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NEWSLETTER

GRANTS FOR HIV,
TUBERCULOSIS AND MALARIA

 **KYRGYZSTAN**

October 2014

UNDP Named Global Leader in Transparency

The United Nations Development Programme (UNDP) is the most transparent development organization, according to a leading global ranking released on 8 October.

The 2014 Aid Transparency Index recognized UNDP for its 'commendable performance' in publishing information beyond international standards this year, placing it first overall out of 68 major agencies evaluated worldwide.

The index is based on the International Aid Transparency Initiative (IATI) standard, which sets a common global benchmark for more timely, accurate and comprehensive aid information. Financial flows, budgets, results, project location, timelines and documents are published into an online database that tracks how aid is spent. This not only increases the accountability of donor countries, but also allows developing countries to better align donor assistance with their national priorities and budgets, ultimately maximizing aid effectiveness.

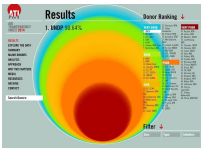
UNDP is the United Nations' global development network. UNDP advocates for change in developing countries and connects those countries to knowledge, experience and resources to help their people build a better life. In order to meet development challenges and develop local capacity, UNDP provides expert advice, training, and grant support to local governments. Specifically, UNDP encourages global development by focusing on poverty reduction, HIV/AIDS, democratic governance, energy and environment, social development, and crisis prevention and recovery. UNDP also encourages the protection of human rights and the empowerment of women in all of its programmes.

"Transparency is core to our mission," said Helen Clark, UNDP Administrator. "We are gratified to be recognized for our efforts to operate in an open, transparent manner. UNDP is committed to working in the open to spark innovation, to ensure the best possible use of funds entrusted to it and to accelerate the development of a sustainable future for all."

This continued commitment to transparency was recognized in the appointment of UNDP to head the IATI Secretariat last year. Leading a consortium of the United Nations Office for Project Services (UNOPS), the governments of Ghana and Sweden, and UK-based NGO Development Initiatives, UNDP is using its considerable reach across 177 countries and territories to continue to improve the transparency of international development cooperation.

"This role puts UNDP at the forefront of global efforts to increase transparency in development cooperation, including through efforts to develop further the IATI common standard for publishing information about aid spending," Helen Clark said.

UNDP also discloses its internal audit reports, and last year moved from annual budget reporting to publishing monthly reports, which detail activities and result frameworks using sub-national geographical data.



From web site "Aid Transparency Index"

Spotlight on Procurement

On 24 October, Kanybek Mambetkulov, Procurement Specialist of the HIV component of the UNDP project in Kyrgyzstan funded by Global Fund grant to fight AIDS, tuberculosis, and malaria (UNDP), received an award in recognition of his outstanding work and was declared UNDP Global Fund Officer of the Year.

Mr. Mambetkulov is proud to be a member of the UNDP family. He started work at the UNDP in 2011 and is one of four people responsible for procurement for the HIV grant. He plays a key role in ensuring the people receive the goods and services they need. As a procurement specialist within the Procurement and Logistics Team, Mr. Mambetkulov ensures that high quality goods are received at the right time and at the right price.



Kanybek Mambetkulov – UNDP procurement specialist

"Through proper procurement planning, as well as coordination with the programme team and end users, our team guarantees best value for money, fairness, integrity, transparency and effective international competition," says Mr. Mambetkulov.

Acknowledging that procurement of anti-retroviral drugs, drugs for the management of opportunistic infections, test systems and diagnostics, needles and syringes, condoms, methadone, medical equipment and other important items are essential to programme, it is imperative that there are highly qualified, committed professionals keeping processes on track. For many items there are also additional requirements from Global Fund (GF), as well as the Kyrgyz State Drug Control Agency under the MOH.

"Compliance with these requirements isn't always easy. Yet it is important not only for UNDP, but for grant recipients and beneficiaries," Mr. Mambetkulov adds.

