

Evaluation of project “HIV prevention among young IDUs” (10 regions of Ukraine) plus KAP results (2002)

I. Brief summary

Evaluation of project “HIV prevention among young IDUs” (10 regions of Ukraine)

(a) Reasons for and purpose of the evaluation.

To evaluate the results reached by the project (2001-2002) against to its objective: to build the capacities of social services for youth in the field of HIV prevention among young IDUs.

To analyse and describe the monitoring and evaluation system developed and established for the purposes of the project for its further scaling up.

(b) Brief summary of design and methodology.

Evaluation of the main project stages: development (situation analysis, criteria, logical model, and analysis of the related projects), process and results.

Evaluation of project impact on three levels: individual, social, and political.

Key spheres of monitoring and evaluation: implementation lines of the project, their adequacy to the needs of the target group, perspectives for project’s development.

Evaluation and monitoring of the following components of the project:

target audience needs and services provision by the project;

production of IECM;

training of social workers and volunteers on harm reduction;

advocacy with the participation of local authorities, mass media and target group;

provision of individual protection means;

counselling and needle exchange points “Trust”.

(c) Summary of participants in the evaluation process: e.g. Government, NGOs, communities, donor organizations, UN Development Group partners and others (N.B. joint evaluations, especially in the UN context, are strongly encouraged).

State Institute of Youth and Family Issues, State Centre of Social Services for Youth, Local Centres of Social Services for Youth, local administrations, local NGOs, volunteers groups and media.

(d) Significant children's or women's rights issues addressed.

“States Parties shall take all appropriate measures, including legislative, administrative, social and educational measures, to protect children from the illicit use of narcotic drugs and psychotropic substances...” (UN Convention on the Rights of the Child, article 33)

(e) Conclusions, lessons learned, recommendations, use made of the evaluation to make timely adjustments in programme design and improvements in programme performance, possible wider relevance of the evaluation (e.g. for Sector Wide Approaches and reform processes), and follow-up actions undertaken to date.

The results are used for the better planning of the prevention activities among IDUs by the social services for youth (SSY) and improvement in project performance. The project managed to bring different agents for co-operation like social and youth workers, health care professionals, psychologists and young people. It established the framework for prevention activities among IDUs by the SSY. The government recognised the results of the pilot project on HIV prevention among IDUs and the model is being implemented now for scaling up on the national level. Regulations regarding the specialised service “Counselling point for young IDUs “Trust” were approved by the Government. Currently 35 points “Trust”, based on local Centres of

Social Services for Youth, provide counselling and needle exchange for young people experimenting with drugs in 19 cities of Ukraine. As the project was considered as a pilot for the further development of the prevention activities among IDUs by the SSY there were given the following recommendations for increasing the efficiency in the all-country context:

- to solve/advocate for solving the issue of lack of funds from the state budget on prevention work: the shortage of supplies obstruct the efficiency of NE programmes;
- to increase outreach efforts towards drug injectors at places , encourage ongoing peer support to reach the many IDUs who are reluctant to come to the program;
- to introduce the strategy of work with media for overcoming prejudice and fears, forming conscious positive public attitude towards harm reduction;
- to increase the spectrum of services provided by “trust” points;
- to provide access to the means of social and psychosocial rehabilitation through the state system of rehabilitation centres for drug users;
- to develop a wide range of VCT services;
- to consolidate the efforts of SSY, NGOs, education, health care and law services in the field of HIV prevention among IDUs for better co-ordinated and comprehensive response.

The evaluation also produced the detailed recommendations on the major tasks and priority ways for development of prevention and information activities for the SSY. The appropriate monitoring and evaluation system for HIV prevention among IDUs projects is established.

Knowledge, Attitudes and Practice Survey among young IDUs: second KAP and comparative analysis 2001 - 2002” (10 regions of Ukraine)

(a) Reasons for and purpose of the evaluation.

To explore the changes in existing knowledge, attitudes and practices on HIV prevention among IDUs. To develop effective and acceptable by target group messages and methods on HIV prevention based on KAP survey results.

(b) Brief summary of design and methodology.

The survey was conducted in 14 cities of Ukraine. Analysis was based on mass selective poll of young IDUs aged 14-28. The first KAP was conducted before the start of the project in selected cities. The second KAP was conducted in one year and a half of project’s implementation. Used the closed-open type questionnaire. The method used - anonymous structured “one to one” interviews. The number of respondents was 1,997 young IDUs. Among them 623 clients of “Trust” counselling and needle exchange points established within the project from nine cities. The project’s impact was searched against the young people’s level of awareness on HIV, practice of drug using and sexual behaviour.

(c) Summary of participants in the evaluation process: e.g. Government, NGOs, communities, donor organizations, UN Development Group partners and others (N.B. joint evaluations, especially in the UN context, are strongly encouraged).

State Institute of Youth and Family Issues, State Centre of Social Services for Youth, Local Centres of Social Services for Youth, local administrations, local NGOs, volunteers groups and media.

(d) Significant children's or women's rights issues addressed.

“States Parties shall take all appropriate measures, including legislative, administrative, social and educational measures, to protect children from the illicit use of narcotic drugs and psychotropic substances....” (UN Convention on the Rights of the Child, article 33)

(e) Conclusions, lessons learned, recommendations, use made of the evaluation to make timely adjustments in programme design and improvements in programme performance, possible wider relevance of the evaluation (e.g. for Sector Wide Approaches and reform processes), and follow-up actions undertaken to date.

The results are used for the better planning of the prevention activities among IDUs by the social services for youth (SSY) and improvement in project performance. Throughout the project the level of young IDUs' awareness on ways of transmission raised on 1% and remained stable and high – 93%. But with comparison to data 2001 the number of respondents who confirmed their awareness on HIV/AIDS threats increased significantly. Per example: only 2% consider themselves unaware in 2002 while there was 13% in 2001. The main sources for information on HIV/AIDS for IDUs remained the same: TV, friends and newspapers, but the new one appeared in the answers of 2002 – 10% of respondents addressed “Trust” points for information purposes. As the project introduced the new form of work such as counselling and needle exchange points “Trust” it was a very positive fact.

Safe injecting practices: in comparison with data 2001 the number of IDUs respondents using the disposable syringe once increased on 10% and accordingly the number of those using the same syringe from 4 to 9 times decreased on 6% and from 10 to 20 times – on 8% in 2002. Among clients of “Trust” points the number of IDUs using the same syringe only once is constantly increasing.

Sexual behaviour: comparative analysis of KAPs showed 11% increase of number of respondents having only one sexual partner. The number of those always using the condom increased on 6%.

97% of “Trust” points clients plan to continue use these services. 90% are satisfied with the attitude from the staff but 55% expressed the need for improvement of the quality and quantity of services connected with the shortage of supplies. This should be addressed through the consolidation of efforts of SSY, NGOs, education, health care and law services in the field of HIV prevention among IDUs for better co-ordinated and comprehensive response.

The detailed recommendations on the major tasks and priority ways for development of prevention and information activities for the SSY were also developed.

II. Technological Scheme for Monitoring and Evaluation of the Effectiveness of the Project

1. First (initial) stage

At the beginning of the project implementation, monitoring was projected to be:

1. A Basic Evaluation of The Situation, Accomplished by Interviewing Injection Drug Users in Seven Cities of Ukraine⁶.

Main indicators for evaluation were:

- IDU level of awareness about HIV/AIDS;
- practice patterns;
- knowledge about preventive programmes;

⁶ Young people using injection drugs: awareness of, understanding the risk of HIV-infection, practice // Analytical report based on the results of the survey of injection drug users as a part of HIV/AIDS Prevention among Young People using injection drugs Project (printed with the support of UNICEF), - K., 2001. – 64 p.

- IDU fundamental needs for services;
- desire, intentions to use project services.

Methods Used In the Basic Evaluation:

Interviewing IDU in structured one-on-one interviews. Interview type: Knowledge, Attitude and Practice. The questionnaire contained blocks of relevant questions on the subject of HIV/AIDS, preventive measures and so on.

Survey was conducted September 10 through October 10, 2001 in seven cities of Ukraine: Mykolajiv, Kharkiv, Chervonohrad (Lviv region), Chernihiv, Sevastopol, Melitopol (Zaporizhja region), and Donetsk.

SSYC volunteers conducted the survey. A total of 638 respondents, 14 and more years old, were polled.

2. Monitoring the Logical Model of the Project (Goals, Objectives, Directions of Work, Ways of Implementation), Which Included the Study and Analysis of:

- the correspondence of project goals and objectives to the existing situation;
- the relevance of goals, objectives and the object;
- the correspondence of the goals and objectives to the ways of project implementation;
- the adequacy of the ways of project implementation;
- the nature of bringing together different work directions;
- the factors hindering the beginning of project implementation;
- the factors furthering project implementation.

Methods Used In the Monitoring of the Logical Model:

- ✓ Analysis of project documentation.
- ✓ Half-structured telephone interviews of project co-ordinators.

3. Monitoring the Development and Testing of Informational Educational Materials:

- considering the opinion of the specialists;
- considering the opinion of the representatives of target groups, for whom these materials were intended.

Methods Used in Monitoring the Development and Testing of Informational Educational Materials:

- ✓ Individual conversations with specialists;
- ✓ Individual conversations with injection drug users.

4. Monitoring the process of teaching social workers and SSYC volunteers safe behaviour skills and methods of carrying out prevention-related activities based on harm reduction strategy, in the course of which the following were analysed:

- the number of training courses;
- the number of specialists that went through training;
- topics, contents of training courses and their correspondence to project objectives.

Methods Used for Monitoring Training:

- ✓ Analysis of project documentation.
- ✓ Half-structured telephone interviews of project co-ordinators.

Half-structured telephone interviews of project co-ordinators were conducted in December 2001. I.M.Pinchuk, Deputy Head of the State Social Services for Youth Centre, V.A.Sanovska, Head of the Social Programmes Implementation Department of the State Social Services for Youth Centre and R.S.Bezkaravajeva, Director of Makijivka City SSYC were interviewed.

The results of the basic evaluation and monitoring of the project are presented in Section 3 of this report.

II. Second stage. Monitoring Project Implementation

Systematic analysis, including an evaluation of several components of the project, using qualitative and quantitative methods, with several months' intervals, was planned in order to determine whether expected results of project implementation and real results.

1. Monitoring teaching leaders from among teenagers, teachers and parents safe behaviour skills and methods of carrying out prevention-related activities, based on harm reduction strategy. Half-structured interviews of the specialists, who conducted the training, were the main method of monitoring, the purpose of which was to determine:

- the level of usefulness of knowledge and skills received during training for practical work;
- the level of application of received knowledge and skills in practice;
- the need for additional training and its possible content.

2. Monitoring educational activities through dissemination of informational educational materials for IDU and representatives of their closest environment by interviewing target group representatives and IDU closest environment, in order to determine:

- the availability of informational educational materials;
- intelligibility, clarity of materials content;
- their effectiveness, consequence;
- shortcomings and gaps;
- main needs for additional information (topics, content, etc);
- attitude towards materials design;
- ways of dissemination.

3. Monitoring activities with the participation of the local authorities, mass media and target groups that involves half-structured interviews of the participants of those events in order to determine:

- the level of knowledge about the direction of project implementation;
- attitude towards target group representatives and main aspects of work under the project;
- possible ways of co-operation, possibilities for project development, opportunities for using experience, and its dissemination.

