

Stronger in Partnerships



AIDS Foundation East-West (AFEW)





Content

Opening words by Frank de Wolf and Anke van Dam	4
Where we work: HIV epidemic EECA	5
Our approaches and the people we reach	11
<i>AFEW's</i> projects in action	14
We are 10 years old!	22
Governance and Finance	25
Who we are	39

Opening Words

Frank de Wolf
Chair of the Board

Anke van Dam
Executive Director



In 2011 *AIDS Foundation East-West* marked its 10th anniversary; we may look back with pride on a decade in which *AFEW* has earned acknowledgment and recognition for its activities in mitigating the impact of the HIV epidemic in Eastern Europe and Central Asia (EECA). In these 10 years *AFEW* received almost 70 million euro, funding projects in 10 countries, reaching out to the most vulnerable groups in society. From its foundation *AFEW* has implemented projects on HIV prevention, care and support for people using drugs, prisoners, sex workers and men having sex with men. The 2011 UNAIDS report stated that localised studies still reveal a very high prevalence of HIV (up to 59%) in EECA among people who inject drugs. An estimated 35% of women living with HIV probably contracted the disease through intravenous drug use, and an additional 50% were probably infected by partners who inject drugs. The use of non-sterile injecting equipment, in other words, remains the core driver of the epidemic in this region. It is therefore unfortunate that needle and syringe exchange points are viewed by the Russian government as facilitating or promoting drug use, and that the American government recently decided to exclude clean needle and syringe activities from its PEPFAR programme. However, there is growing concern that the epidemic will become generalised in the near future through an explosion of heterosexual transmission. *AFEW* will therefore give greater priority to preventive activities on youth and women.

Advocacy and lobbying for harm reduction remain part of *AFEW*'s work. The "Capacity Development of HIV/AIDS NGOs in Eastern Europe and Central Asia" (Project ROST), supporting 60 participants through training and sub-grants for advocacy and resource mobilisation, is an example of this.

The theme of this Annual Report is 'Stronger in Partnerships'. *AFEW* participates in different networks, alliances, consortia and partnerships, believing that by joining forces and pooling expertise we bolster our efforts to curb the HIV epidemic. The results achieved in the past 10 years could only have been realised through these partnerships. *AFEW* built up the capacity of governmental and non-governmental organisations and will continue to support and assist local organisations, as they grow and develop into equal partners. The strength of our partners and our partnerships is a key determinant of the sustainability of the services they provide.

In 2011 some major projects came to an end:

- *AFEW*, as member of a consortium with 4 other non-governmental organisations in the **Russian Federation**, completed the '**Globus**' project. Globus stands for 'Global Efforts Against AIDS in Russia; Stimulating an effective national response to HIV/AIDS in the Russian Federation' and was financed by the Global Fund to Fight AIDS, Tuberculosis and Malaria (round 3, 2004 - 2009). Phase II of this ambitious and effective project concluded in December 2011. *AFEW*'s focus in this project was on HIV prevention and care activities for inmates. *AFEW* provided HIV-related services to almost 10.000 prisoners and trained almost 2,150 prison staff in HIV prevention.
- **In Ukraine**, *AFEW* wound up the **Sex Work and HIV/AIDS Project**, a project to mitigate the effects of the HIV epidemic among female sex workers and their clients. *AFEW* worked to improve sex workers' access to non-discriminatory, non-judgmental and user-friendly medical and psychosocial services including HIV prevention, counseling and testing services, as well as diagnostic and treatment services. The project facilitated the creation of an atmosphere of tolerance and understanding among healthcare and social support service providers, ensuring that sex workers have access to the care and support which they need.
- **In Central Asia**, *AFEW* is in the last phase of its '**ACCESS**' project: HIV/AIDS and HIV/TB Collaborative Activities in Central Asia. This project, which will run until February 2012, consists of HIV/TB collaborative programmes designed to improve the quality, range and reach of available HIV and TB services and to facilitate the co-ordination of HIV/TB activities between vertically separated and isolated healthcare structures. These activities seek to promote communication, co-ordination, and collaboration within the community and across the highly vertically organised and highly specialised pillars of the healthcare system. 15,000 clients in 21 social bureaux received almost 150,000 consultations.

As financial crisis continues funding becomes increasingly scarce, compromising the sustainability of both the current scope and quality of services. The cancellation of round 11 by the Global Fund to fight AIDS, Tuberculosis and Malaria is one of the most striking consequences of the budget cuts and austerity measures undertaken by governments.

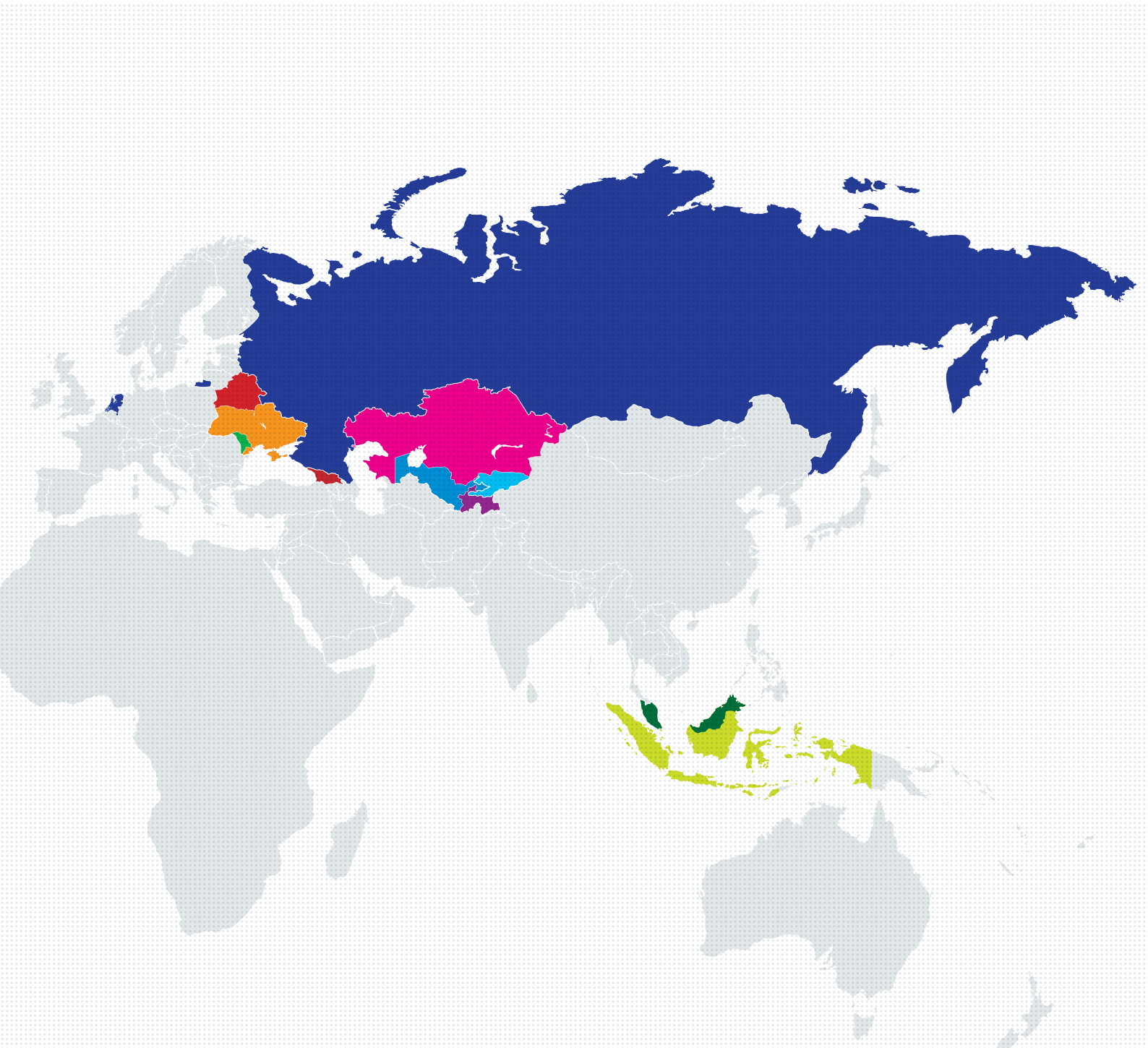
These developments thus imperil both the target groups for HIV prevention, care and support, and the organisations that serve them. In order to cope with dwindling funds *AFEW* has had to undergo a major reorganisation and reduction of staff. The executive director Joost van der Meer, who led the organisation from October 2005 through February 2012, will step down. We thank Joost for his leadership and his hard work to keep the HIV epidemic of EECA on the political agenda.

The good news for 2011 was the Dutch Ministry of Foreign Affairs' approval of funding for the 4,5 year 'Bridging the Gap: health and rights for Key Populations' programme. This programme will be implemented by the Key Populations Alliance, of which *AFEW* is one of seven members. 'Bridging the Gap' started in September 2011 and gives Dutch NGO's the opportunity to combine know-how in reaching the three key populations (people using drugs, sex workers and men having sex with men) and for *AFEW* to build on its reputation in harm reduction and prison health.

Where we work: HIV epidemic in EECA

Eastern Europe and Central Asia (EECA) remains a region with a high prevalence of HIV; a prevalence which, relative to other parts of the world, continues to rise. In its 2011 Global report, UNAIDS indicates a **250% increase** in the number of people living with HIV in EECA since 2001 — an estimated 1.5 million people in 2010.

The following numbers are provided by the national AIDS Centres of respective countries. Note that figures only reflect the number of officially registered cases and therefore may underestimate the true infection rates. Statistics from Russia are dated 01.11.2011.



