

National Strategic Plan of Action for HIV/AIDS Prevention in Georgia

2003-2007

(Budget total – estimated 15,408,653 USD)

The Overall Goal of the NSPA:

To reduce HIV/AIDS epidemic spreading in Georgia through development and implementation of effective control and prevention interventions in the high priority areas identified by the HIV/AIDS situation analysis.

Background:

Georgia is among the countries with relatively low HIV/AIDS prevalence but high potential risk for development of wide spread epidemic. By September 1, 2002 total of 320 HIV cases have been registered officially in Georgia. The prevalence and incidence of HIV/AIDS have progressively increased over the last 6 years with 8 HIV positive cases reported in 1996, 21 in 1997, 25 in 1998, 35 in 1999, 79 in 2000 and 93 in 2001. In January-September 2002 267 new HIV positive cases have been registered officially. HIV/AIDS incidence rate increased from 0.16 (per 100,000 population) in 1996 to 1.82 in 2001. The prevalence rate was also substantially increased. The country witnessed 15-fold increase in the disease prevalence - from as low as 0.37 (per 100,000 population) in 1996 to 5.68 by September 2002.

However, the reported cases do not reflect the actual situation in the country. According to the national and international experts' estimates the current number of HIV/AIDS cases in Georgia exceeds 1,500.

Major routes of the infection transmission: 71% through intravenous drug use, 22% and 3.6% - heterosexual and homosexual contacts, respectively, 1.4% - blood transfusions, 0.7% - MTCT and 0.7% - unknown.

Intravenous drug use is widely spread - for 2001 total of 14,000 IDUs have been registered officially in the country, with the estimated number reaching 120,000. 73% of IDUs report needle/syringe sharing and 87% non- or rare use of condoms. 71% of the registered HIV/AIDS cases in the country are attributed to intravenous injection of drugs. HIV prevalence among this group was 0.54% in 2000. However, high prevalence of HCV (58%) indicates for substantial risk of HIV transmission among IDU population in Georgia.

The epidemiological studies have also revealed 1.4% of HIV prevalence among CSWs. The steadily increasing number of CSWs with high prevalence of STIs indicates for increased potential risk for HIV/AIDS transmission in this group. The 1998 survey carried out for 300 CSWs found 68% STI prevalence with 93.7% of investigated CSWs reporting no- or rare use of condoms.

Georgian government has fully realized the importance and urgency of undertaking effective HIV/AIDS prevention and control measures in the country. In order to respond effectively on HIV/AIDS epidemic spreading in Georgia a Government Commission on HIV/AIDS/STI and other socially hazardous diseases has been established in 1996, that coordinates all related activities planned/implemented within the high priority areas.

The Governmental commitment has been reflected in elaboration (1994) and implementation of the National Programme on Safe Blood and Prevention of HIV/AIDS/STI. In 1999 the HIV/AIDS National Programme was united with Safe Blood and STI programmes as a single national programme that envisages HIV/AIDS and STI EPID-surveillance, testing of donated blood, public education and provides free diagnostics, treatment, out-patient and in-patient care to HIV/AIDS patients. Also the programme pays special attention to protection of the rights of PLWHA and support for care and rehabilitation of the patients and their families.

The second multi-sectoral coordination mechanism functioning in the country is the United Nations Theme Group on HIV/AIDS and UN Technical Working Group established in 1999 and 2000, respectively. The UNTG and UNTWG with representation from UNAIDS co-sponsor agencies – UNDP, UNICEF, UNFPA, WHO and World Bank, National government and NGO partners have been actively supporting the national strategic planning process on HIV/AIDS in Georgia and are engaged in the expanded Governmental Commission on HIV/AIDS/STI.

The HIV/AIDS/STI prevention and control issues within the overarching framework of young people's health and development have been prioritized by the following national strategic and policy documents:

- ◆ Georgian National Health Policy for 1999-2010 adopted by the Government of Georgia in 1999.
- ◆ Strategic National Health Plan for Georgia 2000-2009.
- ◆ Presidential Decree on "Improvement of HIV/AIDS/STI prevention activities in Georgia" issued in 1998, amended in February 2002
- ◆ Poverty Reduction Strategy Paper – Drafted in 2001-2002
- ◆ Caucasus Declaration on Strengthening the National Responses to HIV/AIDS - adopted by the Governments of Georgia, Armenia and Azerbaijan in June 2000 in Odessa, Ukraine
- ◆ National Multi-Sectoral Programme on HIV/AIDS prevention for 2003-2007

Major Priority Areas for Interventions

Based on the finding of the comprehensive Situation and National Response Analysis completed in Georgia in late 2001 and June 2002, respectively (supported within the scope of UNAIDS SPDF and PAF projects), the following high priority areas have been identified for design and implementation of prevention and control interventions within the 2003-2007 National Strategic Plan of Action:

1. Advocacy for development of adequate legislative basis for implementation of effective prevention interventions targeted at vulnerable groups of the population;
2. HIV/AIDS Prevention among IDUs, including IDUs in the penitential system;
3. HIV/AIDS and STI prevention among CSWs, MSM and their partners;
4. HIV/AIDS prevention among youth;
5. Safety of blood and blood products;
6. Prevention of Mother to Child transmission of HIV infection;
7. Care and Support for People Personally Affected by HIV/AIDS, and
8. Prevention of HIV transmission within the health care facilities.

Major Priority Areas, Key Strategies and Activities:

Priority 1: Advocacy for development of adequate legislative basis for implementation of effective prevention interventions targeted at vulnerable groups of the population.

(Total estimated budget 52,000 USD)

Goal: To develop adequate legislative and administrative basis for implementation of HIV/AIDS prevention interventions targeted to high-risk behavior groups of the population

Strategy1.1: Advocacy to initiate amendments in the current legislation for development of supportive legal environment for HIV prevention programmes among high-risk behavior groups (IDUs, CSWs, MSM)

Activities:

- ◆ Organization of a national conference for key stakeholders with participation of international experts;
- ◆ Organization of round-table discussions, workshops, formal and informal meetings with government and NGO sector;
- ◆ Organization of workshops and press conferences for mass media representatives;
- ◆ Organization of thematic IEC campaign to build public support for creation of supportive social environment for the new legislation.

Advocacy -Implementation Plan (Preliminary) and Implementing Partners

	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	Organization of conference for main stakeholders with participation of external experts						Governmental Commission, Institute of drug addiction, IDACIRC, International Experts, UNTG, local/international NGOs, mass media
2.	Organization of round-table discussions, workshops, formal & informal meetings with GOV/NGO sector						Governmental Commission, Institute of drug addiction, IDACIRC, International Experts, UNTG, local/international NGOs, mass media
3.	Organization of workshops and press conferences for mass media representatives						Governmental Commission, UNTG, local and international NGOs, media
4.	Organization of thematic IEC campaign to build public support						Governmental Commission, UNTG, mass media

Strategy1.1: advocacy to initiate amendments in the law to develop supportive legal environment

Preliminary Budget and Implementing Partners

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/NGO	DON	GAPS
1.	Organization of conference for key stakeholders with participation of external experts	20,000	-	-	-	-	20,000	1,000	2,000	17,000
2.	Organization of round-table discussions, workshops, formal/informal meetings	8,000	8,000	-	-	-	16,000	2,000	2,000	12,000
3.	Organization of workshops and press conferences for mass media representatives	3,000	3,000	-	-	-	6,000	1,000	1,000	4,000
4.	Organization of thematic IEC campaign to build public support	5,000	5,000	-	-	-	10,000	-	1,900	8,100
	TOTAL	36,000	16,000	-	-	-	52,000	4,000	6,900	41,100

**Priority 2:
HIV/AIDS prevention among IDUs (3,980,500 USD)**

Goal:

To reduce HIV prevalence and incidence among IDU population

Strategy 2.1: Expansion of harm reduction programmes;

Strategy 2.2: Peer education and outreach programmes targeted at IDU groups;

Strategy 2.3: HIV prevention among IDUs within the penitential system.

Strategy 2.1: Expansion of harm reduction (needle-exchange and methadone substitution therapy) programmes

Activities:

- ◆ Building of government and public support for implementation of harm reduction programmes through organization of workshops, round-table discussions, meetings with participation of external experts all key stakeholders, local and international NGOs and community representatives;
- ◆ Expansion of needle exchange programmes (total of 14 programmes by 2007);
- ◆ Development of VCT and medical, psychological and social rehabilitation centers (MPSRC) for IDUs (total of 5 centers by 2007);
- ◆ Provision of VCT and medical rehabilitation services for IDUs, and
- ◆ Implementation of methadone substitution therapy through VCT and MPSRC centers.

Strategy 2.2: Peer education and outreach programmes targeted at IDUs

Activities:

- ◆ Development and printing of IEC materials (posters, booklets, leaflets);
- ◆ Recruitment and training of IDUs for peer education programmes;
- ◆ Recruitment and training of outreach workers;
- ◆ Provision of vehicles for outreach work;
- ◆ Implementation of peer education with IEC materials, needle and syringes and condom distribution;
- ◆ Implementation of outreach work;

Strategy 2.3 HIV prevention among IDUs within the penitential system

Activities:

- ◆ Organization of meetings and workshops for achievement of consensus and development of joint programme plans with the Ministry of Justice and officials of penitential system for implementation of IEC and needle-exchange programmes within the penitential system;
- ◆ Arrangement of training sessions health care workers within the penitential system for effective implementation of VCT and needle exchange programmes.
- ◆ Production and distribution of IEC materials on HIV prevention among prisons;
- ◆ Pilot needle exchange programmes within the selected prisons.

