

Partnership Framework
Between
The Government of the United States of America
and
The Cabinet of Ministers of Ukraine
On cooperation in countering HIV/AIDS
In 2011 – 2015

The Government of the United States of America (USG) and the Cabinet of Ministers of Ukraine (CMU) (USG) (collectively “the Participants”),

Desiring to further strengthen their cooperation in countering HIV/AIDS in 2011 – 2015 in the interests of both nations,

Recognizing the importance of concerted effort to accelerate containment of Ukraine’s rapidly increasing HIV/AIDS epidemic,

Being in the firm belief that this cooperation will contribute meaningfully to relations between the two countries,

Willing to promote cooperation in public health,

Hereby intend as follows:

Section 1

The Participants intend to reinforce the ongoing collaboration in countering HIV/AIDS in 2011 – 2015 based on equality and mutually advantageous foundations while being guided by Ukraine’s National Program for the Prevention of HIV-Infection, Treatment, Care and Support for People Living with HIV and AIDS Patients 2009-2013 (the National Program, or NAP) and consistent with global U.S. President’s Emergency Plan for AIDS Relief (PEPFAR) goals to achieve concrete results in the prevention, care and treatment of HIV/AIDS.

Priority cooperation directions are set out in Section 3 of the present Partnership Framework.

Section 2

The Participants have identified the following goals that should be achieved through cooperation in countering HIV/AIDS in 2011 – 2015.

A collaborative Operational Plan to attain the stated goals has been developed and is attached to this Partnership Framework (henceforth “Addendum”).

Goal 1: Reduce the level of HIV transmission among Injection Drug Users (IDUs) and other most-at-risk-populations (MARPs)

Key USG Program Areas/Strategic Interventions:

- Technical and program support for expansion of comprehensive package of quality, cost effective prevention services for IDUs and their sexual partners, including MAT, as defined in the WHO/UNODC/UNAIDS Technical Guide
- Technical support to increase knowledge of MARP groups and develop gender-sensitive and gender-differentiated program and policy interventions to improve access to and reduce barriers to care
- Technical and program support for expansion of comprehensive HIV prevention services for other MARPs (CSW, MSM, uniformed services, youth including street youth)
- Technical support to expand MARP access to quality HIV testing and counseling services in outreach and clinical settings

Key Areas of Policy Reform:

The CMU intends to endorse and adopt policies to:

- reduce legal, financial, administrative, program and attitudinal barriers to services for male and female MARPs, particularly IDUs and their sexual partners and including young IDUs
- expand implementation and scale up of appropriate HIV prevention services, prioritizing services targeted to MARPs and their partners, with focus given to expanding access to the package of nine core interventions for IDUs in the WHO, UNODC, UNAIDS Technical Guide
- expand the availability of MAT services and reduce legal and medical barriers to care by increasing MAT service sites, integrating MAT into ART and other services, and expanding the cadre of providers who are trained and

able to provide MAT to include professionals such as primary care providers and other specialists (such as TB specialists).

- increase the role of NGOs in providing services to MARPs and enable local governments to contract with NGOs to deliver HIV/AIDS services to MARPs
- enable scale-up of prevention programs for MARPs, including MAT and other core interventions for IDUs outlined in the WHO, UNODC, UNAIDS Technical Guide

Five Year Intended Outcomes:

- Increased GOU financial and in-kind support should enable the sustained provision of prevention services for MARPs and their partners through the National AIDS Program which includes direct funding of NGOs
- Improved policy environment and established service systems facilitate scale up and maintenance of gender-sensitive, gender-differentiated prevention services for male and female MARPs, particularly MAT for IDUs
- Comprehensive package of nine prevention services for IDUs (including integrated MAT package) introduced and widely implemented in targeted sites

Goal 2: Improve the quality and cost effectiveness of HIV prevention, care and treatment services for MARPs, particularly IDUs and their sexual partners.