Moldova

HIV SITUATION

Population

3,563,700*

Estimated HIV cases, 2009

12,000**

Officially registered HIV cases (by end of 2011)

7,125 (+721 new cases in 2011)***

AFEW'S EXPENDITURE

€194,912 in 2011 (€195,882 in 2010)

PROJECTS

- Scaling Up Access to Prevention, Treatment and Care under the National Programme for the Prevention and Control of HIV/AIDS/STIs (funded by UCIMP TB/AIDS, as principal recipient of a grant from the Global Fund to Fight AIDS, Tuberculosis and Malaria)
- Public Awareness and Educational Development in Europe (funded by dance4life as principal recipient of a grant from the European Commission)
- HIV Prevention among School Youth in the Transnistrian Region of Moldova (funded by UNDP)

Ukraine

HIV SITUATION

Population

45,778,500*

Estimated HIV cases 2009

350,000**

Officially registered HIV cases (by end of 2011)

202,787 (21,177 new cases in 2011)***

AFEW'S EXPENDITURE

€186,083 in 2011 (€843,075 in 2010)

PROJECTS

- HIV/STI Prevention & Health Promotion among Street Children, Ukraine (funded by Aids Fonds)
- Support for the Drop-in Centre for Street Children in Kyiv, Ukraine (Aids-Fondet Denmark, money collected under Humour against AIDS)
- Sex Work and HIV/AIDS Project in Ukraine (funded by the Swedish International Development Cooperation Agency)
- Bridging the gaps: health and rights for key populations. The project is implemented in partnership with the Key Populations Alliance on the grant received from the Ministry of Foreign Affairs Netherlands.
- Improving the access for street children to friendly services using peer leaders from the community in Ukraine, given by the Royal Dutch Embassy in Kiev, Ukraine.
- Co-organisation of the WHO network meeting for Prison Health 4-5 October 2011 and following international conference on Through care on 5-7 October 2011, funded by World Health organization (WHO).

Belarus

HIV SITUATION

Population

9,481,000 *

Estimated HIV cases, 2009

17,000 **

Officially registered HIV cases (by end of 2011)

12,955 (1,196 new cases in 2011)***

AFEW'S EXPENDITURE

€192,935 in 2011 (€128,593 in 2010)

PROJECTS

- Introduction of a Client-based Approach to HIV Care (funded by MATRA, Ministry of Foreign Affairs of the Netherlands)

Russian Federation HIV SITUATION

Population

141,900,000*

Estimated HIV cases, 2009

980,000**

Officially registered HIV cases (by end of 2011)
636,979 (48,363 new cases in 2011)***

AFEW'S EXPENDITURE

€1,863,142 in 2011 (€2,621,573 in 2010)

PROJECTS

- Scaling-up and Improving Access to HIV/AIDS Prevention and Care Programmes for Injecting Drug Users and in Prison Settings in the Russian Federation (funded by UNODC)
- Stimulating an Effective National Response to HIV/AIDS in the Russian Federation (funded by the Open Health Institute (OHI), as part of the GLOBUS Project funded by the Global Fund to Fight AIDS, Tuberculosis and Malaria)
- PMTCT: The Mothers School Project (funded by Eureko Achmea Foundation)
- The "Capacity Development of HIV/AIDS NGOs in Eastern Europe and Central Asia" (Project ROST – Responding to HIV through Organisational Support and Technical Cooperation in EECA funded by AIDS Action Europe as principal recipient of a grant from Aids Fonds, ViiV Healthcare Positive Action Programme, Levi Strauss Foundation and Foundation Open Society Institute).

Kazakhstan HIV SITUATION

Population

Population: 16, 455, 000*

Estimated HIV cases, 2009

13,000**

Officially registered HIV cases (by end of 2011)
17,763 (1,696 new cases in 2011)***

AFEW'S EXPENDITURE

€601,668 in 2011 (€686,353 in 2010)

PROJECTS

- ACCESS Project: HIV/AIDS and HIV/TB Collaborative Activities in Central Asia (funded by the Ministry of Foreign Affairs of the Netherlands)
- Mobilising and Promoting the Active Involvement of People Living with HIV in Kazakhstan (funded by the European Commission)
- USAID Dialogue on HIV and TB Project (funded by Population Services International as principal recipient of a grant from the United States Agency for International Development - USAID)
- Scaling-up HIV and TB services for most at risk populations in Kazakhstan (funded by the European Commission)
- Donation from British School "Haileybury Almaty" for HIV/AIDS Prevention activities

Kyrgyzstan HIV SITUATION

Population

5,478,000*

Estimated HIV cases, 2009

9,800**

Officially registered HIV cases (by end of 2011)
3,887 (599 new cases in 2011)***

AFEW'S EXPENDITURE

€695,770 in 2011 (€650,895 in 2010)

PROJECTS

- ACCESS Project: HIV/AIDS and HIV/TB Collaborative Activities in Central Asia (funded by the Ministry of Foreign Affairs of the Netherlands)
- Friendly Policemen for HIV Prevention Programmes (funded by the Soros Foundation - Kyrgyzstan)
- USAID Dialogue on HIV and TB Project (funded by Population Services International as principal recipient of a grant from the United States Agency for International Development - USAID)
- Contract for supply of product sets: Strengthening of DOTS GF programme in Kyrgyzstan by means of access to diagnostics and treatment of TB resistant to medicines and Short-term course on TB treatment under direct observation (DOTS) in Kyrgyzstan; improvement of access to diagnostics and MDR-TB, funded by Project HOPE in Kyrgyzstan.

Tajikistan HIV SITUATION

Population

7,595,000*

Estimated HIV cases, 2009

9,100**

Officially registered HIV cases (by end of 2011)

3,846 (989 new cases in 2011)***

AFEW'S EXPENDITURE

€1,155,797 in 2011 (€1,514,720 in 2010)

PROJECTS

- ACCESS Project: HIV/AIDS and HIV/TB Collaborative Activities in Central Asia (funded by the Ministry of Foreign Affairs of the Netherlands)
- Pamir against AIDS Project: HIV/AIDS Prevention & Care Project in GBAO, Tajikistan (funded by Oxfam Novib)
- Strengthening the Supportive Environment and Scaling-up Prevention, Treatment and Care to Contain the HIV Epidemic in the Republic of Tajikistan (funded by UNDP)
- USAID Dialogue on HIV and TB Project (funded by Population Services International as principal recipient of a grant from the United States Agency for International Development - USAID)

Uzbekistan HIV SITUATION

Population

27,767,100*

Estimated HIV cases, 2009

28,000**

AFEW'S EXPENDITURE

€32,216 in 2011 (€283,992 in 2010)

Expenses in Uzbekistan in 2011 are related to downsizing and preparation for the office closure. Due to difficulties in re-registering the country office, project activities were suspended in 2010 and the office was officially closed in the middle of 2011.

Georgia HIV SITUATION

Population

4,436,400*

Estimated HIV cases, 2009

3,500**

Officially registered HIV cases (by end of 2011)

3,149 (389 new cases in 2011)***

AFEW'S IN-COUNTRY EXPENDITURE

€25,577 in 2011 (€23,756 in 2010)

PROJECTS

- Strengthening and Coordination of Local NSAs to Address Drug Use and HIV Prevention in the Kakheti Region, Georgia (funded by Public Association Bemoni as principal recipient of a grant from the European Commission)
- Stand up for Human Rights in the context of HIV/AIDS in Georgia (funded by Public Association Bemoni as principal recipient of a grant from the European Commission)
- Bridging the gaps: health and rights for key populations. The project is implemented in partnership with Key Populations Alliance on the grant received from the Ministry of Foreign Affairs Netherlands.



Malaysia — NEW!

HIV SITUATION

Population
29,179,952 (2012 est.)****
Estimated HIV cases, 2009
100,000 (2009)****

AFEW'S IN-COUNTRY EXPENDITURE
€10,580 in 2011 (€0 in 2010)

PROJECTS

- Community Action for Harm Reduction programme in Indonesia and Malaysia (funded by International HIV/AIDS Alliance)

Indonesia — NEW!

HIV SITUATION

Population
248,216,193****
Estimated HIV cases 2009
460,000****
Officially registered cases (by 2009)
310,000****

AFEW'S IN-COUNTRY EXPENDITURE
€10,579 in 2011 (€0 in 2010)

PROJECTS

- Community Action for Harm Reduction programme in Indonesia and Malaysia (funded by International HIV/AIDS Alliance)

References

- * CIS Interstate Committee for Statistics, beginning on 2011. EXCEPT for: Georgia – National Statistics Office of Georgia, December 2010, and Uzbekistan – The State Statistics Committee of the Republic of Uzbekistan, December 2009.
- ** 'Report on the Global AIDS Epidemic', UNAIDS/WHO, July 2010
- *** National AIDS Centres: figures only reflect the numbers of officially registered cases and therefore underestimate the true infection rates.
- **** CIA World Factbook



Our Approaches

AFEW's mission is anchored in Millennium Development Goal 6, which calls upon the global community to step up efforts to halt the spread of HIV and AIDS and achieve universal access to treatment for these conditions. All the programmes in our extensive portfolio are founded on the principle of **universal access** and exemplify an approach based on **human rights and social justice**. Put simply, the starting point is that everyone should have equal access to HIV/AIDS treatment, prevention and care, including services that reduce harm from drug use or other risky behaviours.

AFEW positions itself as a **partner organisation**. As such, the organisation participates actively in several of the foremost international consortia dealing with HIV and AIDS, as well as building grassroots networks of service providers and local NGOs. *AFEW's* unique value as a partner lies in its extensive experience of working in local healthcare infrastructures combined with its international-level expertise, especially on harm reduction and prison health.

Methods

Through constructive engagement with governments and civil society in the countries where it works, *AFEW advocates* for the basic human right to health and demonstrates why it must be extended to reach the most marginalised, stigmatised groups in society.

Recognising that civil society can be effective in filling voids in the health and social systems of the EECA region, *AFEW assists local organisations* with technical support (hands-on training, and customised consultations) so that they can reach more people and serve them more effectively.

Working directly with those who live at the sharp end of the epidemic, *AFEW empowers key populations at higher risk* with targeted, accurate information and assistance in building their own support networks.

The People We Reach

Injecting drug users. *AFEW* expenditure on programmes for injecting drug users: **€501,268 in 2011** (€921,607 in 2010). At the core of *AFEW's* effort to reduce the exceptionally high level of HIV transmission among injecting drug users in EECA is support for harm reduction and the establishment of na-

tional harm reduction networks. These networks comprise training centres for professionals, needle exchange points and provision of less harmful alternatives to injecting drugs.

