



UNODC

United Nations Office on Drugs and Crime

ANNUAL PROJECT PROGRESS REPORT for 1 January – 31 December 2009

Project Title: HIV/AIDS prevention and care among injecting drug users and in prison settings in Estonia, Latvia and Lithuania
Project Number: XEEJ20
Duration: November 2006 – December 2010
Total Budget: USD 5,681,799
Donor: The Netherlands

I. UNODC strategy context

Theme: Prevention, treatment and reintegration, and alternative development

II. Results Achieved

Project Objective: To assist Estonia, Latvia and Lithuania to halt and reverse the HIV/AIDS epidemics among injecting drug users and in prison settings

Outcomes

1. Build national and regional consensus on effective implementation strategies to address HIV/AIDS among injecting drug users and in prisons.
2. Increase coverage of comprehensive HIV/AIDS prevention and care services among injecting drug users and in prison settings.
3. Generate and share strategic information to keep programme on track and to respond appropriately to the evolving HIV/AIDS epidemics among injecting drug users and in prison settings.

Results achieved based on indicators:

1. Through project activities the need of evidence informed HIV prevention among injecting drug users (IDUs) and in prisons has been brought to the attention of high level policy makers. In Estonia, the project has been slowly building consensus around approaches to HIV prevention in prisons, including the role of NGOs. Improved inter-ministerial cooperation has been demonstrated during the consultations between the Ministries of Justice and Interior, and the National Institute for Health Development on continuation of methadone therapy for drug users under arrest. In Latvia, consensus on effective implementation strategies to address HIV/AIDS among IDUs and in prisons has been demonstrated by adopting a new National HIV/AIDS Programme for 2009 – 2013. National response to HIV/AIDS is being monitored by the National Coordination Commission on Limitation of Spread of HIV, TB and STI. The Commission comprises representatives from the Ministry of Health, Ministry of Justice, Public Health Agency as well as other stakeholders including non-governmental organisations. In Lithuania, building of national consensus continues through the on-going process of

development of a new National HIV Programme as well as meetings and consultations with policy makers, experts and civil society organisations. Mid-term evaluation noted that overall, across the countries, there appears to be a growing consensus about the centrality of harm reduction measures within responses to HIV and AIDS. Harm reduction is firmly on the political agenda in each country and there has been more debate and discussion of the issues among stakeholders. Some stakeholders have re-evaluated their opinions on the topic in the light of these debates. However, progress in prison sector has been slower than in the community.

2. To increase coverage of key services for IDUs new methadone maintenance programmes and needle and syringe programmes have been opened in Latvia and Lithuania. Geographic distribution and accessibility to services has improved in both countries. According to the data provided by national authorities, coverage of needle in syringe programmes in Estonia has increased from 40% in 2008 to 52% in 2009, and in Latvia from 18% to 27% respectively. Data on coverage in Lithuania are not available due to insufficiencies in the current reporting system. Lithuanian Drug Control Department has reported a slight increase in the number of syringes distributed, but a decrease in the number of client visits to harm reduction services. In Lithuania in 2009, the number of clients receiving methadone maintenance therapy had increased by 47% comparing with 2006 when the project was started. In Estonia, the main focus has been on the quality of pharmacotherapy and its continuation in police detention centres and in prisons. In cooperation with the National Institute for Health Development, Ministry of Social Affairs, Ministries of Justice and Interior specific recommendations have been prepared to increase the quality of methadone maintenance therapy and to ensure its availability for persons under arrest. To ensure quality of services, training has been organized for addiction treatment physicians, nurses, social workers, police and prison staff and NGOs. Mid-term evaluation concluded that the project has resulted in the introduction of new community services and that respondents believe that training organized by UNODC has been very valuable in this regard. In terms of harm reduction services in prisons, the capacity building activities have contributed to increased dialogue among the key stakeholders and introduction of harm reduction education in most of the prisons in Latvia.
3. The project has contributed a great deal to the increased availability of strategic information through supporting a number of studies and reviews. Mid-term evaluation noted that these studies through national agencies have helped to develop a culture of evaluation and national expertise of conducting evaluations. Information is available on project website and is being actively disseminated to various stakeholders. Some concerns remain that in Lithuania strategic information is not always being used to shape the national response to HIV and AIDS.

Outputs:

- 1.1. National HIV/AIDS strategies and action plans amended.
- 2.1. Improved institutional and professional capacity to address HIV/AIDS among injecting drug users and in prisons.
- 2.2. Increased access to HIV/AIDS prevention and care services for injecting drug users and in prison settings.
- 3.1. All stakeholders are provided with strategic information and analysis on which they can base policy decisions concerning HIV/AIDS prevention and care among injecting drug users and in prison settings.