4. Monitoring the purchase of personal safeguards against HIV-infection by analysing project documentation that concerns this type of activities, as well as interviewing project workers and target group, in order to determine:

- possibility of purchasing: obstacles, problems etc.
- sufficiency of resources for purchasing such safeguards;
- quality of safeguards;
- ways of distribution of safeguards, possibility of their development and improvement;
- the mechanism of safeguards' distribution, its adequacy in terms of IDU needs;
- IDU needs in terms of kinds, quantity and quality of safeguards that are distributed.

5. Monitoring the work of the SSYC Trust Counselling Station through conducting analysis of the documentation as well as half-structured interviews of the specialists working at the station, IDU representatives, that are using the services of the station, representatives of the closest environment of IDU (parents, medical worker, representatives of law-enforcement agencies, etc.) (see Graph 3) in order to study:

- sufficiency of equipment and resources for conducting work;
- types and quality of services that are provided by station specialists;
- accessibility of services to IDU;
- characteristics of service consumers (IDU), their age, gender, economic, educational and other status;
- IDU's attitude to the working hours and location of the station;
- IDU's needs in terms of services that can be provided by station specialists;
- level of knowledge that they received through the station specialists, IDU's attitude towards the problem and practice;
- Attitude of station workers towards the representatives of the target group.

Half-structured telephone interviews of Project Co-ordinators were conducted in December 2001. I.M.Pinchuk, Deputy Head of the State Social Services for Youth Centre, V.A.Sanovska, Head of the Social Programmes Implementation Department of the State Social Services for Youth Centre were interviewed.

Monitoring of the progress of project implementation should be based on studying all the levels of the functioning and impact of project activities: individual (project implementing agencies, IDU), social environment (parents, medical workers, representatives of law enforcement agencies, etc) and political (mass media representatives, decision makers, etc.).

Monitoring provides for development of **special instrumentation**, which would enable receiving all necessary information, mainly:

- ✓ interview outlines for different respondents' categories;
- ✓ questionnaires;
- ✓ typical forms for keeping track of different work directions for project implementation.

III. Third Stage. Summary Evaluation

At the end of HIV/AIDS Prevention among Young People Using Injection Drugs Project implementation, final analysis of its results is required. It includes:

- ✓ **final evaluation** of the effectiveness of project implementation based on the survey of IDU in order to examine the level of acquired knowledge, attitude toward the problem and practice; the level of participation of the injection drug users in the activities of the project; seeing opportunities for project development and development of its individual components;
- ✓ **analysing** the relationship between the set goal and achieved results;
- ✓ **interviewing** project implementing agencies in order to determine: main achievement of the project; factors that promoted the efficacy and efficiency of the project and those that hindered the implementation of the project; main ways of project development, further opportunities; possibilities for co-operation with other partner organisations and institutions;
- ✓ **interviewing** representatives of the social environment of IDU, local authorities and mass media representatives in order to determine the necessity for further work in this or other identical projects; its impact on the local social policies, contribution to solving the problems young people using injection drugs face; experience of project development and implementation; co-operation of different organisations and institutions that took part in the project.

Monitoring project implementation was carried out in 2 stages:

1 stage – June 2002.

2 stage – September – October 2002.

During monitoring the following participated in the survey in each city:

- 10 officers;
- 10 volunteers;
- 10 experts (medical and social workers, law enforcement officers, etc.);
- 10 local residents;
- 10 mass media representatives.

A total of 550 people.

Besides those, 793 injection drug users that use the services of Trust stations at the Social Services for Youth Centres were interviewed in these cities.

The **final evaluation** was done September 17-23, 2002 in 14 cities of Ukraine - Sevastopol, Novovolyns'k (Volynska region), Makijivka (Donetsk region), Melitopol (Zaporizhja region), Chervonohrad (Lviv region), Mykolajiv, Biljajivka (Odesa region), Kharkiv, Chernihiv, Yalta, Dnipropetrovs'k, Nikopol, Kryvyj Rih, Dniprodzerdshyns'k (Dnipropetrovs'k region). 623 of the interviewed injection drug users used the services of the Trust counselling stations in 9 cities: Sevastopol, Novovolyns'k (Volynska region), Makijivka (Donetsk region), Melitopol (Zaporizhja region), Chervonohrad (Lviv region), Mykolajiv, Biljajivka (Odesa region), Kharkiv and Chernihiv.

Open and close-ended questions were used in the survey. A certain portion of questions coincided with the questions that were asked during initial evaluation. At the same time, the questionnaire included new questions about knowledge, attitude and practice of injection drug users.

Anonymous one-on-one structured interviews were conducted by 52 interviewers from the State Institute of Family and Youth Affairs who are constantly working as a part of the existing network of interviewers. 1997 injection drug users, 14 years old and older, were interviewed.

Let us analyse the results of project activities, using the scheme of the monitoring system outlined (see Graph 2) as well as defined levels and criteria of evaluation.

In order to have adequate and objective monitoring of the effectiveness of the project, it is necessary to use single standard instrumentation that will enable identifying the dynamic of changes in the acquired knowledge, attitude to the problem and practice.

3. MONITORING AND EVALUATION OF THE EFFECTIVENESS OF HIV/AIDS PREVENTION AMONG YOUNG PEOPLE USING INJECTION DRUGS PROJECT⁷

3.1. Results of the Initial Evaluation of the Knowledge, Attitudes towards the Issue and Practice of Injection Drug Users

The questionnaires were developed in accordance with the international classification of the specific types of research in youth environment. This research is classified as knowledge, attitude, practice research⁸. Interviewing was done with the help of a specially designed questionnaire, some blocks consisting of closed type questions about knowledge, attitude and practice of IDU, when the respondent could choose from the list the answer that reflects his opinion best, and some containing open-ended questions where the respondent could give any answer.

Confidential one-on-one half-structured interviews were conducted by volunteers from the Social Services for Youth Centres. A total of 638 injection drug users were interviewed.

The project was preceded by initial evaluation, that is evaluation of the situation – existing knowledge, attitude to the problem and behavioural models of youth people, who are injection drug users. In order to conduct the initial evaluation, results of interviewing injection drug users from seven cities of Ukraine were used. The Ukrainian Institute of Social Research and Ukrainian State Social Services for Youth Centre with the support of UNICEF September 10-October 10, 2001 conducted the survey in the following cities: Sevastopol, Donetsk, Chervonohrad (Lviv region), Mykolajiv, Kharkiv, Chernihiv, and Melitopol (Zaporizhja region). Its main objective was to determine the level of IDU's knowledge about HIV/AIDS, their awareness of the risk of HIV-infection and riskiness of behaviour.

Knowledge about HIV/AIDS

According to the results of the survey, most respondents consider themselves knowledgeable about HIV/AIDS (92% of all the respondents), nevertheless:

- a quite large proportion of them do not consider this knowledge sufficient (42% of all the respondents);
- IDU call television and radio (60% of all the respondents), friends (45%), periodicals – newspapers, magazines, etc. (43%), other injection drug users (36%), informational materials at medical institutions (25%) the main sources of information about this problem;
- in IDU environment there are certain myths about HIV-infection and AIDS, which is a sign of an insufficient level of their knowledge: 27% of all the respondents think that HIV-infection and AIDS is the same thing; 24% are certain that when a person is sick with AIDS, his life is not over; in the opinion of 15% of the respondents, AIDS can be treated with modern medicine;
- 14% of all the respondents do not know whether HIV-infection is transmitted through sharing instruments for preparing drugs, 16% do not know if urine contains HIV-infection, 24% do not know that the virus is transmitted from other to child.

⁷ Full report is called “Young people using injection drugs: awareness of, understanding the risk of HIV-infection, practice // Analytical report based on the results of the survey of injection drug users as a part of HIV/AIDS Prevention among Young People using injection drugs Project” (printed with the support of UNICEF Office in Ukraine), - K., 2001. – 64 p.

⁸ In English language literature, this type of research is called: “KAP – knowledge, attitude, practice” or “KAB- knowledge, attitude, behaviour”.

Attitude to the Problem of Drug Addiction and HIV/AIDS Epidemic

- The respondents identify drug users as a group that is in the greatest danger of getting infected with HIV-infection (64% of all the respondents).
- 21% of injection drug users, who participated in the survey, consider the threat of HIV-infection very real in their lives.
- Many respondents after receiving information about HIV/AIDS decided to practically change their sexual behaviour and practice of using drugs: 46% started to take better care of their health, 30% are more careful about choosing friends, 22% decreased the number of sexual partners and the same percentage refused to use shared instruments for using drugs.

Practice

Taking into consideration obtained data, we can say the practice of purchasing drugs is the factor that increases the risk of HIV-infection among the interviewed IDU:

- 49% used services of different dealers;
- 47% when buying a dose, they take the drug into their syringe from a common vessel;
- 39% get it from the syringe of the dealer;
- 21% buy an already filled syringe;
- 17% use syringes of their friends for injection;
- 12% use syringes of people they do not even know;
- 8% before injection do not treat syringes at all;
- 25% use running (tap) water to disinfect the syringe.

The interviewed injection drug users also demonstrate risky behaviour in sexual relationships:

- over a quarter of IDU never use condoms during sexual intercourse;
- 65% of the respondents under 20 year old do not have a constant sexual partner.

Help the Injection Drug Users Need

The results of the survey gave an opportunity to identify the main needs of the injection drug users:

- 66% need information about first aid in case of an overdose;
- 65% desire to have information about institutions that provide services to IDU;
- 62% need to have appropriate information about abscesses prevention and treatment;
- 62% of the interviewed female IDU need support of the surrounding injection drug users; 58% need information about safer way of using drugs intravenously, and 57% need the help of a psychologist;
- 82% of the interviewed young men using drugs confirmed the need for creating mobile and permanent Trust counselling stations.

So the initial evaluation of knowledge, attitude to the problem and practice of the injection drug users showed that the representatives of the target group have a shortage of information about safe behaviour, treatment of complications related to injection drug usage, HIV-infection etc. Injection drug users that took part in the survey are desperately in need of specific information and counselling help.

That is why the expansion of the work of the HIV/AIDS Prevention among Young People Using Injection Drugs Project that is implemented by Social Services for Youth Centres is very pressing and timely.

3.2. Monitoring the Logical Model of the Project

The following were used in monitoring the logical model of the project:

- ✓ project plan;
- ✓ project programme;
- ✓ materials of the half-structured telephone interviews with R.S. Bezkaravajeva, Director of the Makijivka City SSSYC (Donets'k region) who is co-ordinating the implementation of the project in Makijivka;
- ✓ interview results of V.A. Sanovska, Head of the Department of Implementation of Social Programmes of the State Social Services for Youth Centre.

Results of Monitoring the Logical Model of the Project

According to the statistics concerning HIV/AIDS for 1987 – June 1, 2001, there were 39 752 officially registered HIV-infected citizens in Ukraine. 28 875 of them were people using drugs intravenously. Mostly effected are Donets'k, Dnipropetrovs'k, Odesa, Mykolajiv, Zaporizhja, Kharkiv, Lugans'k, Cherkasy, Poltava, Crimea regions as well as Kyiv and Sevastopol Cities.

Intravenous transmission of infection (when HIV-infection is injected with infected drugs) is prevalent; most of the HIV-infected persons are aged between 20-39 years old, and the number of teenagers registered is constantly growing⁹.