**Strategy 2.1: Expansion of harm reduction (needle-exchange and methadone substitution therapy) programmes
Implementation Plan (Preliminary)**

	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	Workshops, roundtable meetings to build government/public support						Governmental comm., UNTG, MLHSA, Institute of Drug addiction, OSGF, Bemoni, Tanadgoma
2.	Needle exchange programmes						OSGF, Institute of drug addiction, IDACIRC, Bemoni, Sasoeba, PHD Ajara
3.	Development of VCT and MPSRC centers' network for IDUS						Bemoni, TanadgomaSasoeba, IDACIRC
4.	VCT services						Bemoni, Tanadgoma, Sasoeba, IDACIRC
5.	Medical-rehabilitation services						Institute of Drug Addiction, Bemoni, Saseoba
6.	Methadone substitution therapy						Institute of Drug Addiction, Bemoni, Saseoba

**Strategy 2.1: Expand harm reduction (needle-exchange and methadone substitution treatment) programmes
Preliminary Budget**

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/ NGO	DON	GAPS
1.	Workshops, roundtable meetings to build government and public support	4,000	3,000	-	-	-	7,000	1,000	2,000	4,000
2.	Needle exchange programmes	216,000	236,000	256,000	276,000	296,000	1,280,000	-	500,000	780,000
3.	Development of VCT and MPSRC centers' network for IDUS	80,000	120,000	160,000	200,000	240,000	800,000	-	200,000	600,000
4.	VCT services	30,000	45,000	60,000	75,000	90,000	300,000	-	80,000	220,000
5.	Medico-rehabilitation services	40,000	50,000	70,000	70,000	70,000	300,000	-	95,000	205,000
6.	Methadone substitution treatment	40,000	55,000	72,000	125,000	125,000	417,000	35,000	-	382,000
	TOTAL	410,000	509,000	618000	746000	821000	3,104,000	1,000	629,400	2,191,600

Strategy 2.2: Peer education and outreach programmes targeted at IDUs - Implementation Plan and Implementing Partners

	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	Development and printing of IEC materials						Institute of Drug addiction, NGOs - OSGF, Bemoni, Sasoeba, Tanadgoma
2.	Recruitment and training of IDUs for peer education						IDACIRC, Tanadgoma, Bemoni, AIDS patients Support foundation
3.	Recruitment and training of outreach workers						IDACIRC, Tanadgoma, Bemoni, AIDS patients Support foundation
4.	Provision of vehicles for outreach work (5 vehicles in total)						Institute of Drug addiction, Bemoni, Tanadgoma, ,Sasoeba, IDACIRC
5.	PE with IEC materials, needle/syringes and condom distribution						Institute of Drug Addiction, IDACIRC, Bemoni, Saseoba, Tanadgoma
6.	Implementation of outreach work						Institute of Drug Addiction, IDACIRC, Bemoni, Saseoba, Tanadgoma

Strategy 2.2: Peer education and outreach targeted to IDUs - Preliminary Budget and Implementing Partners

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/NGO	DON	GAPS
1.	Development and printing of IEC materials	7,000	9,000	11,000	14,000	14,000	55,000	5,000	5,000	45,000
2.	Recruitment and training of IDUs for peer education	7,000	7,000	8,000			22,000	2,000	2,000	18,000
3.	Recruitment and training of outreach workers	7,000	7,000	8,000			22,000	2,000	5,000	15,000
4.	Provision of vehicles for outreach work	40,000	30,000	25,000			95,000			95,000
5.	Implementation of PE with IEC materials, needle/syringes and condom distribution	27,000	32,000	37,000	42,000	47,000	185,000	10,000	20,000	155,000
6.	Implementation of outreach work	32,000	42,000	52,000	62,000	72,000	260,000	10,000	50,000	200,000
	TOTAL	120,000	127,000	141,000	118,000	133,000	639,000	29,000	82,000	528,000

**Strategy 2.3 HIV prevention among IDUs within the penitential system
Implementation Plan (Preliminary) and Implementing Partners**

	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	Organization of round-table meetings with the Ministry of Justice and officials of the penitential system						Governmental Commission, MLHSA, Institute of Drug addiction, IDACIRC, UNTG, NGOs - OSGF, Bemoni, Sasoeba, Tanadgoma
2.	Arrangement of training sessions for HCWs within the penitential system						IDACIRC, Tanadgoma, AIDS patients Support foundation
3.	Distribution of IEC materials on HIV prevention among prisons						IDACIRC, Tanadgoma, AIDS patients Support foundation
4.	Pilot needle-exchange programmes within the selected sites (3 prisons)						Tanadgoma, Bemoni, Sasoeba, AIDS patients Support Foundation, OSGF

**Strategy 2.3 HIV prevention among IDUs within the penitential system
Preliminary Budget and Implementing Partners**

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/ NGO	DON	GAPS
1.	Organization of round-table meetings with the Ministry of Justice and officials of the penitential system	6,000	4,000	-	-	-	10,000	4,000	-	6,000
2.	Arrangement of training sessions for HCWs within the penitential system	4,000	4,000	-	-	-	8,000	-	-	8,000
3.	Distribution of IEC materials on HIV prevention among prisons	7,000	7,500	8,000	8,500	8,500	39,500	-	-	39,500
4.	Pilot needle-exchange programmes within the selected prison			50,000	60,000	70,000	180,000	-	-	180,000
	TOTAL	17,000	15,500	58,000	68,500	78,500	237,500	4,000	-	233,500

Priority 3: HIV/AIDS and STI prevention among CSWs, MSM and their partners (clients)

(Estimated total for the component - 1,970,760 USD):

Overall Goal:

Prevention of HIV/AIDS and STIs among CSWs, MSM and their partners.

Strategy 1: Development of network of centers for VCT on HIV and STIs and provision of free STI treatment for CSWs and MSM

Strategy 2: Development of targeted outreach and peer education programmes for CSWs and MSM

Strategy 3: Development of HIV/AIDS and STI prevention programme for regular partners of CSWs (ref.: situation and response analysis – majority of CSWs' partners are policemen and transit truck drivers).

Strategy 3.1: Development of network of centers for VCT on HIV and STIs and provision of free-of-charge STI treatment for CSWs and MSM

Activities:

- ◆ Establishment of new centers for VCT and free STI treatment, with a demonstrated effectiveness from working experience of the NGO "Tanadgoma" and "Healthy Cabinet" (6 centers by 2007).
- ◆ Training of programme staff for the new centers;
- ◆ Provide face to face and hot-line counseling to CSWs and MSM;
- ◆ Provide free testing on HIV and STIs;
- ◆ Provide free treatment on STIs;
- ◆ Develop and disseminate IEC materials for the target group;
- ◆ Free condom distribution;
- ◆ Promotion of female condoms.

Strategy 3.2: Development of targeted outreach and peer education programmes for CSWs and MSM

Activities:

- ◆ Conducting surveys and mapping exercises and spot cites for peer education and outreach interventions;
- ◆ Recruitment and training of CSWs and MSM as peer educators;
- ◆ T Recruitment and training of programme staff for outreach work among CSWs and MSM;
- ◆ Procurement of vehicles for outreach;
- ◆ Outreach programmes among CSWs and MSM
- ◆ Distribution of IEC materials and free condoms

Strategy 3.3: Development of HIV/AIDS and STI prevention programme for regular partners (clients) of CSWs (Ref.: Situation Analysis – majority of clients are among policemen and transit truck drivers)

Activities:

- ◆ Development and printing thematic IEC materials for transit drivers and police;
- ◆ Distribution of IEC materials and free condoms through custom service and police departments;
- ◆ Organize workshops for policemen on HIV/AIDS/STI prevention.

**Strategy 3.1: Development of network of centers for VCT on HIV and STIs and free STI treatment for CSWs and MSM
Implementation Plan (Preliminary) and Implementing Partners**

	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	Eestablishment of new centers for VCT and free STI treatment (6 centers by 2007)						Tanadgoma, IDACIRC, STI institute, Healthy Cabinet at the STI Institute
2.	Training of the staff within the new centers						Tanadgoma, IDACIRC, STI institute, Healthy Cabinet at the STI Institute
3.	Provision of VCT for CSWs and MSM						Tanadgoma, newly established centers
4.	Provision of free treatment on STIs						Healthy Cabinet at the STI Institute, newly established centers
5.	Development and disseminate IEC materials						Tanadgoma, IDACIRC,STI institute, Healthy Cabinet at the STI Institute
6.	Free condom distribution						Tandgoma, newly established centers, Healthy Cabinet at the STI Institute
7.	Promotion of female condoms						Tanadgoma, IDACIRC,STI institute, Healthy Cabinet at the STI Institute

**Strategy 3.1: Development of network of centers for VCT on HIV and STIs and free STI treatment for CSWs and MSM
Preliminary Budget and Implementing Partners**

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/ NGO	DON	GAPS
1.	Eestablishment of new centers for VCT and free STI treatment (6 centers by 2007)	84,460	232,000	146,000	146,000	146,000	754,460	-	-	754,460
2.	Training of the staff within the new centers	45,000	67,000	84,000	102,000	110,000	408,000	20,000	40,000	248,000
3.	Provision of VCT for CSWs and MSM	1,000	1,500	1,000	1,000	1,000	5,500	-	5,500	-
4.	Provision of free treatment on STIs	7,000	14,000	18,000	21,000	24,000	84,000	40,000	-	44,000
5.	Development and disseminate IEC materials	500	1,000	1,500	1,500	1,500	6,000	1,000	5,000	-
6.	Free condom distribution	6,000	10,000	14,000	18,000	22,000	70,000	-	20,000	50,000
7.	Promotion of female condoms	1,000	2,000	3,000	4,000	5,000	15,000	-	5,000	10,000
	TOTAL	144,960	327,500	267,500	293,500	309,500	1,342,960	61,000	75,500	1,106,460