Prisoners. *AFEW* expenditure on programmes for prisoners: **€2,391,258 in 2011** (€3,054,029 in 2010). *AFEW* works together with ministries of justice, prison health experts, inmates and local NGOs to build local capacity and ensure that prisoners have the same access to information and services as those living outside prison walls. This policy is in line with the internationally accepted principles of the World Health Organisation (WHO). Given the high rate of injecting drug use in the prisons in the region, *AFEW* also advocates for provision of needle exchange and opioid substitution therapy in prisons. Another major component of *AFEW's* prison work is the introduction of **transitional client management**. To ensure continuity of care for released prisoners, a system has been developed that prepares prisoners for release and guides them to medical and social assistance outside of prison.

Vulnerable Women. *AFEW* expenditure on programmes for vulnerable women: **€698,843 in 2011** (€880,643 in 2010). Power and economic imbalances related to gender can increase the vulnerability of women. This vulnerability, combined with stigma against female drug users and sex workers, leaves women with reduced access to harm reduction and drug treatment services. Women living with HIV also require separate attention, if only because of the issue of prevention of mother-to-child transmission (see below) and child care. Activities for **sex workers** aim to create non-discriminatory, non-judgmental and user-friendly medical and psycho-social services, including HIV prevention, counselling and testing services.

People living with HIV. *AFEW* expenditure on programmes for people living with HIV: **€676,547 in 2011** (€942,305 in 2010) People living with HIV remain prevalent in the countries of EECA, even within the very services that they rely on for treatment and care. Breaking through the wall of prejudice faced by this group is vital to addressing the HIV epidemic and is therefore a priority area for *AFEW*. Education,

training and advocacy within state services are combined with mobilisation and support of communities of people living with HIV. **Prevention of mother-to-child transmission of HIV (PMTCT)** is tackled through a 'family-oriented' approach that links up women, their children, wider families and community groups of women living with HIV with existing/potential service providers.

Most-at-risk adolescents (MARA). AFEW expenditure on programmes for most-at-risk adolescents: **€217,281 in 2011 (€260,636 in 2010)**. Through mass media campaigns and cultural events, AFEW mobilises young adults, encouraging them to take responsibility for their own health, play an active role in the global response to HIV, and forge future societies based on tolerance and respect for human rights. AFEW develops informational materials, outreach programmes and peer training initiatives especially for young people living in high-risk circumstances. Activities for **street children** focus on developing support systems for children who are deprived of family care and protection. Drop-in centres provide all-round safe havens where children can receive basic services, such as shelter, food, warmth, clothing, recreation, family mediation and health services.

Governmental and non-governmental organisations (national and international). AFEW expenditure on programmes for international and national governmental and non-governmental organisations: **€266,776 in 2011 (€889,618 in 2010)**. As part of AFEW's sustainability strategy, AFEW builds the capacity of local governmental and non-governmental partners. AFEW provides technical support in order to equip staff with the right knowledge to provide HIV prevention, treatment, care and support that is up-to-date and of good quality. For instance, AFEW trains prison staff in HIV prevention and creates a resource centre and a pool of trainers to make such a training programme sustainable. Organisational development comprises training in management skills, administrative and financial skills, monitoring and evaluation and fundraising. These skills promote the sustainability of our partners and hence the sustainability of the approaches that we introduce.

Tuberculosis related activities and TB Patients. As follow up of AFEW's HIV/TB projects in Central Asia AFEW started activities for people infected by Tuberculosis. AFEW therefore identified a new target group for its work; total expenditure **€217,285 in 2011**.

We invite you to read more about AFEW's projects, past and present, on our website at www.afew.org



GLOBUS

Stimulating an Effective National Response to HIV/AIDS in the Russian Federation

Project duration

Phase I — 2004-2009

Phase II — 2009-2011

Donor

The Global Fund to Fight AIDS, Tuberculosis and Malaria

Budget

Phase I — \$ 29,3 mln

Phase II — \$ 4,3 mln

“Phoenix” symbolises rebirth GLOBUS project through the work of one social bureau

This name accurately reflects the aim and activities of the Phoenix social bureau in the Russian city of **Kazan** – to be the place where prisoners get a new start in life. This ‘social bureau’ is an organisation that helps people vulnerable to HIV exercise their rights to healthcare and social services. Phoenix helps prisoners to readapt to society by providing an effective assistance package in this transitional period, and offering them support both pre- and post-release. Phoenix was established with financial and technical assistance from AFEW to carry out the client management programme within the GLOBUS project. It facilitates former prisoners’ contact with state agencies such as various ministries and departments, hospitals and polyclinics.

The staff workers and psychologists of Phoenix work inside prisons and prepare clients for release. It is often the case that long-awaited freedom is in reality not as bright and promising as anticipated. A criminal record poses a serious obstacle to finding employment, and the psychological effects of prison experiences hamper social integration. Newly released prisoners are often disoriented by the realities of free life, and such practical and personal difficulties can induce aggression and contribute to recidivism. It is at this critical juncture that NGOs like Phoenix can intervene and extend a supporting hand. If the prisoner foresees specific problems upon release, such as the lack of a passport,

homelessness or medical problems, he is able to raise these concerns with social workers. Together they draft a plan of action: where to go, whom to write or to call. Continued, post-release support is also offered where problems persist or new difficulties arise. Phoenix is based in the Mercy rehabilitation centre – a government-run centre with staff psychologists, doctors, legal advisors and social workers. This ensures that former prisoners have access to complete range of support services in a single location. The centre might, for example, provide a former prisoner with assistance in applying for a pension or disability allowance, help obtaining medical insurance or simply temporary shelter. If the client has HIV, he can also request support in maintaining ARV therapy. In other cases they are referred for assistance to governmental institutions that signed the agreement for collaboration in HIV prevention, provision of social and labor opportunities.

Although the bureau’s director acknowledges AFEW’s role in the success of Phoenix, this success could not have been achieved without the collaboration made possible through the referral network built up by this NGO since the establishment of Phoenix in 2007.

In 2009 the social bureau developed, and proposed to prison authorities, an agreement on collaborative activities in HIV prevention and the provision of labor and social opportunities for people released from prison colonies. The agreement was signed by a dozen of government agencies, and it provides that every person referred by Phoenix to the Labor Department, tax authorities, polyclinic, AIDS centre or other institution will be guaranteed assistance.

Today Phoenix boasts a high client turnover (the programme is even forced to turn down out-of-region applications) and a drop-out rate of only 4%. Only 2% of clients re-offended since the start of the project. Since the launch of the Bridge Project in this social bureau in July 2010, 300 people have been enrolled in the programme.

“Our clients even ask us to give them a stamped certificate, which says that this person has successfully completed our client management programme, – said Alexander Kamaev, - Such certificates are considered proof for the Commission on Parole that the prisoner is on the correct path.”

A long-time professional in the field of HIV prevention, Alexander Kamaev gives due credit to the authorities of the Republic of Tatarstan for supporting the work of Phoenix, and praises the government initiated financial support programme for NGOs that work in the social sphere and health-care in particular.

One of the project’s shortcomings, however, is the low rate of employment of former prisoners – only a dozen since the beginning of the project have found permanent jobs. This regrettably low figure is in part a consequence of a lack of cooperation from the side of employers. Phoenix regularly receives lists of vacancies in the region from local labor authorities, but employers often reject applicants on the basis of a criminal record. Nevertheless, Phoenix continues to call and meet with employers seeking to convince them to at least meet with clients.

‘They made their choice for a healthy and law-abiding life, they are fully prepared to start anew and I believe they should be given this chance.’ said Alexaner Kamaev.

“AFEW’s client management standards are the answer why our work is so effective and successful”

“This programme is an acknowledgement of the crucial role of NGOs in the work with vulnerable populations”

— Alexander Kamaev, director,
‘Mercy’ rehabilitation centre, Kazan, Russia

'It is not always easy to start a project, especially in new circumstances, with new rules and people. It is especially difficult to implement the project to high standards and to produce tangible results. In countries where we work, AFEW often faces such challenges, but even this time, in Belarus, we managed to carefully plant a Client management seedling and grow out of it a fruit-bearing tree, a tree that feeds many people vulnerable to HIV'

— Elena Voskresenskaya
AFEW's regional director, Ukraine



MATRA Project Client Management in Belarus bears fruit

Introduction of a Client-based Approach to HIV Care in the Republic of Belarus

Project duration

January 2010 — December 2012

Donor

Matra Social Transformation Programme,
Ministry of Foreign Affairs of the Netherlands

Budget

EUR 682,260

AFEW has worked since May 2010 to establish the practice of client management in the Belarusian healthcare and public sectors, where this approach has never previously been used. Within the project "Introduction of a Client-based Approach to HIV Care" in the Republic of Belarus AFEW established two social bureaus: "Intersection" (Minsk) and "Healthy choice" (Gomel), the Gomel region being the site of the first registered outbreak of HIV in Belarus, in the small town of Svetlogorsk in mid 1990s.

The AFEW project in Belarus started at the same time as the Global Fund project, allowing stakeholders to benefit from AFEW experience in setting up client management systems. The two Matra project social bureaus are linked with other social bureaus in Belarus, funded from the Global Fund grant. The AFEW project bureaus serve as pilot sites, where new technologies and practices are tested before being disseminated to other regions of the country.

The project has now operated successfully in for a year and a half, its approaches, standards and most importantly results earning the recognition and respect of HIV-related public organisations throughout the country. Today all 13 NGOs that work with vulnerable populations in Belarus follow AFEW's recommendations and standards of client management as adapted to local regulations and specificities. Furthermore, the informational materials produced by the project are widely used and copied by local NGO partners and governmental healthcare institutions. Informational booklets for the clients of social bureaus are very popular, having been developed using client-friendly language and design, and tested with the groups of clients – people using drugs, people living with HIV. The most popular of the bro-

chures produced by AFEW are "Veins" and "Drugs overdose". They provide detailed and accessible information for injecting drug users on how to prevent fatal outcomes and what to do if one sees another in the state of overdose. Another brochure – "Self-help for people undergoing withdrawal syndrome" – is especially popular among social bureau clients who are in remission.