The prevention of HIV-infection among injection drug users is complicated by the fact that this target group is closed, hardly accessible, but at the same time it desperately needs intervention. Until 2000 preventive work using harm-reduction strategy was done mainly by non-governmental organisations that were financed by donor organisations. Now there are Social Services for Youth Centres headed by the State Social Services for Youth Centre working alongside.

The joint project of the SSSYC and UNICEF, HIV/AIDS Prevention among Young People Using Injection Drugs, *is crucial and adequate in terms of involving state organisations to preventive work among injection drug users.*

It is most appropriate to create Trust counselling stations that will be doing different types of work directly with the target group representatives. They would include counselling (psychological, medical, social, legal etc.), syringe exchange, condom distribution, disinfecting solutions, informational educational materials and outreach work, etc.

That is why *the main goal of the project, strengthening the possibilities of SSSYC in terms of preventive work among young people using injection drugs through Trust counselling centres – is suitable to the existing situation in Ukraine.*

The objectives of the project encompass all of its main aspects and conform with the major rules of implementation of social projects for the representatives of vulnerable to HIV-infection groups. Specifically:

1. The project is preceded by a survey of knowledge, attitude and practice of the injection drug users, which depicts the real situation in terms of IDU's behavioural practices, their main needs regarding preventive activities, etc. Such surveys give a chance to evaluate the correspondence of project activities with the needs and requests of the target group representatives, and correct them.
2. The success of the work of implementation of such type of a project depends mainly on the specialists participating in the project, their

⁹ Epidemic situation with HIV/AIDS in Ukraine // Problems with drug abuse, HIV-infection and STI in Ukraine: Inform. bull. – 2001. - #2. – P.11.

knowledge and practical skills. That is why the selection and adequate training of staff is one of the primary tasks of the projects trying to reach target group representatives.

3. Another important component is working with the representatives of the general public in order to develop tolerant attitude to project in general and its individual aspects. In order to be effective, any social project needs to get the support of local authorities, mass media representatives, public and so on. That is why the objectives of this project include corresponding points.
4. Specialists that are working with target group representatives for a long time think that peer education strategy is an effective ways of working with the groups, because it helps to quickly establish contact with IDU and impact their behaviour. That is why objectives of this project that include this component are very important and adequate in term of impact and efficacy.
5. Harm-reduction strategy if applied to using injected drugs provides for giving IDU sterile, clean instruments used for injections, which was reflected in the main objectives of the project.
6. Taking into consideration the fact the target group is isolated from society, is latent and does not have free access to medical, psychological and legal service, it is worthwhile to include access of the young people using injection drugs to HIV-infection testing and medical and psychological aid.

As a part of project, implementation of corresponding types of activities is provided for. In accordance with the rules of the implementation of social projects, planned types of activities are adequate in terms of *goal, objectives and object of the project*:

1. They have clearly defined stages of implementation that correspond to the logic of project development.
2. They plan for such forms of activities that would ensure the fulfilment of project objectives.
3. Planned activities are interrelated, complement each other and provide for gradual (in stages) implementation of these activities.

Based on results of half-structured telephone interviews with R.S. Bezkaravajeva, Director of Makijivka City SSYC (Donets'k region) and V.A. Sanovska, Head of the Department of Implementation of Social Programmes of the State Social Services for Youth Centre, the following factors interfering with and contributing to project implementation were identified.

Factors Interfering with Project Implementation:

- In some regions of Ukraine the work of SSYC Trust counselling stations was not understood and supported by the local authorities and the public.
- Sometimes, inconsiderate publications of some journalists harm the work of the project. They do not understand the work of the project, yet write about its activities.
- There are certain misunderstandings about the main workers, involved in preventive work under such a project. Some of the medical workers insist that they, first of all, narcologists, not social workers, need to do such work.

The following have been identified as factors contributing to project implementation:

- National Programme for Prevention of HIV-Infection Spread and Treatment of AIDS for 2001-2003 provides for activation of the work of state and non-government organisations in the area of HIV/AIDS prevention;
- Financial and methodical support of international organisations, UNICEF, UNAIDS in Ukraine in particular;
- Support of the government (the Order of the State Committee for Youth Policies, Sport and Tourism “About ratification of measures for prevention of HIV-infection, AIDS, negative developments in youth environment” dated 5.11.2002 #3202;
- Enthusiasm of project officers at the sites;
- Support of the local authorities offices;
- Recruiting specialists who have practical experience of working with harm-reduction and peer education strategies;
- Co-operation with non-governmental organisations.

After analysing the logical model of the project, its goal, objectives, and work directions, we can conclude that they correspond to the main principles of methodology for developing social projects.

3.3. Monitoring the Development and Testing of Informational Educational Materials

Based on the knowledge, attitude and practice survey, 5 types of informational educational materials have been developed for HIV/AIDS prevention among injection drug users:

- 1) a brochure for injection drug users – about overdoses of different types of drugs and diseases related to injection drug usage (thrombosis, abscesses, etc), their symptoms and treatment methods;
- 2) a brochure for young people who are just starting to use injected drugs – about principles of harm-reduction while using injected drugs, about rules of safer usage of injected drugs, etc.;
- 3) a brochure for volunteers who are working with injection drug users – about main principles and rules of volunteer work, post duties of project workers and recommendations for them;
- 4) a brochure for parents of injection drug users – a list of reasons that lead youth to use drugs, advice to parents on how to help the child;
- 5) a brochure for mass media representatives and decision-makers – about problems of drug abuse and HIV/AIDS in the world and in Ukraine in particular, forecasts about the spread of the HIV/AIDS epidemic in the country in the near future, as well as about the concept of reduction of harm of injection drug usage and principle direction of work in order to reduce the risk of infection, and so on.

Each brochure contains information about organisations and principle services provided to injection drug users.

Brochures were developed by the specialists of the Ukrainian Institute of Social Research based on the experience of famous organisations, creating informational educational materials for the representatives of the target group:

- Doctors without borders (Moscow, Russia)
- Netherlands Institute of Psychic Health and Addiction;
- Chervona Strichka NGO (“Red Ribbon” - Kharkiv, Ukraine);
- Regional non-governmental organisation Vozvraschenie (“Return” – St. Petersburg, Russia);
- Public Congress Stalist’ (“Stability” - Vinnytsja, Ukraine).

The experts of the State Social Services for Youth Centre evaluated the quality of each kind of informational educational materials.

1. Overdose and For IDU beginners brochures.

They were tested by active injection drug users who came back from the places of confinement, living in the Moscovs’kyj District of Kyiv City and are registered in Moskovskyj District Administration of the City Administration of the Ministry of Internal Affairs (DACA MIA) of Ukraine:

- Bogdan, 24 years old – using shirka for 6 years;
- Borys, 23 years old – using cocaine for 5 years;
- Olga, 28 years old – using dimedrol for 7 years;
- Oleksij, 21 years old – using amphetamine for 3 years;
- Serhij, 21 years old – using shirka for 5 years.

Street IDU, involved in syringe exchange programme in Mins’kyj district of Kyiv City:

- Oleg, 25 years old – using dimedrol for 3 years;
- Stepan, 27 years old – using shirka, according to his words, he is HIV-positive.

Experts from among IDU tested the content of the materials, and the correspondence of the information presented in them to the needs of the target group representatives.

Based on the results of the testing of the brochure text several significant additions were done concerning the ways of helping in case of taking an overdose of different kinds of drugs, as well as treating abscesses at home.

2. *Volunteer brochure.*

This brochure was tested by volunteers and social workers of the Social Services for Youth Centre of the Mins'kyj District of Kyiv City, working for programme of harm-reduction of using injected drugs:

- Galyna Pekna, 19 years old – a social worker;
- Volodymyr Savinov, 24 years old – a social worker;
- Olena Rogal's'ka, 20 years old – a volunteer for harm-reduction programme.

Taking into consideration their experience in harm-reduction projects, volunteers as experts in this area, supplemented the list of tips concerning the work with injection drug users. Also, recommendations about specifics of communicating with IDU during outreach work were added.

3. *Brochure for parents of injection drug users.*

This brochure was tested by the consultant psychologist of the Re-Socialisation Centre for Drug Addicts, L.A. Kolesnichenko, who is personally counselling injection drug users, their parents, and so on. No changes in the brochure were made.

4. *Brochure For Mass Media Representatives and Decision-Makers.*

The Deputy Head Doctor of Kyiv City Health Centre, O.O. Stoiko, tested it.

The comprehensiveness of the presented preventive information was evaluated as insufficient, so based on the results of the testing, additional information was added to the analysis of the situation about HIV/AIDS in Ukraine and main directions of work of the HIV/AIDS Prevention Programme in Ukraine.

In 2002 the State Social Services for Youth Centre, as a part of the project, published two manuals:

1. Main directions of work, skills and abilities of a volunteer of Harm-reduction Programme among Injection Drug Users.
2. Methodical manual for HIV-Infection Prevention among Young People Using Injection Drugs (for social workers).

These manuals are collections of various materials about modern experience of national and foreign scientists, researchers, practising social workers: models of preventive work, history of the origin of harm-reduction strategy, organising and conducting primary behavioural research among IDU, main directions of preventive work, ways of working with IDU, and so on.

The manuals were developed by the specialists of the State Social Services for Youth Centre and Institute of social and political psychology of APN of Ukraine.

3.4. Monitoring Specialists' Training

In order to monitor specialists' training, a half-structured telephone interview was conducted with the Director of Makijivka City SSYC (Donets'k region), R.S. Bezkaravajeva who is co-ordinating project implementation in Makijivka City. Also, V.A.Sanovska, Head of Social Programmes' Implementation Department of the State Social Services for Youth Centre, was interviewed.

Monitoring Results

As a part of HIV/AIDS prevention among young injection drug users, August 13-17, 2001, at Mykolajiv Regional SSYC, State social services for youth centre and Blagodijnist' ("Charity") charity foundation held a practical seminar on HIV-infection prevention work among injection drug users for Heads of Social Programmes' Implementation Departments of regional SSYC and Co-ordinators of Trust counselling stations, represented by 11 regions of Ukraine (AR Crimea, Sevastopol City, Dnipropetrovs'k, Donetsk, Mykolajiv, Odesa, Zaporizhja, Kharkiv, Volyns'ka, Chernihiv, and Lviv regions).

Besides local organisers, representatives of the State SSYC, Family and Youth Affairs Administration of Mykolajiv Region State Administration, Institute of Social and Political Psychology of APN of Ukraine, Ukrainian Institute of Social Research took part in the work of the seminar.

The main goal of the seminar:

- studying the positive experience of co-operation of Mykolajiv Regional Social Services for Youth Centre with Blagodijnist' ("Charity") Charity Foundation and other state and non-governmental organisations that are working in the area of HIV-infection prevention among young people using injection drugs, employing harm-reduction strategy;
- preparing workers of the specified regions to work under this programme.

Main topics of educational practical seminar:

- ✓ practical experience of preventive work in Mykolajiv city;
- ✓ practice of street work using harm-reduction programme;
- ✓ specifics of organising work of Trust Counselling Stations;
- ✓ pre-testing counselling of injection drug users ;
- ✓ conducting operational evaluation of the situation;
- ✓ conducting behavioural research;
- ✓ preparing social workers and SSYC volunteers to do such types of research.

