EMPOWERING YOUNG PEOPLE TO PREVENT HIV/AIDS IN UKRAINE

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Introduction and context:

In modern Ukraine there is a contradiction between needs for healthy youth and real deterioration of its general condition. Ukraine is the country with transition economy. The number of families which are not capable to provide the basic conditions for the maintenance and education of children and youth has considerably increased. Due to the official state statistics, the total number of teenagers and youth between 14 and 28 years is equal to about 10,855 thousands people. The number of teenagers and youth between 14 and 28 affected by the negative phenomena, is more than 1,220 thousands, which is more than 11% from total.

The significant part of youth are addicts and HIV-infected (addicts - more than 755,000 and HIV-infected - 111,000, which is 7.3% total of youth). Development of epidemic of HIV/AIDS started in Ukraine in 1995-1996.

HIV-infected patients and patients with AIDS are being registered, those who were officially diagnosed and those persons who received the HIV-infected diagnosis by primary testing, but it is not confirmed with repeated testing because of the fact they have decided not to do it.

Due to the statistical data of seroepidemic monitoring, for 01.01.2003 there were more than 111,000 of HIV-infected in Ukraine, and more than 62,000 were officially diagnosed as HIV-infected. Amongst those HIV-infected 40,300 are injected drug addicts, and most of those HIV-infected are youth.

Number of HIV-infected, being dispensary registered

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<tbody>
<tr>
<td>Number</td>
<td>1526</td>
<td>6,615</td>
<td>15,287</td>
<td>22,719</td>
<td>26,838</td>
<td>30,666</td>
<td>35,291</td>
<td>41,252</td>
<td>62,365</td>
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Patients with AIDS, and those who died of AIDS

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<tbody>
<tr>
<td>Those with AIDS</td>
<td>45</td>
<td>143</td>
<td>189</td>
<td>398</td>
<td>586</td>
<td>647</td>
<td>867</td>
<td>1,353</td>
<td>1,915</td>
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<tr>
<td>Deaths</td>
<td>19</td>
<td>69</td>
<td>82</td>
<td>148</td>
<td>253</td>
<td>414</td>
<td>473</td>
<td>834</td>
<td>1,285</td>
</tr>
</tbody>
</table>

The more detailed statistic data is available from Y. Kruglov (Kyiv)

Short Background info on specific features of the described prevention work:

In Ukraine much attention is paid to problems of prevention and fight with AIDS at the state level. There was the legislation about AIDS developed, accepted and it is being constantly improved. The Supreme Soviet, the President and the Government of Ukraine have established the number of National programs to counteract drug abuse and HIV/AIDS, in particular, there was the Fourth National Program to Fight with
AIDS prepared during 2004-2008. In these programs the significant attention is paid to preventive activities.

The main bodies responsible for HIV/AIDS prevention at the state level are the Ministry of Health Care and the Ministry of children, families and youth. In Ukraine the international and Ukrainian public organizations and charitable funds successfully work, first of all the United Nations counterparts.

Ukrainian public organizations are financially supported by the international organizations (UN Office, USAID, Soros Foundation etc.), and they have little financial support from the state and city budgets).

The preventive activities are directed at the three basic targets:

1) groups of risk (the main direction);
2) teenagers and youth;
3) parents and teachers.

The work is mainly concentrated in the most HIV affected regions at the South and East of Ukraine.

Those who are involved into these activities understand complexity of a problem and try to unite resources of the state and public organizations, and to involve youth more into preventive work, leaders out of the number of youth, parents and teachers. A lot of informational activities are carried out, but still they are not sufficient.

In Ukraine during 2000 –2003 was, there were at least three significant projects implemented which purpose was reinforcement of individual abilities by training.

1) National level.
The Project ‘Contribution peer to peer educational work amongst Ukrainian youth aimed at a healthy way of life’ (UKR/00/HO1/1V). The executor –Ministry of Health Care of Ukraine in co-operation with UNAIDS. The project director is V.Orzhehovskaja, Coordinator - L.Andrushchak. Place of implementation – all 25 administrative regions of Ukraine, Kyiv and Sebastopol. The project budget is $1,100,000 US. Resources: UNPF, UNAIDS, UNDP offices in Ukraine. Target group: pupils and students of educational institutions. Total number of participants is 2,500,000 youth. Executors: national professionals, teachers, instructors and international advisors, the trained leaders, mentors out of the number of the students’ youth.