Building capacity in service providers is the primary component of the programme. In the course of the project AFEW's experts have organised a number of training seminars for the staff of social bureaus and representatives of partner organisations, both governmental and non-governmental. In May 2011 AFEW organised a study tour for representatives of both social bureaus as well as specialists from local narcotics clinics to the city of Kazan, Russia, allowing them to learn about client management practices in Tatarstan, to expand their vision of the work of local narcotics services and to become familiar with one of the most successful examples of rehabilitation programmes for drug users. The choice for Kazan was not accidental. It is one of the cities of Russia where, for the past several years, AFEW ran the "GLOBUS" project – a client management programme for prisoners. The visit was greatly appreciated by Belarusian specialists:

In July 2012 AFEW experts and their Belarusian partners will present the results of the programme during the XIX International AIDS Conference in Washington, DC.

Project results at a glance

- Since the beginning of the project a total of 479 clients signed up for the client management programme.
- 282 of these successfully completed the programme and received a total of 2627 services from medical, legal and social specialists; the most needed services included medical and psychological assistance.
- In both social bureaus there are also functioning self-help groups for people living with HIV. The groups allow clients to share their experiences and benefit from the psychological support of peers. Within the project 35 people found a permanent job and 155 received professional training, which allows them to seek employment.

- Each social bureau has its specialisation. The social bureau in Minsk actively works with the children of HIV positive parents. Social bureau specialists conduct family consultancies or individual psychological adjustment sessions. The “Healthy Choice” social bureau in Gomel works with prisoners from the local open prison before and after their release.
- 41 partner organisations and specialists are included in the referral network of providers working with social bureaus in Minsk and Gomel.
- 4,000 informational flyers for clients, 400 copies of project newsletters, 200 copies of “Recommendations on client management” and 200 copies of “Standards on client management” were published and distributed by the project.

‘I was amazed by the number of non-commercial organisations working with vulnerable groups and how well they manage clients, the level of cooperation among service providers within the partners’ network and the amount of finances allocated for harm reduction programmes.

— Anna Liubinskaya,
of the NGO Positive Movement, Minsk

‘Our colleagues were talking about numerous problems with funding, legislation, cooperation, and so forth, that are very similar to the problems that Belarusian organisations working with IDUs are facing, however I was amazed by the number of non-commercial organisations working with vulnerable groups and how well they manage clients, the level of cooperation among service providers within the partners’ network and the amount of finances allocated for harm reduction programmes. I was also impressed by the support of municipal government that allocated premises for the rehabilitation centre for drug users.... In the Republic of Belarus we also have many services working with vulnerable groups, but effective cooperation is lacking, so the client management programmes will address this issue.’

— Anna Liubinskaya,
of the NGO Positive Movement, Minsk

ACCESS Project: HIV/AIDS and HIV/TB Collaborative Activities in Central Asia

Project duration

1 January 2008 - 1 March 2012

Countries

Kazakhstan, Kyrgyzstan, Tajikistan,
Uzbekistan (project ran until 2010)

Donor

Ministry of Foreign Affairs, The Netherlands

Budget

EUR 6,8 mln

Following the conclusion of the ACCESS project: HIV/AIDS and HIV/TB Collaborative Activities in Central Asia – the largest project in Central Asia in terms of its capacity and duration – it can happily be regarded as a fine example of the introduction the best Western healthcare practices into post-Soviet healthcare systems.

First AFEW managed to achieve its principal goal of establishing collaboration and constructive dialogue between NGOs that work in the field of HIV and TB and government institutions through thematic working groups on HIV, TB and HIV/TB; a significant achievement given the typical reluctance of the governments of Central Asian states to fully cooperate with non-governmental organisations.

Second, we managed to **build trust and gain recognition** that AFEW's unique programmes are changing the lives of members of vulnerable populations and those around them for the better. Programmes within the ACCESS project were **officially recognised and adopted** by the healthcare and prison authorities of Central Asian states. In Tajikistan, for example, the "Patient School" programme was introduced in all tuberculosis dispensaries and proved an effective method of treating patients and preventing the development of the disease into its multi-drug-resistant form. The programme equips nurses in TB dispensaries with knowledge, skills, a course syllabus and informational materials about TB and HIV, which they then convey to patients. The efficacy of this method demonstrates that the more the patient knows about TB and HIV the greater is the chance that he will approach his treatment responsibly.

'Patient School'

In 2010 Kazakhstan's National TB Centre also issued an order to implement the "Patient School" programme in all dispensaries throughout the country. Moreover, Kazakhstan's Penal System Committee decided to implement another AFEW programme – "START Plus" – in 20 prisons throughout the republic, with a view to further expansion. This programme aims to raise awareness among inmates about HIV, tuberculosis, STIs, hepatitis and treatment adherence; to decrease risky behavior and to expand access to pre- and post-release medical and social services. Each inmate attends six individual sessions with social workers, who were also trained by AFEW at numerous educational courses throughout the Central Asian region and beyond. The goal of the sessions is to ascertain each inmate's needs and provide relevant prevention services, medical care, psycho-social and legal support. "START Plus" is also being successfully implemented in eight prisons of Tajikistan (in 2011 alone the programme reached **5,727 prisoners**) and its 'client management' component is included in the new reform strategy for the Kyrgyz Penal system.

Technical Working Groups

The 'Technical working group on prevention of social-significant diseases, social support and health promotion in Sughd province of Tajikistan', created through the project, received the status of a **permanent working mechanism** under Sughd province Coordination Council on HIV, TB and malaria prevention. More than 30 representatives of GOs and NGOs are included in the working group. The group's decisions are merely advisory, but once approved by the Council they become mandatory.

Another working group created within the ACCESS project is called 'Health promotion in Tajikistan Penal System'. It is chaired by Deputy Head of the Correctional Department, includes 15 NGO representatives, and is also a permanent coordination mechanism of the Tajikistan Ministry of Justice.

'I think the "ACCESS" project's most significant achievement is the fact that it managed to unite all service providers. Technical support is helpful, but on its own is not sufficient to complete the main goal – through coordination and collaboration of different structures, both public and governmental, we managed to agree on issues related to providing services to vulnerable groups.'

— Azamjon Mirzoev
Deputy Minister of Health of Tajikistan



Handbooks

With the aim of reducing the stigma and discrimination face by vulnerable groups, *AFEW* developed a series of handbooks and modules for law enforcement agencies throughout Central Asia, and held dozens of training events for young police officers on HIV and TB prevention, the principles of client management and the role of the police in promoting health. This means that today an officer on duty will not take a sex worker or a drug user to the station but instead refer her or him to a social bureau where they have access to free condoms, needle exchange, medical or legal assistance or simply shelter.

Events

This was all made possible through a number of joint events initiated and supported by *AFEW*, where representatives of civil society working in the field of HIV could express and address their needs and concerns to the governmental institutions. The most notable and productive of these events were the Prison Forums held in Kazakhstan (2006, within TMF project), Kyrgyzstan (2008) and Tajikistan (2010) where participants could also visit local prisons. In 2009 Kyrgyzstan hosted the first Central Asian conference on the dual epidemic of HIV and TB. It brought over 100 professionals together and resulted in an appeal to the governments of the region with a concrete action list.

Capacity Building

Within the ACCESS project *AFEW* developed and carried out several educational training events for representatives of government and non-government organisations on various themes related to HIV and TB, capacity building for NGOs and ARV adherence for people living with HIV. In total around 400 attendees were able to participate; sharing experience, gaining knowledge and skills for their work and building lasting partnerships. Through the ACCESS project *AFEW* reached millions in Kyrgyzstan, Tajikistan and Kazakhstan through mass media campaigns and street activities to raise awareness and provide the public with information to help dispel common myths and misconceptions about HIV and to reduce HIV-related stigmatisation and discrimination. Public opinion polls conducted before and after these campaigns showed an increased level of acceptance of and solidarity with people living with HIV. Similarly, media campaigns and the dozens of different informational brochures produced by the project played a fundamental role in motivating people to reflect upon their personal habits and encourage steps towards safer and healthier lifestyles.

Further efforts were directed at shaping the attitudes of current journalists and journalism students toward appropriate coverage of issues related to HIV. The role of journalists in forming public thinking was emphasised, promoting a move away from gloomy pictures and alarmist sensationalism in favour of an educational approach to journalism, contributing to understanding and solidarity with people living with HIV.

Social Bureaus

Finally, *AFEW* financially supported **21** case management units (social bureaus) in three countries, where around **15,000** clients (PLHIV, sex-workers, drug users and prisoners) received over **150,000** psycho-social, medical, legal and prevention services from over **200** created or attracted service providers. In November 2011 a qualitative and quantitative assessment of access to medical, psycho-social services for people using drugs, sex workers and TB patients was conducted in the project regions of Kazakhstan, Kyrgyzstan and Tajikistan. Partner NGOs and government organisations conducted field work under the supervision of the external assessment coordinator. The results of the assessment illustrate that the main objectives of the project such as

- a providing a wide range of preventive, medical, social, psychosocial and information services for vulnerable target groups;
- b increasing and improving conditions and facilities and access to program services;
- c encouraging the target groups to apply for services, have been successfully implemented. The most important result obtained during the study was the fact that 85% of the target group who required various health and social services, knew where and how to get the appropriate service.

Challenges

Of course *AFEW* faced challenges and constraints during the project. A major challenge was *AFEW*'s failure to re-register its office with the Justice Ministry in **Uzbekistan** due to a new policy toward civil society groups, and consequent inability to continue its activities. Continuous political instability in **Kyrgyzstan** through 2008-2011 caused numerous government reshuffles. New people at the ministries and departments required additional meetings, training and advocacy activities, not to mention the need to continuously establish new relationships; some officials were frankly uninformed about HIV/TB issues and vulnerable groups. **Kazakhstan** is now considered a middle income country and consequently major international donors discontinued support for healthcare programmes, yet the country's budget alone is not sufficient to cover all necessary costs related to HIV prevention.