**Strategy 3.2: To develop targeted outreach and peer education programmes for CSWs and MSM
Implementation Plan (Preliminary)**

	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	T Conducting surveys and mapping exercises and spot cites for peer education and outreach interventions						Tanadgoma, newly established centers
2.	T Recruitment and training of CSWs and MSM as peer educators;						Tanadgoma, newly established centers
3.	Recruitment and training of programme staff for outreach work among CSWs and MSM;						Tanadgoma, newly established centers
4	Provision of Vehicles for outreach						Tanadgoma, newly established centers
5.	Outreach among CSWs and MSM						Tanadgoma, newly established centers
6.	Distribution of IEC materials and free condoms						Tanadgoma, newly established centers

**Strategy 3.2: To develop targeted outreach and peer education programmes for CSWs and MSM
Preliminary Budget and Implementing Partners**

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/ NGO	DON	GAPS
1.	Conducting surveys and mapping exercises and spot cites for peer education and outreach interventions	3,000	-	6,000	-	-	9,000	2,000	2,000	5,000
2.	Recruitment and training of CSWs and MSM as peer educators;	800	1000	1000	1000	1000	4,800	800	2,000	2,000
3.	Recruitment and training of programme staff for outreach work among CSWs and MSM;	1,200	1,500	1,500	1,500	1,500	7,500	1,500	3,000	3,000
4.	Provision of Vehicles for outreach	-	10,000	10,000	5,000	5,000	20,000	-	-	20,000
5.	Outreach among CSWs and MSM	25,000	40,000	55,000	70,000	85,000	275,000		25,000	250,000
6.	Distribution of IEC materials and free condoms	6,000	8,000	10,000	12,000	14,000	50,000	5,000	5,000	40,000
	TOTAL	43,200	60,500	83,500	89,500	106,500	366,300	9,300	37,000	320,000

**Strategy 3.3: Development of HIV/AIDS/STI prevention programme for regular partners of CSWs (policemen and transit truck drivers)
Implementation Plan (Preliminary) and implementing partners**

	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	Development and printing of IEC materials for CSW partners (clients) – e.g. transit drivers and policemen						IDACIRC, Tanadgoma
2.	Distribution of IEC materials and free condoms through state custom service and police departments						IDACIRC, Tanadgoma, newly established centers, AIDS patients support foundation
3.	Organize workshops for policemen on HIV/AIDS/STI prevention						IDACIRC, Tanadgoma, newly established centers, AIDS patients support foundation

**Strategy 3.3 - Development of HIV/AIDS/STI prevention programme for regular partners of CSWs (policemen and transit truck drivers)
Preliminary Budget**

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/NGO	DON	GAPS
1.	Development and printing of IEC materials for CSW partners (clients) – e.g. transit drivers and policemen	15,000	15,000	15,000	15,000	15,000	75,000	-	-	75,000
2.	Distribution of IEC materials and free condoms through state custom service and police departments	25,000	30,000	35,000	40,000	45,000	175,000	-	-	175,000
3.	Organize workshops for policemen on HIV/AIDS/STI prevention	4,500	-	3,500	-	3,500	11,500	-	-	11,500
	TOTAL	44,500	45,000	53,500	55,000	48,500	261,500	-	-	261,500

Priority 4:

HIV/AIDS prevention among young people (14-25 year age group)

(Estimated total for 2003-2007 - 2,527,000 USD):

Overall Goal: Prevention of HIV/AIDS epidemic among youth through awareness rising and promotion of healthy life style

Strategy 1: HIV/AIDS education at schools and universities and among displaced youth;

Strategy 2: VCT services for youth;

Strategy 3: Awareness rising on HIV/AIDS and safe sexual behavior promotion among youth

Strategy 4.1: HIV/AIDS education at schools and universities and displaced youth

Objective 1: To ensure 80 percent coverage of youth at secondary school (14-16 years old) and high schools students by HIV/AIDS/STI prevention education

Component 1:

Elaboration of the curriculum on HIV/AIDS education at schools and Universities (life skills health education and peer education);

Activities:

- ◆ Establish a working group to review experience and lessons learned in other countries delivering HIV/AIDS education at schools and to elaborate the education curriculum with appropriate teaching materials (life skills health education and peer education);
- ◆ Testing of life skills health education and peer education curriculum through piloting at selected schools;
- ◆ Revision of the curriculum and development of the final version to be adoption on full-scale education on HIV/AIDS at schools;
- ◆ Elaboration of HIV/AIDS education guidelines and programme for TOT and peer education training;

Component 2: Training of trainers (TOT);

Activities:

- ◆ Selection of candidates for TOT;
- ◆ Invitation of external experts/trainers to conduct TOT;
- ◆ Organize TOTs at central and regional levels;

Component 3:

Training of teachers, peer educators and outreach workers;

Activities:

- ◆ Selection of candidates for training – teachers, youth representatives From schools, universities and out of school/displaced youth;
- ◆ Training of school teachers in life kills health education with emphasis on providing information and education on HIV/AIDS;
- ◆ Training of peer educators and outreach workers;

Component 4: Piloting of the HIV/AIDS education curricula at schools (80 schools);

Activities:

- ◆ Selection of schools for piloting HIV/AIDS education within life skills and peer education programmes;

- ◆ Production/printing of information-education materials;
- ◆ Piloting of HIV/AIDS education curricula in selected schools;
- ◆ Evaluation of the piloting results.

**Component 5:
Mobilization and build supportive environment among parents**

Activities:

- ◆ Conducting workshops and round-table discussions among parents for consensus building and creation of supportive environment and attitudes to HIV/AIDS education in schools;
- ◆ Development, printing and dissemination of IEC materials on HIV/AIDS education among parents;

**Component 6:
Wide-scale implementation of HIV/AIDS education at schools (750 Schools country-wide);**

Activities:

- ◆ Expansion of the ToT and teachers' training programmes ;
- ◆ To reproduce teaching materials;
- ◆ National -scale implementation of HIV/AIDS education curricula at schools (life skills and peer education approaches).

**Component 7:
Outreach and peer education for youth at higher education institutions and for street/displaced youth**

Activities:

- ◆ Implementation of peer education programmes at schools
- ◆ Implementation of peer education programme among university students;
- ◆ Conducting survey and development of database on out of school/displaced youth.
- ◆ Development of special outreach programmes and conduct outreach and peer education among of schools/displaced youth.

**Strategy 4.1: HIV/AIDS education at schools and universities and for displaced youth
Implementation Plan (Preliminary)**

	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	Establish a working group and elaboration of the education curriculum (life skills health education and peer education);						Ministry of Education, Ministry of Health, IDACIRC, Graduate and Post-graduate training institutions for teachers, Groups of parents, religious leaders
2.	Testing of the curriculum through piloting at selected schools;						Ministry of Education
3.	Revision of the curriculum and development of the final version to be adoption on wide-scale education on HIV/AIDS at schools;						Working group – national experts under coordination of the Ministry of Education
4.	Elaboration of HIV/AIDS education guidelines and programme for TOT and peer education training;						Working group – national experts under coordination of the Ministry of Education
5.	Selection of candidates for TOT (life skills health education and peer education);						Working group – national experts under coordination of the Ministry of Education
6.	Invitation of external experts/trainers to conduct TOT;						Working group, ministry of Education
7.	Organize TOTs at central and regional levels;						Working group, ministry of Education
8.	Selection of candidates for training – teachers, youth representatives from schools, universities and out of school/displaced youth;						Working group, ministry of Education
9.	Training of school teachers to deliver pilot education on HIV/AIDS;						Working group, Ministry of Education, ministry of health, IDACIRC, Graduate training centers for teachers
10.	Training of peer educators and outreach workers;						IDACIEC, AIDS Patents Support Foundation, Tanadgoma

11	Selection of schools for piloting;						Working group, ministry of Education,
12	Production/printing of pilot educational materials;						Working group, MOED, MOH, IDACIRC, Graduate training centers for teachers
13	Piloting of HIV/AIDS education curricula in selected schools;						Working group, ministry of Education,
14	Evaluation of the piloting results						Working group
15	To conduct workshops for parents						MoED, MOH, IDACIRC, Graduate and Post-graduate training institutions for teachers, Groups of parents, religious leaders
16	To develop, print and disseminate IEC materials on HIV/AIDS education for parents;						Working group
17	To continue training of teachers;						Working group, ministry of Education, ministry of health, IDACIRC, Graduate training centers for teachers
18	To reproduce teaching materials;						Working group, ministry of education
19	Wide-scale implementation of HIV/AIDS education curricula at schools.						Working group, ministry of education
20	To conduct peer education at Schools						Working group, ministry of education
21	To conduct peer education among university students;						IDACIRC, AIDS Patients Support Foundation, Tanadgoma
22	To conduct surveys and develop /regularly renew information bank on out of schools/displaced youth.						working group, Ministry of education
23	To establish special outreach programme and conduct outreach and peer education among of out of schools/displaced youth.						Working group, Tanadgoma, NGO working on out of street /displaced youth, to be established

**Strategy 4.1: HIIV/AIDS education at schools and peer education for university students and displaced youth
Preliminary Budget and Implementing Partners**

