

Data Sheet

USAID Mission:	Ukraine
Program Title:	HIV/AIDS Prevention and Care
Pillar:	Global Health
Strategic Objective:	121-0328
Status:	Continuing
Planned FY 2006 Obligation:	\$2,176,000 CSH; \$1,938,000 FSA
Prior Year Unobligated:	\$200,000 CSH; \$28,000 FSA
Proposed FY 2007 Obligation:	\$2,176,000 CSH; \$3,068,000 FSA
Year of Initial Obligation:	2004
Estimated Year of Final Obligation:	2008

Summary: This objective aims to reduce transmission of the Human Immunodeficiency Virus (HIV) through the adoption, promotion, and facilitation of protective behaviors, and mitigate the impact of HIV and Acquired Immuno-Deficiency Syndrome (AIDS) on those affected. It seeks to strengthen the delivery of HIV/AIDS information and services, improve the enabling environment, and reduce stigma and discrimination associated with HIV/AIDS. It focuses on prevention, gives priority to local-level programs, and promotes the active involvement of both public and private sectors.

Inputs, Outputs, Activities:

FY 2006 Program:

Program Support (\$395,000 FSA, \$28,143 FSA carryover, \$177,142 CSH, \$200,000 CSH carryover). USAID will provide funds for administrative support, evaluations and assessments, and USAID information technology support.

Reduce Transmission and Impact of HIV/AIDS (\$1,543,000 FSA, \$1,998,858 CSH). In order to cohesively strengthen the delivery of HIV/AIDS information and services, USAID will provide 60% of high-risk groups with preventive information and services in regions of highest HIV prevalence. At the end of the project's first year, it has reached approximately 25% coverage. A broader range of organizations are engaged including community-based (CBOs), faith-based (FBOs), and non-governmental (NGOs). Likewise, USAID strengthened prevention of mother-to-child transmission (PMTCT), and voluntary counseling and testing (VCT) services. These projects also include strengthening community support for HIV-positive pregnant women and integrating PMTCT interventions in prenatal, delivery, and post-partum health services. In target eight oblasts, USAID seeks to achieve a decrease in the rate of infected infants born to HIV-positive mothers with a target of less than 6% transmission by the end of the project. To provide a continuum of care to HIV-affected children, USAID will work with the Ministry of Family, Children and Youth Affairs and the Ministry of Health (MOH) to develop a framework to promote alternative family based care for abandoned HIV-positive children and will build Ukrainian systems and commitment to keep children born to HIV+ mothers within the biological family environment. The overall goal of these projects is to provide broad coverage of HIV services to the most affected groups.

Building a supportive enabling environment for HIV/AIDS program implementation is essential for combating HIV/AIDS pandemic. USAID will assist the MOH in designing a new PMTCT program and VCT protocols. In addition, technical assistance will be provided to the HIV NGO Coalition, the HIV/AIDS monitoring and evaluation systems, Oblast AIDS Coordination Councils, multi-sectoral working groups, and the National AIDS Coordination Council (NCC). Several knowledge-based studies have been conducted in order to further support the enabling environment. This includes the implementation of National Health Accounts in order to determine available financial resources and their distribution for HIV/AIDS. It is also anticipated that in summer 2006 a mid-strategy review will be conducted for USAID/Ukraine's HIV/AIDS Strategy 2003-2008.

Reducing stigma and discrimination toward those affected remains a key for all HIV/AIDS efforts. To address this issue, USAID will continue to promote accepting attitudes towards people living with HIV/AIDS (PLWHA) to reach 80% of the general population in two high prevalence regions. The USAID

program will include education and communication campaigns; peer education; and assistance to engender a supportive legal environment. Additionally, civil society organizations will advance initiatives on behalf of those with HIV/AIDS, to more effectively advocate for their rights, and to affect positive change in their communities.

Implementers: the International HIV/AIDS Alliance, Program for Appropriate Technology in Health (PATH), the All-Ukrainian Network of People Living with HIV/AIDS, John Snow, Inc. (JSI), American International Health Alliance (AIHA), the Academy for Educational Development (AED), Holt International, Doctors of the World, the Futures Group International, PSP-One, The Synergy Project, Partners in Health Reform Plus, International Relief and Development, and The Institute for Sustainable Communities (ISC) (all prime).

FY 2007 Program:

Reduce Transmission and Impact of HIV/AIDS (\$3,068,000 FSA, \$2,176,000 CSH). USAID will increase access to care and support for HIV-positive people, and will expand support groups for HIV-positive pregnant women and mothers by strengthening peer outreach. Another project will extend its activities to additional schools and workplaces. Wide dissemination of new VCT protocols will increase the involvement of NGOs in service delivery. Implementers: the International HIV/AIDS Alliance (prime), PATH (prime and sub), the All-Ukrainian Network of People Living with HIV/AIDS (sub), JSI (prime), AED (sub), International Relief and Development (prime), the Futures Group International (prime), AIHA (prime), Doctors of the World (prime), Holt International (prime), ISC (prime), and Partners for Health Reform Plus (prime).

Performance and Results: USAID's project launched the Participatory Site Assessment, which included the development of the comprehensive package of services and identification of the intervention gaps. Based on the assessment, the project doubled coverage of these services. USAID's PMTCT programs resulted in training for key decision-makers and an increase in the number of health facilities offering PMTCT services. USAID program raised awareness about the needs of HIV-affected children and their families. USAID trained local social service providers to provide psycho-social support. Eleven journalists from the three pilot regions were trained on how to report on families and children affected by HIV/AIDS. USAID prepared a network of 62 master-trainers on HIV/AIDS related stigma and discrimination. The master-trainers trained in turn more than 4,250 individuals. Additionally, 25 TV programs, 13 radio programs, 49 newspaper articles, and 24 websites articles raised ideas of tolerance towards PLWHA. USAID trained 16 lawyers and 28 journalists on HIV/AIDS related stigma and discrimination issues. All of these activities will contribute to increasing accepting attitudes toward PLWHA among 80% of the population in the project sites.

US Financing in Thousands of Dollars

Ukraine

121-0328 HIV/AIDS Prevention and Care	CSH	FSA
Through September 30, 2004		
Obligations	1,475	2,695
Expenditures	0	1
Unliquidated	1,475	2,694
Fiscal Year 2005		
Obligations	2,273	4,656
Expenditures	1,380	1,045
Through September 30, 2005		
Obligations	3,748	7,351
Expenditures	1,380	1,046
Unliquidated	2,368	6,305
Prior Year Unobligated Funds		
Obligations	200	28
Planned Fiscal Year 2006 NOA		
Obligations	2,176	1,938
Total Planned Fiscal Year 2006		
Obligations	2,376	1,966
Proposed Fiscal Year 2007 NOA		
Obligations	2,176	3,068
Future Obligations	0	0
Est. Total Cost	8,300	12,385