In addition to these professional requirements, it is vital that all procurement professionals adhere to high ethical standards and report any fraud or corrupt practices. This ensures that items are procured at the lowest possible cost, therefore maximizing the goods and services that can be delivered to recipients. This in turn helps people receive the treatment, care, support and prevention services that they really need.

Today's procurement professionals need to operate quickly, effectively and think widely, in line with procurement policies, all the while maintaining a client-orientated manner.

"I am happy to have been honoured with such a reward and I look forward to my continued work with the Procurement Team," says Mr. Mambetkulov.

HIV GRANT

New Funding Model

GF has developed a new model of funding that will allow it to strengthen the strategic direction of its investments, increase the volume of its resources and engender greater global cooperation.

Therefore, GF made several missions to Kyrgyzstan and supported activities in the development of a Concept Note on the HIV and TB grants for 2016-2017. The Concept Note is the mechanism to request financing from GF for the grants. In view of the timelines for negotiating the new grant agreement for 2016-2017, GF informed CCM members that it would request UNDP to submit a request for an extension of their existing grant.

Extension of existing HIV grant

On the 1 October 2014, GF formally wrote to UNDP requesting them to prepare a workplan and budget for the year ending 31 December 2015. UNDP arranged meetings with all HIV-grant sub-recipients (SRs) in order to define the priorities and activities through a transparent process. These discussions helped SRs to understand the new GF requirements, and also to refine the workplan and budget. Meetings were held on 15-16 October in UNDP's office.

Representatives from government and non-government sectors and members of organizations representing the non-government sector that work with key populations such as people living with HIV (PLWHIV), people who inject drugs (PWID), sex workers (SWs) and men who have sex with men (MSM) were invited. However, in order to ensure partnership with all parties, Skype conferences were organized with partners from Osh oblast.

WHO representatives and members of the working group on the development of the Concept Note took part in the meetings in order to harmonize the activities between the international partners and the working group.

Information about new requirements to budgeting and recommendations for those new approaches to be used to form the new budget and define priority directions in the light of available funding were presented during the discussion.

The main priority directions for 2015 remain the same, such as treatment and HIV diagnostics, prevention of HIV transmission among the key groups, harm reduction programs and social support.

However, it was recommended that the participants revise certain aspects of funding for personnel in government organizations, the copying and printing information for SRs, and the procurement process within the grant.

Taking into account a general approach on budget reduction, the actual needs of the organizations from a programme perspective, recommendations from the national partners, as well as donor requirements, UNDP prepared the budget for 2015 for the HIV grant and in November presented to CCM grants committee and also a full CCM meeting. It was subsequently submitted to GF for approval.

The board will make a final decision on a approval of the activities and funding volume for the HIV grant implementation in 2015.

UNDP staff expressed their willingness to put all efforts in reducing the risk of a break in programme activities during the process of the budget approval and the signing of agreements by interested stakeholders.

Guaranteeing Accurate Patient Test Results

Only a decade ago, national standards for laboratory operation did not even exist in Kyrgyzstan. A struggling healthcare system, outdated testing and a lack of training for healthcare workers meant inaccurate test results were a daily reality.

In 2003, only 30% of all diagnostic labs in the country could demonstrate 100% accuracy of HIV test results. Testing results for other diseases weren't much more accurate.

To combat the problem, the Minister of Health (MOH) established the scientific and production association Preventive Medicine, as an infectious disease laboratory. Since the establishment of the Preventive Medicine, which became fully operational in Bishkek in 2005, things have rapidly improved.

The laboratory was designed to train laboratory specialists, increase laboratory diagnostic capacity and strengthen the public health system. High-quality laboratory diagnostics are imperative for early, rapid and accurate detection of diseases.

Preventive Medicine was launched with three small rooms and without equipment to perform quality control (QC) tests. The Republican Aids Centre (RAC), located on the floor below them, assisted with testing. Initially, Preventive Medicine worked to improve hepatitis diagnostics. After obtaining success with hepatitis, they implemented the same techniques with other infectious diseases, including HIV and tuberculosis.