More detailed information is available from L.Andrushchak, V.Punok (Kyiv).

2) Regional level.
The Project “HIV Prevention amongst teenagers and youth in the South Region of Ukraine”. Executor: the State Centre for Social Services for Youth in co-operation
with UNICEF, supported by UNAIDS. Region - South of Ukraine, target group - leaders from teenagers, youth, teachers, parents.

Financial resources– UNICEF, UNAIDS, Ukrainian State Centre for Social Services for Youth.

More detailed information is available from I.Pinchuk, V. Sanovska (Kyiv).

3) Local level (Kyiv City, the capital of Ukraine).
Project ‘Youth for health’. Executor: The Union of Children and Youth Organizations of Kyiv, Kiev City Center for Social Services for Youth, by the support of Canadian-Ukrainian fund.

Target group: pupils and youth from Kyiv, the members of The Union of Children and Youth Organizations of Kyiv.

Financial resources - Canadian-Ukrainian fund.

Direct executors - volunteers from the Union of Children and Youth Organizations of Kyiv

The second implementation phase of the project ‘Youth for health’ started in 2003. The more detailed information is available from O.Balakireva, O.Yaremenko (Kyiv).

Concept of empowerment applied in prevention work.
Those projects are empowering, as they are basically directed on development communication skills, abilities to solving conflicts, vital problems, skills of healthy life style; they also focus on finding the right decisions for personal problems solving, development of the positive personal potential, good-natured attitude to peers, awareness and skills for standing for one’s own honour and rights.

The target groups of these projects are:
- teenagers, pupils of schools and youth ,
- leaders out of the number of teenagers and youth ,
- teachers, social workers, leaders out of their number,
- parents and leaders out of the number of parents.

The basic kinds of activities are:
- Development and edition of teaching materials for training leaders and for carrying by them practical skills trainings, trainings with peers.
- Conducting training sessions with leaders out of the number of teenagers and youth, teachers, social workers, parents.
- Conducting practical skills training, trainings by leaders with peers.

The main outcomes of the above projects are:
Development and approval at the state level of the concept for ‘peer to peer’ training, issuing 6 educational thematic modules on the basic directions for ‘peer to peer’ project implementation; training – methodological materials and programs, methodological manual for leaders out of the number of teenagers, youth, teachers, parents; handouts - informational materials.

Involving into prevention activities of the large number of teenagers and youth from educational institutions of Ukraine, social workers from the system of centers for social services for youth (more than 700 centers), involving into prevention activities of teachers, parents.

In particular, in 14 Kiev City regions 105 volunteers out of the number of youth and 20 youth leaders from the Union of Children and Youth Organizations conduct training sessions for the speakers’ groups, personal development trainings, behaviour skills in crisis situations.

The Project which provides **empowerment for people living with HIV towards AIDS prevention for them**.

The main project focus is preparing of HIV – infected people for antiretroviral therapy (ARV) with the aim of prevention AIDS for them. **Empowerment** is in formation and development in them the ARV benevolence, defining and discussing possible side effects, in developing the abilities and skills for positive behavior towards these effects, so as to decrease the harmful effects.

The project was implemented during 2003 by the NGO ‘Time of life +’.

During that time there were 5 social workers trained out of the number of PLWA, 4 telephone consultants – volunteers to work at the ‘hotline’, 4 facilitators to organize and to conduct mutual aid groups. The trained project professionals out of the number of PLW received job placements in the projects and provided its effective implementation, social – psychological maintenance for PLW who live in Kyiv City and who are patients of AIDS Clinic in Kyiv City from the other regions of Ukraine. Every week there were 2 self-help groups conducted, ‘peer to peer’ training re: developing and formation of the ARV benevolence.

More detailed information is available from S. Antonjak, N. Koovatov (Kyiv).

1) **Major achievements and problems**

During the development of the HIV/AIDS epidemics in Ukraine, it became clear, that until present it does not seem possible to restrain or stabilize it. It is related not only to the deficiency in finance resources and professional staff, but also with the lack of basic methodological and methodical approaches in preventive work, in particular, it is related to concentration of the basic attention on the risk groups and the most affected regions of the country.
Major achievements and problems in preventive work we can illustrate with such example:

Evaluation of project “HIV prevention among young people in the Southern Ukraine” (three cities), conducted by State Institute of Youth and Family Issues (Balakireva O., Yaremenko O.)

