working on malaria in Kyrgyzstan for ten years and receiving this award is a validation of all his hard work.

For Kubanych, the award came as a complete surprise. "I got a call this afternoon from the State Sanitary Epidemiological Department and was told to come down to therefor a ceremony," said Kubanych.

The certificate, signed by the Minister of Health is one of the most prestigious awards in Kyrgyzstan.



His wife, Baytygul, couldn't be prouder. "It's very difficult to receive this award from the Ministry of Health," said Baytygul. "Your work really has to stand out."

Kubanych is thrilled with the award and vows to continue to work hard.

Procurement information for June 2014:

HIV Component:

- The tender for rent of a warehouse with a cooling chamber is conducted. The signing of the contract is expected in July 2014; \$9721
- 2. 62 first aid kits are procured and supplied: \$861
- 3. A contract is signed for the supply of methadone hydrochloride (15 kg): \$36,803.12
- A contract is signed for the supply of test systems for the determination of CD3/CD4/CD8 and reagents: 549.432.70
- A contract is signed to supply test systems for the diagnostics of viral hepatitis among HIV-infected patients: \$29,718.21
- 6. A contract is signed for provision of customs terminal services at Manas airport: \$50,000



- 7. Assessment of bids for the provision of printed materials is completed, 31 contracts are in the stage of being signed: \$37.19
- 8. Official license (key) for the use of 1C program is purchased: \$1,996.17
- 9. The procurement of the following test systems, equipment and consumables to conduct studies and train lab specialists of NGO Preventive Medicine:
 - a) diagnostic test systems for enzyme immunoassay method (EIA)
 - b) diagnostic test systems for confirmation of HIV and viral hepatitis C for Immune Blot Analysis (Western Blot)
 - c) international biological standards and reference panels and positive human serum
 - d) diagnostic test systems for the detection of genomic apparatus of pathogen by polymerase chain reaction (PCR)
 - e) tips for reference-dispensers of variable volume for PCR and cryotubes. microtubes for PCR, metal tripods for micro tubes, plastic bilateral tripods IsoFreeze for PCR
 - f) replaceable unit (adapter plate) for a solid-state desktop thermostat, Mini rocker shaker, micro centrifuge and spare rotor for amplifier "Rotor Gene 6000" g) pharmaceutical refrigerator

 - h) laboratory refrigerator (non-household) of vertical load and temperature range -40°C
 - i) deep freeze and vertical load
 - i) medical disposable non-sterile gloves and nitrile gloves
 - k) disinfectant PD 2T, Lizoformina 3000

Tuberculosis Component:

- A contract is signed for the supply of sterilized water used for injections for 520 patients: \$12,504
- 2. Partitions and windows are installed and small repairs are carried out at the Bishkek TB Centre-\$2 196
- Annual stock of dust filters is supplied to the National Reference Laboratory: \$1.010
- 4. Delivery of food and hygiene packages for the RPH patients in Chim-Korgon village: \$709
- 5. A contract is signed to train nurses, PHC paramedics, laboratory staff and TB doctors on sputum smears, treatment adherence among MDR-TB patients during outpatient treatment phase, and clinical and programme management of MDR - TB, \$12,583

Malaria Component:

 A contract is signed for the supply of reagents for PCR labs of the Department of Disease. Prevention and State Sanitary Epidemiological Control in Bishkek: \$7,993

Information on deliveries for June 2014

HIV Grant

- Health products and medicines to AIDS Centres and NGOs: \$193,667,31
 - Information and educational materials for NGOs: \$2,316,10
 - Office supplies and furniture for NGOs: \$892.68

TR Grant

Medicines for TB facilities: \$141,309.56



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TUBERCULOSIS AND MALARIA