After the seminar throughout 2001 Heads of Social Programmes' Implementation Departments of regional SSYC and Co-ordinators of SSYC Trust Counselling Stations conducted training seminars in order to teach social workers and volunteers in their cities (5 social workers and 15 SSYC volunteers in each of the specified regions of Ukraine – a total of 200 persons) the skills of safe behaviour and methods of conducting preventive work, employing harm-reduction strategy.

The goal of the HIV/AIDS Prevention among Young People Using Injection Drugs Project provides for doing outreach work, counselling injection drug users, disseminating informational educational materials, exchanging syringes, and so on. That is why learning the experience of the work employing harm-reduction strategy of non-governmental organisations and acquiring practical skills of doing such work is worthwhile.

During the training seminar, SSYC social workers, participating in them, acquired practical skills in the area of specifics of doing street work, establishing relationships with injection drug users, counselling on different questions related to safe behaviour, etc.

So, according to monitoring data, the beginning of project implementation was preceded by the work of selection and training of staff that provided for learning the experience of the work of organisations, which had been working with harm-reduction strategy for several years already, training SSYC social workers professional skills of working with the representatives of this target group.

3.5. Changes in the Level of Knowledge about HIV/AIDS.

The work of Trust counselling stations, which were established at the premises of Social Services for Youth Centres, includes conducting informational educational activities. The following methods were used to inform injection drug users about the ways of transmission of HIV/AIDS and the main ways of their prevention: individual consultations, group training, dissemination of informational-preventional booklets of relevant orientation. In order to track the changes in the level of knowledge of injection drug users about HIV/AIDS, the questionnaire for 2002 had additional related questions.

In general the level of knowledge of all the interviewed injection drug users about HIV/AIDS remained very high, which was the same for year 2001 (92% and 93% respectively).

Injection drug users from Mykolajiv (100% of the them said that they know about the problems of HIV-infection and AIDS), Yalta (100%) and cities of Dnipropetrovs'k region (100%) were most distinguished in terms of their knowledge about HIV/AIDS according to the results of 2002 survey. The lowest percentage of people who confirmed that they have some knowledge about the problem of AIDS was registered among injection drug users in Kharkiv City (73%).

Compared to 2001 survey, the proportion of respondents over 28 years old, who confirmed their knowledge about the problem of HIV/AIDS (2001, 13% considered that they did not know anything about it, and this year it is only 2%) increased significantly. There were no gender-related differences in the answers given by interviewed IDU.

The correlation of the results of the surveys made in 2001 and 2002 revealed that the data is almost the same. So, among those injection drug users, who know something about HIV/AIDS, 43% think that they have sufficient knowledge about it, for 26% of them it is in sufficient, and 24% were hesitant in their answer. There were no differences observed between the confidence of men and women about their knowledge about HIV/AIDS.

As to the level of confidence in their knowledge about HIV/AIDS among representatives of different age categories, in comparison to the data of 2001 survey, it increased twice among respondents aged 25-28 years old. So for injection drug users of this age group, based on the results of 2002 survey, 22% are sure that their level of knowledge about HIV/AIDS is insufficient, unlike the data from 2001 survey, when 42% of respondents gave such an answer.

Interviewed injection drug users from Chervonohrad City are most confident in their knowledge about HIV/AIDS, same as in 2001 (61%, 60% in 2001). The tendency for the confidence in the knowledge did not change in comparison to 2001 in Mykolajiv City (2001 – 49%, 2002- 50%) and in Chernihiv City (32% and 30% respectively). In Sevastopol City and Kharkiv City, the proportion of respondents, who are confident in their knowledge about HIV/AIDS, somewhat decreased. So, in 2001 in Kharkiv City, 28% of all the interviewed injection drug users were confident about their knowledge, but in 2002 this proportion was only 17%. In 2002 in Sevastopol City, the number of people, who were confident in their knowledge, decreased by 11% (49% and 38% respectively).

Sources of Information

Same as in 2001, most of the respondents obtain information about HIV/AIDS from television (2002 – 59%, 2001 – 55%). The second most significant source is friends and acquaintances (42% of all the respondents mentioned this way of getting information about HIV/AIDS); 33% of the respondents gain information through periodicals (newspapers, magazines).

If we compare the same figures for 2001, we will see that the first three sources of information about HIV/AIDS are almost identical.

In comparison to 2001, the proportion of injection drug users, who ask their acquaintances and relatives for information about HIV/AIDS, increased (18% and 28% respectively). It is also characteristic of both the interviewed respondents and those who use the services of SSYC Trust Counselling Stations (see Table 3.5.1). At the same time, the proportion of those, who obtain information from periodicals and other injection drug users decreased.

The following sources of information about HIV/AIDS among those who use the services of SSYC Trust counselling stations are most popular, according to the rating: television, radio, friends, periodicals, other injection drug users, informational materials at medical institutions, relatives, reference literature, popular scientific literature. 10% of those, who use the services of the stations, seek information in informational materials that are disseminated by SSYC Trust counselling stations.

Table 3.5.1

In general in 2002, the level of knowledge of all interviewed injection drug users about HIV/AIDS remained quite high, which matches the results of the previous year survey (92% and 93% respectively).

Injection drug users from Mykolajiv City (100% of the them said that they know about the problems of HIV-infection and AIDS), Yalta City (100%) and from cities in Dnipropetrovs'k region (100%) were most distinguished in terms of the knowledge about HIV/AIDS according to the results of the 2002 survey. The lowest percentage of people, who know something about the problem of AIDS, was registered among injection drug users from Kharkiv City (73%).

In comparison to 2001, the first three sources of information about HIV/AIDS did not change: most of the respondents obtain information about HIV/AIDS from television (2002 – 59%, 2001 –55%). The second most significant source is friends and acquaintances (42% of all the respondents mentioned this way of getting information about HIV/AIDS); 33% of the respondents receive information from periodicals (newspapers, magazines).

10% of those, who use the services of the stations, seek information in informational materials that are disseminated by SSYC Trust counselling stations.

Ways of Transmission of HIV-Infection

The vast majority of injection drug users who took part in 2002 survey correctly identified such ways of transmission of HIV-infection: sharing syringes and needles, sharing instruments for preparing drugs, unprotected sexual intercourse, contacting infected blood, transfusion of blood and blood products.

Nevertheless, it is quite disturbing that there is a significant percentage of all the respondents, who do not know about the ways of transmission of HIV-infection; they are the injection drug users, who said that they do not know the answer to this question. So 14% of all the interviewed IDU do not know if it is safe or not to share

instruments for preparing drugs (in 2001 it was 14% as well), 17% (in 2001 – 16%) do not know if HIV-infection is contained in sperm or if it is transmitted from mother to child (18% compared to 24% in 2001).

“I don't know” responses concerning the most common and known ways of transmission of HIV-infection are much more frequent among the representatives younger than 20 years old.

So, the comparative analysis of data for the two years shows that though there are some positive shifts in what IDU know; nevertheless, 29% of the respondents of this age category are not sure if the virus is transmitted from mother to child (in 2001 - 32%), 16% (in 2001 – 20%) - through sharing instruments for preparing drugs with other IDU, and 23% (n 2001 – 17%) that sperm can be a way of transmission.

According to the data presented in Table 3.5.2, we can state that consumers of the services of Trust counselling stations operating at SSYC know well the main ways of HIV-infection transmission. However, the knowledge of those, who use their services, about such ways of transmission of HIV-infection as sperm is still insufficient in Chervonohrad, Kharkiv, Chernihiv, and other cities.

Table 3.5.2

Myths about HIV/AIDS

One of the problems of today's public opinion is the rise of speculations about HIV/AIDS in mass media, which in truth present wrong information and facilitate the rise of myths and stereotypes.

In order to determine the level of knowledge of the injection drug users about HIV/AIDS related issues, symptoms and consequences of infection, in 2002 several questions about myth-statements were added to the list of questions asked (see Table 3.5.3).

According to the data presented in Table 3.5.3, the proportion of those injection drug users, who believe false stereotypes (myths) about the possibility of curing AIDS and the relationship that exists between HIV-infection and getting sick with AIDS, significantly decreased in 2002 compared to 2001. However, according to the results of 2002 survey, the portion of those injection drug users, who do not know about the advances of medicine that can stop or slow down the development of HIV-infection in the body of a person, somewhat increased (see Table 3.5.3).

Table 3.5.3

Despite better results in terms of prevalence of stereotypes about HIV/AIDS in the environment of injection drug users, the percentage of those respondents, who consider mythological ideas true, is still high. Such ideas are the reasons for the prevalence of risky behaviour.

There are some differences in prevalence of stereotypes related to awareness of HIV/AIDS among injection drug users, who live in different cities of Ukraine and use the services of Trust counselling stations (see Table 3.5.4).

According to the data presented in the Table, over a third of the interviewed consumers of the services of Trust counselling stations, who live in Chervonohrad and Chernihiv, have a mistaken understanding of the possibility of curing AIDS with the help of modern medication. Half of the interviewed users of the services of Trust

counselling stations, who live in Chervonohrad city, 43% of those, who live in Makijivka, and 35% - in Biljajivka, do not have a clear idea about how to differentiate between the persons who is infected with HIV and persons sick with AIDS. It is an indication of erroneous knowledge.

Only 28% and 43% of the interviewed injection drug users from Chernihiv City and Kharkiv City respectively know about modern ways of strengthening the immune system of an HIV-infected person. Theirs are the lowest figures among other cities.

The presence of stereotypes about HIV/AIDS and lack of knowledge about certain questions among injection drug users necessitate activation of informational educational activities in the specified cities, specifically in these fields.

Table 3.5.4

Taking into consideration the fact that in Ukraine HIV virus is spreading not only through so-called high risk groups, questionnaire included the question about those strata of population that are most vulnerable to getting infected with HIV. Whereas in 2001 respondents considered drug users to be the group of highest risk (64%), now there are only 59% of such respondents. Most of all the respondents (60%) consider female sex workers to be in the greatest danger of getting infected with HIV (in 2001 – 52%). Other leading risk groups are homosexuals (57%, whereas in 2001 – 52%), and 50% of the respondents consider it very likely that anybody can be infected with HIV (in 2001 there were 56% of such respondents).

The analysis of the correlation of the data of 2001-2002 surveys unveiled the fact that there is a tendency for injection drug users to have more adequate evaluation of the risk groups in terms of HIV-infection.

Table 3.5.5

Results analysis showed that most interviewed injection drug users know about the main ways of HIV-infection transmission. Knowledge about other ways of transmission is still not comprehensive. So the tendency that existed in 2001 is still present in 2002.

Nevertheless, despite better results in terms of prevalence of stereotypes about HIV/AIDS in the environment of injection drug users, the percentage of those respondents, who perceive mythological ideas as true, is still high. Such ideas are the reasons for the prevalence of risky behaviour.

The presence of stereotypes about HIV/AIDS and lack of knowledge about certain questions among injection drug users necessitates activation of informational educational activities in the specified cities, specifically in this field.

3.6. The Impact of the Project on the Practice of Using Drugs

Production and distribution of narcotic substances has become a profitable business in Ukraine. Despite strict control on the part of law enforcement agencies, practically in each city you can buy drugs. There are certain points where they are sold. Especially, this is true for so-called light drugs. The availability of such drugs, their relative cheapness, myths surrounding the process of using drugs and their effect lead to a very high rate of drug abuse among young people. Especially high is the

growth of this phenomenon for young people in their teens, when factors of psychological development and socialisation of a person make him or her more sensitive to external influence. According to the data from surveys of injection drug users – initial survey in September, 2001 and final survey in October 2002 – there is a tendency of teenagers engaging in using drugs (see Tables 3.6.1 and 3.6.2). Young people of male gender are involved more actively.