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/NGO	DON	GAPS
1.	Establish a working group and elaboration of the education curriculum (life skills health education and peer education);	3,000	-	-	-	-	3,000	-	3,000	-
2.	Testing of the curriculum through piloting at selected schools;	in kind	in kind	-	-	-	-	in kind	-	-
3.	Revision of the curriculum and development of the final version to be adoption on wide-scale education on HIV/AIDS at schools;	-	1,500	-	-	-	1,500	-	1,500	-
4.	Elaboration of HIV/AIDS education guidelines and programme for TOT and peer education training;	1,500	-	-	-	-	1,500	-	1,500	-
5.	Selection of candidates for TOT (life skills health education and peer education);	in kind	-	-	-	-	-	-	-	-
6.	Invitation of external experts/trainers to conduct TOT;	6,000	-	-	-	-	6,000	-	-	6,000
7.	Organize TOTs at central and regional levels;	36,000	-	36,000	-	-	72,000	-	20,000	52,000
8.	Selection of candidates for training – teachers, youth representatives from schools, universities and out of school/displaced youth;	in kind	in kind	in kind	in kind	in kind	-	in kind	-	-
9.	Training of school teachers to deliver pilot education on HIV/AIDS;	20,000	20,000	-	-	-	40,000	-	-	40,000
10.	Training of peer educators and outreach workers;	15,000	15,000	15,000	15,000	15,000	90,000	-	20,000	70,000

11	Selection of schools for piloting;	in kind	-	-	-	-	-	in kind	-	-
12	Production/printing of pilot educational materials;	27,000	27,000	-	-	-	54,000	-	20,000	34,000
13	Piloting of HIV/AIDS education curricula in selected schools;	50,000	50,000	-	-	-	100,000	-	10,000	90,000
14	Evaluation of the piloting results	-	1,500	-	-	-	1,500	1,500	-	-
15	To conduct workshops for parents	10,000	10,000	20,000	20,000	20,000	80,000	-	20,000	60,000
16	To develop, print and disseminate IEC materials on HIV/AIDS education for parents;	4,000	4,000	20,000	20,000	20,000	68,000	5,000	15,000	48,000
17	To continue training of teachers;	-	-	52,000	60,000	68,000	180,000	-	-	180,000
18	To reproduce teaching materials;	-	-	70,000	78,000	84,000	232,000	-	-	232,000
19	Wide-scale implementation of HIV/AIDS education curricula at schools.	-	-	80,000	100,000	120,000	300,000	-	-	300,000
20	To conduct peer education at Schools	15,000	20,000	30,000	30,000	30,000	125,000	-	15,000	110,000
21	To conduct peer education among university students;	15,000	15,000	20,000	20,000	20,000	100,000	-	10,000	90,000
22	To conduct surveys and develop /regularly renew information bank on out of schools/displaced youth.	5,000	1,500	5,000	1,500	1,500	14,500	1,500	5,000	8,000
23	To establish special outreach programme and conduct outreach and peer education among of out of schools/displaced youth.	30,000	16,000	20,000	20,000	20,000	106,000	-	-	106,000
	TOTAL	237,500	181,500	368,000	364,500	398,500	1,575,000	8,000	141,000	1,426,000

Strategy 4.2: VCT services for youth

Objective: By 2007 ensure accessibility and affordability of voluntary counseling and testing on HIV/AIDS for >90 percent of young people throughout Georgia.

Component 1: Establishment of youth friendly VCT centers network throughout the country

Activities:

- ◆ To open new centers for youth VCT on HIV at regional/district levels;
- ◆ Ensure access to VCT services for youth at central and regional/district levels;
- ◆ To train staff of the centers on voluntary counseling and testing service provision;
- ◆ To operate HIV/AIDS hot-lines at youth VCT centers;

Component 2: To support the VCT with appropriate IEC materials

Activity:

- ◆ Development, printing and supply of VCT centers with IEC materials

Component 3: Outreach work for university students and out of school youth.

Activity:

- ◆ Conduct outreach for university students and out of school youth.

Component 4: Condom distribution

Activity:

- ◆ distribute condoms free of charge among attendees of VCT centers and during outreach work;

Strategy 4.3:

Awareness rising on HIV/AIDS/STI and safe sexual behavior promotion among youth

Objective: To Increase awareness on HIV/AIDS among youth and promote safer sexual behavior

Component 1: To conduct wide scale IEC campaign on HIV/AIDS/STI prevention targeted at youth

Activities:

- ◆ To organize cultural and sport events to deliver HIV/AIDS education messages for youth
- ◆ To commemorate WAD and WAVD;
- ◆ To Develop and disseminate IEC materials;
- ◆ To organize talk-shows, radio and TV programmes on HIV/AIDS for youth.

Component 2: Condoms social marketing campaign

Activities:

- ◆ To develop and broadcast TV and radio commercials;
- ◆ To organize events for free condom distribution.

**Strategy 4.2: VCT services for youth
Implementation Plan (Preliminary)**

	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	Establish/expand youth friendly health services with VCT on HIV at regional/district level;						CCM, UNTG (UNICEF, UNFPA) partner NGOs, IDACIRC, regional/district NGOs, Tanadgoma center and regional branches
2.	Ensure access to VCT services for youth at central and regional/district levels;						CCM, UNTG (UNICEF, UNFPA) partner NGOs, IDACIRC, regional/district NGOs, Tanadgoma center and regional branches
3.	To train staff of the centers on voluntary counseling and testing;						Tanadgoma, IDACIRC
4.	To operate HIV/AIDS hot-lines at youth VCT centers;						CCM, UNTG (UNICEF, UNFPA) partner NGOs, IDACIRC, regional/district NGOs, Tanadgoma center and regional branches
5.	Development, printing and supply of VCT centers with IEC materials						Implementing partners at regional/district levels, Tanadgoma, IDACIRC
6.	Conduct outreach for university students and out of school youth.						Implementing partners at regional/district levels
7.	distribute condoms among attendees of VCT centers and during outreach work;						Implementing partners at regional/district levels, Tanadgoma, IDACIRC

**Strategy 4.2: VCT services for youth
Preliminary Budget and Implementing Partners**

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/NGO	DON	GAPS
1.	To open new centers for youth VCT on HIV at regional level;	60,000	30,000	20,000	25,000	25,000	160,000	-	20,000	140,000
2.	Operation cost of VCT centers, including hot-line	30,000	40,000	50,000	60,000	60,000	240,000	20,000	20,000	200,000
3.	To train staff of the centers on voluntary counseling and testing;	1,000	1,000	2,000	3,000	3,000	10,000	-	10,000	-
4.	To operate HIV/AIDS hot-lines at youth VCT centers;	included in 2.	included in 2.	included in 2.	included in 2.	included in 2.	-	-	-	-
5.	Development, printing and supply of VCT centers with IEC materials	5,000	5,000	8,000	12,000	12,000	42,000	5,000	10,000	27,000
6.	Conduct outreach for university students and out of school youth.	7,000	7,000	8,000	8,000	8,000	38,000	5,000	10,000	23,000
7.	distribute condoms among attendees of VCT centers and during outreach rides	5,000	5,000	7,000	10,000	10,000	37,000		10,000	27,000
	TOTAL	108,000	88,000	95,000	118,000	118,000	527,000	30,000	80,000	417,000

**Strategy 4.3: Awareness rising on HIV/AIDS/STI and safe sexual behavior promotion among youth
Implementation Plan (Preliminary) and Implementing Partners**

	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	To organize cultural and sport events to deliver HIV/AIDS education messages for youth						CCM, IDACIRC, UNICEF, UNFPA, UNDP, WHO, PSI, Save the Children, AIDS Patients Support Foundation, G+G, Tanadgoma, Media
2.	To commemorate WAD and WAVD						CCM, IDACIRC, UNICEF, UNFPA, UNDP, WHO, PSI, Save the Children, AIDS Patients Support Foundation, G+G, Tanadgoma, Media
3.	To Develop and disseminate IEC materials;						CCM, IDACIRC, UNICEF, UNFPA, UNDP, WHO, PSI, Save the Children, AIDS Patients Support Foundation, G+G, Tanadgoma, Media
4.	To organize talk-shows, radio and TV programmes on HIV/AIDS for youth.						CCM, IDACIRC, UNICEF, UNFPA, UNDP, WHO, PSI, Save the Children, AIDS Patients Support Foundation, G+G, Tanadgoma, Media
5.	To develop and broadcast TV and radio commercials;						CCM and UNTG partners, IDACIRC, Media
6.	To organize events for free condom distribution						CCM and UNTG partners, IDACIRC, Media
7.	Free condom distribution						CCM and UNTG partners, IDACIRC, Media

**Strategy 4.3: Awareness rising on HIV/AIDS/STI and safe sexual behavior promotion among youth
Preliminary Budget and Implementing Partners**

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/ NGO	DON	GAPS
1.	To organize cultural and sport events to deliver HIV/AIDS education messages for youth	20,000	25,000	25,000	25,000	25,000	120,000	5,000	20,000	95,000
2.	To commemorate WAD and WAVD	5,000	5,000	7,000	7,000	7,000	31,000	2,000	10,000	19,000
3.	To Develop and disseminate IEC materials;	15,000	15,000	20,000	20,000	25,000	95,000		20,000	75,000
4.	To organize talk-shows, radio and TV programmes on HIV/AIDS for youth	5,000	5,000	7,000	7,000	7,000	31,000		10,000	21,000
5.	To develop and broadcast TV and radio commercials	10,000	10,000	15,000	20,000	20,000	75,000		10,000	65,000
6.	To organize events for free condom distribution	5,000	7,000	7,000	7,000	7,000	33,000	1,000	15,000	17,000
7.	Free condom distribution	5,000	5,000	10,000	10,000	10,000	40,000		10,000	30,000
	TOTAL	425,000	360,000	288,000	197,000	101,000	425,000	8,000	95,000	322,000

Priority 5: Safety of Blood and Blood Products

(Total estimated budget for 2003-2007 - 2,267,625 USD)

Overall Goal: Prevention of HIV transmission through securing safety of blood and blood products during transfusion.

Strategy 1: To ensure HIV testing of donated blood

Objective: By 2007 ensure testing of >95 percent donated blood on HIV.