Key USG Program Areas/Strategic Interventions:

- Systems strengthening to increase efficiency of drug and commodity procurement and supply management
- Costing studies to improve CMU capacity to provide cost-effective HIV services
- Quality assurance systems development and implementation to improve and maintain quality and effectiveness of HIV prevention services
- Technical assistance to improve blood safety
- Training and systems development to expand access by MARPs to quality HIV testing and counseling services in outreach and clinical settings
- Training and systems building to improve the quality of HIV treatment and care

Key Areas of Policy Reform:

The CMU intends to endorse and adopt specific policies to:

- strengthen governance, efficiency, transparency and effectiveness of HIV/AIDS drug and commodity procurement and supply management

- decentralize HIV/AIDS medical care and treatment, with progressive integration of HIV prevention and treatment interventions into primary care settings and increased range of service providers delivering MAT and other services
- revise regulatory structure regarding organization, resources, and functions of AIDS Centers and their interaction with other institutions to institutionalize service coordination and referrals
- support adequate numbers and cadres of trained personnel to support comprehensive HIV/AIDS services and case management
- prevent stigma and discrimination against MARPs and protect the rights of PLWHA
- ensure confidentiality and prevent discrimination against MARPs using HIV services
- integrate routine delivery of testing and HIV prevention services into medical service settings for patients at high risk of HIV/AIDS
- support HIV/AIDS prevention, care and treatment and laboratory services, including blood safety and blood screening measures
- regularize monitoring of CMU HIV/AIDS expenditures

Five Year Intended Outcomes:

- Fewer stockouts due to improved system for HIV/AIDS drug and commodity procurement and supply management at national and sub-national level
- Cost-efficient, high-quality prevention, treatment and care and laboratory services enable scale up and increase effectiveness of national program in containing the epidemic

Goal 3: Strengthen national and local leadership, capacity, institutions, systems, policies and resources to support the achievement of national AIDS program objectives.

Key USG Program Areas/Strategic Interventions:

- Capacity development to build national and sub-national leadership in managing and monitoring the National AIDS Program
- Systems and capacity development to improve the collection, analysis, use of surveillance and program information for program decision-making
- Technical support to strengthen capacity in evaluation and operational research
- NGO institutional capacity strengthening
- Policy development and implementation to support HIV/AIDS prevention, care and treatment and laboratory services

- Technical support to strengthen budgeting, financial management and monitoring to strengthen financial sustainability of national AIDS program
- Training and systems development to strengthen national laboratory capacity
- Technical assistance to strengthen human resources planning systems

Key Policy Reforms:

The CMU intends to endorse and adopt specific policies to:

- increase CMU allocation and efficient use of resources and services for all MARP groups, especially IDUs
- expand the role of NGOs in providing MARP services
- establish HIV-specific budget line in national and local budgets
- support HIV/AIDS prevention, care and treatment and laboratory services, including blood safety and blood screening measures

Five Year intended outcomes:

- Policies on national and local planning and budgeting for HIV/AIDS activities are in line with National AIDS Law and National AIDS Program
- Increased national and local government resources allocated for prevention, treatment, care and support services for MARPs

Section 3

The Participants intend to facilitate in collaboration development along the following priority lines:

- Consolidation of available joint achievements in state policy and programmatic activities development; in enabling civil organizations (NGO) to provide services in prophylaxis, care and support of the people with HIV and AIDS patients in the highest HIV/AIDS incidence regions of Ukraine.
- Facilitation in closer collaboration between civil society and governmental authorities as well as among donors and international organizations.
- Further implementation of activities on reducing strategic, legal and regulatory barriers to services; enhancing the role of national, regional and local structures to catalyze collaboration among the stakeholders in resolving HIV/AIDS-related issues; strengthening coordination, management and monitoring of the national response to HIV/AIDS.

- Consolidate capacity and commitment of the public, NGO and private sector stakeholders to establishing and securing services for MARPs and as a priority for IDUs.
- Ensure epidemiological surveillance over infectious diseases, in particular HIV/AIDS and STDs.
- Enhanced synergy among public and NGO sectors' programs; mutual reporting and transparency.
- Deepened partners' relations and joint activities among public organs, donors and their partners, civil society in securing a better coordinated, targeted and powerful response to HIV/AIDS.
- Integration of the HIV/AIDS services into the primary medical assistance systems.
- Gradual CMU increase in available financial support of the targeted NAP that should be grounded on evidence based medicine principles and comprise wider comprehensive services for MARPs (IDUs in the first place) over the next five years.
- Create preconditions for further dialog to facilitate use of program approaches in solving HIV/AIDS issues, corresponding contributions of partners and achievement of the planned results.

