

REPUBLIC OF KAZAKHSTAN

**REPUBLICAN CENTER FOR PREVENTION AND
CONTROL OF AIDS**

The first annual report

**On the implementation of the Grant of the Global Fund to
Fight AIDS, Tuberculosis and Malaria**

KAZ-202-G01-H-00

**Assistance and support to safer behavior choices among
vulnerable population groups (injection drug users,
commercial sex workers and youth); assistance and support
to people living with HIV/AIDS**

Reporting period: 1 December 2003 - 31 December 2004

**Developed by the Project Implementation Unit
(PIU)**

February 2005

Almaty

Annual progress report

Donor:	The Global Fund to Fight AIDS, Tuberculosis and Malaria
Principal Recipient:	The Republican Center for Prevention and Control of AIDS of the Ministry of Health of the Republic of Kazakhstan
Country:	Republic of Kazakhstan
Grant Number:	KAZ-202-G01-H-00
Program:	Assistance and support to safer behavior choices among vulnerable population groups (injection drug users, commercial sex workers, youth); assistance and support to people living with HIV/AIDS
Total grant amount for 2 years	USD 6,502,000
Total grant amount for 1 year	USD 2,518,101
Amount disbursed in the 1st year	USD 1,614,571.25
Program starting date:	1 August 2003 / 1 December 2003
Program period:	1 December 2003 / 30 November 2005
Reporting period:	1 December 2003 / 31 December 2004

The proposal of the CCM of the Republic of Kazakhstan was sent to the Global Fund in September 2002. The Project Implementation Unit (PIU) was selected by the Principal Recipient (the Republican Center for Prevention and Control of AIDS) on the competitive basis for the project implementation for 2 years.

The Grant Agreement between the Republican Center for Prevention and Control of AIDS and the Global Fund to Fight AIDS, Tuberculosis and Malaria was signed on the 29th July 2003. подписано 29 июля 2003 года. The aim of the GFATM project is to increase the effectiveness of the National Program on the AIDS control and reduction of the epidemic destructive effects.

The first disbursement in the amount of \$ 637,700 was received on 12 December 2003, and the program started on 1 December 2003.

The second disbursement in the amount of \$ 1,637,454.48 was received on 21 July 2004, the third - USD 242,946.50 - on 11 October 2004.

The following activities are envisaged under the GFATM grant in Kazakhstan:

1. Reduction of vulnerability and behavioral risks among the injection drug users (IDUs), commercial sex workers (CSWs), and men having sex with men (MSMs);
2. Improvement of knowledge and awareness of youth for healthy behavior;
3. Provision of care, treatment and psychosocial support to people with HIV.

In accordance with the Grant Agreement provisions stated in Annex A, the following was done in order to receive the 1st disbursement:

- Opened a bank account into which Grant funds would be disbursed and KZT account from which the Principal Recipient should draw funds to implement the Program. Description of the policies and procedures that will apply to the two bank accounts, including arrangements under which US dollars disbursements will be converted to Kazakh local currency, was sent to the Local Fund Agent;
- A letter signed by the Authorized Representative of the Principal Recipient setting forth the name, title and authenticated specimen signature of each person authorized to sign disbursement request under Article 6 of the Standard Terms and Conditions of the Agreement, was submitted to the Global Fund.
- In accordance with Resolution # 1201, dated November 29, 2003 of the Government of the Republic of Kazakhstan, the Global Fund was included into the list of the international and governmental organizations, foreign and non-governmental public organizations and funds rendering grants.
- Project Implementation Unit (PIU) was established under the Republican Center for AIDS Prevention and Control, consisting of 6 members:

In accordance with the Grant Agreement provisions stated in Annex A, the following was done in order to receive the 2nd disbursement:

- The Procurement Plan of the PR was approved;
- The Monitoring and Evaluation Plan was approved;
- Agreement with the independent audit company "AltynAudit" was signed for carrying out of the PR financial activity audit.

The GFATM grant implementation during the first program year.

The annual report covers the period of the first program year from 1 December 2003 till 31 December 2004.

The Project Implementation Unit implemented the grant in accordance with the guidelines of the Global Fund, and current legislation of the Republic of Kazakhstan.

During the grant implementation period there were 2 CCM meetings, with new members each time.

The basic principles of the activities under the GFATM project in Kazakhstan were defined at the CCM meeting held on 22 September 2003.