Plans for the future

We look forward to continuing and expanding our client management activities in **Kyrgyzstan** and **Tajikistan** within the new Key Populations Project funded by the Dutch Ministry of Foreign Affairs. This project has a particular focus on women and youth.

In Kazakhstan we will continue lobbying for the more proactive financial involvement of the government in HIV prevention programmes. Over the course of the ACCESS Project we built strong NGOs in all of these countries and hope that they will now sustain themselves and look for additional funding

“The ACCESS Project helped me personally to become a professional in my field, it taught me to work in a team with other organisations, and thanks to this project it was possible to develop a young organisation as ‘Nigoh’ to work with vulnerable women.”

— Olga Tulyanova

director, NGO ‘Nigoh’, Khujand, Tajikistan



10th Anniversary of AFEW

In 2011 AFEW celebrated its 10 year anniversary. Ten years ago Médecins Sans Frontières (MSF) – an international organisation that provides emergency medical assistance worldwide – established a new NGO with the specific aim of combating the growing HIV epidemic in the countries of the former Soviet Union. AFEW was established with the financial support of the Open Society Institute, the Dutch Ministry of Foreign Affairs and MSF. With its head office in Moscow and branches in Kyiv and Almaty, AFEW started to implement a Harm reduction training programme and programmes on preventive health in the penal system. Later AFEW developed various mass media campaigns on safe sex and solidarity with people living with HIV in Mongolia, Ukraine and Russia. As years followed, AFEW expanded its activities. We opened offices in Bishkek, Dushanbe, Tashkent and Chisinau, and started to work with new target groups vulnerable to HIV such as street children and men who have sex with men. In 2011 we set up capacity building projects in Georgia. To learn more about AFEW's path, please see the short movie **"10 years of AFEW Action"** by Tinus Kramer available at http://www.youtube.com/watch?v=PQu_xYWK9yc.

To mark the anniversary, AFEW organised various events for its partners in the Netherlands and in the region to thank them for their support and joint efforts in mitigating the epidemic. In Moscow AFEW held its first Red Ribbon Ball. This charity ball raised awareness about the HIV situation in Russia and Central Asia and AFEW's programmes in the region. Nearly 60 representatives of the Russian business community attended the ball, which was hosted by award-winning Russian television host Vladimir Pozner. Since major international donor institutions in the field of HIV have largely discontinued support for HIV prevention programmes in Russia, considering the country to be financially capable of shouldering this burden itself, it was important that the Russian business community be informed about the necessity of supporting HIV prevention and treatment programmes. We also passed this message to the Dutch Prime Minister Mark Rutte, who visited Russia during his trade mission in October, to touch upon the issue of the lack of governmental financial support of HIV prevention programmes in his official meetings with the Russian leadership.

In the Netherlands AFEW organised several activities. In Rotterdam we held a themed afternoon on HIV and AIDS in Eastern Europe and Central Asia at the "Blinibioscoop" – a movie theater founded by the Russian-speaking community in the Netherlands, where the Dutch audience can learn about Russia, its people and culture through movies. "Blini" in Russian stands for pancakes and 'bioscoop' in Dutch means a movie theater. The guests were briefly told about the organisation and then watched several documentaries: "Client Management in Kazakhstan" (2009, Tinus Kramer) showing the work of AFEW's client management program in the republic. The last documentary shown was "Balka. Women, Drug Use and HIV in Ukraine", made by our partner organisation the Open Society Institute (OSI). "BALKA" is a trilogy about women who struggle with drug use and cope with HIV in Ukraine. The movies were followed by a lively discussion and of course freshly made pancakes!

In Amsterdam AFEW held another event to raise awareness through social media. Through its Facebook page 'AidsEvent' AFEW reached the general public, friends and sponsors. At the public library following a short introduction of AFEW and its activities, the guests took a huge red ribbon through the streets of Amsterdam to one of the local bars in downtown. At the bar guests enjoyed a live music performance by the Vinsky Project and AFEW held a lottery draw with various prizes including some from Eastern Europe and Central Asia. AFEW will make increased use of social media in 2012, seeking to improve its visibility to the general public and corporate foundations. Besides its Facebook and Twitter pages, AFEW will appear on Pifworld social enterprise – a new tool for us to tell the world about our projects and raise money. In September AFEW's team took part in the Dam to Dam run. This charity marathon attracts thousands of people every year. Runners need to race walk about 6 km from the centre of Amsterdam to the small town of Zaandam. All of our ten runners made it to the final raising a total of 3,250 Euros for AFEW's activities.

And finally, in November AFEW held a major reception for our partners, friends and donors to mark its tenth anniversary. A representative of UNAIDS, **Ms. Els Klinkert**, praised AFEW for its activities, which are hands on and pragmatic.

"AFEW is really doing important things," – she said.

The AFEW 10 years film was shown, documenting AFEW's work of the past 10 years.

'AFEW is really doing important things,'
— Ms. Els Klinkert, UNAIDS





Financial Policies

Investment Policy

To avoid financial risks that may harm the financial stability of the organisation, Stichting AIDS Foundation East-West (*AFEW*) does not invest freely disposable capital. According to the organisation's policy, liquidity cannot be invested in equities or bonds. Most major donor contracts require us to keep granted subsidies in cash.

The Central Bureau for Fundraising (CBF), which is a quality mark for Dutch registered fundraising organisations, stipulates that an approved organisation should spend on average no more than 25% of its fundraising income on fundraising expenses over a period of three years. Over the last three operational years, 9% of *AFEW*'s income from own fundraising was spent on fundraising expenses.

Equity Policy

AFEW complies with the guidelines for equity-policy and equity-reporting of the Dutch Association of Fundraising Organisations – VFI, which were adopted by the Central Fundraising Bureau in Holland (CBF) in 2008. *AFEW* follows the CBF guidelines in building its own reserve. The purpose of the continuity reserve is to ensure that the organisation can continue operating should it experience a sudden drop in its funding, to ensure the sustainability of long-term programmes, to provide pre-financing for some activities, and to conduct exploratory missions in new countries.

The *AFEW* Board decided to add part of its surplus 2011 in the amount of €52,736 to free continuity reserve. At the end of 2011, the free continuity reserve stood at €321,206, which is enough to cover the operational costs of the downsized organisation for 4 months. The size of the reserve is well below the standards laid down by the Central Bureau for Fundraising. Full information about *AFEW* reserves and funds is presented in the 2011 Financial statements.

Financial Results

This financial review covers *AFEW*'s tenth operational year, ending 31 December 2011. *AFEW* maintains its accounting records in accordance with the legislative requirements of the countries in which it conducts its operations. This financial review covers *AFEW*'s tenth operational year, ending 31 December 2011.

Income and Expenditure

The total income available for *AFEW* activities in 2011 was €5,064,034, which is approximately in line with the budgeted amount of €5,274,000 (96%). It is slightly less than was expected, due to the late start of several projects, some activities of running projects being rescheduled for 2012 and several contracts modifications. In general, the variation is within the organisation's acceptable deviation range.

A total amount of €4,969,259 was spent in the 2011 operational year, which is in general also in compliance with the budgeted amount of €5,393,000 (92%). Expenditure refers to money spent on core programme objectives, the costs of raising income and management and administration costs.

Direct Costs

In 2011, *AFEW* spent €4,479,433 (90%) of its outgoings directly on core programme activities (objectives). With the overall donors' funding decrease, in 2011 total directly attributable costs decreased compared to 2010 by 28% (from €6,240,407).

The amount spent on core programming objectives includes sub-grants to third parties. *AFEW* strives to build the capacity of its local partners and ensure the long-term sustainability of its initiatives by equipping them with its knowledge and experience. In 2011, we provided €1,353,631 in sub-grants (27% of total expenditures) to partners in the countries in which we operate. However, the amount given in sub-grants substantially decreased compared to 2010 due to overall funding cuts (by 40%). The money given as sub-grants was spent on activities which are in line with *AFEW* objectives and mission.

Costs of Raising Income

AFEW spent €142,827 on raising income in 2011, which represents 3% of total expenditure, and consists of expenses related to the cost of own fundraising, costs of joint activities and the cost of obtaining governmental grants. The cost of raising income in 2011 is slightly higher than the budgeted amount, due to intensifying efforts to look for new funding. Yet, the costs of raising income in 2011 is half that of 2010 due to restructuring (cuts) in the International office aiming to save costs and fit the available donors budget.

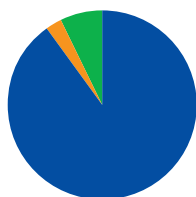
Management and Administration

Management and Administration expenses primarily consist of expenditures associated with executive management, operation of the headquarters, finance and human resources management, part of the internal and external communication budget and travel expenses for the *AFEW* Board. Management and administration expenses in 2011 constituted 7% of *AFEW*'s total expenditure, or €346,999, a decrease of 15% compared to 2010. Yet, the actual result 2011 is slightly higher than the budgeted due to further restructuring actions implemented for the sake of 2012 budget. Severance payments were paid at the end of 2011.

The Executive Director's annual gross salary stood at €88,569. Board members do not receive remuneration for their activities in accordance with *AFEW* policy.