(a) Reasons for and purpose of the evaluation.
- To evaluate the results reached by the project (2001-2002) against its objective: to strengthen the capacities of social services for youth in the field of HIV primary prevention.
- 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:
- development of guidance documents for peer leaders, teachers, parents for HIV prevention among adolescents and youth;
- peer to peer training of youth, teachers, and parents;
- training of social and youth workers parents for HIV prevention;
- advocacy with the participation of local authorities, mass media, and target group.

(c) Summary of participants in the evaluation process: e.g. Government, NGOs, communities, donor organisations, 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 (Sevastopol, Mykolayv, Odesa), local administrations, local NGOs, volunteers groups and media.

(d) Significant children's or women's rights issues addressed.
“States Parties shall take appropriate measures to develop preventive health care,... guidance and services.” (UN Convention on the Rights of the Child, article 24)

(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 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,
teachers, administrators, journalists, and young people. It established the framework for prevention activities by the SSY. As one of the project results, the awareness level of young people on transmission routes has raised by 3%.

As the project was considered as a pilot, for the further development of the prevention activities by the SSY there were given the following recommendations for increasing the efficiency in the all-country context:

- to build the comprehensive intersectorial approach for HIV prevention;
- to provide consistency and better co-ordination of prevention activities at the national and local levels;
- to consolidate the efforts of education, health care, law and social services, government and NGOs working in the field of HIV prevention;
- to avoid doubling of activities and better identify the roles of the local governments and NGOs;
- to provide continuity, succession, addressed timely services, accessible information for young people.

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 primary prevention projects is established.


(a) Reasons for and purpose of the evaluation.
To explore the changes in knowledge, attitudes and practices in target groups of young people and develop the effective methods of prevention based on KAP surveys comparative results.

(b) Brief summary of design and methodology.
Analysis based on mass selective poll of young people aged 14-28 years old. The first KAP was conducted before the start of the project in three 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 1,774 young people. The project’s impact was searched against the young people’s level of awareness on HIV, practice of drug using, sexual behaviour.

(c) Summary of participants in the evaluation process: e.g. Government, NGOs, communities, donor organisations, 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 (Sevastopol, Mykolayv, Odesa), local administrations, local NGOs, volunteers groups and media.

(d) 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 improvement of targeted interventions and better planning of the prevention activities by the social services for youth (SSY). In the result of the project the awareness level of young people for the transmission routes has raised on 3%. In spite the fact that in total 97% of young people consider themselves being aware on HIV/AIDS, only about 65-70% of them want to have more complete and reliable information as there are still a lot of myths and stereotypes. In average, up to 6% of young people demonstrated more right level of answers on existing myths on HIV/AIDS. In some cases the index is much higher, p. ex: number of right answers regarding the AIDS treatment in comparison with data 2001 almost doubled in Mykolayv (from 14% to 27%) and Sevastopol (from 17% to 32%) and increased in 4.5 times in Odesa (from 6% to 27%). The less informed stay children aged 14-16.

The project did not provide significant impact on the safe practices of drug using or level of consumption. This requires more consolidation of efforts among education, health care, law and social services, government and NGOs working in the field of HIV prevention. The comprehensive inter-sector approach for HIV prevention should be built.

Regarding safe sexual behaviour practices the KAP showed the increase of number of respondents always using condoms (from 49% to 68%). Among women respondents in Mykolayiv 52% always use the condom with the occasional partners (18% from data 2001); among men – 24% in comparison with 10%.

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

The important result for the project was also development of the several manuals. In relation to the seminar theme, the most important are two of them. In the first one there were the methodic of learning and empowerment of leaders out of the number of youth, parents, teachers, and dissemination of useful life skills by the leaders based at peer education principle.

The author’s version of the methodic for working over solving the conflict life situations has positively recommended itself in prevention activities practice. Its specifics is in effective learning the knowledge and skills of making one’s own decision re: way out of the typical life problems related to possibilities of HIV infecting.

In the second manual the experience of the ‘Trust’ offices under the Centres for social services for youth of the Southern region of the country, was generalized; there
were empowerment methodics for volunteers and those offices workers presented for conducting psychological counseling, pre- and post-test counseling for IDUs, training them to disseminate useful skills amongst peers with the use of peer education snow ball methods.

Such a work allows gaining skills of positive ways for solving problems, improving IDU’s health, their relations with the nearest environment.

In spite of successes, the objectives of advancing the level of knowledge amongst youth re: AIDS are not solved yet.