The following decisions were taken at the CCM meeting on 10 November 2004:

- To approve the work plan of the Global Fund project for the 2nd year of implementation from 1 December 2004 till 30 November 2005;
- To approve the staff of the technical group under the CCM for the GFATM project implementation;
- Technical group for the GFATM project implementation to make a decision on the grant proceeds utilization saved on the first program year implementation;
- The Ministry of Justice together with the Republican Center for Prevention and Control of AIDS to develop the draft application “HIV and tuberculosis in prisons” to the Global Fund for future grant.

Annual report on the GFATM grant implementation was developed in accordance with the form stated in the country proposal approved by the Global Fund.

Goal 1. Reduction of vulnerability and behavioral risks of injection drug users, commercial sex workers and men having sex with men;

For the purposes of the program activity the Republican Center for Prevention and Control of AIDS concluded contracts with twenty Regional AIDS Centers and twenty three non-governmental organizations (NGO). The Commission with participation of the international and local NGOs selected the grant sub-recipients on the competitive basis.

The pre-grant evaluation of the organizations applied for participation in the GFATM project implementation took place. NGOs were selected on the basis of the following criteria:

- Organization lifetime (not less than 1 year);
- Experience in the cooperation with the international organizations on the implementation of the similar projects;
- Availability of the qualified staff in preventive programs for the vulnerable groups (experience, number of years);
- Financial stability of the organization, sources of funding;
- Relations of the organization with governmental bodies and other NGOs;
- Experience in preventive programs organization among IDUs, CSWs, MSMs and PLHA (not less than 1 year);
- Type of the target groups involved in such preventive programs, brief description of the services rendered under the implemented projects on the preventive programs;

- Using by the organization of trust points, friendly clinics, outreach (place and number of permanent facilities rendering medical services);
- Availability of safe storage facilities for goods and medicines;
- Methods of syringes utilization, procedures of syringe exchange;
- Organization of work of volunteers, social workers and others involved in the project
- Experience in the project monitoring and evaluation, indicators used, coverage target groups during recent years, any progress;
- Letters of recommendation.

Activity 1. Creation of supportive legal and social policy environment for vulnerable population groups

For the purposes of revision of the current legislation and normative acts of the Republic of Kazakhstan, elimination of PLHA discrimination, publication of more supportive and positive articles in the mass media regarding vulnerable to HIV populations, and changing of the negative attitude to PLHA the following was done:

2 national seminars were held with participation of the members of the Parliament of the Republic of Kazakhstan (17 people) and representatives of the executive bodies: ministries and agencies involved in the implementation of the National Program of AIDS epidemic counteraction (30 people). The representatives of the Ministries of Health, Education, Internal Affairs, Justice, Defense, Information, Labor and Social Protection took part in these seminars. The organizer was the AIDS Center of Astana city.

Indicator category	Indicator description	Plan		Aim/ result	1 quarter	2 quarter	3 quarter	4 quarter	Year 2 Aim
		Value	Year						
1	Number of people trained	0	2002	Aim	0	0	20	40	160
				Result	0	7	7	47 (117,5%)	

Activity 2. Improve knowledge and awareness of professionals and representatives of non-governmental organizations

For the purposes of harm reduction strategy development, assistance to safer behavior among vulnerable population groups, improvement of technical skills of NGOs and other organizations working with the vulnerable populations:

16 regional seminars were held with participation of the representatives of Health Departments, Akim (regional government bodies), staff of trust points, friendly clinics, Regional AIDS Centers, law machinery, Health Service, NGOs, volunteers, as well as narcology experts, and specialists in skin and venereal diseases. Organizers of these seminars were the Regional Centers for AIDS Prevention and Control.

Indicator category	Indicator description	Plan		Aim/ result	1 quarter	2 quarter	3 quarter	4 quarter	Year 2 Aim
		Value	Year						
1	Number of people trained	0	2002	2002	512	1024	1024	1024	1904
				2002	461 (90%)	932 (91%)	1057 (103,2%)	1057 (103,2%)	

Activity 3. Provide HIV/AIDS education and information on the personal protection means (condoms, needle exchange program and disinfectants) for vulnerable populations

For the purposes of IDUs, CSWs and MSMs coverage with preventive programs, provision of higher level of knowledge on safe injection and sexual practices among vulnerable populations, and increasing of access to the personal protection means:

IEC materials were developed and issued for every vulnerable group (IDUs, CSWs and MSMs) in the number of 34085 units against 34000 planned (100,3%). Brochures «HIV and Drugs» were issued for IDUs (24000 units), «For You» - for CSWs (5085 units), for MSMs - «Safe sex for unconventional guys» (5000 units). Brochures were delivered to the grant sub-recipients (Regional AIDS Centers and NGOs) in December 2004.