Overall Expenditure 2011

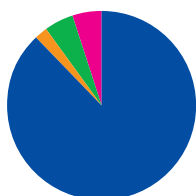
100% = €4,969,259



- Direct objectives (programme expenditure) – **€4,479,433 (90%)**
- Costs of raising income – **€142,827 (3%)**
- Management and administration costs – **€346,999 (7%)**

Expenditure on Core Programme Objectives (by Programme Type)

100% = €4,479,433



- Capacity building (includes training, sub-grants, technical support and client management): **€3,961,778 (88%)**
- Advocacy: **€83,281 (2%)**
- Mass Media Campaigns: **€228,407 (5%)**
- Other (research, provision of product sets, milk formula, condoms and other materials): **€205,968 (5%)**

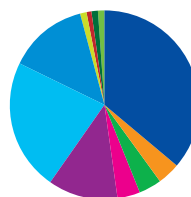
Overall Expenditure by Target Group

100% = €4,969,259

Target Group	Expenditure in 2011	Expenditure in 2010
Injecting drug users	€501,268 (10%)	€921,607 (13%)
Prisoners	€2,391,258 (48%)	€3,054,029 (43%)
Women	€698,843 (14%)	€880,643 (13%)
Most-at-risk Youth	€217,281 (4%)	€260,636 (4%)
People living with HIV	€676,547 (14%)	€942,305 (14%)
TB Patients	217,285 (4%)	–
Governmental and non-governmental organisations (international and national)	€266,776 (6%)	€889,618 (13%)

Overall Expenditure by Country

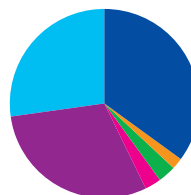
100% = €4,969,259



- Russia **€1,863,142 (37%)**
- Belarus **€192,935 (4%)**
- Ukraine **€186,083 (4%)**
- Moldova **€194,912 (4%)**
- Kazakhstan **€601,668 (12%)**
- Tajikistan **€1,155,797 (23%)**
- Kyrgyzstan **€695,770 (14%)**
- Uzbekistan **€32,216 (1%)**
- Georgia **€25,577 (1%)**
- Malaysia **€10,580 (less than 1%)**
- Indonesia **€10,579 (less than 1%)**

Overall Expenditure by Operational Type

100% = €4,969,259



- Salaries and personnel costs **€1,722,083 (35%)**
- Public relations and communications **€78,980 (2%)**
- Office rental **€150,588 (3%)**
- Office maintenance, supplies and depreciation **€150,569 (3%)**
- Purchases and acquisitions (travel, accommodation, consultancy, information material development, monitoring and evaluation, fundraising events costs conference participation, training and support activities) **€1,513,408 (30%)**
- Sub-grants to partner organisations **€1,353,631 (27%)**

Balance sheet as of 31 December 2011

	2011 EUR	2010 EUR
Tangible fixed assets	0	373
Inventory		
For immediate and full use in the context of the objective	80	339
Accounts receivable and deferred assets		
Donors	6,652,507	6,384,565
Other	3,926	143,165
	6,656,433	6,527,730
Cash and cash equivalents	1,252,042	1,845,330
Total assets	7,908,555	8,373,772
<hr/>		
Reserves and Funds		
Reserves		
Continuity reserve	321,206	268,470
Restructuring reserve	108,250	165,000
Continuation Reserve Russia 2012	105,000	
Special purpose reserve	0	373
Funds	534,456	433,843
Special purpose funds		
Long-term debts	53,684	59,522
Subsidy commitments		
Short-term debts	4,114,650	939,486
Subsidy commitments		
Other liabilities	2,999,909	6,561,429
	205,855	379,491
Total liabilities	7,320,414	7,880,406
	7,908,555	8,373,772

Statement of Income and Expenditure as of 31 December 2011

Auditors' Endorsement

The abbreviated financial information for 2011 presented on these pages is derived from the financial statements that were approved by the AFEW Board. KPMG Accountants N.V. expressed an unqualified opinion on these financial statements on 1 June 2012.

Income	Actual 2011 EUR	Budget 2011 EUR	Actual 2010 EUR
Income from own fundraising			
Grants from international Foundations/NGOs	624,205	407,000	734,250
Grants from Businesses	35,819	54,000	0
Other: Donations/Collections	9,633		8,757
	669,657	461,000	743,006
Income from joint activities	1,991,409	2,137,000	1,779,140
Income from third parties activities	0	34,000	6,037
Subsidies from governments	2,402,347	2,642,000	4,363,086
Other income/loss	621		3,956
	5,064,034	5,274,000	6,895,225
Total income			
	5,064,034	5,274,000	6,895,225
Expenditures	Actual 2011 EUR	Budget 2011 EUR	Actual 2010 EUR
Spent on objectives			
Capacity Building	3,961,778	4,605,761	5,530,946
Mass Media Campaign	228,407	269,414	383,565
Advocacy	83,281	73,253	171,327
Other (research, provision of product sets, milk formula, condoms and other materials)	205,968	26,713	154,568
	4,479,433	4,975,141	6,240,407
Costs of raising income			
Cost of own fundraising	51,636	24,198	39,172
Cost of Joint activities	24,383	20,328	20,243
Cost of third party activities	0		0
Costs of obtaining governmental grants	66,809	76,157	239,470
	142,827	120,683	298,885
Management and administration			
Costs Management and administration	346,999	297,176	409,547
	4,969,259	5,393,000	6,948,839
Total expenditures			
	4,969,259	5,393,000	6,948,839
Balance of income and expenditure	94,775	(119,000)	(53,614)
Allocation of Year-end result			
Continuity reserve	52,736	(85,000)	(22,327)
Continuation reserve Russia 2012	105,000		
Restructuring reserve	(56,750)		
Special purpose reserve	(373)		(492)
Special purpose funds, additions	-		6,037
Special purpose funds, expenditures	(5,838)	(34,000)	(36,831)
	94,775	(119,000)	(53,614)
Total allocation of Year-end result			
	94,775	(119,000)	(53,614)

Governance & Finance

Governance

AIDS Foundation East-West fully complies with the code of good practice for charity organisations in the Netherlands; the Code Wijffels. The *AFEW* Board is the **highest level of decision-making in the organisation**. It delegates day-to-day management responsibilities to the Executive Director who then delegates specific responsibilities to other members of *AFEW*'s Management Team (MT) and senior management in regional offices.

Board members bring to the organisation their professional experience in various fields of work, from specialised knowledge of medical treatment and the HIV/AIDS epidemic to expertise in management and budgeting. The Board is charged with overseeing the overall operation of the organisation in order to ensure **good standards of transparency and accountability**. The Board approves the organisation's strategy and the budget, as well as advising the Management Team and senior managers on strategic issues. The Board also evaluates and appraises the work of the Executive Director. Board members receive no financial compensation for their work.

Board Members

As of 31 December 2011, the *AFEW* Board consisted of seven members.

Frank de Wolf (Chairman)
James Nolan (Treasurer)
Catherine Hodgkin (Board Member)
Vladimir Pozner (Board Member)
Leah Utyasheva (Board Member)
Arsen Kubataev (Board Member)
Guido van den Berk (Board Member)

Read their biographies

<http://www.afew.org/about-afew/who-we-are/>

Accountability

The Board is satisfied that the financial statements prepared by the Management Team for the year ending 31 December 2011 fairly reflect the financial position and operations of *AIDS Foundation East-West (AFEW)*. The Annual Report 2011 provides a fair reflection of the programmes, activities and results achieved in 2011. All members of the Board accept responsibility for the Board's annual report and the financial statements prepared by the Management Team. The auditors, KPMG, have approved these financial statements for publication.

Rotation Schedule of the Supervisory Board

Board members generally serve no more than 3 terms of 3 years.

Name	Function	Appointment	Re-appointment	End of Term
Frank de Wolf	Chairman	December 2006	December 2009	December 2012
James Nolan	Treasurer	October 2004	October 2007, October 2010	October 2012
Vladimir Pozner	Board Member	January 2007	January 2010	January 2013
Catherine Hodgkin	Board Member	January 2007	January 2010	January 2013
Leah Utyasheva	Board Member	May 2009		May 2012
Arsen Kubataev	Board Member	May 2009		May 2012
Guido van den Berk	Board Member	May 2010		May 2013

Performance and Strategy

AIDS Foundation East-West Strategic Plan 2011 - 2013: Towards Universal Access

AFEW set out its long-term targets for development and expansion in its **strategic plan 2011 - 2013**. These longer-term targets are translated into annual plans that provide the organisation with specific goals and objectives for each year. This strategic plan was approved during the board meeting in May 2011.

A stakeholder survey, held early 2011 to guide strategic choices, showed that our constituencies think *AFEW* is strong in prison health, client management, harm reduction, voluntary counseling and testing (VCT) and HIV/TB co-infection. Respondents thought that *AFEW* should gain more knowledge about advocacy for change at national level, HIV services for migrants, human rights including protection from discrimination, tuberculosis (without HIV) and hepatitis C.

AFEW wishes to embed work and strategy in the relevant international strategies and policies, particularly the UN declaration on Universal Access to treatment, prevention care and support.

In the strategic plan 2011 - 2013, *AFEW*'s mission remains fundamentally unchanged. In short: *AFEW* seeks to reduce the impact of HIV and AIDS in Eastern Europe and Central Asia by using innovative and proactive approaches and by actively seeking international and regional exchanges.

AFEW plans to achieve this mission by focusing on its strengths: the focus on key populations most at risk for HIV, particularly injecting drug users (IDUs), sex workers, men having sex with men (MSM), street children and prisoners and detainees, whether they are living with HIV or not. Because our particular strength is prison work, particular attention will always be paid to the role of prisons in public health with respect to HIV and related issues.

There are three strategic components in our mission that can be translated into strategic objectives.

I. Increase access to services

Client management is not a vertical service, but strengthens existing services to cope with the special needs of people living with HIV (PLHIV) and key populations. It is focused on the individual and at the same time, by building a network of services, strengthens the health system. Therefore, we will continue to develop and promote this approach in the region, including transitional client management in prison settings.

Problems are not always related to infection with HIV only. Many diseases frequently co-exist with HIV and have an impact on HIV itself. It is therefore important for *AFEW* to introduce, develop and support interventions that take into account a wider spectrum of issues, for example tuberculosis, hepatitis C, sexually transmitted infections (STIs), sexual and reproductive health. Furthermore, *AFEW* will enhance efforts to promote inclusive and gender sensitive approaches in HIV services.

II. Increase capacities of local non-governmental organisations and care providers

Civil society is a key stakeholder in the response to the HIV epidemic, but the health system and other governmental organisations also need to have the necessary capacity to act. In bringing civil society and governmental actors together, we contribute to building a diverse, open society. Capacity building, including technical assistance, will continue to be our key activity for the region.