Results achieved based on indicators:

1.1. National HIV/AIDS strategies and action plans amended.

Results of evaluation of pharmacotherapy of opioid dependence in Estonia were presented and discussed with health care experts and policy makers. The evaluation was conducted by experts of the National Institute for Health Development and Trimbos Institute, the Netherlands. It was concluded that in the previous years the main focus had been on increasing the number of clients without paying sufficient attention to the quality issues. Staff had not received appropriate training, and methadone therapy had a very bad image among the clients and health professionals. Discontinuation of therapy in police arrest houses is one of the obstacles for scaling-up methadone maintenance therapy in prisons. The evaluation recommended to revise the national guidelines for pharmacotherapy of opioid dependence and to introduce quality assurance mechanisms. It was also recommended to support training of staff and to facilitate exchange of experience among various treatment centres.

In cooperation with Estonian Ministry of Justice a workshop was organized to discuss possibilities to continue pharmacotherapy for opioid dependence in arrest houses. The meeting was attended by National Police, Institute for Health Development, treatment providers and NGOs. It was concluded that there are no legal obstacles for provision of methadone maintenance therapy (MMT) in arrest houses and prisons. As the Ministry of Interior does not have sufficient knowledge on MMT, it was agreed that the Ministry of Justice will take the lead in preparing a pilot project on continuation of therapy in police arrest houses in 2 cities: Tallinn and Johvi.

In June 2009, a new National HIV Programme for 2009 – 2013 was adopted by the Government of Latvia. The programme is based on epidemiological evidence and includes the following activities aimed to prevent spread of HIV among IDUs and in prisons: needle and syringe programmes (NSPs), pharmacotherapy for persons dependent on opioids, HIV testing, HIV prevention and treatment in prisons. In response to recommendations of mid-term evaluation, the National Coordination Commission on Limitation of Spread of HIV, TB and STI has assumed responsibilities of the Project Steering Committee. This will help to secure sustainability of project results and to ensure improved and more effective collaboration with the national HIV coordination process.

Following the interruption of HIV testing in Latvia's prisons UNODC initiated a dialogue between the Ministries of Health and Justice. In the result, normative documents have been amended to define responsibility of the Ministry of Health in securing funds for HIV monitoring in prisons. Thus, the issue of funding HIV testing in prisons has been solved at the systems level and further interruptions of HIV testing in prisons have been averted.

Ministry of Health has approved the report on „Evaluation of the access to HIV/AIDS treatment and care in Latvia“ prepared by WHO and UNODC. The evaluation concluded that there are significant barriers to receive treatment for IDUs and prisoners due to stigma and insufficient funding. It was recommended to scale up access to ART by decentralizing treatment outside Riga and obtaining lower ARV prices. The report also recommends to scale up methadone maintenance treatment in the community and prisons, and to promote greater integration of TB, HIV and drugs services.

UNODC has provided technical assistance to the Ministry of Health in revising the Lithuanian National HIV Programme for 2009 – 2012 according to the recommendations of the peer review by AIDS Strategy and Action Plan Service (ASAP). ASAP noted that the strategy would be stronger if the proposed activities closely matched the epidemic situation – i.e., a strong focus on prevention among IDUs rather than general population education.

Vilnius Centre for Addiction Disorders and Lithuanian Psychiatrists Association had the lead role in drafting a new protocol for methadone maintenance therapy. The protocol has been reviewed by WHO experts and presented during a national conference for psychiatrists. The new protocol has also been shared with experts and policy makers in Estonia and Latvia.

In cooperation with EMCDDA, technical assistance for estimation of the size of IDU population has been provided to Latvian and Estonian experts. The estimated size of opioid user population in Riga is 5900. The estimates at national level in Latvia and Estonia will be finalized in 2010.

2.1. Improved institutional and professional capacity to address HIV/AIDS among injecting drug users and in prisons.

All capacity building activities have been completed according to the agreed country work plans and previously assessed training needs. During the reporting period 24 training workshops and 14 meetings have been organized with the total number of participants amounting to almost 1100. In addition, the project has supported participation of 67 persons in international conferences and meetings of experts and policy makers. Trainings on HIV prevention and care, harm reduction and pharmacological treatment of opioid dependence have been provided to prison staff and police officers, drug dependence practitioners, social workers, pharmacists and NGOs.

In Latvia, six seminars on HIV prevention and education were organized for a group of trainers from prisons. The aim of the seminars was to train trainers who can develop and deliver HIV education programmes for prison staff and prisoners. Trainers are following the methodological guidelines of the handbook “Risk reduction for drug users in prisons” which has been prepared within the framework of the on-going project. By the end of 2009, 7 out of the 12 prisons in Latvia have staff qualified to deliver harm reduction education.