Tatiana Kucuk – The Head of the Quality Control Lab

In 2006, 75% of regional diagnostic labs (RDL) showed 100% accuracy of HIV test results. But then, in 2007, the government decided that training was no longer needed and cut funding. The impact of this decision was felt as the proportion of labs with 100% HIV test result accuracy fell to 62% in 2008 and to 55% in 2009.

With donations from various organizations, in addition to a grant from GF in 2010, lab staff training and HIV testing quality assurance/ quality control activities resumed. In 2011, the number of RDLs with the highest accuracy of HIV testing increased to 78%, in 2012 climbed to 86%, and in 2013 it reached 91.3%.

Today, Preventive Medicine has expanded to 13 rooms; eight of which are high-tech laboratories that have been restored through the HIV grant. Now the laboratory contains state of the art equipment, including an ultra-low temperature freezer and a biological safety cabinet.

The laboratory has been accredited to international standard ISO/ICE 17025, which verifies that the lab is technically competent and able to produce precise and accurate test and calibration data. Preventive Medicine is now preparing for Medical Laboratory accreditation for quality and competence (ISO 15189). The laboratory plans to continue to assist RDLs with staff trainings and preparing them for accreditation to international standard ISO 15189.

Preventive Medicine has also been involved in creating regulations, policies and procedures to address the prevention and control of infections, ensuring the biological standardizations of laboratories, conducting monitoring visits to labs, and improving skills by attending international seminars.

Currently, the lab utilizes the ELISA Test (Enzyme-linked immunosorbent assay), or EIA, the most commonly used antibody test for HIV diagnosis. Generally, the conventional antibody tests do not allow the detection of HIV in patients 3 to 12 weeks after infection (during its acute phase).

Preventive Medicine will begin working with Polymerase Chain Reaction Test (PCR), which detects the genetic material of HIV in the blood. It can identify the virus within two to three weeks of infection, i.e. before any signs of HIV-specific antibodies occur in blood serum.

Today, Tatiana Kucuk, the head of the Quality Control Lab of the Preventive Medicine, can be proud of the fact that all 46 HIV diagnostic labs are achieving good test results.

"Training is important for our country and it's important for our work," she says. Without accurate test results, our healthcare systems cannot provide rapid and accurate detection of diseases for those who need treatment most.

Thankfully, Kyrgyzstan's formerly ailing laboratories are well on the road to recovery.

Highlights

- Preventive Medicine has 13 rooms; eight of which are high-tech laboratories that have been restored through the HIV grant in Kyrgyzstan and contain state of the art equipment, including an ultra-low temperature freezer and a biological safety cabinet.
- The Preventive Medicine laboratory has been accredited to international standard ISO/IEC 17025, which verifies that the lab is technically competent and able to produce precise and accurate test and calibration data.
- Today, all 46 HIV diagnostic labs in Kyrgyzstan have good achievements in testing.

Annual conference on programs with SWs in Kyrgyzstan

The annual sex worker (SW) conference was held on 23-24 October 2014 and hosted by representatives of NGO Tais Plus and supported by UNDP and ITPC/Bridging the Gaps. This event is held annually, as it provides a unique platform for SWs, programme implementers and other key stakeholders to come together to outline, discuss and address joint issues, and to share best practices on programmes with SWs. It is very important for the voices of SWs to be raised and heard at such level.

In particular for this year, besides great participation of civil society organizations, stakeholders from the government sector were also well represented. Attendees included employees of relevant NGOs, and representatives of Shah Aym Network, a union of SWS, and international organizations, including UNDP Jennifer Butler, Senior Advisor on HIV of the regional UNFPA office. Also included were representatives from the Ministry of Health, Ministry of Internal Affairs, Republic Dermatology and Venereology Centre and national AIDS centres. All main stakeholders involved in the programs with SWs participated in the event, and had the opportunity to listen and understand each other.