Component 1: Procurement of quality test-systems for testing of donated blood

Activity:

- ◆ Quality control of test-systems for screening and conformation testing of blood on HIV ;

Component 2: testing of donated blood on HIV

Activity:

- ◆ Screening of donated blood on HIV by ELISA and rapid/simple tests;
- ◆ Conformation of ELISA positive samples by Western Blot;
- ◆ Conformation by PCR;

Strategy 2: Increase share of voluntary donations of blood

Activities:

- ◆ Planning and implementation of IEC campaign to promote voluntary donation of blood;
- ◆ Development, printing and dissemination of thematic IEC materials;
- ◆ To develop incentives for voluntary donation of blood;

Strategy 3: Development of state of art system for safe blood programme

Component 1: Enhance capacities of HIV testing labs

Activities:

- ◆ Enhance ELISA testing capacity within the blood testing labs at the central level;
- ◆ Enhance ELISA testing capacity at the regional labs.

Component 2: Improve blood transportation system

Activity:

- ◆ Procurement of vehicles for blood banks and HIV testing labs in Tbilisi and regional centers

Component 3: Development of the Management Information System

Activities:

- ◆ Development of Blood bank Database for MIS;
- ◆ Procurement of IT equipment and server for HIV diagnostic labs in Tbilisi and regional centers for establishment of IT/MIS network;
- ◆ Establishment of the Safe Blood MIS network;

Component 4: Training of personnel

Activities:

- ◆ Training of Lab personnel on MIS operation at central and regional levels;
- ◆ Training of lab personnel on screening and confirmation methods of testing on HIV at central and regional levels;
- ◆ Organization of workshops on management of blood safety and effective blood (blood product) transfusion systems;
- ◆ Revision of guidelines for health care workers on proper indications and safety of blood (blood product) transfusion;

4. Safety of Blood and blood products

Preliminary Implementation Plan (tentative) and Implementing Partners

	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	Quality control of test-systems for screening and conformation testing of blood on HIV ;						IDACIRC, central and regional Lab management
2.	Screening of donated blood on HIV by ELISA and rapid/simple tests;						IDACIRC, HIV diagnostic labs in Tbilisi and regional levels
3.	Conformation of ELISA positive samples by Western Blot;						IDACIRC
4.	Conformation by PCR;						IDACIRC
5.	Planning and implementation of IEC campaign to promote voluntary donation of blood;						MLHSA, Blood banks, Institute of Hematology and Transfusiology, IDACIRC, NGO "Amagleba",
6.	Development, printing and dissemination of thematic IEC materials;						MLHSA, Blood banks, Institute of Hematology and Transfusiology, IDACIRC, NGO "Amagleba",
7.	To develop incentives for voluntary donation of blood;						MLHSA, Blood banks, Institute of Hematology and Transfusiology, IDACIRC
8.	Enhance ELISA testing capacity within the blood testing labs at the central level;						MLHSA, IDACIRC
9.	Enhance ELISA testing capacity at the regional labs.						MLHSA, IDACIRC, regional public health departments
10.	Procurement of vehicles for blood banks and HIV testing labs in Tbilisi and in regions						MLHSA
11.	Development of Database for MIS						IDACIRC, Blood banks in Tbilisi and regional centers
12.	Procurement of PC and server computer for HIV diagnostic labs in Tbilisi and regions						MLHSA, IDACIRC
13.	Development of Safe blood MIS network;						MLHSA, IDACIRC, Regional Public Health Departments

14	Training of Lab personnel on MIS operation;						IDACIRC
15	Training of lab personnel on screening and confirmation methods of testing on HIV;						IDACIRC
16	Organization of workshops on issue of safe and effective blood transfusion;						MLHSA, Blood banks, Institute of Hematology and Transfusiology
17	Revision of guidelines for health care workers on indications and safety of blood transfusion;						MLHSA, Blood banks, Institute of Hematology and Transfusiology

5. Safety of blood and blood products Preliminary Budget for 2003-2007

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/NGO	DON	GAPS
1.	Quality control of test-systems for screening/conformation testing of blood on HIV ;	In kind	In kind	In kind	In kind	In kind	-	In kind	-	-
2.	Screening of donated blood on HIV by ELISA and rapid/simple tests;	351,800	348,200	398,200	398,200	398,200	1,894,600	1500000	-	394,700
3.	Conformation of ELISA positive samples by Western Blot;	2,000	2,000	2,000	2,000	2,000	10,000	10,000	-	-
4.	Conformation by PCR;	4,950	4,950	4,950	4,950	4,950	24.75	24.75	-	-
5.	Planning and implementation of IEC campaign to promote voluntary donation of blood;	10,000	15,000	15,000	15,000	15,000	70,000	-	-	70,000
6.	Development, printing and dissemination of thematic IEC materials;	20,000	20,000	15,000	15,000	15,000	85,000	5,000	10,000	70,000

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/NGO	DON	GAPS
7.	To develop incentives for voluntary donation of blood;	In kind	-	-	-	-	-	In kind	-	-
8	Enhance ELISA testing capacity within the blood testing labs at the central level;	20,000	-	-	-	-	20,000	20,000	-	-
9	Enhance ELISA testing capacity at the regional labs.	15,000	15,000	-	-	-	30,000	-	-	30,000
10	Procurement of vehicles for blood banks and HIV testing labs in Tbilisi and in regions	50,000	30,000	30,000	-	-	110,000	-	-	110,000
11	Development of Database for MIS	3,000	-	-	-	-	3,000	3,000	-	-
12	Procurement of PC and server computer for HIV diagnostic labs in Tbilisi and regions	8,500	7,500	-	-	-	16,000	-	6,000	10,000
13	Development and maintenance of Safe blood MIS network;	3,000	3,000	3,000	3,000	3,000	15,000	2,000	-	13,000
14	Training of Lab personnel on MIS operation;	2,000	2,000	-	-	-	4,000	-	-	4,000
15	Training of lab personnel on screening and confirmation methods of testing on HIV;	In kind	In kind	In kind	In kind	In kind	-	In kind	-	-
16	Organization of workshops on issue of safe and effective blood transfusion;	3,000	1,500	1,500	1,500	1,500	9,000	1,000	-	8,000
17	Revision of guidelines for health care workers on indications and safety of blood transfusion;	500	-	500	-	-	1,000	1,000	-	-
	TOTAL	493,750	449,150	470,150	439,650	436,650	2,267,625	1,542,025	16,000	709,700

Priority:
Prevention of Mother to Child transmission (MTCT) of HIV

(Total estimated budget for 2003-2007 - 489,748 USD)

Overall Goal: To prevent mother to child transmission of HIV infection through provision of quality counseling during antenatal and perinatal periods and for infant feeding

Strategy 1: Provide VCTs on HIV for pregnant women;

Strategy 2: Lab diagnostic and monitoring of HIV positive mothers and their newborns;

Strategy 3: HIV Prophylactic treatment for HIV positive mothers to prevent MTCT.

Strategy 6.1: Provide VCTs on HIV for pregnant women

Component 1. Training of HCWs of Women Health Centers and obstetrics on VCTs

Activities:

- ◆ Develop training curricula and educational materials on provision of VCT for pregnant women
- ◆ Organize training sessions on VCT for pregnant women among personnel of women consultation centers and maternity hospitals.

Component 2: Development and dissemination of IEC materials on HIV prevention for pregnant women

Activities:

- ◆ Develop IEC materials on prevention of HIV MTCT
- ◆ Disseminate IEC materials among pregnant women attending women health centers

Component 3: Provide VCTs to pregnant women and Women health centers

Activity:

- ◆ Provide VCT to pregnant women at women health centers

Strategy 6.2: Lab diagnostic and clinical monitoring of HIV positive mothers and their newborns

Activities:

- ◆ Development of the national standard on lab diagnostic and clinical monitoring of HIV positive mothers and newborns
- ◆ Clinical monitoring of HIV positive mothers
- ◆ Lab diagnostic of newborns of HIV positive mothers

Strategy 6.3: HIV Prophylactic treatment for HIV positive mothers to prevent MTCT

Activities:

- ◆ Development of the national standard on prophylactic treatment of HIV positive mothers and newborns to prevent MTCT
- ◆ Provide HIV positive mothers with HIV Prophylactic treatment (retrovir for 22-week) to prevent MTCT
- ◆ Provide newborns of HIV positive mothers with HIV Prophylactic treatment (6-week)

**Priority 6:
Prevention of MTCT -Implementation Plan (Preliminary) and Implementing Partners**

	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	Develop training curricula and educational materials on VCT for pregnant women						IDACIRC, MCH Department , MLHSA
2.	Organize training sessions on VCT for pregnant women for personnel of Women health Centers and obstetrics						IDACIRC, MCH Department , MLHSA
3.	Develop and print IEC materials on prevention of HIV MTCT						IDACIRC, MCH Department , MLHSA
4.	Disseminate IEC materials among pregnant women attending women health centers						IDACIRC, MLHSA, women health centers
5.	Provide VCT to pregnant women at women health centers						Women consultation centers and maternity hospitals at central, regional and district levels
6.	Development of the national standard on lab diagnostic and clinical monitoring of HIV positive mothers and newborns						IDACIRC, MCH Department , MLHSA
7.	Clinical monitoring of HIV positive mothers						IDACIRC, MCH services
8.	Lab diagnostic of newborns of HIV positive mothers						IDACIRC, MCH services, diagnostic labs at central, regional and district levels
9.	Development of the national standard on prophylactic treatment of HIV positive mothers and newborns to prevent MTCT						IDACIRC, MCH Department , MLHSA
10.	Provide HIV positive mothers with HIV Prophylactic treatment (retrovir for 22-week) to prevent MTCT						IDACIRC
11.	Provide newborns of HIV positive mothers with HIV Prophylactic treatment (6-week)						IDACIRC