Table 3.6.1

Table 3.6.2

Graph 3.6.1

The analysis demonstrated that home-made opiates (“shirka”) are the most popular drugs among injection drug users (see Graph 3.6.1). On the whole, there is a tendency among the interviewed injection drug users to lower the level of their consumption of other types of drugs, compared to 2001.

Drugs Purchasing Patterns

The way a drug is purchased influences the risk of getting infected with HIV. As seen from experience, most of the dealers do not care about keeping the rules of disinfection, they do not keep basic hygiene rules for preparing and packaging narcotics.

On the whole, according to 2002 survey, in this body of data 20% of the respondents prepared drugs at home on their own (see Tables 3.6.3 and 3.6.4). 40% of the respondents use the services of one stable drug dealer and 48% use the services of different dealers. There are no significant gender related differences in these figures. Both women and men using drugs intravenously are involved in the same practices of purchasing drugs.

Compared to 2001 survey, the number of persons using the services of the same dealer increased 4%. The number of female respondents preparing drugs on their own decreased by 10%, and men – 4% compared to 2001 survey. There are no significant differences as to indicators of using services of different drugs dealers, and no gender related difference are observed in comparison to the previous survey.

Interviews of the users of the services of SSYC Trust counselling stations confirm the fact that preparation of drugs at home is very risky in terms of law and requires a person to have large bulk of raw materials and put in a lot of effort. This pushes injection drug users to use the services of a constant dealer or several different dealers.

Table 3.6.3

Table 3.6.4

Ways of dividing drug solution practised by the interviewed IDU influence the likelihood of getting infected with HIV and hepatitis (see Table 3.6.5).

For example, in 2002 21% of all the respondents would buy drugs in a syringe that is already filled, and most of the time they do not know, to whom it belongs. 43% of the respondents take the drug into their syringe from a common vessel, 40% - from

a syringe, that the dealer brings, 19% buy the drug in syringe that was filled already, not knowing whether this syringe is new or it has been used before.

Comparing these results to the results of 2001 research, we can say that the tendency remains the same as in the previous year. There are no substantially significant differences identified between the two. Distribution of data between genders is almost equal.

Table 3.6.5

Representatives of the age group 29 years old and older are in the highest risk of getting infected because of the failure to meet the requirements of hygienic norms, 57% of them are getting drugs from the syringe of the dealer, not even knowing to whom it belongs. 48% of the respondents aged 22-24 years old take the drug from a shared vessel into their syringe.

Table 3.6.6

The results of interviewing people using the services of Trust counselling stations also demonstrate the prevalence of risky in terms of infection with HIV and hepatitis practices in this group. Such practice is caused first of all by the specifics of the psychological and physical condition in which drug users are at the time of so-called abstinence. Another reason that determines such practices of users is suggestions of drug dealers, who are in charge of the distribution of the drug because they are owners.

Using Syringes for Injections

Re-using disposable syringes is characteristic of most injection drug users. Only 43% of the interviewed injection drug users during the final survey said that they use new syringes for each separate injection. 41% of all the respondents said that they use one disposable syringe for 2-3 injections; 12% - for 4-9 injections, 3% - for 10-20 injections; 1%- for over 20 injections (see Table 3.6.7). Such a dynamic is inherent to almost all age categories.

There was no relationship identified between re-using of disposable syringes and gender.

There is a positive tendency in comparison to 2001 survey. The number of respondents, who use syringes for injections only once, grew 10% and so the number of injection drug users using syringes for 4-9 times dropped 6% and users using syringes 10-20 times – 8% respectively. We should also note that among people using the services of Trust stations, the number of users who use a disposable syringe for each individual injection is increasing. Particularly, such situation is observed in Kharkiv (25%), Sevastopol (14%), Novovolyns'k and Makijivka (7%), Mykolajiv (6%) (see Table 3.6.8).

Table 3.6.7

Graph 3.6.2

According to the results of interviewing injection drug users, who are using the services of SSSC Trust counselling stations, we can say that informational

educational work done there has positive impact (see Graph 3.6.2). This tendency is inherent for all the specified cities (see Table 3.6.8). As the Table data demonstrates, the number of injection drug users, using the services of Trust counselling stations, who use a new sterile syringe for each new injection is significantly larger than the figures for all interviewed respondents in both 2001 and 2002.

Table 3.6.8

Ways of Disinfection of Instruments Used for Injections

Treating syringes after injections in order to use them again is one of the ways to avoid getting infected with HIV or hepatitis. According to the results of the final 2002 survey, the most traditional ways of treating syringes after injection are still washing them in boiled water (21% of the respondents) and in tap water (18%). More effective ways of disinfection of syringes, such as washing them in disinfecting solution, are used by 9% of the representatives, boiling – by 7%, washing with alcohol – by 6%. At the same time, 6% of the respondents do not treat their syringes at all (see Table 3.6.9).

According to age categories representatives of 14-16 years old age group turned out to be least careful – 12% of them replied that they do not treat their syringe for the next injection with the same syringe.

There is no substantial observed deviation according to other ways of treating syringes from general figures.

Gender distribution of received results show that women are less inclined to use an untreated syringe again in contrast to men.

Breakdown of IDUs according to the place of residence shows that IDUs in Kharkiv City (22%) and Chernihiv City (15%) are re-using untreated syringes most of all. The largest percentages of boiling syringes and needles, if they are used again, were recorded in Yalta (30%) and Chervonohrad (23%) respondents; Mykolajiv (31%) and Chervonohrad (20%) respondents are treating them with disinfecting solutions. According to these indicators there are no significant deviations.

The comparison of results of 2001 and 2002 surveys shows that the number of IDUs treating syringes with boiled water has increased 1%, and the number of respondents treating syringes with tap water has dropped 7%. The number of IDUs who are boiling needles and syringes has increased 3%, the number of those who are using disinfecting solutions and alcohol for this purpose has increased 7% and 2% respectively. The number of respondents using several ways of disinfection at the same time has decreased 3%.

Graph 3.6.3.

However, along with this, the most distinguished in terms of impact of the work of Trust counselling stations is the significant increase of the proportion of those interviewed users, who are always using only new syringes for each individual injection and wash it with special disinfecting solutions. It is especially characteristic of those users, who are using the services of Trust counselling stations, which enables us to confirm the high effectiveness of the informational educational work done in these stations.

Table 3.6.9

Therefore, for injection drug users surveyed in 2002 the following remain the most popular ways of disinfection of instruments used for injection:

- washing in boiled water – 21%,
- washing in tap water – 18%,
- washing with disinfecting solution – 9%,
- boiling needles and syringes – 7%,
- washing with alcohol – 6%.

The analysis of data obtained is disturbing because out of all the ways of disinfection of used syringes, those that are least effective IDUs employ most frequently. The most effective in terms of preventing getting infected with HIV and hepatitis are the following ways of disinfection: boiling, treating them with disinfecting solution or alcohol, which turned out to be the least popular.

At the same time, the comparison of the two surveys enables us to say that a positive tendency is under way. The number more effective ways of disinfection and new syringes are used has increased, while the number of those, who do not treat the syringe at all, has dropped from 8 to 6%.

Table 3.6.10

Sharing Syringes for Injections

Sharing the same syringe with another person is one of the most dangerous ways to get infected with HIV and hepatitis. In the final survey in 2002, 61% of all the respondents realised this danger and gave the answer, “Never, I only use my own syringes” to the question, “Do you practice sharing syringes with another person?”. But 22% of the respondents use syringes of their close friends or girl-friends, 7% of respondents use syringes of people they are familiar with when they need to and 6% use syringes used by a stranger, if they are high on drugs; 4% use syringes offered by their dealer.

Comparing 2001 and 2002 surveys we can reach a positive conclusion about the impact of the work of Trust counselling stations on IDUs’ understanding of the risk related to sharing syringes with other people. According to the data presented in the diagram (Graph 3.6.4), in 2002, the proportion of injection drug users, who never share syringes with other people, has grown significantly. This tendency is especially true for persons using the services of SSYC Trust counselling stations. There are almost no gender-related differences in this category (see Table 3.6.11).

Graph 3.6.4.

Table 3.6.11

In general, the survey of the users of the services of SSYC Trust counselling stations testifies to quite efficient educational work done in all the specified cities (see Table 3.6.12). Nevertheless, in almost all the cities the disturbing tendency of sharing syringes with acquaintances or any syringe at hand remains. It is especially true for cities of Sevastopol and Chervonohrad.

Table 3.6.12

So, the comparison of the initial survey (September 2001) and final survey (October 2002) of injection drug users shows that positive shifts has been observed in the practice of injection drug users under the influence of the work of SSYC Trust counselling stations, especially IDUs using the services of these stations.

For example, the proportion of those injection drug users who use only sterile new syringe for each new injection, who after injection disinfect the syringe with a special solution, as well as those who never use drugs with other people by sharing syringes has grown significantly.

At the same time among injection drug users whoa re still not covered by the preventive work of the SSYC Trust counselling stations as well as those that are using the services of the station there is still a tendency to engage into risky ways of purchasing and dividing drugs. This makes the need for explanatory work with people who are preparing and selling drugs very pressing.

3.7. The Influence of the Work of the Project on the Sexual Practices of Injection Drug Users

The Number of Sexual Partners

Sexual intercourse is one of the ways of HIV-infection transmission, and so the need for studying the sexual practices of injection drug users is important for HIV/AIDS prevention. SSYC Trust counselling stations for injection drug users conduct quite active work in the area of condom distribution and dissemination of informational materials about the need to use condoms to prevent getting infected with HIV and STIs. In order to determine if injection drug users are changing their sexual practice under the influence of the work of the station, questions concerning sexual practice, the number of sexual partners were included in the questionnaire as indicators of sexual activity.

As the analysis of responses of injection drug users using the services of the stations and others, who were interviewed in 2001 and 2002, indicated that the tendency demonstrating the inclination of injection drug users to engage into sexual intercourse with only one person remains (syringe exchange diagram on Graph 3.7.1). Though in 2002, 14% of the respondents answered the question “How many sexual partners have you had in the last month?” that they did not have any, 55% replied that they had only one partner and 31% said they had more than one partner in the last month. 39% of the respondents, who had more than one partner, had 2 partners, 33% had 3-4 partners. Respondents between 14 and 18 years old turned out to be mostly sexually active. 44% and 40% of them had 3-4 sexual partners respectively in the last month (see Table 3.7.1).

Graph 3.7.1.

Representatives belonging to 21-24 and 25-28 years old age group (56% and 59% respectively) demonstrated the highest inclination to have monogamous relationships, which is quite legitimate. Because as a rule, this is the age when sexual experimentation is done away with, and young people are more serious about choosing a partner, hoping to find not just a sexual partner, but a spouse for the rest of their lives.

Representatives of 14-16 years old group indicated that they did not have any sexual partners in 32% of the responses.

Women have more than one sexual partner in 13% more instances than men do (42% vs. 29%).

On the whole, the comparison of 2001 and 2002 surveys testifies to the fact that the number of people who have only one partner grew substantially, by 11% of the whole sample.