One of the key messages of the conference focused on the goal to change the current approach of harm reduction programming. To ensure the effectiveness and sustainability of programmes, the view of 'sex workers as programme clients' must shift to one of 'sex workers as programme partners'. It was concluded that if one views SWs as always in need, an unequal partnership is created, which in turn, promotes non-meaningful participation of SWs in the decision-making process.

New guidelines created by WHO, UNFPA, UNAIDS, the World Bank and the Global Network of Sex Work Projects (NSWP) were presented. The guidelines contain recommendations on the implementation of effective programmes with SWs based on the approach of SW empowerment.

There was lively discussion around the introduction of rapid saliva based HIV testing. Tais Plus is one of nineteen NGOs in Kyrgyzstan that offers the rapid saliva-based HIV test. It was noted that only a small percentage of people who take the test at Tais Plus and receive a preliminary positive result go to an AIDS centre to undergo confirmation testing. Five out of 30, in 2013, and 1 out of 7, in the first half of 2014, went for confirmation testing. The challenges faced by the organisation in supporting and escorting clients to Aids Centres for confirmatory testing were discussed.



Shahnoz Islamova - The head of Tais Plus during conference

In response to this information, representatives of the Ministry of Internal Affairs expressed concern about the effectiveness of the work of NGOs and stated that there are forceful methods available that will help improve the testing coverage. There was discussion and agreement that SWs have to make independent and voluntary decisions on the need to undergo confirmatory testing, and that any coercion was likely to be detrimental to the effectiveness of the programme.

According to representatives of civil society organizations focusing on SWs, there is no doubt that the ability to conduct rapid testing based in NGOs has increased the availability of HIV testing. However, only after the introduction of the rapid test did it become clear that there are significant barriers for further diagnosis. Many SWs arriving for testing appeared mainly interested in obtaining the motivation package provided to those who undergo the rapid test,



Conference participants during brainstorming

but were not willing to obtain confirmatory results. Further, it was noted that SWs often arrive for testing in groups making it difficult to communicate in a confidential manner to those who need confirmation testing. The group concluded the need to strengthen the system of peer counselling and remove motivational packages issued after the rapid test.

Recent allegations of human rights violations were discussed during the conference as well. According to NGO Tais Plus, from November 2013 to September 2014, 178 SWs from five

cities across Kyrgyzstan reported that their rights had been violated. The most common violations reported were extortion (82%), illegal arrest (59.6%), and threats and blackmail (49%). The main perpetrators included clients and police. It was very important for these issues to be raised in presence of representatives from law enforcement agencies in order to understand the scale of the problem, and the damaging effect on work with SWs.

During the conference, all interested parties, including members of the community, NGOs, international organizations, government agencies, and most importantly, the women for whom this work is being done, were given a chance to have their voices heard. At the end of the conference, the participants developed a resolution, which will serve as a basis for the discussion in the following year to track progress in addressing issues related to sex-worker programmes in Kyrgyzstan.

The introduction of a new package of registration and reporting documentation for OST sites and NEP in SSEP institutions

According to the RAC, as of 1 November 2014, PWIDs (and ex-PWIDs) accounted for 55% of the total number of PLHIV in Kyrgyzstan. In prisons, there are currently 301 people registered as HIV positive and 1,500 PWIDs. However, certain estimates claim that one out of every three incarcerated individuals injects drugs.

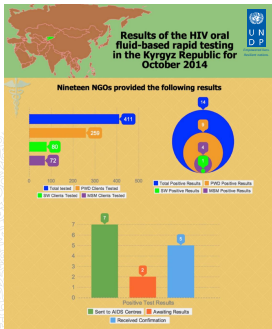
In the framework of the GF grant, UNDP supports the activity of 15 needle exchange points (NEP), which cover 1,073 prisoners, and five opioid substitution treatment (OST) points, which cover 268 clients, in the penitentiary system of the KR.