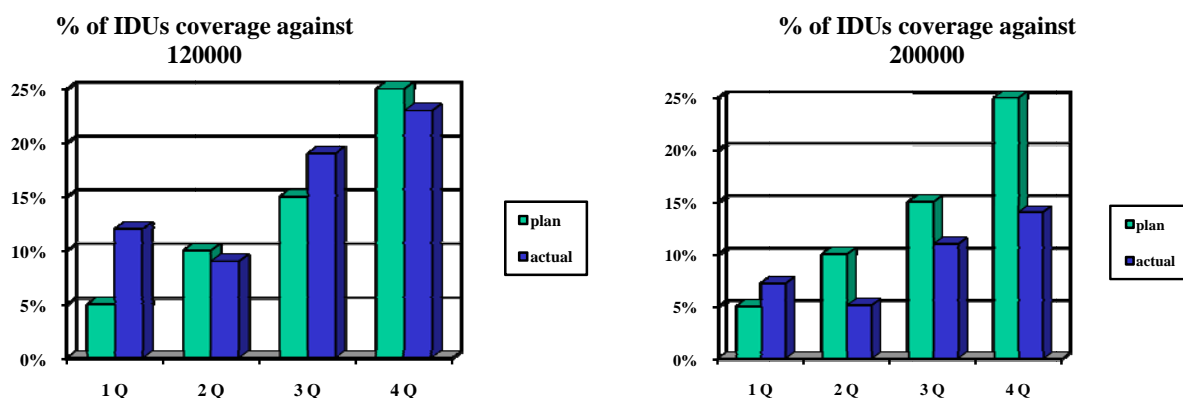
440 volunteers paid under the GF grant were hired for the work on vulnerable populations coverage with preventive programs. IDUs were covered with the preventive programs under funding of the Global Fund and local budget as well as under other projects under the implementation in the country.

7200500 syringes of 2 ml, 5 ml and 10 ml were purchased and delivered to the Regional AIDS Centers and NGOs in September 2004. As of the end of 2004, 1773592 syringes were distributed among IDUs, it is 24,6% of the total number of syringes purchased for the GF funds.

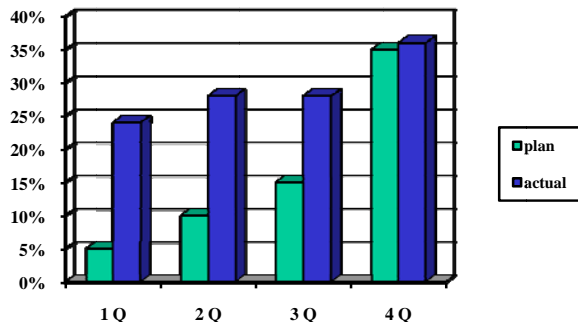
5 tons of sodium hypochlorite were supplied to IDUs-prisoners in the penitentiary settings in 5 regions of the country.

Memorandum of Understanding was signed with the UNFPA on the 19th of February 2004, on procurement and supply of 7152500 condoms; original invoice was sent to the Principal Recipient on the 10th September 2004, and was paid up (100%) in accordance with the Memorandum terms on 27 September 2004. In spite of the fact that the Principal Recipient in its Technical Specifications as of 5 February 2004, emphasized the requirement of mandatory registration of goods in the Republic of Kazakhstan, the UNFPA purchased the unregistered condoms from TTK LIG ltd (India). Pending positive resolution of the registration problem the supply of goods to the RK is put off.

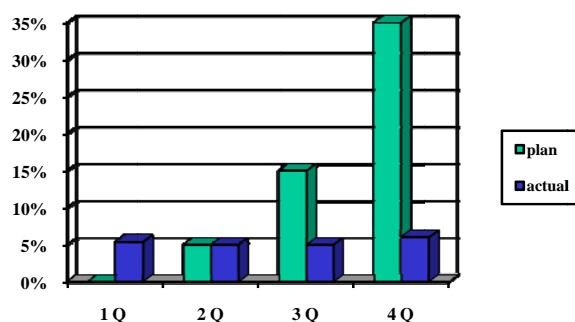
CSWs and MSMs were covered with preventive programs under the state budget and other programs under the implementation in the country. The coverage of MSMs did not reach the planned level due to difficult of access to this group.