Table 3.7.1

Table 3.7.2

Condom Use

Using condoms during sexual intercourse is a reliable way to prevent AIDS and STIs. Despite the work of the Trust counselling stations and other organisations to promote condom use as the main way to prevent getting infected with HIV or STI, in 2001 the tendency of using condoms remains almost unchanged in the environment of injection drug users (see Graph 3.7.2).

In 2002 17% of the interviewed users responded that they had never used condoms. 56% of the respondents said they use condoms only sometimes, and no significant gender-related differences were observed. 56% of men and 58% of women responded in this way. 25% of men and 28% of women always use condoms.

As to age distribution, 18% of injection drug users under 20 years old and 24% of 29 year olds and older never use condoms (see Table 3.7.3). In the distribution of responses to this question, there were no differences identified that were related to the place of residence.

Graph 3.7.2.

In comparison to 2001, the number of respondents, who had never used condoms, dropped 9%, while the number of those, who always use condoms, grew 6%.

Table 3.7.3

According to the data presented in Table 3.3.4, injection drug users using the services of SSYC Trust counselling stations, exceed several times the number of those, who have not been exposed to the work of the stations, in terms of frequency of condom use. It is also an indicator of the effectiveness of the impact of the work of such stations.

Table 3.7.4

In order to particularise responses in the 2002 survey related to condom use, respondents were asked to answer the question, "Have you used the condom when you had sex last time?" In the summary, 50% of the respondents gave a confirmation and 47% gave a negative reply (see Graph 3.7.3).

Graph 3.7.3.

According to the data obtained in answers to this question, the tendency for positive shift in the use of condoms remains.

Table 3.7.5

So the analysis of obtained results showed that under the influence of the work of SSSYC Trust counselling stations for injection drug users, positive changes in the attitude of the respondents to their sexual life have taken place. Most of the interviewed young people using drugs prefer monogamous relationships with sexual partners. More than anyone else, IDUs under 20 try to diversify their sexual life; they had more than 2 sexual partners in the last month.

A positive tendency of an increase in the proportion of injection drug users, who always use condoms, has been noted. It is an indicator of the effectiveness of the work done under the project.

3.8. Changes in the Behaviour of Injection Drug Users

In order to avoid getting infected with HIV, it is very important to adjust your behaviours to the real requirements of the prevention actively implemented by the specialists working at SSSYC Trust counselling stations. In the questionnaire respondents were asked to distinguish specific, real, practical measures that they had applied after learning about HIV/AIDS problem (see Graph 3.8.1).

Graph 3.8.1.

According to the data presented in the Graph, the proportion of the users of the counselling stations' services, who started using only sterile syringes for injections, is significantly different from the figures of all the interviewed injection drug users in both 2001 and 2002. Again, this is a testimony to the effectiveness of the impact of prevention programmes implemented by the specialists of the SSSYC Trust counselling stations. There are positive changes (even though they are not significant) in the number of those who started using condoms, treat instruments used for injections, decreased the number of sexual partners and stopped sharing instruments used for injection among users of the services of the stations in comparison to other respondents.

According to the data of the 2002 survey, 33% of all the respondents said that started being more careful about their health and use only sterile syringes and needles, 25% started using condoms, 24% began to be more discerning in choosing friends, 19% decreased the number of sexual partners, 15% stopped sharing instruments used and 6% decreased the amount of injection drugs they use. The gender analysis of the data obtained shows that women have become 11% more careful than men have in choosing friends (31% versus 22%). In 9% more instances than men (40% versus 31%) women are using only sterile syringes and needles.

On the basis of age, we can state that 57% of the representatives belonging to 29 and more years old age group started using sterile syringes and needles for injections. Representatives, 29 years old and older and 14-16 years old respectively 2 and 3 times decreased the amount of injected drugs they use. At the same time, for 14-16 year old age group the figures of refusing to use common instruments and mixtures is 2 times lower than in general (7% versus 15% in general).

The analysis of the results based on the place of residence shows that in Sevastopol the dominating ways of prevention is using condoms, in Yalta – treating instruments for injections, in Novovolyns’k and Melitopol – using only sterile syringes and needles, in Kharkiv and Chernihiv – decreasing the amount of injected drugs used.

The comparison of this survey to the 2001 survey brought to light the positive tendency of a 3% increase of using only sterile syringes and needles for injections. The use of condoms increased 5%, and mandatory treatment of instruments used for injections increased 4%. At the same time caring for one’s health (33% versus 46%), attitude towards choosing friends (24% versus 30%) and refusal to share instruments and solution (15% versus 22%) decreased.

So the following ways of prevention of personal infection with HIV are most common among respondents:

- using only sterile syringes and needles;
- treating instruments used for injections;
- using condoms.

Injection Drug Users’ Awareness of the Possibility of the Likelihood of Getting Infected with HIV

Any preventive work is supposed to influence the conscience of a person, which should be reflected in the emergence of new knowledge, understanding, skills etc., which upon reaching realisation level became personal. During interviews, injection drug users were asked to evaluate the level of likelihood of their getting infected with HIV, which may be a good indicator of the awareness of personal risk (see Table 3.8.1).

14% of all the respondents think that this possibility is very real for them, and another 29% think that it is possible. 27% of all the respondents could not give a definitive answer; they considered it too difficult. 20% gave said that the possibility of their getting infected with HIV is very low (unlikely), and 7% think that it is not a threat to them at all.

Indicative of the effectiveness of influence the work of Trust counselling stations had in passing knowledge to injection drug users about the threat of getting infected with HIV is the proportion of the users of the services of the stations aware of the risks related to using drugs intravenously (see “very real” and “possibly” answers of the respondents in Table 3.8.1).

Table 3.8.1

HIV-infection prevention specialists think that awareness of the likelihood of getting infected is the first step to positive changes in practice. That is why we consider it a positive tendency that the number of respondents, admitting personal threat of getting infected with HIV as very real, has increased.

The cohort of people aged 29 and older are twice as aware of the reality of getting infected with HIV as all the other respondents – 29%. Youth, aged 14-16, is most careless in terms of being aware of the risks of getting infected with HIV: there are twice as many answers in this group as in the whole sample that HIV-infection is not a real threat to them – 18%.

There are basically no gender-related differences in the replies.

Despite quite positive tendency in the awareness by injection drug users of the reality of getting infected with HIV, the percentage of those, who do not want to think about the realisation of this threat and gave careless answers this question, has increased (see answers, “It is not a threat to me” or “Unlikely” in Table 3.8.1). According to the results of 2002 survey, the proportion of those, who think that the perspective of getting infected with HIV is unlikely, has increased. It requires the activation of work related to this.

So informational educational work of SSYC Trust counselling stations for injection drug users is responsible for positive shifts in their practices. It is especially noticeable among the users of the SSYC Trust counselling stations’ services, who, under the influence of the information about HIV/AIDS in order to prevent personal infection with HIV, started practising such measures as:

- using only sterile syringes and needles;
- treating instruments used for injections;
- using condoms.

Indicative of the effectiveness of the impact of the Trust counselling stations’ work on injection drug users concerning the threat of getting infected with HIV is the proportion of the users of the services of these stations aware of the risks related to using drugs intravenously.

3.9. Injection Drug Users’ Evaluation of the Work Done By Trust Counselling Stations

Almost every third of the interviewed injection drug users is using the services of Trust counselling stations, set up at the premises of SSYC. Most of the stations are permanent (59%).

22% of the interviewed target group representatives started using the services of Trust counselling stations only recently – in the last 1 –3 months. Another 21% of the respondents are using the services of Trust counselling stations from 6 months to one year and 23% are using the services of Trust counselling stations over a year, and half of them (51%) are injection drug users aged 25-28 years old.

The following services provided by Trust counselling stations to injection drug users are most popular: syringes and needle exchange – 96% and dissemination of informational materials (booklets, brochures) 85% (see Graph 3.9.1).

Graph 3.9.1.

In general, respondents are quite satisfied with the services provided by the Trust counselling stations. But the working hours of the station, its location, quality of services provided to injection drug users, staff attitude, as well as presence of syringes, condoms and informational materials sometimes disappoint clients (see graph 3.9.2).

Graph 3.9.2.

At some places, psychological counselling does not bring dissatisfaction. So for example, in Mykolajiv there were 38% of such respondents, 31% in Sevastopol and Chernihiv and 30% in Makijivka.

As to the specific details of the work of Trust counselling stations, 82% of the interviewed respondents are satisfied with the mode of operation of Trust counselling stations.

It is also beyond doubt that local SSYC Trust counselling stations bear significant influence on the accessibility and effectiveness of the services provided. 80% of the interviewed injection drug users were satisfied with the location of SSYC Trust counselling stations.

As was noted before, one of the most popular services at the stations is syringe and needle exchange. In general, this type of services brings satisfaction to 89% of the respondents. However the quality and quantity of syringes and needles exchanged at the station does not satisfy 27% of the injection drug users.

As to information support, quality and quantity of brochures and booklets that are distributed at SSYC Trust counselling stations is satisfactory for the vast majority of the target group representatives. Injection drug users from the following cities are not satisfied with the quality and quantity of informational materials: Makijivka and Melitopol (30%), Kharkiv (27%) and Chernihiv (25%).

In general injection drug users are positive about the work of Trust counselling stations. The attitude of Trust counselling stations staff plays a very important role in this. The vast majority of the respondents (90%) is satisfied with the attitude of the staff of Trust counselling stations and plans to continue using their services (97%).

Thus injection drug users are satisfied with the services the SSYC Trust counselling stations provide.

However, according to the data of the survey, special attention needs to be paid to legal support. 55% of all the interviewed users of the services of Trust counselling stations are not satisfied with this service. We can also point to the quality of medical aid; 40% of the respondents said that they are not happy with it, as well as psychological counselling – 31%.

In general, injection drug users are positive about the work of Trust counselling stations. The attitude of staff as Trust counselling stations plays a very important role in this. The vast majority of the respondents (90%) is satisfied with the attitude of the staff of Trust counselling stations and plans to continue using their services (97%).

4. Analysis of the Attitude of the Social Environment to the Project

Monitoring project implementation and evaluation of its effectiveness included identification and analysis of the main achievements and difficulties experiences by the project in order to further improve the work of the stations and expand this network to other regions of Ukraine. This was achieved through half-structured interviews with the project workers, project volunteers, as well as experts from among specialists. A total of 550 interviews was done, 50 in each city.

Taking into consideration the fact that HIV/AIDS epidemic struck all the regions of Ukraine, that the spread of HIV-infection is taking on intensive pace among various population strata through different channels in the country, working in the area of HIV-infection prevention among injection drug users in the specified cities began with the mobilisation of the efforts of all the public in the cities. The main goal of creating SSYC Trust counselling stations was to slow down the rate of the proliferation of HIV-infection among persons using drugs intravenously by developing in them habits of safe behaviour, teaching them ways of protection from

HIV-infection, providing them with means of protection (clean syringes, disinfecting solutions, condoms). However, the implementation of this project would not be possible without the support of the administrations of the cities.

Before the work of the stations began in the specified cities, tedious work was done in order to shape positive public opinion. It was highly necessary in order to avoid open counteraction of city administrations, law enforcement agencies and the public.