III. Focused advocacy efforts

Focused advocacy efforts will support the first two strategic elements. Advocacy will be focused on issues where *AFEW* thinks it has an added value. In the international public health arena, *AFEW* will strengthen and focus its role in national and international advocacy on issues of prison health, particularly as they are relevant for HIV treatment, prevention, care and support. The second international advocacy priority will be to inform decision makers and the general public about the human and public health impact of the devastating epidemic at the eastern borders of the EU and lobby and advocate for universal access for key populations in EECA.

The strategic objectives described above are translated into 4 programme objectives. In 2010 *AFEW* decided on a new classification for its core programme objectives to better reflect what the organisation does.

Following reclassification, there are now four main programme objectives:

- 1 Capacity Building** (by far *AFEW*'s largest area of activity, which includes training, sub-grants, technical support and client management). In order to empower civil society and to sustain activities *AFEW* is building the capacity of local NGOs in aspects such as organisational and programme management, finance and administration, resource mobilisation, advocacy and setting up services like client management. *AFEW* is offering its technical assistance via training, monitoring site visits, conferences, round table meetings, working groups etc. *AFEW* is not only doing so in the traditional way of physical encounters, but exploring also new media like e-learning. *AFEW* has supported and continues to support over a 100 NGOs in this way.
- 2 Mass Media Campaigns**, *AFEW* recognises mass media campaigns as an important force for social change, particularly on issues related to HIV. Campaigns raise awareness and provide the public with information to help dispel common myths and misconceptions about HIV and to reduce HIV-related stigma and discrimination. Similarly, media campaigns play a fundamental role in motivating people to reflect upon their personal habits and encourage steps towards safer and healthier lifestyles. Rooted in international experience and best practices, *AFEW*'s mass media campaign messages address issues such as safer sex, solidarity with PLHIV and access to antiretroviral treatment. Nationwide television and radio public service advertisements are combined with the large-scale distribution of information materials, outdoor advertisements and public events. *AFEW* works closely with local partners and authorities when developing and communicating specific messages.
- 3 Advocacy**: The scale of the response which HIV requires necessitates efforts from *AFEW* regarding advocacy. Particularly now, campaigning and advocacy is important as HIV is in danger of being eclipsed by other urgent issues (e.g., climate change, energy and food crises, conflict resolution) and the economic crisis, further threatening the progress made so far in responding to the pandemic. *AFEW*'s advocacy activities are designed to align efforts within civil society in order to improve the overall quality, foster collaboration, and increase the effectiveness of the response to HIV; to keep AIDS on the social and political agenda and guarantee that adequate funding is available, so that the scale-up of the response continues, in particular for key populations and PLHIV. In order for civil society to respond to HIV at the global level, it is critical that it is empowered and enabled to share information in a timely manner, to strategise, and to develop its own policy and advocacy agenda in a safe and enabling environment. To this end, *AFEW* offers its local NGO partners training on capacity building.
- 4 Other** (research, supply of products sets, milk formula, condoms and other materials). To support *AFEW*'s prevention activities, *AFEW* procures commodities like products sets, condoms, syringes and needles, bleach and milk formula.

Programme Development

In 2011, we continued to adapt our programmes to take into account **emerging trends in the epidemic in EECA**. Injecting drug use has always been the major vehicle for HIV transmission in the region, but in recent years heterosexual transmission has begun to play a far greater role, especially in the older epidemics in Russia and Ukraine. For this reason, we are increasing our focus on sexual health services for **vulnerable youth** and empowerment of **women's** groups. The UNAIDS report published in November 2011 made clear that Eastern Europe and Central Asia region is the only region in the world where the HIV epidemic is growing (with a 250% increase since 2001). Vulnerable groups such as people using drugs, sex workers, men having sex with men and prisoners are most at risk. *AFEW* will continue its focus on those groups.

In 2011 *AFEW* implemented a high volume of budget for **prisoners** (almost half of its total budget, 48%, compared with 44% of the total budget in 2010). Prison health can be considered one of *AFEW's* core competences, *AFEW* will use the International AIDS Conference 2012 in Washington, DC in the United States as an opportunity to highlight its prison projects. The volume of projects for women increased as well; the budget for most at risk adolescents remained the same. We expect an increase in activities targeting youth in 2012.

HIV-TB activities in the framework of ACCESS project will stop in February 2012. *AFEW* continues activities related to Tuberculosis in Kazakhstan (EU project: 'Scaling-up HIV and TB services for most at risk populations in Kazakhstan') and in Kyrgyzstan (Project Hope: Contracts for supply of product sets: "Strengthening of DOTS GF program in Kyrgyzstan by means of access to diagnostics and treatment of TB resistant to medicines" and "Short-term course on TB treatment under direct observation (DOTS) in Kyrgyzstan; improvement of access to diagnostics and MDR-TB");

Furthermore, *AFEW* will continue its advocacy to include TB activities in HIV projects.

In 2011 *AFEW* explored opportunities for collaboration with the International Organisation of Migration (IOM) to develop projects for **migrants**. The contacts are established and follow up will be given in 2012 for joint proposals.

Geographical Coverage

AFEW has expanded its activities in Georgia. Together with a local partner, *AFEW* is implementing activities in the framework of the Bridging the gaps: health and rights for Key Populations in Ukraine, Georgia, Tajikistan and Kyrgyzstan programme;

An exploratory mission to Azerbaijan was conducted in spring 2011. Promising contacts with local governmental and non-governmental organisations were established. One local NGO approached *AFEW* with a request for collaboration. This will be followed up in 2012.

AFEW offers technical assistance regarding prison health to two NGO's, one based in Malaysia, the other in Indonesia. The Community Action for Harm Reduction project, implemented by the International HIV/AIDS Alliance is the first project outside of the EECA region where *AFEW* is working as a consulting organisation. For two years *AFEW* considered offering consultancies to third parties as an extra source of income for the organisation. This project is a first opportunity to do so.

Last year, we reported on the difficulties in re-registering our country office in Uzbekistan. *AFEW* in Uzbekistan was liquidated in the middle of 2011. Only a very few international organisations are allowed to work in Uzbekistan at the moment. While the HIV epidemic is following the trend of the epidemic in Russia and Ukraine, which means that incidence is rising, the current political context in Uzbekistan hampers re-registration of international NGOs. Nonetheless, at the first opportunity, *AFEW* will strive to reopen the office and resume activities in Uzbekistan.

Communications with Stake-holders

AFEW's Strategic Plan sets a series of objectives for communications with a variety of stake-holders. As a Dutch organisation, which has benefited from core funding from the Dutch and EU tax-payers over the years, *AFEW* has a responsibility to inform public in Western Europe about HIV in EECA. In 2011 *AFEW* celebrated its 10th anniversary, which was the primary vehicle for informing the general public in the Netherlands and in the region about *AFEW* as an organisation and its achievements. All *AFEW* offices organised events to highlight the results of the past 10 years. *AFEW* organised a first Red Ribbon Ball in Moscow, a charity ball to

raise awareness of the HIV epidemic and AFEW's work, in September 2011. AFEW also organised a team of 10 volunteers and staff for a sponsor-run ('Dam to Dam loop') with which we raised over 3000 euros. Another general public event took place in Amsterdam, in the public library, in November 2011.

AFEW continued to draw attention to its work at **key moments such as World AIDS Day, World TB Day and during the launch of new projects**, through events and press liaison at the regional level, together with online reporting. Furthermore, AFEW communicates with its stakeholders through the general website, Facebook and Twitter, the annual report and regional newsletters (for the ACCESS Project in Central Asia and Street Children Project in Ukraine). AFEW also started sending off 'donor alerts', a brief description of a project and its results, to donors, partners, and other organisations.

Human Resources Management and Efficiency

Ethical work practices are one of the guiding principles of AFEW. AFEW Code of Conduct clarifies issues related to privacy, conflicts of interest, the use of AFEW's property and behaviour that could damage AFEW's reputation or expose AFEW to legal liability. The Code stipulates ethical standards that apply to all AFEW employees worldwide.

AFEW staff adhere to a high and uniform set of conduct standards. Every employee has a personal obligation to uphold these standards, and act in an ethical manner toward each other, our partners, target groups and the general public. Employees of AFEW are motivated to contribute to a common cause and feel close to the core values of the organisation. Consequently, employees should always represent the organisation in a professional way.

Due to the financial constraints for 2011 described in the Fundraising section, AFEW was not able to hire new staff for key positions nor to implement a **Human Resources Development Policy**. Furthermore, the Management Team had to make the difficult choice to further downsize in 2012 the International Office in the Netherlands, regional offices in Almaty and Russia, and the country office in Tajikistan. Fundraising, communications and the tasks previously carried out by the Quality Management Unit had already been moved to

the regional offices in 2010 and the International Communications Department was significantly downsized in 2011. One International Communications Officer was left in position, for the first period in 2011 as full time, later that year a half time communication officer was appointed. One of the three directors in the International Office has left, the management team will consist of 2 directors from the beginning of 2012.

As mentioned above, the organisation has had to reduce staffing levels in order to make **efficiency savings**. In general, total indirect costs (or overhead costs), which consist of management, administration and costs of raising income, have seen a decline from €708,432 in 2010 to €489,826 in 2011 (30% down).

Technical Support Facility

In 2011 the contract for the Technical Support Facility in Eastern Europe and Central Asia (TSF-EECA) with UNAIDS stopped. UNAIDS initiated a meeting in July 2011 with all existing knowledge hubs in the region and AFEW to discuss a new structure for offering technical assistance. Unfortunately, despite the good intentions of all parties no agreement was reached. AFEW and other organisations involved started a strong lobbying effort with UNAIDS to take responsibility and provide clarity. This effort will be continued in 2012.

Fundraising

The global financial crisis continues, leading to further cuts in aid budgets. The announcement of the Global Fund to fight against AIDS, TB and Malaria to cancel its round 11 was the ultimate result not only of the economic crisis and but also of the de-prioritisation of HIV and AIDS in national and international policy.

Overall, *AFEW* achieved the budget as set in the Strategic Plan for 2011 (€5.1 million actual income versus €5.3 million planned income). For 2012, the budget currently looks much better than in the strategic plan (almost €5 million versus €2.5 projected).