% of CSWs' coverage



% of MSMs' coverage



A calculation of coverage was made on the basis of the assessed number of vulnerable populations representatives, provided by the RC AIDS. The IDUs' coverage with preventive programs will be re-planned for the following project years, because as of the beginning of the project implementation the assessed number of IDUs was 120000; as of the beginning of the second half year their number was already 200000.

Indicator category	Indicator description	Plan		Aim/ Result	1 quarter	2 quarter	3 quarter	4 quarter	Assessed number (QSA)
		Value	Year						
3	% of IDUs covered with preventive intervention	5%	2002	Aim	5% 6000	10% 12000	15% 18000	25% 30000	120000/ 200000
				Result	12% / 7,2% 14351	9% / 5,1% 10252	19% / 11% 22767	23% / 14% 27430	
3	% of CSWs covered with preventive intervention	5%	2002	Aim	5% 1000	10% 2000	15% 3000	35% 7000	20000
				Result	24% 4790	28% 5612	28% 5612	36% 7195	
3	% of MSMs covered with preventive intervention	0%	2002	Aim	0% 1735	5% 1590	15% 4770	35% 11130	31800 / 41300
				Result	5,4% / 4% 1735	5% / 3,8% 1550	5% / 3,8% 1550	7,9%/6% 2500	

* В таблице плановые индикаторы даны от первоначального оценочного числа ПИН (120000), МСМ (31800).

Activity 4. Improve the accessibility and acceptability of STI treatment

To increase attendance of STI clinics by youth, IDUs, CSWs, MSMs for getting free and accessible medication, early diagnostics, appropriate treatment and to improve control over STI epidemic:

9 friendly clinics under the AIDS Centers were established and equipped in 9 regions of the country.

Medicines (9types) for STI treatment were supplied to 12 Regional AIDS Centers to allow functioning of friendly clinics (equipped under the GF grant and state budget funding).

7 seminars for friendly clinics staff on syndrome STI treatment took place. The organizers were the Regional AIDS Centers.

3120 patients received syndrome STI treatment.

Indicator category	Indicator description	Plan		Aim/ Result	1 quarter	2 quarter	3 quarter	4 quarter	Year/ Aim
		Value	Year						
2	Number of functioning friendly clinics	0	2002	Aim	0	8	8	8	15
				Result	0	0 (0%)	9 (112,5%)	9 (112,5%)	
1	Number of trained friendly clinics' staff	0	2002	Aim	0	100	140	140	260
				Result	0	96 (96%)	142 (101,4%)	142 (101,4%)	
3	Number of patients who received the syndrome STI treatment	0	2002	Aim	1800	2400	3000	3600	7600
				Result	1449 (80,5%)	2774 (115,6%)	2774 (115,6%)	3120 (86,7%)	

Activity 5. Introduce and then disseminate the use of substitution therapy for IDUs

The RC AIDS concluded the contract with "Rusan Pharma" on procurement of 5 kg of methadone. The work on its state registration is underway.

However the matter of substitution therapy and its analogues use in Kazakhstan has not been resolved yet. In spite of continual negotiations with all interested parties (MoH, MIA) responsible for substitution therapy use authorization, methadone is not acceptable even for HIV infected IDUs who need ARV treatment.

Indicator category	Indicator description	Plan		Aim/ Result	1 quarter	2 quarter	3 quarter	4 quarter	Year/ Aim
		Value	Year						
2	Number of IDUs who regularly visit the methadone clinics	0	2002	Aim	0	0	30	100	100
				Result	0	0	0	0	

Activity 6. Strengthen the evaluation capacity of the government health service

For the strengthening and effective control and evaluation of HIV/AIDS programs results, the RC AIDS responsible for the monitoring and evaluation of all HIV/AIDS programs in the country was equipped with 5 personal computers for data collection and analysis, on the GF funds.

5 cars were purchased and delivered to 5 regions of the country for carrying out of epidemiological surveys.