Psychiatrists, social workers and nurses from Estonian prisons and community treatment centres were trained on appropriate dosing of methadone and interaction of methadone with other medications. In Lithuania, training on drug dependence disorders was organized for prison guards and police. The aim of the seminars was to increase awareness about drug dependence, the treatment possibilities, including pharmacotherapy and the role of law enforcement agencies in referring drug users to treatment services. Two seminars about HIV prevention were organized for prison staff and NGOs participating in the adaptation of a manual on risk reduction for drug users in prisons. In cooperation with Kaunas Medical University pharmacists were trained on HIV prevention for drug users. During the seminars experience of pharmacists with drug users was discussed and it was agreed to start dissemination of information about harm reduction services through the pharmacies. All training activities have been assessed and majority of participants have acknowledged that they have obtained new knowledge and skills that will be applied in their professional work. Training programme on social work with IDUs has been prepared and approved by Siauliai Medical College.

Round table discussions on scaling up services for IDUs were organized with local policy makers and experts in the Lithuanian cities of Siauliai, Marijampole and Kaunas. Siauliai and Kaunas municipalities are committed to continue support for needle and syringe programmes and methadone maintenance therapy. In Marijampole, in the current economic situation no resources are available for harm reduction services.

A regional training on pharmacotherapy for women with opioid dependence was organized for methadone maintenance programmes from all three Baltic States. The participants were trained on treatment strategies for pregnant women, mother-to-child transmission of HIV, psychosocial support for pregnant women and after birth, and methadone therapy in ARV and hepatitis C therapy. Staff of methadone treatment programmes also received training on motivational interviewing and intervention.

Staff of needle and syringe programmes from Latvia and Lithuania were trained on peer driven interventions for IDUs. Participants received knowledge and practical skills for involvement of IDUs in HIV prevention education. Piloting of peer driven interventions in both countries is scheduled for 2010.

During the reporting period the following information and education materials have been developed and disseminated: Voluntary HIV Testing and Counselling (in Lithuanian), Diagnostics, Treatment and Social Support of Opioid Dependent People (in Lithuanian), Technical Guide on Starting and Management of Needle and Syringe Programmes (in Latvian), Frequently Asked Questions about Methadone and Buprenorphine (in Lithuanian, Latvian and Russian), HIV/AIDS Prevention, Care and Support in Prison Settings: the case of NGO Convictus, Estonia (in English), Manual on risk reduction for drug users in prisons (in Lithuanian), HIV and hepatitis A, B and C (in Latvian and Russian), Life continues: a brochure for PLWHA (in Latvian and Russian), a brochure on safe injecting (in Latvian and Russian). In addition to these, also materials developed by other organizations were disseminated, like Self-Aid for People Overcoming Abstinence Syndrome and Drug-Drug Interactions in Opioid Maintenance.

2.2. Increased access to HIV/AIDS prevention and care services for injecting drug users and in prison settings.

Grant agreements have been signed with 6 organizations in Latvia and 4 organizations in Lithuania. The interventions supported within the small grants scheme include HIV and drugs education in prisons, new methadone therapy programmes, as well as scaling up coverage of needle and syringe programmes. This has been achieved through opening of new services and introducing outreach and peer driven interventions for HIV prevention among injecting drug users. The services are provided by NGOs, prison staff, social services at the municipalities, and health care centres. A grant has been provided to Estonian National Institute for Health Development for training of service providers, revision of guidelines for methadone maintenance therapy, provision of methadone therapy in police detention centres and pilot project on integration of HIV treatment and methadone maintenance therapy.

Implementation of projects started under the previous year's grant scheme was continued. In April, a seminar was organized to share information about the main achievements of needle and syringe programmes in Latvia supported by UNODC small grants scheme in 2008. The seminar was attended by service providers, NGOs and representatives from municipal and

governmental institutions who also discussed the sustainability of harm reduction programmes and the potential risks during the economic crisis. Although funding of needle and syringe programmes from the national and municipal budgets will be continued it is expected that the total budget will be reduced and further scaling-up of services will be impossible without external support. According to the Public Health Agency, in 2008 the number of new clients reached by needle and syringe programmes has increased by 161% comparing with the previous year, the number of distributed syringes has increased by 44.6%, the number of distributed condoms – by 56.6% and the number of HIV tests performed for IDUs – by 48%. In 2009, the coverage of needle and syringe programmes was 27%, which is a 9% increase comparing with the previous year.

