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		Date\дата: 28.06.2022 г.
1	GENERAL Information/ Основная информация:	UNDP GF Program supports the implementation of government programs on HIV and TB and helps national institutions to implement a comprehensive set of measures to ensure access to diagnosis and treatment of HIV and TB.
	a) Mission date(s)/дата миссии	29 May – 1 June 2022
	b) Mission member(s)/члены миссии	Inga Babicheva, HIV&TB Coordinator\Deputy Programme manager
	c) Mission to /миссия куда	NGO Zdorovoe pokoleniie, Jalal-Abad AIDS Center, Jalal-Abad TB Center, NGO Plus Center
	d) Purpose of the Mission/цель миссии	NGO Zdorovoe pokoleniie – discussion with management and staff of NGO on program results in 1 st Q of 2022, measures to be undertaken to improve programme results and collaboration with JA AIDS Center, capacity development, meeting with clients Jalal-Abad AIDS Center – discussion on ART adherence and measures to be undertaken to improve the collaboration with local NGOs Jalal-Abad TB Center – outpatient treatment, problems in the implementation of National TB programme NGO Plus Center – working issues of case management approach implementation, mobile team, reporting forms, etc.
	e) Names, titles of individuals met during the mission/ Имена, имена лиц, встречающихся во время миссии	Heads and staff members of NGO Zdorovoe pokoleniie, NGO Plus Center, Director of Jalal-Abad AIDS Center, Director of Jalal-Abad TB Center, MDR Coordinators JA TB Center, M7E specialist of JA TB Center Osh, PLHIV (clients of NGO Zdorovoe pokoleniie)
	FSVITR distribution list/список рассылки	Itana Labovic, Baktygul Almerekova, Iuliia Aleshkina

II DESCRIPTION OF MISSION ACHIEVEMENTS/TASKS COMPLETED/ ОПИСАНИЕ ДОСТИЖЕНИЙ МИССИИ / ЗАДАЧИ ЗАВЕРШЕНО:

29 May 2022 NGO Zdorovoe pokoleniie

During the meeting with NGO staff and management the following issues were raised:

- A long-term conflict with the leadership of the ZHAIDS Center, for which the NGO does not see any reason and does not understand what the real problem is. Many attempts were made by NGOs to establish cooperation, both in this grant and in previous periods, but all attempts were unsuccessful. To implement the agreement with UNDP in 2021, a doctor from the AIDS Center was recruited to achieve the goals, however, AIDS Center's director does not allow him to provide lists of LTFU, non-adherent patients, on the basis of which the organization's work on the PLHIV component should be based, explaining that that the tracking database is out of work. The NGO hopes that this problem will be solved with the help of the CCM members and UNDP.
- Unfriendly attitude towards PLHIV from doctors and nurses of AIDS Center, with elements
 of stigmatization. Doctors do not want to prescribe ART, citing the fact that patients will
 not take treatment anyway. There is a frequent change of treatment regimens, which does
 not contribute to the development of adherence.
- Problems are reflected in the achievement of indicators for the 1st quarter, the organization was supposed to cover 155 people, but only 50 were covered
- Last year, NGOs received lists of PLWH to work with, but 70% of them are non-existent, employees spent so much effort and time, and the result is zero. It turns out that the AIDS center does not have up-to-date information that PLWH have left, may have died, etc. Based on the work done, the AIDS center was provided with complete information on the lists, we hope that they will add this information to their lists for further work.
- The FMC notes a very low level of knowledge of family doctors on HIV issues, in general, there is no understanding of the problems of PLHIV, their needs this is reported by the clients of the organization
- There were cases of disclosure of HIV positive status in the FMC during the conduct of the epidemiological investigation, posttest counseling, which neighbors and strangers can see and hear

During a meeting with NGO clients and management, the following was expressed by them:

- Gratitude to the organization for support, employees for their sympathy, readiness to help, their moral and psychological help.
- Gratitude for the participation of children in summer camps
- Frequent change of ART regimens without explaining the reasons, lack of any counseling on HIV, ART, adherence to USM and AIDS center
- Rude, unfriendly attitude on the part of the doctors of the AIDS center

30 May 2022 Jalal-Abad AIDS Center

At a meeting with the leadership and doctors of the AIDS Center, issues of interaction with NGOs were raised, in particular, issues raised earlier in the Healthy Generation NGO were discussed:

• Interaction with NGOs – the importance of interaction, the possibility of using the resources of NGOs to work with PLHIV. The director of the AIDS center expressed her lack of understanding of the problem, noted her openness to cooperation and understanding of the tasks facing NGOs and that NGO resources can be used to achieve common goals, for example, a mobile team supported by NGOs is also used for M&E visits, drug delivery, counseling of patients living in remote regions. The director was invited to hold a meeting with all interested and involved parties in order to update the issue of HIV infection, the problems of the center, etc.