1 national seminar for 100 specialists from organizations dealing with the National Program monitoring and evaluation, and 1 national seminar for 50 AIDS Centers specialists were held. The organizer was NGO "Alliance-Asia", one of the sub-recipients of the Global Fund grant.

Another sub-recipient – Public Opinion Research Center carried out 2 public-opinion polls: 1) among schoolchildren on knowledge of HIV/AIDS problem: and 2) attitude of the general population to people living with HIV/AIDS. Further sociological surveys started in February 2004 in accordance with the plan. Final report on sociological survey on HIV/AIDS knowledge among schoolchildren was submitted to the RC AIDS in April 2004. Final report on sociological survey on attitude of the population to PLHA was submitted to the RC AIDS in May 2004.

At the cost of GF grant on 6-10 October 2004 a meeting of the work group with the participation of the representatives of the Ministry of Health RK and the international organizations such as UNAIDS, CDC and PSI was held on the development of the national system for monitoring and

evaluation of different AIDS epidemic counteraction programs under the implementation in the country. The work group developed draft recommendations on M&E.

Indicator category	Indicator description	Plan		Aim/ Result	1 quarter	2 quarter	3 quarter	4 quarter	Year/ Aim
		Value	Year						
1	Number of trained AIDS Centers in M&E of HIV/AIDS programs	0	2002	Aim	0	0	50	50	50
				Result	0	0	50 (100%)	50 (100%)	
1	Number of trained key staff involved in M&E of HIV/AIDS programs	0	2002	Aim	0	100	100	100	200
				Result	0	0	96 (96%)	96 (96%)	
3	Number of sociological surveys	0	2002	Aim	0	2	2	2	4
				Result	0	2 (100%)	2 (100%)	2 (100%)	

OBJECTIVE 2. Provide youth with the knowledge and awareness to improve their healthy behavior

Implementation of this component will allow to provide the following:

- Considerable increase in realizing of HIV/AIDS problems among youth;
- Possible hard drugs slowdown among youth;
- Reduction of prevalence of curable STIs;
- Young people will have more incentives for testing and early treatment of AIDS.

Activity 1. Introduce HIV/AIDS/STI and drug use prevention topics in the basic curricula of all educational institutions.

To provide students and teachers with good knowledge and understanding of HIV/AIDS/STI problems, as well as to strengthen responsibilities and adherence of educational system to HIV/STI prevention:

The RC AIDS' sub-recipient, the National Center for Healthy Lifestyle, conducted 4 interregional seminars for the staff of the educational settings, schools and post-graduate institutes.

In December 2004 the following literature was published and delivered to the regional departments of all educational settings in all regions

- Small books for schoolchildren of 7-10 years old : «Adventures in the mysterious world» - 186120 units.
- Booklets for schoolchildren of 11-17 years old «Why should we talk about AIDS» - 341664 units.
- Booklets for professional school students «Responsible behavior – safe protection against HIV/AIDS» - 44000 units.
- Booklets for students of the higher education settings «HIV/AIDS without myths and illusions» - 56000 units.
- Methodical recommendations for the teachers on HIV/AIDS education on the basis of living skills «Knowledge necessary for HIV/AIDS prevention» - 19317 units.
- Total number of IEL is 647101 units out of 641200 planned (101%)

Indicator category	Indicator description	Plan		Aim/ Result	1 quarter	2 quarter	3 quarter	4 quarter	Year/ Aim
		Value	Year						

1	Number of trained staff of the educational departments, schools and post-graduate facilities	0	2002	Aim	0	80	80	80	480
				result	0	80 (100%)	80 (100%)	80 (100%)	
1	Number of IEL distributed	0	2002	Aim	0	0	0	641200	1923600
				Result	0	0	0	647101 (101%)	

Activity 2. Provide appropriate HIV/AIDS and SDI education and information targeted at youth

For the more effective peer education of youth, better knowledge and understanding by youth of HIV/AIDS/STI problems, increasing the use by youth of condoms and other means of safe sex:

The RC AIDS sub-recipient, the National Center for Healthy Lifestyle, conducted one national seminar for 40 participants from the education and health system, journalists and NGOs.

In December 2004, 50000 posters “How is it important to be protected”, 2000 audio- and video-cassettes and CD-ROMs with materials on HIV/AIDS/STI and drugs use prevention, were produced and distributed among the educational departments of all regions of the country.