During 2011, *AFEW* signed new contracts in the total amount of almost € 6.2 million, for project activities in 2011 year and beyond.

Funding Setbacks

In 2011, **one major grant application was rejected**, which could have provided *AFEW*'s Moscow and Kyiv office with basic financial stability over the next few years. This EU proposal that covered activities for Russia and Ukraine regarding harm reduction would have been a good opportunity to sustain *AFEW*'s activities in those countries. The lengthy process for approvals by the EU makes staff and management planning difficult.

In 2011, *AFEW*'s biggest budget project to date, the GLOBUS Project, closed. Russia's eligibility for future aid from the Global Fund was not clear at the end of 2011. It may be that a major source of support for work with vulnerable groups in Russia will disappear.

Kazakhstan is now also considered to be a middle income country and as such less eligible for development aid. For *AFEW* it is growing increasingly difficult to find funds for activities in Kazakhstan, having for now only 2 medium size projects for 2012. This means that the Regional Office in Almaty may need to reorganise further, if no new funds will be available.

In Moldova *AFEW* will conclude its projects in 2012, and for now *AFEW* has no prospects for secure funding in the future. *AFEW* has submitted two proposals of which we will receive news in 2012.

Fundraising Strategy for 2012 and Beyond

Due to concerted lobbying by AIDS organisations in the Netherlands, HIV was put **back on the policy agenda of the Dutch government** with a special emphasis on vulnerable groups. This created a window of opportunity to obtain money from the Key Populations Fund. We continued actively exploring opportunities with other EU and US-based donor organisations – an EU project for prison reform in Kyrgyzstan was launched at the end of 2011.

We are also diversifying our funding sources by engaging with new trends in the HIV epidemic in EECA. We plan to increase applications for funds allocated specifically for women's and youth projects. Gender-based and youth-specific projects are urgently required as we see a rise in the proportion of cases affecting females and adolescents. Proposals regarding street children and young offenders have been submitted and are awaiting approval.

Our organisation has started to offer consultancy to other projects. *AFEW*'s expertise in the fields of prison health and HIV related issues is of great value for other regions of the world. In 2011, The International HIV/Aids Alliance has brought *AFEW* in as a consultant on its Asian harm reduction programmes.

Risk Categories

Strategy

AFEW developed its new strategy plan 2011 – 2013, a plan for the upcoming three years. Given rapidly shifting global economic and political conditions, *AFEW* decided to develop a three-year term plan in order to react appropriately to new trends. The new strategy describes plans reflecting the changes in the HIV epidemic in the region. *AFEW* carefully follows the reports of UNAIDS and other UN bodies in order to update its plans when needed.

Operational risks

AFEW had to reorganise its management due to cuts in budget last year. *AFEW* faced a loss of quality human resources and therefore expertise. By sharing specialised staff over the different offices *AFEW* safeguards its quality of implementation. A new generation of *AFEW* (regional) managers have been appointed and will be guided in their development by the International Office.

This guidance and training demands more involvement from the International Office. Effective time management will be critical for staff at the International Office as it is set for a capacity reduction in 2012 as well. At current staff levels, it is possible to administer, implement and develop new programmes, however *AFEW* currently has a very limited capacity for communication activities, and no resources for the development of staff. In the long run this will hamper *AFEW*'s visibility and capacity.

AFEW could not free funds in the budget for a monitoring and evaluation specialist based in the International Office this year, leaving M&E officers in the regional offices to secure evaluation of the local projects. Bridging the gaps: health and rights for Key Populations in Ukraine, Georgia, Tajikistan and Kyrgyzstan project budget provides for overall M&E of the activities in the 4 countries.

Integrating budgets for communication into projects serves to compensate for this shortfall in communication capacity, and including visits to conferences into project budgets gives staff an opportunity to gain knowledge.

AFEW will explore possibilities of sharing of staff with other organisations for specific projects in order to lift workload on staff members.

Financial Reporting and Financial risks

In general, *AFEW* has no major issues with Finance and financial reporting. *AFEW* remains in close contact with donors regarding all items, including reporting and budget changes. Several possible financial risks are described below.

- Refusal of the donor to accept some expenses as justifiable. *AFEW* staff strive constantly to conform to the donor procedures and avoid situations where inapplicable expenses occur. In cases where some expenses are not accepted by the donor, *AFEW* can cover costs from its contingency reserve.
- Many donors have a policy of withholding the final tranche pending the verification of the final report. As a rule, final tranche amount is no more than 7% of the grant. However, the approval of the final report can take some time. As a result, *AFEW* has to prepay some expenses from its own money. *AFEW* communicates this issue

to donors and tries to receive payments from donors on-time.

- Exchange rates differences between *AFEW* internal financial system Axapta and some donors fixed exchange rates may lead to some unpredictable *AFEW* gains/losses. The amount of the gain or loss is not significant.

Legislation

In each country of its operation, *AFEW* works in compliance with local legislation.

Legislation in the countries where *AFEW* works may change; new laws regarding the status of (inter)national NGOs or the content of work (*AFEW* has projects active in controversial areas like harm reduction and prison health) might occur. *AFEW*'s local offices are aware of changes in law and know how to respond.

Regulations

AFEW has a set of internal policies and procedures which are followed by all offices. Internal audits, executed once a year, check the understanding and interpretation of *AFEW*'s regulations, and reveal hiccups. *AFEW* constantly reviews its internal regulations and revises them when needed.

Given limited staff capacity, only financial, human resource administration and legal issues were evaluated during last years' internal audits. The Management Team aims to revive the regular internal program audit starting from 2012.

Our 2011 Team

AFEW works hard to initiate new projects and further develop existing ones, and many specialists join the organisation to contribute to the response to HIV in Eastern Europe and Central Asia. In 2011, **the average number of employees at AFEW was 65**. The largest regional office, with an average of 33 staff members, is the Central Asian Office, comprising the regional office in Almaty, Kazakhstan, and three country offices in Tashkent, Uzbekistan (closed in the middle of 2011), Bishkek, Kyrgyzstan and Dushanbe, Tajikistan. The average number of people working in *AFEW*'s Russian regional office in Moscow was 14. The regional office in Kyiv, Ukraine, employed an average of 8 staff members, with another 3 staff members working in country office in Chisinau, Moldova. Finally, 7 *AFEW* staff members worked in the International Office of *AFEW*: 5 based in Amsterdam, the Netherlands, one based in Moscow, Russia, and one based in Kyiv, Ukraine.



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Abbreviations

AFEW *AIDS Foundation East-West*

AIDS Acquired Immunodeficiency Syndrome

CAAP Central Asia AIDS Project

CBF Central Bureau of Fundraising

dance4life dance4life International (The Netherlands)

EECA Eastern Europe and Central Asia

EU European Union

FOSI Foundation Open Society Institute

Global Fund Global Fund to Fight AIDS, Tuberculosis and Malaria

GLOBUS Global Efforts against AIDS in Russia

HIV Human Immunodeficiency Virus

IPPF–EN International Planned Parenthood Federation – European Network

Key Populations Key populations at higher risk of HIV (in EECA, this term usually refers to injecting drug users, sex workers, former and current prisoners)

MARA Most at risk adolescents

MATRA Matra Social Transformation Programme, Ministry of Foreign Affairs of the Netherlands

MFS Co-financing system of the Ministry of Foreign Affairs of the Netherlands

OHI Open Health Institute

PLHIV People living with HIV

PMTCT Prevention of mother-to-child transmission of HIV

RF Russian Federation

ROST Capacity Development of HIV/AIDS NGOs in Eastern Europe and Central Asia

SIDA Swedish International Development Cooperation Agency

STI Sexually Transmitted Infection

SW Sex worker

Tbc Tuberculosis

UCIMP HIV/TB Project Coordination, Implementation and Monitoring Unit, Ministry of Health of the Republic of Moldova

UNAIDS Joint United Nations Programme on HIV/AIDS

UNDP United Nations Development Programme

UNESCO United Nations Educational, Scientific and Cultural Organisation

UNGASS United Nations General Assembly Special Session

UNICEF United Nations Children's Fund

UNODC United Nations Office on Drugs and Crime

USAID United States Agency for International Development

Vienna Express 'The Vienna Express 2010: Towards Universal Access'

VCT Voluntary Counselling and Testing

WHO World Health Organisation

[Click here to see a full glossary of HIV-related terms in English and Russian](#)

Colophon

Production

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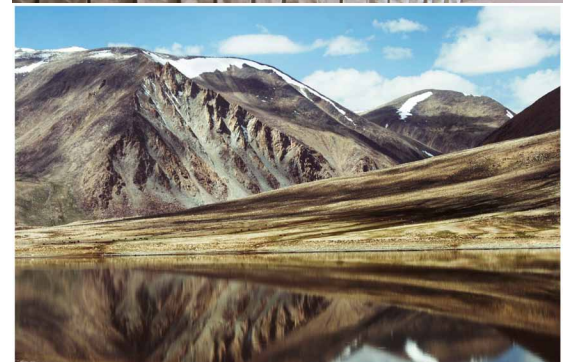
Donate to AFEW

In this annual report, we have striven to present a glimpse into the many important ways that AFEW works in Eastern Europe and Central Asia to halt the spread of the HIV epidemic and avert a social, economic and human catastrophe. We ask you to support the work of our staff and partners who work with the most neglected and stigmatised people in their region, and whose work changes lives for the better. Your contribution is vital, because the groups that we represent are so often overlooked in lists of good causes, corporate charity budgets and national development programmes.



VOOR
GOEDE DOELEN

AFEW's commitment to financial transparency and accountability is testified by its long-term relationships with many international and national donors, as well as its seal of approval from the Central Bureau of Fundraising (CBF) in the Netherlands and compliance with Code Wijffels. A large proportion of its expenditure (90%) is directly spent on core programming, which means that it directly affects the quality of life of its target groups and stops them becoming new HIV statistics. Donations can be made online at www.afew.org, through the bank transfer in the Netherlands to giro 8886 or by contacting our International Office.



Annual Report 2011

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