- •Rudeness, lack of interest of the employees of the center the director announced that she knows these problems, a conversation was held with the employees, she hopes that the situation will improve
- •Doctors in FMCs are a big problem, despite training, certification, the level of staff turnover remains high, the center does not have time to train. Training on new clinical protocols is expected with the support of the CDC, we will use this opportunity to meet with doctors again and discuss issues of attitude towards patients, the need to take into account the needs of patients, their social needs
- •The practice of conducting post-test counseling leaves much to be desired, it is necessary to continue to work with this service, at least to ensure confidentiality, the staff of the center cannot participate in every epidemiological investigation.
- •Issues of frequent changes in ART regimens the doctors of the center make all appointments in agreement with the doctors of the Republican AIDS Center. A phone call was made to the doctor of the RCAIDS, she confirmed that the change or appointment of schemes occurs only on her recommendation, when prescribing, she follows only the clinical protocol and considers the availability of stocks of medicines. Since there were complaints from PLHIV about not understanding why the schemes were changed, it became clear that patients are not being given quality counseling, if PLHIV were informed about the reasons, they would be committed. Therefore, this issue was discussed with the doctors of the AIDS Center, they received assurances that further counseling will be strengthened and they will do their best to fully inform about their state of health, forecasts, admission rules, etc.
- •Non-functioning of the electronic tracking database yes, Republican AIDS Center could not fix the problem for a long time, the database started working only a few days ago.

Separately, the director voiced the need to train doctors at least at the center in the basics of psychology for counseling PLHIV.

Jalal-Abad TB Center

Issues discussed:

- Expansion of outpatient care in the WLCBT the percentage is very low, no more than 6%, although the country target for 2021 is 23% and for 2022 is 32%. The director explained that many patients stay until the end of treatment because they have comorbidities or side effects. Even in the case of sensitive TB, patients are sometimes treated for 4-6 months. CCM Members expressed the opinion that in order to save beds, medical records are made, but in fact, patients are not in the hospital, this is practiced. The Director very emotionally rejected this opinion regarding her center. However, when examining the MDR department, it turned out that 2 wards are completely empty, despite the statements of the head that the department is full, and the patients who are not in the ward are on a walk.
- Reducing the number of new cases detected in 2020-2021 it is necessary to strengthen
 the work with directors of FMCs to identify cases. The director stated that, unfortunately,
 she has no influence on the phthisiatricians in the FMC, especially on the directors of the
 FMC.
- The warehouse of medicines was inspected, no violations were found. 1 June 2022

NGO Plus Center

Due to the fact that in 2022 case managers who previously worked under the NCP were transferred to NGOs, it became necessary to hold a general meeting, establish administrative and program processes, get to know all employees, and discuss pressing issues of implementing the organization's activities. The following issues were discussed at the meeting:

- UNDP explained why the decision was made to include case managers in Batken and Jalal-Abad regions under the management of NGOs. The new case managers expressed their joy that now they will receive assistance from the organization, training, exchange of experience, they are also ready to share their experience, which, they are sure, will also be useful to the organization, since the situation in the regions is slightly different, so the approaches in jobs vary and sharing experiences can be very helpful.
- •Staff expressed the need for training on many issues counseling, rights, TB/MDR-TB, etc.
- Employees noted that the nurses responsible for video DOT have a minimum of knowledge on the implementation of this method, because of this they refuse to transfer patients to video NCL, although in fact they give patients drugs on hand for long periods
- •There is a need to formalize the possibility of issuing long-term anti-TB drugs with a mandatory controlled approach both for external migrants and for patients receiving treatment in their own FMC. UNDP noted that it has already started this work with the NCP, in principle, doctors also welcome this initiative. Since they understand that this will facilitate treatment for the patient and increase his chances of completing treatment with a favorable outcome.
- •It is necessary to make a summary for patients in several languages so that they can take with them and read at home.
- •A wish was expressed to have vests and backpacks for employees of the organization with the emblem of the organization, which will increase the viability and raise the status of case managers
- •The need to introduce the services of new case managers into the database was discussed, the NGO welcomes this approach, which will allow receiving data for the report automatically
- BRIEF RECOMMENDATION OF NEXT STEPS/FOLLOW-UP ACTIONS AND RECOMENDING STAFF/UNIT TO FOLLOW-UP (TO BE ADDRESSED TO SSU, THEN TO RELEVANT UNIT OR RR/SMT)/ КРАТКАЯ РЕКОМЕНДАЦИЯ СЛЕДУЮЩИХ ШАГОВ / ПОСЛЕДУЮЩИХ ДЕЙСТВИЙ И РЕКОМЕНДАЦИИ СОТРУДНИКОВ / ЕДИНИЦ ДЛЯ ПОСЛЕДУЮЩИХ МЕРОПРИЯТИЙ: NGO Zdorovoe pokoleniie
 - It is necessary to formalize the process of interaction with the AIDS Center, to formalize official correspondence, in which to state requests, shortcomings of work, to keep minutes of meetings with the leadership of the AIDS Center
 - To regularly inform the AIDS center about the work carried out with conclusions, suggestions
 - CCM and UNDP hold a meeting at the regional level with the involvement of all stakeholders in order to draw attention to the problem of HIV infection, PLHIV and NGOs

Jalal-Abad AIDS Center

• UNDP - to find an opportunity to train primary care physicians on stigma, discrimination, patients' rights

Jalal-Abad TB Center - no recommendations

NGO Plus Center

- UNDP to consider the possibility of conducting training for case managers, nurses using video DOT
- •UNDP continue to work with the National Program for the Expansion of Outpatient Care, video DOT
- •UNDP already has a developed leaflet, which may need to be updated and printed, provided to NGOs
- •UNDP to consider the possibility of providing branded products to the organization to enhance visibility.

Rationale/ Action
Обоснование /действие

Responsible staff member/Unit

Ответственный сотрудник /

подразделение ТВ СООК ДОАТUR

I. Babicheva, HIV TB Coordinator Deputy

Programme manager 6 E R