6. Prevention of MTCT of HIV - Preliminary Budget for 2003-2007

	Activity Description	Fiscal Years					Total USD
		2003	2004	2005	2006	2007	
1.	Develop training curricula and educational materials on VCT for pregnant women	in kind	-	-	-	-	in k
2.	Organize training sessions on VCT for pregnant women for personnel of MCH services throughout the country	21,000	10,500	10,500	-	-	42,0
3.	Develop and print IEC materials on prevention of HIV MTCT	6,000	6,000	6,000	6,000	6,000	30,0
4.	Disseminate IEC materials among pregnant women attending women health centers	in kind	in kind	in kind	in kind	in kind	in k
5.	Provide VCT to pregnant women at women health centers	34,149	54,215	64,830	77,245	97,311	327,7
6.	Development of the national standard on lab diagnostic and clinical monitoring of HIV positive mothers and newborns	in kind	-	-		-	in k
7.	Clinical monitoring of HIV positive mothers	1,500	2,500	5,000	7,500	8,500	25,0
8.	Lab diagnostic of newborns of HIV positive mothers	178	300	600	900	1,020	2,9
9.	Development of the national standard on prophylactic treatment of HIV positive mothers and newborns for PMTCT	in kind	-	-		-	in k
10.	Provide HIV positive mothers with HIV Prophylactic treatment (retrovir for 22-week) to prevent MTCT	3,600	6,000	12,000	18,000	20,400	60,0
11.	Provide newborns of HIV positive mothers with HIV Prophylactic treatment (6-week)	120	200	400	600	680	2,0
	TOTAL	66,547	79,715	99,330	110,245	133,911	489,7

Care and Support for People Personally Affected by HIV/AIDS (Total estimated 4,060,220 USD)

Overall Goal:

Improvement of the life quality of People Personally Affected by HIV/AIDS

Strategy 1: Comprehensive Treatment including ARVs

Strategy 2: Services for People Personally Affected by HIV/AIDS

Strategy 3: Advocacy and Social Mobilization

Strategy 4: Resource Mobilization

Strategy 1: Comprehensive Treatment including ARVs

Objective: By 2007 ensure accessibility and affordability of testing, combination and symptomatic therapy for all AIDS patients (130 patients).

Component 1: Provision of combination drug regimens - generic products to all AIDS patients

Activities:

- ◆ Continue to provide testing and symptomatic treatment for all PLHA through Government funding – National AIDS Prevention Programme
- ◆ Continuous provision (non-interrupted) of HAART to 5 Patients living with AIDS within the National AIDS Prevention Programme (since 1996)
- ◆ Mobilize external support and internal resources for ensuring accessibility and affordability to HAART for all PLHA

Component 2: Ensuring availability of adequate diagnostic on HIV/AIDS for determination of the individual case management regimens

Activities:

- ◆ Institutional capacity building – provision of the diagnostic equipment (resistance determination) to the National AIDS Center, the central referral service for all PLHA
- ◆ Establishment of regional diagnostic centers with CD4 and Viral Load determination capacity in Batumi and Zugdidi (regions with the highest incidence rates)
- ◆ Human capacity building – in-service staff training for utilization/maintenance of the diagnostic equipment and provision of quality diagnostic and counseling services for individual case management. 3 Training in Tbilisi, Batumi and Zugdidi.

Component 3: Provision of qualified counseling for PLHA and family members before starting treatment (regimen, schedule, side effects, resistance, nutrition, monitoring, etc.)

Activities:

- ◆ Human capacity building – development of local master trainers' group (4 specialists – 2 from Tbilisi, 1 - Batumi and 1 - Zugdidi) and ToT course through exchange training programmes
- ◆ Cascade training on testing/counseling services at the central, regional and district levels (69 laboratories throughout the country) facilitated by Masters Trainers;
- ◆ Supporting establishment of counseling centers for PPAHA at central and sub-national levels;
- ◆ Awareness raising among PPAHA on the proper follow-up and compliance to treatment and continuous monitoring through self-support groups, PLHA networks, etc.

Component 4: Provision of Monotherapy and quality counseling during infant feeding for HIV+ mothers and their families (ref.: strategy 3 - PMTCT).

Component 5: Inclusion of Hep C treatment for management of co-infections among PLHA

Activity:

- ◆ Development of resource mobilization strategy for ensuring treatment regimens for HepC case management for all PLWHA with co-infection (see monitoring indicators & budget details).

Component 6: Advocacy and coordination for rational utilization of available scarce resources for meeting the ARV treatment requirements for all PLWHA

Activity

- ◆ Arrangement of regular round-table discussions and consultations for key decision-makers (CCM member agencies) on exploring possibilities for alternative procurement mechanisms of HAART regimens. Seeking opportunities for provision of generics or advocating for signing TRIPS Agreement could increase the state funded HAART treatment coverage from 5 patients (2002) to 20 (with generics) or even all patients (through TRIPS Agreement).
- ◆ Assessment and research on demonstrated effectiveness (best practices) or failures (lessons learned) from introduction of generics regimens in other countries.
- ◆ Mobilization of private sector for phasing-in with their resource contributions to ARV treatment for PLHA.

Monitoring and evaluation:

Interim and Final Outcome Indicators:

1. Percentage of PLHA receiving testing and symptomatic treatment through the National Programme funds, including Hep C treatment (100%)
2. Percentage of AIDS patients receiving HAART (100%)
3. Percentage of PPAHA with access to qualified counseling services – 20% by 2003, 40% - 2004, 60% - 2005, 80% - 2006 and 100% by 2007.
4. Percentage of staff trained in diagnostics and testing/counseling services at the laboratory centers operating throughout Georgia – 30% by 2003 and 100% by 2004.
5. Percentage of PLHA integrated in the national network for PPAHA – at least 60% by 2007.

**Strategy 7.1: Comprehensive Treatment including ARVs and monitoring of AIDS patients
Implementation Plan (Preliminary)**

	Activity Description	2003	2004	2005	2006	2007	Implementing Partner
1.	Testing and Symptomatic Treatment for PLWHA						MLHSA National AIDS Center
2.	HAART for PLWHA						MLHSA National AIDS Center
3.	Hep C treatment for all PLWHA with co-infection						MLHSA National AIDS Center
4.	Diagnostic Equipment for the National AIDS Center						MLHSA National AIDS Center
5.	Diagnostic Equipment for Batumi & Zugdidi Centers						MLHSA National AIDS Center
6.	In-service Training for 3 centers – Tbilisi, Batumi and Zugdidi						National AIDS Center
7.	Exchange programme for Masters Trainers (4)						National AIDS Center; Regional AIDS Centers in Zugdidi and Batumi
8.	Cascade Training by Master Trainers Central/Regional/District Levels						Masters Trainers, NAC Central/Regional/District Centers
9.	Establishment of a counseling center at the central level (Tbilisi)						Georgian + Group
10.	Expansion of the counseling centers for PPAHA at regional levels						Georgian + Group; NAC Central/Regional/District Centers
11.	Assessment and research on best-practices/lessons learned - generics						Governmental Commission – GOV, NGO, International Agencies
12.	Advocacy and coordination meetings						Governmental Commission – GOV, NGO, International Agencies
13.	Achievement of final CCM agreement re: generics/TRIPS						Governmental Commission – GOV, NGO, International Agencies
14.	Continuous monitoring and evaluation						Governmental Commission – GOV, NGO, International Agencies

**Strategy 7.1: Comprehensive Treatment including ARVs and monitoring of AIDS patients
Preliminary Budget and Implementing Partners**

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/ NGO	DON	GAPS
1.	Testing and Symptomatic Treatment for PLHA	106,600	159,000	236,000	359,000	541,000	1,276,000	200,000	-	1,076,000
2.	HAART for PLHA	79,342	126,743	205,625	331,626	520,884	1,264,220	300,000	-	964,220
3.	Hep C treatment for all PLHA with co-infection	42,000	82,000	103,000	126,000	147,000	500,000	-	-	500,000
4.	Diagnostic Equipment for the National AIDS Center	409,000	28,500	28,500	28,500	28,500	523,000			523,000
5.	Diagnostic Equipment for Batumi & Zugdidi Centers	-	25,000	25,000	-	-	50,000	-	-	50,000
6.	In-service Training for 3 centers – Tbilisi, Batumi and Zugdidi – 500 USD/training	1,500	-	-	-	-	1,500	-	-	1,500
7.	Exchange programme for Masters Trainers (4 trainers * 2,000 USD)	12,000	-	-	-	-	12,000	-	-	12,000
8.	Cascade Training by Master Trainers Central/Regional/District Levels – total 70 trainings * 2 masters trainers * 2 days	10,000	10,000	-	-	-	20,000	-	-	20,000
9.	Establishment of a counseling center at the central level (Tbilisi)	15,000	2,500	2,500	2,500	2,500	25,000	10,000	-	15,000
10.	Expansion of the counseling centers for PPAHA at regional levels (3 centers)	25,000	6,000	6,000	6,000	6,000	49,000	-	-	49,000
11.	Assessment and research on best-practices/lessons learned - generics	In kind	In kind	-	-	-	-	In kind	In kind	-
12.	Advocacy and coordination meetings – 12 meetings per year	In kind	In kind	In kind	In kind	In kind	In kind	In kind	In kind	-
13.	Achievement of final CCM agreement re: generics/TRIPS	In kind	In kind	In kind	In kind	In kind	In kind	In kind	In kind	-
14.	Monitoring and Evaluation	3,000	3,000	3,000	3,000	3,000	15,000	2,000	2,000	11,000
	TOTAL	703,442	442,743	609,625	856,626	1,248,884	3,735,720	512,000	2,000	3,221,720

Strategy 7.2: Service for People Personally Affected by HIV/AIDS

Objective: By 2007 ensure availability of accessible, affordable and confidential counseling, psychological and informational services for all PLHA and their family members:

Component 1: Provision of Post-test counseling to all PPAHA both at central and regional/district levels – by physician psychologist and/or self-support groups' volunteers.