On 7-8 October, a training was conducted for 38 staff members of NEPs and OST points in the State Service for the Execution of Punishment (SSEP). The primary goal of the training was to discuss the implementation of a new package of registration and reporting documents for NEPs and OST points in the SSEP system.

The training participants were familiarized with the draft package of registration and reporting documentation for OST points and NEPs. The trainees then practiced filling out the registration and reporting documentation.

Furthermore, participants were presented with updated standards for the implementation of harm reduction programs and provision of services for PWIDs. This standard was provided by an order from the Ministry of Health (MOH) on 22 August 2014.

Upon the discussion of the new package of registration and reporting documents, a proposal was made to do a test run of the new package in several penal colonies. Then, after taking into account comments and suggestions, to update the documents and afterwards approve them with the internal order of SSEP. The goal is to create greater streamlining of forms and reporting on timelines.



TUBERCULOSIS GRANT

Meeting with sub recipients of the TB grant

On 10 October, those involved in the implementation of the TB grant, took part in a meeting on the grant's implementation. The attendees included staff of TB institutions from across Kyrgyzstan and their MDR-TB coordinators and accountants.

After Irina Schelokova, UNDP TB Component Coordinator, opened the session, Toktogonova Atyrgul, Coordinator for MDR-TB at the Republic AIDS Centre, provided statistics divided by province for 2013 and information on treatment results for 2012.

Regional coordinators and accountants then presented information on completed targets and described achievements and issues on implementing these activities. They also raised a concern about the delay of funding through the Treasury and the Mandatory Insurance Fund, which took place in the first quarter of 2014.

To address the problems on receiving approved funding for the next year, participants were given instructions that must be carried out between December 2014 and January 2015. UNDP also explained the GF's new requirements on sub-recipient reporting. A new indicator on the coverage of TB patients with positive culture drug sensitivity test (DST) was explained in detail and the reporting forms to collect information on this indicator were determined.

Due to the increase in the number of people detected with MDR-TB and in need of treatment, there are insufficient funds in the current budget to meet the cost of drugs for all those in need of treatment. Thus, a decision was made to support UNDP budget revision to channel any grant savings towards drugs.

Monitoring visits to Osh region

UNDP specialists carried out monitoring visits at TB centres in Osh province on 20-25 October 2014. The visits were conducted by UNDP staff with regional DR-TB coordinators and coordinators on the provision of medical and laboratory services. Eight institutions were visited and assessed on their implementation of programming.

Currently, 216 DR-TB patients are being treated in TB centres in Osh Province.

On programme indicators:

Since the introduction of an incentive programme, where money is transferred to a TB patient's bank account in order to encourage him or her to maintain treatment and continue examinations, a growth of the number of newly revealed TB cases was observed. Whereas 54 smear positive patients were revealed in the third quarter in 2013, there were 79 people revealed in the third quarter in 2014.



TB grant sub recipients during meeting



Valentina Sorokina - UNDP MBE specialist during visit

The success rate of treating DR-TB patients reported in the third quarter of 2014 totalled 81%, which is higher than the target indicator of 62%.

In 2011 motivational payments, such as the payment of transportation costs and monthly food and hygiene packages, for TB patients were introduced. These measures are believed to have contributed to the positive results reported in the third quarter of 2014.

Implementation of the sub-recipient budget and treatment adherence support for DR-TB patients

In the third quarter of 2014, a total of 335,223 soms were paid to TB doctors, laboratory technicians and regional coordinators and a total of 568,630 soms were paid in the form of motivational payments.

Finally, a total of 96.2% of the agreed funding dedicated to Osh TB Centre was sent to the centre for implementation of projects.