Moreover, a significant part of the population of the cities thought that it was necessary to control more strictly those who are producing, selling and using drugs. Many local residents were dissatisfied with the fact that help would be provided to drug addicts, who in fact need to be imprisoned. Often in the specified cities, local residents voiced the opinion that free syringes need to be given not to injection drug users, who are lost for society, but to diabetics or elderly, and so on. This extremely negative attitude to injection drug users and to the work of Trust counselling stations made them a hard to access group especially they were not open for preventive work to begin in their midst and so it required urgent work done, so that social tension in the cities is removed.

With this purpose, explanatory work was conducted, involving local mass media. So, in **AR Crimea** a round table discussion was held about the prevalence of the problems of drug addiction in youth environment and ways of prevention of this phenomenon, as well as counteracting the HIV/AIDS epidemic with the participation of interested structures and organisations.

In **Sevastopol City** representatives of the local authorities, medical, educational institutions, law enforcement agencies were invited to participate in the work of the round table called "Prevention of negative phenomena in youth environment. Strategy of partnership and co-operation". A special event was prepared and held on the AIDS Day. It was informative in its nature. The purpose of the event was to inform the broad strata of local community about the work of the SSYC Trust counselling stations and methods of work employed with injection drug users. In the local newspaper, *Slava Sevastopolja*, (Sevastopol Glory) a series of articles about the work of the station and about the life of injection drug users were published. A special film was produced in order to inform local population with the specifics of work of SSYC Trust counselling stations. It was broadcast through a local television station.

In **Donets'k region** the following activities were done in order to shape public opinion: meeting at the state administration of Gorlivka City; publications about the work of the Trust counselling station in regional mass media, as well as in local newspapers (of Mariupol and Slov'jans'k cities). In specially designed mass youth events in **Makijivka City** over 2000 young people participated. These events were a kind of advertisement of the work of the SSYC Trust counselling station, and its services.

Keeping in mind that drug addiction is a legal problem too, which needs to be solved in close co-operation with law enforcement agencies, in the specified cities project implementing agencies co-ordinated their actions with law enforcement officers. For example, in Sevastopol City a joint plan of actions in the area of HIV-infection prevention among injection drug users has been developed and agreed upon with the representatives of the division of illegal drug trafficking. In other cities selected for monitoring and evaluation of the effectiveness of the Trust counselling stations, there is a fruitful co-operation with the representatives of the representatives of departments of internal affairs, agencies for minors affairs, district militia officers,

etc. Despite all this, there are numerous problems in the relationships with law enforcement agencies in the specified cities. For example, SSYC volunteers from **Chernihiv City** indicated in their interviews that some district militia officers, who are working in the districts, where permanent and mobile Trust counselling stations are located, do not quite understand the importance of providing injection drug users with free syringes and counselling. Sometimes there are instances, when station visitors are arrested. SSYC volunteers from **Yalta City** emphasised the fact that law enforcement officers are demanding addresses of injection drug users using the services of the station, in order to do crime prevention work. Project implementing agency from **Kharkiv City** noted that despite co-operation agreement with law enforcement agencies, they sometimes feel the pressure from the representatives of these structures, which influences the effectiveness of the work of trying to get injection drug users to use the services of the centre.

HIV-infection prevention among injection drug users is an complicated, medical, social problem, and specialists from different fields (including medical workers, law enforcement officers, lawyers, psychologists, social workers etc.) need to be involved into efforts of trying to solve it. In all the specified cities adequate work of trying to recruit specialists necessary for the work done at the counselling stations was conducted. Co-operation with recruited specialists has been reflected in signed work contracts. For example, in **Melitopol City** SSYC Trust counselling station for injection drug users, three psychotherapists are working alongside other specialists and provide station clients psychological help. And in **Kharkiv City** a lawyer, psychologist and a sociologist counsel injection drug users at the SSYC Trust counselling station.

Besides that, it was necessary to find special buildings that would meet all the needs, in order to facilitate productive work of the stations. Such buildings could be provided by medical institutions. Possibilities for simplifying access of injection drug users to medical services have been negotiated; agreements to provide specific medical aid to injection drug users, using the services of SSYC Trust counselling stations, were reached with some medical institutions. This aid would especially encompass providing narcological, surgical, venerological aid, as well as testing for HIV-infection. In all specified cities joint work agreements signed with specialised medical institutions provided room for counselling stations and made it possible to disinfect and utilise used syringes and provide medical aid.

Recruited specialists received relevant training in HIV-infection, drug addiction, harm-reduction strategy, specifics of working at Trust counselling stations, psychological specifics of injection drug users, etc. **Biljajivka** District Trust counselling station of the Social Services for Youth Centre (Odesa region) taught a special training course, Balintovski groups as one of the methods of prevention of the burnout phenomenon among harm-reduction specialists and volunteers. Same kind of training courses have been taught at other Social Services for Youth Centres, where Trust counselling stations are set up. Highly qualified practising specialists knowledgeable about this problem in all the cities have taught training courses.

It is known that non-governmental organisations were the first in Ukraine to get involved into preventive work employing harm-reduction strategy with the financial and technical support of international donors. While this work was done, they acquired practical and theoretical experience that become very useful for Social Services for Youth Centres, which have been working in this field only one year. Social Services for Youth Centres at whose premises Trust counselling stations are

located, are in a close co-operation relationship with non-governmental organisations, apply their experience, develop joint events and programmes. For example, in **Mykolajiv City** Mykolajiv charity foundation Blagodijnist' ("Charity") is helping with the work of Trust counselling station of the Social Services for Youth Centre there, in **Kharkiv City** Chervona Strichka (Red ribbon) foundation for helping HIV-infected people is doing that, in **Chervonohrad City** – Lviv Usi Razom ("All together"), the Centre of Social and Psychological Information, which for many years is doing work employing harm-reduction strategy for injected drugs use.

Taking into account the fact that injection drug users are a very difficult group to gain access to, field workers – volunteers – are participating in the preventive work of Trust counselling stations. They include former or active injection drug users, who received special training. They disseminate information about the work of SSYC Trust counselling stations, talk about ways of prevention of HIV-infection in preparation, division and use of drugs with a syringe, distribute syringes, disinfecting solutions, condoms, informational literature. Training seminars were conducted in all the specified cities in order to teach volunteers theoretical principles of HIV/AIDS prevention and practical skills of work employing harm-reduction strategy. The following specialists took part in the training: narcologists, infection doctors, social workers, psychologists, and NGO representatives working in this field.

One of the main objectives for the work of SSYC Trust counselling stations is setting up support groups for injection drug users and their co-dependents (parents, relatives, family members, etc.). In **Sevastopol** Trust counselling stations 5 self-support groups have been created and are operating now: two for injection drug users, one for HIV-infected and another two for parents and family members of injection drug users. In **Melitopol**, **Chervonohrad** and **Chernihiv** there is one group in each for parents, whose children are using drugs. At **Mykolajiv** Trust counselling station there is a support group for HIV-infected injection drug users, Vyhid ("Way out").

Based on the rich experience accumulated during the work of SSYC Trust counselling stations for injection drug users in the specified cities, with the financial and technical support of the representative office of UN Children's Fund (UNICEF) in Ukraine, work of expanding the network of counselling stations to other cities of Ukraine is continued, including not only big regional capitals and district capitals, but also small towns. So, in 2001 there were 32 such centres in Ukraine, and in 2002 another 15 were established: in AR Crimea (Kerch, Yevpatorija), in the regions of Donets'k (Gorlivka, Mariupol, Slov'jans'k), Dnipropetrovs'k (Kryvyj Rih, Dnipropetrovs'k), Kyiv (Brovary), Mykolajiv (Nova Odesa, Ochakiv), Odesa (Balta), Poltava (Poltava), Kharkiv (Balaklija), Khmelnyts'kij (Netishyn) and Chernihiv (Pryluky).

5. Project Impact on the Changes in Local Policies

HIV-infection is a social problem that can cause demographic, economic and social changes in society more than any other disease. That is why HIV/AIDS problem today is considered the problem that will be solved not only at the governmental level, but also at the level of local authorities. National programme of HIV-infection prevention for 2001-2003 is ratified and working in the country. It stipulates participation of a broad circle of ministries, agencies and organisations. One of the main directions of preventive work in the area of HIV/AIDS epidemic is supporting the work with the help of harm-reduction strategy by establishing Trust counselling stations for injection drug users. On the basis of the national programme

some regional state administrations created analogous programmes for HIV-infection prevention. In some regions co-ordinating councils have been created for working in the area of HIV/AIDS epidemic prevention. For example, such councils are working very actively in the cities of **Odesa, Kharkiv**. However, in some regions, especially, in regional capitals and individual cities such programmes were not created or exist only on paper. This hinders the expansion of preventive work and its activation, especially for target groups that are most vulnerable to getting infected with HIV.

Work under HIV/AIDS Prevention among Young People Using Injection Drugs Project that provided for establishing Trust counselling stations in the specified cities of Ukraine, caused certain changes in the attitude of the representatives of the local state administrations to preventive work on the city level:

1. Project implementing agencies did respective work to inform representatives of local authorities about the mission and goals of the project, specifics of its implementation.
2. Project implementing agencies enlisted the support of the local authorities. So, preventive programme developed by **Makijivka City** Social Services for Youth Centre was included into the regional prevention programme for 2003. The decree of **Donets'k Region** Administration established an integrated programme Donetsk Region Youth for counteracting the HIV/AIDS epidemic in this region until 2005, where development of Trust counselling stations for injection drug users in Donetsk region is marked as one of the main directions of work. Now in Slov'jans'k and Gorlivka such stations were created at the premises of SSYC.
3. Project implementing agencies regularly participate in topical meetings of the local autonomous bodies (local authorities, government) dedicated to problems of prevention of negative phenomena in youth environment and counteracting HIV/AIDS epidemic which facilitates co-ordination and harmonisation of actions of different institutions at the local level.
4. State governing offices have a chance to systematically study the results of the work of Social Services for Youth Centres and of Trust counselling stations for injection drug users in particular. Project implementing agencies present written reports to them. This gives state officials an opportunity to find gaps (blank spaces) in prevention, identify problems and accomplishments, and determine ways to continue work.
5. State administrations in the specified cities try to help with project implementation. So, state administration of **Sevastopol City** is financing the circulation of informational materials for injection drug users, their parents, and volunteers from the local budget.

6. Project Accomplishments and Hardships

In order to analyse the main accomplishments and hardships of the project so as to further improve the activities of the project and expand its network to other regions of Ukraine thorough half-structured interviews of implementing agencies, project volunteers, as well as experts from among recruited specialists were conducted. A total of 550 interviews were done, 50 in each cities.