1. Ensure availability of at least one physician/psychologist or volunteer for post-test counseling at each 69 testing laboratories throughout the country.
2. In-service staff and/or volunteers' training for development/improvement of quality post-test counseling skills throughout Georgia;
3. Establishment of the national network for PPAHA and ensure continuous networking and coordination for provision of regular office and outreach (house) counseling services.

Component 2: Continuous patients' education and education for family members

- ◆ Ensure availability or support establishment of accessible, affordable and confidential counseling services for PPAHA
- ◆ Establishment of confidential and free 24 h hotline services at central or regional/local levels
- ◆ Equip all available and operating psychosocial and health counseling services at central/regional/district levels and provision of proper referral for PPAHA (specialized services, self-support organizations, counseling services, other health facilities)
- ◆ Development and distribution of information-education materials for counseling and psychological services to PPAHA;
- ◆ Organization of communication and peer education w-shops for PPAHA – facilitated by Masters Trainers and international experts
- ◆ Organization of annual meetings with representatives of regional/district centers and national PPAHA network for analysis of the achievements, constraints and identification of gaps and opportunities for further improvement of the programme performance.

Component 3: Information Services

- ◆ Development and production of printed information-education-communication materials (series for PLWHA, production of periodical journals and publications for PLWHA)
- ◆ Organization of round-table meetings, seminars, w-shops for PPAHA
- ◆ Development of a comprehensive communication programme for media advocacy – TV/radio programmes, talk shows and press articles.

Monitoring and evaluation:

Interim and Final Outcome Indicators:

1. Percent coverage of the PPAHA with accessibility to affordable and confidential information-counseling services – 20% by 2003, 40% - 2004, 60% - 2005, 80% - 2006 and 100% by 2007.
2. Percent of PPAHA involved in the round-table meetings, seminars and w-shops – 40% by 2005, 60% by 2007.
3. Percentage of adolescent and adult population covered by IEC materials – 10%
4. Percentage of professional groups covered by IEC materials – 40%
5. Percentage of PLWHA involved in job-opportunity initiatives – at least 10% annually

**Strategy 7.2: Service for People Personally Affected by HIV/AIDS
Implementation Plan (Preliminary)**

	Activity Description	2003	2004	2005	2006	2007	Implementing Partners
1.	Assessment of the existing staffing structure at regional/district labs and recruitment process						National AIDS Center, Georgina Positive Group, AIDS Patients Support Foundation, Volunteers
2.	Training of service staff and volunteers (as the component of the cascade training course)						Masters Trainers, NAC, Central/Regional/District Centers, Georgina Positive Group, AIDS Patients Support Foundation
3.	Establishment of the national PPAHA network and services						Georgina Positive Group
4.	Establishment of the central/regional/district hotline service						NAC, Central/Regional/District Centers, Georgina Positive Group, AIDS Patients Support Foundation
5.	Inventory of all services and development of the referral list						NAC, Central/Regional/District Centers, Georgina Positive Group, AIDS Patients Support Foundation
6.	Development/production and distribution of IEC materials for counselors						National AIDS Center, Georgian Positive Group, AIDS Patients Support Foundation
7.	Communication and peer education w-shops (4 seminars)						National AIDS Center, Georgian Positive Group, AIDS Patients Support Foundation, other NGOs
8.	Annual meetings – w-shops for PPAHA						Georgian Positive Group
9.	Development of a comprehensive media advocacy and communication programme						Governmental Commission – GOV, NGO, International Agencies
10.	Continuous monitoring and evaluation						Governmental Commission – GOV, NGO, International Agencies

Strategy 7.2: Service for People Personally Affected by HIV/AIDS
Preliminary Budget and Implementing Partners

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/ NGO	DON	GAPS
1.	Assessment of the existing staffing structure at regional/district labs and recruitment process	In kind	In kind	-	-	-	In kind	In kind	-	-
2.	Training of service staff and volunteers (as the component of the cascade training course)	See Budg. for Str. 7.1	See Budg. for Str. 7.1	-	-	-	See Budg. for Str. 7.1	-	-	-
3.	Establishment of the Nat. PPAHA network and services. Establishment of web-site & networking between regional centers	See Str. 7.1 Plus 1,000 for web-site	See Str. 7.1 Plus 1,000 for web-site	500	500	1000	See Str. 7.1 Plus 4,000 for web-site	-	-	4,00
4.	Establishment of the central/ regional/district hotline service	7,000	7,000	7,000	7,000	7,000	35,000	-	5,000	30,000
5.	Inventory of available services and development of the referral list	In kind	-	-	-	-	In kind	In kind	-	-
6.	Development/production and distribution of IEC materials for counselors	5,000	5,000	2,000	2,000	2,000	16,000	-	-	16,000
7.	Communication and peer education w-shops (12 seminars)	10,500	7,000	-	-	-	17,500	-	4,500	13,000
8.	Annual meetings – w-shops for PPAHA	3,000	3,500	3,500	3,500	3,500	17,000	-	-	17,000
9.	Development of a comprehensive media advocacy and communication programme	7,500	7,500	5,000	5,000	5,000	30,000	-	-	30,000
10.	Continuous monitoring and evaluation	2,000	3,000	3,000	3,000	3,000	14,000	2,000	2,000	10,000
	TOTAL	37,000	34,000	21,000	21,000	21,000	133,500	2,000	11,500	120,000

Strategy 7.3: Advocacy and Social Mobilization

Objective: Combat stigma and discrimination to PPAHA through formation of supportive social environment and attitudes among key policy makers and population in general.

Component: Advocacy and communication campaign for supportive attitude formation among the society to PPAHA.

Activity:

- ◆ Communication programme for social attitude formation: mass media campaigns, talk shows, forums, actions, conferences, commemoration of WAD and WAVD campaigns, exhibitions.
- ◆ Organization of seminars, workshops for all key stakeholders – policy makers, social and health service providers, population in general. Support arrangement of 12 seminars (monthly) with facilitation of international and local experts.
- ◆ Supporting exchange training programmes for provision of quality health and social services for PLHA (policy makers and health-social services providers – 10 persons).
- ◆ Resettlement of PLHA for creation of job opportunities for PLHA – establishment of professional/carrier training programmes (IT, language, management course training) in Tbilisi, Batumi and Zugdidi (3 centers).
- ◆ Supporting involvement of PLHA in exchange training or post-graduate education programmes.

Strategy 7.4: Resource Mobilization

Objective: Ensure development and implementation of a comprehensive resource mobilization plan for securing adequate human, technical and financial resources for effective implementation of the activities planned for 2003-2007.

Activity:

1. Mobilization of human resources for voluntary and professional work with PLHA organizations or counseling-psychological services
2. Mobilization of technical resources for administrative capacity building of PLHA organizations, including assistance for formation of regional branches
3. Development of a long-term fund-raising strategy - with involvement of government, NGO, UN and other international organizations, private sector – for programme sustainability with emphasis on accessibility and availability of ARV treatment for all PLWHA.
4. Organization of resource mobilization meeting with national/international GOV/NGO and private sector partners – quarterly meetings through CCM or retreat meetings (annual).

Strategy 7.3: Advocacy and Social Mobilization - Implementation Plan (Preliminary)

	Activity Description	2003	2004	2005	2006	2007	Implementing Partner
1.	Communication programme for social attitude formation						Governmental Commission – GOV, NGO, International Agencies, Mass Media
2.	Organization of 12 workshops for all key stakeholders						Governmental Commission – National AIDS Center, GPG, AIDS PSF, International Experts
3.	Supporting exchange training programmes for 10 policy makers and health-social services providers						Governmental Commission - GOV, NGO, International Agencies
4.	Establishment of professional/career training programmes in Tbilisi, Batumi and Zugdidi						Governmental Commission – Georgian + Group
5.	Exchange training or post-graduate education for PLWHA						Governmental Commission – Georgian + Group

Strategy 7.3: Advocacy and Social Mobilization - Preliminary Budget and Implementing Partners

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/N GO	DON	GAPS
1.	Communication programme for social attitude formation	See St. 7.2	See St. 7.2	See St. 7.2	See St. 7.2	See St. 7.2	See St. 7.2	-	-	-
2.	Organization of 6 workshops for all key stakeholders (6 * 500 USD) per year	4,000	4,000	4,000	4,000	4,000	20,000	-	-	20,000
3.	International Consultancy for facilitation of 4 2-day w-shops	4,000	-	-	-	-	4,000	-	4,000	-
4.	Supporting exchange training programmes for 10 policy makers and health-social services providers	20,000	10,000	-	-	-	30,000	-	-	30,000
5.	Establishment of professional/career training programmes in Tbilisi, Batumi and Zugdidi	30,000	6,000	6,000	7,000	10,000	59,000	-	10,000	49,000
6.	Exchange training or post-graduate education for PLWHA	10,000	10,000	10,000	10,000	10,000	50,000	-	-	50,000
	TOTAL	68,000	30,000	20,000	21,000	24,000	163,000	-	14,000	149,000

**Strategy 7.4: Resource Mobilization
Implementation Plan (Preliminary)**

	Activity Description	2003	2004	2005	2006	2007	Implementing Agency
1.	Development of a long-term fund-raising strategy						Governmental Commission - GOV, NGO, UN and other International Agencies
2.	Organization of resource mobilization meeting with key players through CCM						Governmental Commission - GOV, NGO, UN and other International Agencies
3.	Retreat meetings with national/international GOV/NGO and private sector partners (annual)						Governmental Commission - GOV, NGO, UN and other International Agencies

**Strategy 7.4: Resource Mobilization
Preliminary Budget and Implementing Partners**

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/NGO	DON	GAPS
1.	Development of a long-term fund-raising strategy for human, technical and financial resource mobilization	In kind	In kind	In kind	In kind	In kind	In kind	In kind	In kind	-
2.	Organization of resource mobilization meeting with key players through CCM	3,000	3,000	3,000	2,000	2,000	13,000	1,000	2,000	10,000
3.	Retreat meetings with national/international GOV/NGO and private sector partners (annual)	3,000	3,000	3,000	3,000	3,000	15,000	-	5,000	10,000
		6,000	6,000	6,000	5,000	5,000	28,000	1,000	7,000	20,000

Priority 8:
Prevention of HIV transmission within health care facilities

(Total estimated for 2003-2005 - 60,800 USD)

Goal: to avoid HIV transmission within health care facilities

Strategy1: To review, amend and disseminate the national standard on universal precautions within health care facilities

Strategy2: To provide training for health care workers on universal precautions

Strategy 3: Patients' education

Strategy1: To review, amend and disseminate the national standard on universal precautions within health care facilities

Activities:

- ◆ To organize a working group of experts and review current national standards on universal precautions;
- ◆ To amend the standard according to current situation;
- ◆ To disseminate the new standard within health care facilities.