Indicator category	Indicator description	Plan		Aim/ Result	1 quarter	2 quarter	3 quarter	4 quarter	Year/ Aim
		Value	Year						
1	Number of trained	0	2002	Aim	0	40	40	40	80
				Result	0	40 (100%)	40 (100%)	40 (100%)	
1	Number of IEL distributed	0	2002	Aim	0	0	35%	100% 55000 units	111000 units
				Result	0	0	0	102% (56000 units)	

Objective 3. To provide treatment, care and psycho-social support to people with HIV

Activity 1. Create a supportive environment, eliminate discrimination and segregation against people with HIV.

To improve the social environment for PLHA, to change negative attitude to PLHA of the population and professionals dealing with HIV/AIDS, and integration of PLHA to community, a mass media campaign was planned under the GF project. For these purposes a company «GALA TV» was selected on the competitive basis. In December 2004, two talk-shows were held on the central TV channel “Khabar” covering all regions of the country. In accordance with the campaign plan, tree radio-programs, distribution of 2 radio-jingles and 2 video-films, PR-campaign and a TV short film on PLHA problems – are planned for the 1-2 quarters of 2005.

Activity 2. Develop standardized clinical management of people with HIV

With the assistance of experts and technical partners of the RC AIDS – WHO, UNAIDS – the National periodical protocols of diagnostics, treatment and care at HIV infection and AIDS were developed (approved by the MoH Order dated 12 February 2004).

One national and 5 interregional seminars on HIV/AIDS treatment protocols introduction were held for the specialists responsible for the treatment of AIDS patients. The organizers were the regional AIDS Centers.

Indicator category	Indicator description	Plan		Aim/Result	1 quarter	2 quarter	3 quarter	4 quarter	Year/Aim
		Value	Year						
1	Number of trained specialists	0	2002	Aim	0	125	125	125	125
				Result	85	125 (100%)	125 (100%)	125 (100%)	

Activity 3. Supply HIV-infected people with antiretroviral treatment

To provide an access to antiretroviral treatment for all people with HIV/AIDS, and diagnostics for PLHA to be treated:

The regional lists of patients who need the three-component HAART were developed; each patient has his individual code for confidentiality observance. The lists of patients are included into the centralized database.

On 30 July 2004, a contract was signed with the company “RANBAXY Laboratories, Ltd.” for procurement of genetic ARV drugs of 5 types. Three of them are already produced and ready for delivery to Kazakhstan allowing starting treatment of 135 patients. However, the treatment was delayed due to the fact that two out of three drugs were not registered with the Pharmacy Committee of the Republic of Kazakhstan, although the registration period prescribed by the normative acts already expired.

In July 2004 the number of patients who need ARV was reassessed, and due to this fact the Expert Group on 23.07.04 took a decision to include additional 100 patients to 200 planned for ARV in the first program year. Additional list consists of patients registered and included into the centralized database. Patients selected are in line with the selection criteria and agree to observe the treatment regimen. Annex to the main contract with “RANBAXY Laboratories, Ltd.” was signed for procurement of additional number of ARV drugs for the treatment of 300 patients.

At the same time 58 patients receive 3-components HAART out of the state budget.

Besides, ARV therapy is provided to all pregnant women in Kazakhstan with HIV in order to prevent HIV transmission from mother to child. As of the end of 2004 77 pregnant women with HIV and 70 newborn children received preventive treatment under the budget funding.

The Government assigns the budget funds for provision of palliative treatment of people with HIV/AIDS including opportunistic infections treatment.

5 cito-fluorometric analyzers were procured from “Becton Dickinson” company for determining of CD4 cells and delivered to Almaty, as well as the test-systems for determining the viral load and provision of the necessary diagnostics level for the patients who receive 3-component HAART. The equipment and reagents are targeted at fitting out of laboratories under the AIDS Centers in five regions where the patients will receive HAART.

Indica	Indicator description	Plan	Aim/	1 quarter	2 quarter	3 quarter	4 quarter	Year/
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tor category		Value	Year	Result					Aim
3	Number of patients under the HAARVT	0	2002	Aim	0	0	100	200	400
				Result	0	0	0	58 (29%)	

Monitoring

Monitoring and evaluation of the Global Fund grant implementation is carried out in compliance with the National monitoring and evaluation system. In accordance with the indicators for the GFATM program implementation, the Principal Recipient shall collect and analyze data on the basis of reporting forms developed and approved by the Commission for selection of the GF grant sub-recipients. Collection of the information on the program activity is carried out on the quarterly basis, financial and resources distribution monitoring is carried out on monthly basis. This information is submitted to the Principal Recipient by the contracted NGOs, Regional AIDS Centers, NHLS and PORC. The international organizations such as UNAIDS, CDC, UNESCO and WHO assist in the improvement of M&E potential.