In Lithuania, some difficulties have been identified in collecting reliable data from needle and syringe programmes. To address this problem, technical support is provided to the Drug Control Department in developing and implementing a data collection protocol for needle and syringe programmes. Information was collected on existing practices regarding continuation of methadone therapy in police detention centres in Lithuania. The results showed that there is no consistency and different approaches are used across the country. In the biggest cities therapy is discontinued for drug users under arrest. The results were presented to the Police Department and the Ministry of Interior and it was agreed to develop guidelines for provision of methadone in police detention centres.

3.1. All stakeholders are provided with strategic information and analysis on which they can base policy decisions concerning HIV/AIDS prevention and care among injecting drug users and in prison settings.

In January, UNODC organized a regional conference “Universal Access to HIV prevention and care by 2010: can we achieve it in the Baltic States?” During the conference, policy makers, drug dependence treatment and HIV prevention experts from prisons and community services as well as NGOs exchanged information about results achieved in each of the project countries, discussed recommendations of the mid-term evaluation and project priorities for 2009 – 2010. National conferences were organized in Latvia and Lithuania to present project achievements in the current year and to share lessons learned.

In Lithuania, international conference “Penal enforcement system: present situation and future perspectives” was organized in cooperation with the Prison Department. The participants shared the experience of European countries in addressing drug use and HIV in prisons, and a special focus was on the discussion about possibilities to introduce methadone maintenance therapy in the penal institutions of Lithuania.. UNODC also supported participation of Estonian, Latvian and Lithuanian experts in the international conferences “Joining the Dots: criminal justice, treatment and harm reduction”, “Prison Health Protection – What Works in the Prevention and Control of Major Communicable Diseases”, and 5th European Conference on Clinical and Social Research on AIDS and Drugs.

Information about the most important project activities, study reports and other technical documents is posted on the project website www.unodc.org/balticstates

III. Risk Analysis (Assumptions)

Some risks for the project sustainability have emerged in relation to the global crisis. According to IMF, the Baltic States are among the countries most heavily hit by the crisis. In the second quarter of 2009, GDP in Estonia has decreased by 16.1% comparing with the

same period a year ago, in Latvia – by 19.2%, and in Lithuania – by 16%. In all three countries the governments have significantly cut the budgets of all sectors, including health care and social sectors. Reforms in the health sector have been initiated in Latvia and Lithuania, and there is a risk that preventive services especially for such most-at-risk groups as drug users, sex workers and prisoners are an easy target for disproportionate reduction of resources. To address these risks UNODC will intensify advocacy work for HIV and harm reduction in particular. Project exit strategy has been updated and shared with the national counterparts and the project donor.

IV. Project Management

There have been no changes in project management modalities. Cooperation with implementing partners in the Ministries of Health, Ministries of Justice, HIV prevention service providers and NGOs is very good.

Some difficulties in financial management have emerged due to insufficient capacity of UNDP office in Lithuania. To address this problem, UNODC HQ assisted with introduction of new procedures for management of UNODC project grants.

The overall project budget has been increased by USD 681,799.

V. Monitoring

All grant recipients are requested to submit financial and narrative reports in the middle and after the completion of the project activities. In addition to that, UNODC staff regularly visits all services supported within the small grants scheme to monitor and advise on project implementation. To monitor the quality of capacity building activities all participants of study tours and training activities are asked to complete assessment questionnaires which are later analyzed by UNODC and the trainers. According to the recommendations of the mid-term evaluation, indicators for measurement of coverage of services have been developed and shared with implementing partners. UNODC Project Office prepares quarterly project progress reports which are shared with the donor government and project steering committees in the three countries.

VI. Evaluation

From December 2008 till January 2009, project mid-term evaluation was carried out by an independent expert. The purpose of evaluation was to measure progress towards achievement of the expected outcomes and to assess the measures that the project has put in place in order to create positive impact in the future. The evaluation concluded that this is an extremely useful and well-run project that is highly relevant to the national responses to HIV and AIDS in each of the Baltic States. There is some evidence of progress towards the objectives and results at this mid-point of project implementation. The main concern raised in the evaluation is the sustainability of activities and systems established during the course of project implementation. It was recommended to invest time in measures to increase the likelihood of sustainability. It was also recommended to include in the performance monitoring framework a small number of quantitative measures of coverage of key services. The main findings of the evaluation were presented and discussed during a regional meeting that took place in the end of January 2009 in Latvia. Evaluation report has been approved by the government focal implementation agencies in all three countries and subsequently a plan for implementation of the recommendations has been prepared by UNODC.

VII. Overall assessment of the final implementation status of the project:

Project objectives almost achieved with only minor changes, deviations or shortcomings.