Results of interrogation testify of the general level of knowledge on general questions re: HIV/AIDS amongst the pupils and student youth conducted in December 2003 by the Institute for Social and Political Psychology at the Academy of Pedagogical Sciences in Ukraine.

<table>
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<tr>
<th>Which of the sayings below you consider to be the right ones?</th>
<th>The number of respondents who ticked that answer (%)</th>
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<tbody>
<tr>
<td>Infected person can transfer immunodeficiency virus to the other person during the sex contact</td>
<td>76,3</td>
</tr>
<tr>
<td>The risk of getting HIV/AIDS is the highest amongst drug users, prostitutes and homosexuals</td>
<td>75,9</td>
</tr>
<tr>
<td>HIV infection can be found in human body only by means of the specific blood test in medical laboratory</td>
<td>65,1</td>
</tr>
<tr>
<td>HIV infected woman is not able to deliver a health baby</td>
<td>51,2</td>
</tr>
<tr>
<td>HIV infection suppresses the natural defence of the organism against illnesses</td>
<td>50,8</td>
</tr>
<tr>
<td>There are some medicines which can prolong human life of HIV – infected person</td>
<td>28,6</td>
</tr>
<tr>
<td>There are no ways to defence of AIDS</td>
<td>16,6</td>
</tr>
<tr>
<td>One can defined that the person is HIV infected from the person’s appearance</td>
<td>6,1</td>
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Information level amongst youth re: HIV/AIDS routes transmission.

Table 21.
At first sight, the knowledge of youth seems rather high. However, more detailed analysis shows, that this knowledge is fragmentary and concerns only specific questions.

Only 2.4% of young people were able to provide the right answers for all the questions. The mostly often the respondents know the right answer for the only one question. The example providing evidence for that can be comparative analysis of the answers for the questions No 1, 4, 6. Around 80% of young people provided separately the right answers for each of them. But to answer right for all the three questions at one time was possible only for 61% of respondents. We could add question No 7 into that list and the number of right answers will be shortened up to 35%.

These results provide evidence that the knowledge young people have re: AIDS have rather surface character.

Amongst the main deficiencies in prevention activities the following should be mentioned:
- the accent on the work with the risk groups and lack of attention to outwardly safe youth,
- concentration of the main resources in the most affected by HIV and drug abuse regions of the country, and lack of attention to the regions with the smaller spread of those phenomenon,
- the accent on the informational – educational work and lack of attention to the work on strengthening personal youth resources, training the life skills in transition society.

For essential improvement of preventive work, there is a need in:
1) enhancing prevention activities with all the teenagers and youth, and not only with risk groups;
2) change of accents in the content of the work. The main attention should be paid to strengthening the youth personal potential, formation of healthy life style, preparation for introduction into adult life in a society, oriented on market economy in its positive measures;
3) assistance for problem youth which has already negative experience of participation in drug dealing business, sex business, criminal activities, in its resocialization;
4) wider use and dissemination (by peer to peer method) of life experience of problematic youth, in the work with the youth who consider such life style to bring quick enrichment. It is necessary on concrete life examples to show to youth that such a way can bring to its personality quick ruining;
5) promoting for peers the positive examples and experience of the youth itself for finding the ways out of difficult life situations.
6) it is necessary to assist youth to gain the right life competence, to learn effective communication skills, solving conflict situations, organizing and having free time, establishing own civic unions for development and providing one’s own interests, as the youth in Ukrainian society belongs to the social group which needs social protection and support.

2) Lessons to be drawn; possibilities to apply approach in other contexts

Within Ukrainian conditions, to achieve the best results in prevention activities, the following is relevant:

1. Establishment in educational institutions within the subject ‘Life Safety Protection’ and at the facultative trainings, training and learning vital skills based on processing typical ways of solving the problems in vital situations.
2. Increase the critical weight of prevention projects to receive ‘chain reaction effect’ in youth environment. To emphasize on the systematic implementation of prevention activities and its repeating for new generations of teenagers and youth.
3. To provide association of resources of the state organizations which are engaged into prevention activities and public associations, first of all people, living with HIV/AIDS, international organizations working in the area of HIV/AIDS prevention.

This experience can be useful first of all for the countries of former Soviet Union and former socialist countries in which there are similar social processes and problems, and which have similar structures for prevention activities and similar approaches to their decisions.

REFERENCES
2. Informational bulletin of the Ukrainian AIDS Centre for the 2003.