For the creation of the database and information analysis the Epi info, developed by the CDC was used. Installation of the Epi info in the Regional AIDS Centers was made in September 2004.

Epi info is a series of software for Microsoft Windows 95, 98, NT, 2000, and is intended for its use by the professionals in health sector for the database management, creation of common databases and statistical applications. Epi info is available for all and can be loaded in Internet.

Cooperation with the Local Fund's Agent

LFA in Kazakhstan –KPMG-Jannat renders significant assistance to the Principal Recipient in the GFATM project implementation through assistance in the financial management, procurement, and program monitoring and evaluation.

In January 2005 the KPMG carried out the program activity review of the GFATM grant sub-recipients: AIDS Center of Astana city, AIDS Center of Karaganda region and NGO “Umit” in Karaganda city. LFA reviewed the sub-recipients reporting documentation, and made recommendations on the improvement of weak spots in the project implementation.

Conclusion

Introduction of the project of the Global Fund to Fight AIDS, Tuberculosis and Malaria in Kazakhstan initiated the:

1. development of the national HIV/AIDS treatment protocols (approved by the Order of the Ministry of Health of the RK, dated 12.02. 2004 , № 150);
2. approval of the Regulations on the trust points activity for IDUs, order of the MoH RK dated 9.03.2004, № 228;
3. approval of the Regulations on the cabinets of anonymous testing and psycho-social consulting, Order of the MoH RK, dates 9.03.2004, № 227;
4. approval of the friendly clinics activity under the AIDS Centers, Order of the MoH, dated 29.03.2004, № 295;
5. development of the draft unified national monitoring and evaluation system for all HIV/AIDS programs implemented in the country, by the work group consisting from the

national and international experts, in accordance with the Order of the MoH RK, dated 02.09.2004, № 667;

6. In the GFATM project implementation the NGOs together with the regional AIDS Centers and other interested parties were attracted for the following activity:
 - Preventive work with IDUs, CSWs and MSMs;
 - Development of the informational and educational materials aimed at behavior changes and increase of HIV/AIDS knowledge level among targeted groups
 - Improvement of peer education;
 - Participation in mass media campaigns on forming of tolerable attitude of the population towards the PLHA and target groups;
 - Participation in focus-groups activity on the selection of the most appropriate goods for the end users;
 - Participation in the organization of technical tests of goods supplied;
7. 1627 people out of 1595 planned were trained in the first year of implementation, which is 102%;
8. the vulnerable groups representatives received an access to free STI syndrome treatment in the friendly clinics equipped under the AIDS Centers;
10. Coverage of IDUs with information, education and means of personal protection is 23% out of 25% planned for the 1st year of the project implementation, which is 92%.
11. Coverage of CSWs with information, education and means of personal protection is 36% out of 35% planned for the 1st year of the project implementation, which is 103 %.

The implementation of the Global Fund project during the first year was hampered due to the following problems:

1. Absence of the coordinating CCM role. During the whole GF grant implementation period there were only two CCM meetings: on 22 September 2003 and 10 November 2004, each time with new members. That was why the problems arisen in the course of the project implementation were not resolved in timely and adequate manner.
2. ARV treatment of 200 AIDS patients was not started in the 1st program year due to the slow state registration procedure of ARV generics of RANBAXY. The time fixed by the normative acts for registration is up, but there is still no positive decision.
3. The matter of substitution methadone therapy introduction is not resolved so far, in spite of the continual negotiations with all interested authorities (Ministry of Health RK, Ministry of Internal Affairs) responsible for permission to the substitution therapy introduction. Methadone is inaccessible even for HIV-infected IDUs to be treated. The matter of substitution therapy geographical expansion for the purposes of HIV infection prevalence is not resolved yet.
4. Coverage of CSWs and MSMs with preventive intervention was carried out under the state budget funding and other projects implemented in the country, since the delivery of condoms under the grant proceeds was not carried within the planned period.
5. Coverage of MSMs with preventive intervention will be re-planned in the near future due to the difficult of access to this group.