Osh Oblast TB Centre staff during monitoring visit

MALARIA GRANT

The PCR laboratory to become fully operational in the beginning of 2015

According to Dr. Gulnara Abdylidaeva, the Head of the Parasitology Laboratory at DDP&SSES, in August 2014, within the framework of the Malaria Grant funded by the GF, the DDP&SSES's parasitological laboratory received PCR laboratory equipment for parasitic disease detection.



New PCR lab equipments

The full preparation of the PCR laboratory of the DDP&SSES will be completed in December 2014. And the laboratory is expected to be fully operational in the beginning of the year 2015.

According to the estimations by DDP&SSES/MOH, during the malaria epidemiological season (April - October), out of 100,000 patients with fever, more than 41,500 of them from 47 medical entities throughout the country will be tested for

In October 2014, the PCR lab equipment, including a biosafety box and a PCR Real time detection system, were successfully installed. The pieces of equipment were certified by appropriate documents issued by installation engineers.

After the PCR lab equipment was installed, international specialists conducted training sessions for the national counterpart's staff involved in laboratory diagnostics of parasitic diseases.



Gulnara Abdylidaeva - The Head of the Parasitology Laboratory

malaria agents, as well as other parasitic diseases, using the PCR lab equipment.

Thus, the activity of parasitological laboratory will facilitate the identification of all the cases of malaria in order to undertake adequate and timely measure against malaria in the Kyrgyzstan.

Procurement information for October 2014

HIV Grant:

1. The contract for the provision of services of a pharmacist and national management consultant of drugs and medical devices: \$3,709 USD
2. The contract for the supply of mobile credit for sub recipients: \$6,354 USD
3. The contract for the supply of medical products (vacutainers and needles): \$4,512 USD
4. The contract for the supply of furniture for sub recipients: \$6,764 USD
5. The contract for the supply of test systems 4th generation: \$69,654 USD
6. The contract for the supply of autoclaves for the NGO Preventive Medicine: \$23,964 USD
7. The contract for cargo insurance for delivery within Kyrgyzstan: \$2,376 USD
8. Purchased electrical supplies for Family Medicine Centre №6: \$474 USD.
9. Upholstered furniture for the NGO Centre Plus: \$853 USD
10. Implemented delivery of the drug methadone hydrochloride to the Republican Centre on Addictions at the Ministry of Health: \$36,803 USD
11. The contract for the services of internet service providers for UNDP until the end of 2015: \$2,827 USD
12. Purchased ELISA test system for seminars for the NGO Preventive Medicine: \$742 USD
13. A contract for the supply of a deep freeze cooler for the NGO Preventive Medicine: \$23,298.

TB Grant:

- 1) Supplied and installed air conditioners for stores in Chui, Osh, Jalalabad and Batken regional centres to combat tuberculosis: \$2,073 USD
- 2) Ten fire extinguishers for warehouses of regional centres to combat tuberculosis: \$225 USD
- 3) An agreement to purchase an alarm system for the National Reference Laboratory at NTSF: \$553 USD
- 4) A contract for the supply of food and hygiene kits for TB patients at the Republican Psychiatric Hospital in the village Chym Korgon: \$1,493 USD
- 5) A contract for the supply of food and hygiene kits for TB patients in the village DPRB Archaly: \$1,821 USD
- 6) Contracts for the supply of drugs for the treatment of TB treatment side effects: \$8,023 USD

Malaria Grant:

1. Supplied and installed air conditioning in the PCR laboratory: \$697 USD
2. Stabilizers supplied and installed equipment for PCR laboratory: \$762 USD

Information on deliveries for October 2014

HIV Grant:

- Health products and medicines and various goods to AIDS Centres, NGOs and other state institutions: \$ 168,290 USD.
- Informational and educational materials for NGOs: \$ 1,926 USD.

TB Grant:

- Medicines to TB facilities: \$ 30,235 USD
- Various other health products: \$3,885 USD

Malaria Grant:

- Health products and medicines for Department of Disease Prevention and State Sanitary Epidemiological Surveillance and provincial centres: \$ 1,400 USD



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