Strategy2:

To provide training for health care workers on universal precautions

Activity:

- ◆ To organize training for HCWs at the central and regional levels

Strategy3:

Patients' education

Activity:

- ◆ Development and dissemination of thematic IEC materials among patients attending health care facilities

Priority 8: Prevention of HIV transmission within health care facilities - Implementation Plan (Preliminary) and implementing partners

	Activity Description	2003	2004	2005	2006	2007	Implementing Partner
1.	To organize a working group of experts and review current national standards on universal precautions						MLHSA, IDACIRC
2.	To amend the standard according to current situation						MLHSA, IDACIRC
3.	To disseminate the new standard within health care facilities						MLHSA
4.	To organize training for HCWs at the central and regional levels						MLHSA, IDACIRC
5.	Development and dissemination of thematic IEC materials among patients attending health care facilities						IDACIRC, municipal and regional public health departments

Priority 8: Prevention of HIV transmission within health care facilities - Preliminary Budget

	Activity Description	Fiscal Years					Total in USD	Partners		
		2003	2004	2005	2006	2007		GOV/NGO	DON	GAPS
1.	To organize a working group of experts and review current national standards on universal precautions	in kind	in kind	in kind	in kind	in kind	in kind	in kind	in kind	-
2.	To amend the standard according to current situation	2,000	-	-	-	-	2,000	2,000	-	-
3.	To disseminate the new standard within health care facilities	3,000	--	-	-	-	3,000	3,000	-	-
4.	To organize training for HCWs at the central and regional levels	13,600	13,600	13,600	-	-	40,800	40,800	-	-
5.	development and dissemination of thematic IEC materials among patients attending health care facilities	3,000	3,000	3,000	3,000	3,000	15,000	15,000	-	-
	TOTAL	21,600	16,600	16,600	3,000	3,000	60,800	60,800	-	-

Expected outcomes of the 2003-07 NSPA

Full-scale implementation of the strategies and activities outlined within the proposed Strategic Plan of Action on HIV/AIDS prevention for 2003-2007 would enable achievement of following results and expected outcomes:

Outcome indicators:

1. Percent of IDUs covered by needle-exchange programme, outreach and peer education intervention - >60%
2. Percent of young people having access to VCTs on HIV - >90%
3. Percent of school youth of age 14-16 covered by HIV education programme >90%
4. Percent of CSWS and MSM having access to VCT > 35%
5. Safe blood transfusion > 97%
6. Percent of pregnant women having access to VCT > 90%
7. Percent of AIDS patients receiving HAART >100 percent

Monitoring and Evaluation:

Monitoring and Evaluation would be the integral part of the NSPA throughout the 5-year period. Daily monitoring of the plan implementation would be conducted by the partner organizations identified within the National Strategic Plan. Overall coordination and monitoring will be undertaken by the Governmental Commission on HIV/AIDS/STI and socially dangerous diseases (CCM), the executive body. Quarterly performance and financial reports on programme implementation would be submitted to the country coordination mechanism by implementing partners. For evaluation of the strategic plan implementation epidemiological, sociological and biological surveys will be conducted to measure the impact and outcome of the supported activities/interventions according to the initial (baseline) process and target indicators.

Financing and management:

The estimated total budget for the 7 key components of the 2003-2007 National Strategic Plan of Action is 10,873,433 USD, including:

- ◆ USD funded by the Government and local NGO resources (National Programme on Safe Blood and HIV/AIDS/STI Prevention, programme/projects implemented through local NGOs),
- ◆ Substantial part of resources in terms of institutional and human capacities allocated as the in kind contribution through the existing National Programmes on Safe Blood and HIV/AIDS/STI Prevention, IDUs and CSWs targeted prevention programmes funded through GOV/NGO sectors, national expertise for policy and curricula formulation, etc.
- ◆ USD allocated/planned from international donor organizations - UN Theme Group member agencies (UNICEF, UNFPA, WHO, UNDP), other international bilateral and multilateral donors - USAID and international NGOs - Save the Children, Population Service International.
- ◆ The Financial Gaps outlined in the budget sections of each priority area comprise total estimated USD for the 5-year period.

The work performed within the National Strategic Planning Process in Georgia – the Situation Analysis (2001), National Response Analysis (June 2002) and the presented Strategic Plan of Action (September 2002) has built a sound basis for development of a comprehensive resource mobilization strategy for securing adequate human, financial and technical resources for effective implementation of the priority interventions outlined in the 5-year National Plan of Action. A sound fund-raising strategy with involvement of all key stakeholders – national government, NGOs and international community should be created if the National Strategy Plan of Action is to become effective in control and prevention of developing wide scale HIV/AIDS epidemic in the country.

The Governmental Commission on HIV/AIDS/STI and other socially dangerous disease, as the country coordination mechanism (CCM) will be responsible for overall coordination of the NSPA implementation and the resource mobilization strategy. Implementing partners as outlined in the preliminary implementation plan of the NPA will be accountable through interim financial and performance reports to the CCM. UN Theme Group agencies – UNDP, UNICEF, UNFPA, WHO, WB will provide financial and technical contribution to the NSPA, as well as expertise for policy formulation, programme design, curriculum development, etc.

The IDACIRC, as the secretary of the CCM, coordinator of the National Programme on Safe Blood, HIV/AIDS and STI prevention, in close consultation with CCM and UNTG partners will ensure overall coordination, supervision, M & E of the NSPA implementing process throughout the 2003-2007 period. The Implementing partners (national GOV and NGOs, international agencies) as outlined within the relevant priority areas will be closely cooperating with the IDACIRC and other CCM and UNTG partners for continuous coordination, decision making and review/refinement of the current strategies and activities.

The National Strategic Plan of Action elaborated by the National Experts Team assigned by the CCM partners has been approved by the Ministry of Labor, Health and Social Affairs on 15 September 2002.

The CCM member agencies realize the importance for continuous monitoring, assessment and analysis of the activities undertaken within the 50year Plan of Action and agree to revise and ,if considered reasonable through joint consultation, refine the strategies and activities outlined in the 2003-2007 NSPA document. Annual revision of the plan would enable the partners to analysis the performance of the programme activities, identify the major achievements/constraints and the challenges to be met for development of the effective HIV prevention and control system in Georgia.

National Strategic Planning Process in Georgia – 2000-2002

The first draft of the National Strategic Plan of Action for HIV/AIDS Prevention in Georgia for 2000-2002 has been elaborated by the country delegation (GOV, NOG and international agency representatives) at the Caucasus Area Meeting on HIV/AIDS National Response, supported by UNICEF/UNAIDS/USAID in June 2000 in Odessa, Ukraine.

Revision of the national strategic interventions has been undertaken at the USAID/PSI supported second Caucasus Area Meeting on HIV held in November 2001 in Vienna, Austria.

Within the period the CCM and UNTG partners have supported the Situation Analysis on HIV/AIDS (2001) and National Response Analysis (2002), that gave a comprehensive data for refinement and finalization of the Strategic Plan of Action on HIV/AIDS for 2003-2007 period.

The strategic planing process has been supported through 3-day workshop with participation of the working group – national experts' team from CCM and UNTG member agencies. The w-shop has been facilitated by Dr. Alexander Busel, the UNAIDS Consultant and the National Experts Team would like to express acknowledgements for his valuable support for the NSPA formulation.

Members of the National Experts Team working on finalization of the 2003-2007 National Strategic Plan of Action:

Dr. Iago Kalandadze – Deputy Minister, MLHSA

Dr. Ramaz Urushadze – Head of Public health department, MLHSA

Dr. Tengiz Tsertsvadze – Chairman of Board, Infectious Diseases, AIDS and Clinical Immunology Research Center (IDACIRC)

Dr. Shota Gogichaishvili – Executive Director, IDACIRC

Dr. Gela Lejava – Chairman of Board, Institute of Drug Addiction

Mrs. Eka Kuchava – Chief specialist, Dep. of Public Health, MLHSA
Mrs. Nana Ninashvili - Head of epidemiology unit, Dep. of Public Health, MLHSA
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Mr. George Kalandadze – President, NGO “Bemoni”
Mr. David Ananiashvili – Director, NGO Georgian + Group
Mr. Irakli Khvedelidze – Deputy Director, PSI
Mr. Archil Undilashvili – Head of health department of Youth Parliament of Georgia