The analysis of interview results enabled identification of main accomplishments in the work under the project:

- Establishing co-operation with experts of different profiles, recruiting them to work with SSSC Trust counselling stations. At the stations, in the specified cities from 3 to 8 of recruited specialists from different fields are working regularly: medical workers (narcologists, infection doctors, surgeons, psychotherapists, medical nurses), social workers, psychologists, sociologists.
- Recruiting youth, specialists, former or active injection drug users, their parents, and relatives to work on voluntary basis. At the stations from 3 to 10 SSSC volunteers are working, including 2 to 5 persons who are currently or used to be injection drug users.
- Creating and active work of permanent Trust counselling stations at local narcological clinics, hospitals, centres for prevention and fighting AIDS open on average 3 times a week. At the same time in **Makijivka, Ternivtsi, Chernihiv and Sevastopol** both permanent and field forms of work are employed in the work of Trust counselling stations, during which recruited specialists and volunteers are doing syringe exchange, provide informational counselling services and disseminated informational materials.
- Establishing constructive relationships with injection drug users, recruiting them to use the services of the station, take part in support groups, working with the help of harm-reduction methods. Different stations in the specified cities reach 30-150 injection drug users during one month. The range of coverage depends on work experience of the station, level of trust towards to station workers, kinds of services provided, etc.
- Constantly expanding the services provided to injection drug users at the station. These services are used actively: providing free instruments used for using injected drugs (syringes, needles, disinfecting solutions, alcohol pads), social support, psychological counselling, medical aid, informational support, facilitating access to specialised medical services (assignments to see necessary doctors to get anonymous, free medical aid). In **Mykolajiv City** they can use the services of a lawyer, and in **Melitopol City** – of a psychotherapist.
- Regular professional development courses for recruited specialists, directors, staff workers of SSSC Trust counselling stations, training SSSC volunteers, injection drug users, their parents and other co-dependents through special training courses, seminars led by leading experts.
- Constantly exchanging experience, information with specialists also involved in prevention of HIV/AIDS, drug addiction, and so on, by organising conferences, round table discussions, joint meetings and sessions.
- Establishing co-operation with local mass media, coverage of the work of the station in newspapers, on radio and television.
- Targeting informational services.

Taking into consideration the fact that the work of Trust counselling stations is designed for a specific target group and has many difficulties and obstacles in the way of its effective implementation, it is necessary to identify the main problems that the implementing agencies faced, for further project improvement and development. Here are the major problems:

- Shortage of material and financial resources for expanding the work, its regularity and stability. All the stations, where survey was made, are financed by the State Social Services for Youth Centre. Local authorities give only limited funds to the stations for informational educational activities or purchase of syringes. In some

cities, non-governmental organisations working with this target group, having different sources of financing also provide financial support. For example, in **Mykolajiv, Chervonohrad and Kharkiv**, non-governmental organisations help Trust counselling stations created at the premises of Social Services for Youth Centres, and provide syringes, condoms, informational materials, and so on. However, the problem of financing the work of such stations is still pressing, especially in small towns.

- Lack of specialised buildings, suitable for the work of the stations and attractive to injection drug users in terms of location.
- Lack of transportation (car, bus) for doing fieldwork, especially in big cities or cities with specific geographic location.
- Shortage of (especially in some cities) qualified specialists who can be recruited to participate in the work of the counselling station.
- Lack of trust of most of hidden injection drug users to the work of stations, volunteers and specialists.
- Unfavourable and sometimes even aggressive attitude of local population to the work of mobile SSYC Trust counselling stations, especially in small towns.
- Lack of access to the full range of medical services that injection drug users need, especially in small towns. For example, implementing agency in **Novovolyns'k** of Volyns'ka region emphasised the fact that there is even no room for testing for HIV-infection, no institutions for treatment and rehabilitation of drug users in the city, so they have to send, when necessary, their users to the regional capital without any guarantee that they will get there and receive adequate help.
- Shortage of experience, theoretical knowledge and practical skills in project coordinators, specialists and volunteers.
- Shortage of methodical, organisational help for station's functioning, providing specific types of services.
- Passive attitude of parents, relatives and other co-dependents in terms of participation in preventive work, providing specific kinds of help to users.
- Low activity level of injection drug users, their consumerism in relation to project workers, services provided.
- Shortage of advertisement of the work of the station, problems in co-operation with local mass media, their commercial nature.
- Lack of advertisement of preventive nature on local radio and television channels.

7. General Evaluation of Project Effectiveness

Monitoring of activities for implementation of HIV/AIDS Prevention among Young People Using Injection Drugs Project, September 2001 through October 2002, gave an opportunity to reach some conclusions:

- Project activities fit the urgent needs of the target group representatives.
- Individual kinds of work under the project are inter-related and correspond to the general mission of the project, that is amplification of the opportunities of SSYC in terms of preventive work among injection drug users through Trust counselling stations.
- The attitude of target group representatives to the work of the project is, in general, positive, however there is a problem of negative public opinion towards injection drug users and the work of such projects.

The evaluation of the effectiveness of the work of Trust counselling stations showed that certain positive changes took place at all the levels of project influence – individual, social environment level and political level.

The following positive shifts were registered at the *individual level*:

- the proportion of those who always use only a sterile new syringe for each injection, those who after injection disinfect their syringe with a special disinfecting solution, as well as those who never use drugs with other people using the same shared syringe has increased;
- most of the interviewed young people using injection drugs are in monogamous relationships with sexual partners;
- the proportion of injection drug users who always use condoms also grew;
- a significant part of the users of the services of the stations are aware of the risks related to using drugs with a syringe;
- a large percentage of the users of the services of Trust counselling stations under the influence of information about HIV/AIDS started applying the following measures of prevention of getting infected with HIV:
 - using only sterile syringes and needles;
 - treating instruments used for injections;
 - using condoms.

At the *level of social environment*:

- in specified cities fruitful work was done in order to lower social tension, improve psychological macro climate and remove negative public opinion, at least in the social environment that exists around injection drug users;
- a team of like-minded individuals was formed, who through common effort are solving the problem of counteracting the HIV/AIDS epidemic in the environment of injection drug users at the city level;
- working relationships with local mass media was established. It involves co-operation in preventive work, creating the image of SSYC counselling stations, coverage of their work, shaping tolerant public opinion;
- constructive contracts have been signed with target group representatives, their co-dependents; ways of reaching them through support groups, volunteer movement are planned;
- volunteer movement experienced great expansion, now it involves not only injection drug users, but also youth that does not use drugs, parents, specialists of different fields;
- SSYC volunteers selection and training is done on regular basis;
- State Social Services for Youth Centre is constantly providing methodical support for the work of the project. 2 methodical manuals have been published: *Main directions of work, abilities and skills of a volunteer in the programme of Harm-*

*reduction among injection drug users*¹⁰ and *Methodical manual for HIV-infection Prevention Among Young People Using Injection Drugs (for social workers)*¹¹;

- Working relationships with other state and non-governmental organisations have been established, which involves joint preventive work.

At the **political level** we can outline the following positive tendencies:

- a positive image of Trust counselling stations was created at the level of local authorities;
- expanding the network of Trust counselling stations is one of the priorities of the work of SSYC centres;
- constant increase of financial support of SSYC Trust counselling stations from the local budget;
- in some cities work to create new and expand the activities of the existing SSYC Trust counselling stations was taken to the regional level (Donets'k, Kharkiv and Odesa regions);
- some programmes of activities in the area of HIV/AIDS prevention among injection drug users developed by project implementing agencies became the basis for regional programmes for contracting HIV-infection epidemic (Donets'k region);
- constant informational flow to local authorities has been set up about the implementation of preventive programmes and the work of the project;
- ways of financing the work of the stations from the local budget are always sought.

So the effectiveness of the HIV/AIDS Prevention among Young People Using Injection Drugs Project and the work of SSYC Trust counselling stations in all the designated for research cities in particular can be evaluated as high. Despite the fact that project implementing agencies faced numerous difficulties and obstacles, they managed to gain rich experience, make certain steps ahead on the way of the creation of a network of counselling stations for young people using injection drugs, create a foundation for continuing this work.

In order to continue the tedious and complicated work of HIV/AIDS prevention in the environment of young people using injection drugs, it is necessary to implement additional measures in order not to make the same mistakes and make the impact of the project on the target group and social environment more effective.

8. Recommendations Concerning Project Development

So, the analysis of the work of the project demonstrated that the possibilities for continuation of the implementation of the project and expansion of the network of Trust counselling stations for injection drug users at the premises of Social Services for Youth Centres are promising. Accumulated experience is the basis for developing further steps in preventive work in the environment of young people using injection drugs.

¹⁰ *Main directions of work, abilities and skills of a volunteer in the programme of Harm-reduction among injection drug users*. Published as a part of the joint project of the State social services for youth centre and UNICEF office in Ukraine, HIV/AIDS prevention among young injection drug users with the support of UNAIDS Programmes' Development Fund. – K., 2002 – 74p.

¹¹ B.P. Lazorenko, I.M. Pinchuk, V.A. Sanovska, *Methodical manual for HIV-infection Prevention Among Young People Using Injection Drugs* – K., 2002 – 111p.

We consider it necessary to offer authorities, state, non-governmental organisations, law enforcement offices, mass media, scientific research, medical and social institutions to take into account the following recommendations in their work concerning creation and development of SSSC Trust counselling stations for injection drug users:

- Experience accumulated during project implementation testifies to the fact that there are real opportunities for influencing young people using injection drugs in order to prevent the spread of HIV/AIDS epidemic. That is why it is necessary to continue, develop and expand this important work, taking into account accumulation during project implementation experience and knowledge. It is extremely important to preserve and develop established relationships with other vital preventive programmes, different organisations and institutions that implement them.
- Continual financing by the government is required for successful project implementation.
- In order to continue the work of creating positive environment for injection drug users, deliberate, informational educational work needs to be done in broad strata of society in order to shape tolerant public opinion toward drug addicts and Trust counselling stations that provide them help. For this purpose, it is expedient to use more various mass media, recruiting professional journalists to cover the work of the stations, creation of informational materials for injection drug users. A separate strategy needs to be developed for working with mass media.
- Informational educational work in the area of prevention of the spread of HIV-infection needs to also focus on the representatives of the social environment of young people using injection drugs, meaning, co-dependents, their parents and other relatives. For this purpose, they need to be more involved into volunteer activities and participate in self-support groups.
- The importance of this problem for entire Ukraine, the solution of which is promoted by Trust counselling stations working with injection drug users, necessitates legal, statutory support of the work of such projects for better coordination, harmonisation of actions with law enforcement offices, medical institutions.
- In order to involve volunteers from among youth, experts from different fields more actively into working at the stations, a system needs to be developed that would motivate, encourage and support them.
- In order to reach the latent part of injection drug users by preventive activities, constant attention needs to be paid to “street work”, creation of “field stations” for counselling work, employing peer education method, as well as new technologies and methods of involving injection drug users into HIV/AIDS prevention.
- For professional development of recruited specialists, it is expedient to continue to systematically exchange experience and teach new methods and technologies of working with drug addicts through organising seminars, training courses, round table discussions and conferences.
- Accumulated experience needs to be disseminated and spread to other regions and cities of Ukraine. For this purpose, seeking additional funds to finance this activity needs to be done more actively. Existing resources of state institutions and non-governmental organisations and private sector need to be used most actively for this purpose.

- In order to expand the coverage of injection drug users by preventive activities the range of offered services of Trust counselling stations needs to be continually expanded. This is necessary in order to simplify injection drug users' access to quality, anonymous and affordable medical services.
- Available data testify about the existence of injection drug users' need to have social and psychological rehabilitation. It necessitates the creation of a state system of institutions for drug addicts rehabilitation.
- In order to increase the range of coverage of IDU by preventive activities the efforts of SSYC, non-governmental organisations, medical institutions, centres for prevention of and fighting AIDS, law enforcement offices, educational institutions working with target group representatives need be united.
- In order to help specialists to work in the area of HIV-infection prevention among injection drug users, with the specifics of working at Trust counselling stations, it is vital and timely to create a system of continuous scientific support of the work of the project. The issue of unification of documenting the work of the project is still unresolved.