Section 4

In implementing and managing this Partnership Framework, the Participants intend to be guided by the following principles:

- **Support for National Processes and “Three Ones”:** Partnership Framework goals and strategies should be in line with and help advance the goals and objectives of Ukraine’s National HIV/AIDS Program, as well as align with the “Three Ones” Principles supporting one national strategy, one National AIDS Coordinating Authority, and one national monitoring and evaluation system in support of the National Program. In promoting the principles of the Three Ones, the Partnership intends to operate under

independent financing arrangements for U.S. Government foreign assistance.

- **Harmonization of Donor Efforts and Leveraging of Donor Investments:** Recognizing that Partnership Framework resources are not expected to support all needs, inputs should strategically and synergistically complement and leverage resources provided by the Global Fund to Fight AIDS, Tuberculosis and Malaria, other donors, and bilateral and multilateral agencies in order to promote economies of scale and optimize the use and impact of coordinated resources.
- **Ensure Broad Country-Level Engagement** (public, private and nongovernmental sectors): The Partnership Framework should facilitate robust public, private, and nongovernmental involvement, promote multi-sectoral coordination, and ensure meaningful PLWHA engagement in the National AIDS Program.
- **Build Country-Level Leadership on HIV/AIDS:** The Partnership Framework should catalyze progressively increasing high-level country ownership and leadership on the national AIDS response, particularly in the areas of National AIDS Program governance, CMU leadership on policy reform and financial sustainability to maintain National AIDS Program results over time.
- **Mutual Accountability, Transparency and Collaboration in Achieving Results:** In collaborating to support National AIDS Program goals, USG and CMU Partnership Framework partners should establish measurable objectives, define partner expected contributions that support achievement of Partnership Framework objectives, demonstrate transparency, joint decision-making and flexibility in implementing and managing Partnership Framework programs, regularly monitor progress toward planned objectives, and should ensure efficient use of all Partnership Framework funds throughout the life of the Partnership Framework.
- **Target Partnership Framework Investments to Achieve Maximum Impact:** Recognizing that Partnership Framework resources are limited and subject to the availability of funds in any given year, and acknowledging the concentrated nature of the epidemic in Ukraine, Partnership Framework investments should be carefully targeted to support increased access by most-at-risk populations to essential services.
- **Ensure Focus on Results:** Partnership Framework partners mutually decide to center efforts on building a continuum of services that is coordinated across health, social welfare and other entities to improve quality of care for most-at-risk populations.
- **Protect the Rights of Most Vulnerable Populations:** To effectively reduce transmission of HIV/AIDS, Partnership Framework activities should support

efforts to reduce the widespread stigma and discrimination that constrains access to care and to protect the rights of most-at-risk populations to access essential prevention, treatment, care and support services.

- **Further National AIDS Program Financial Sustainability:** Acknowledging the significant increases in state expenditures on HIV/AIDS during the period 2003-2008, Partnership Framework partners recognize the need for the CMU to continue to increase expenditures in order to provide sufficient funding to implement a targeted national program and sustain program outcomes, and determine to work collaboratively during the next five years to increase Government contributions while improving program efficiencies and cost effectiveness.

Participants acknowledge that achievement of the Partnership Framework goals may require resource flows beyond the ability of the CMU and the USG to support and understand that constraints on the availability of funding could lead to a review and revision of the Partnership Framework goals.

Section 5

Core partners for the Partnership Framework are the CMU and the U.S. Government.

For the United States Government, Partnership Framework leadership is to rest in the United States Ambassador to Ukraine, or his or her designate. Under this leadership, the U.S. interagency PEPFAR team which includes USAID, the U.S. Centers for Disease Control and Prevention, Peace Corps, and the Department of Defense are to be responsible for the development, implementation, and management and monitoring of the Partnership Framework. During the five years of the Partnership, USAID, Peace Corps and the Department of Defense expect to continue to support the expansion of targeted prevention services and related systems strengthening activities, including the scale up of medication assisted therapy programs, policy advocacy and development, and public and nongovernmental sector capacity building, and governance, program management and leadership development. HHS/CDC seeks to bring specialized expertise in epidemiology and surveillance and laboratory development.

Overall CMU leadership for the Partnership Framework is to rest in the Office of the Minister of Health, which is the Government of Ukraine agency charged with overall responsibility for the management, coordination and prioritization of all activities within the Government response to HIV/AIDS. The Minister of Health, as the CMU counterpart to the Partnership Framework, provides the senior, multi-

sectoral political and policy leadership and support needed to successfully implement activities included in the Partnership Framework. The MOH is to develop related arrangements with appropriate Ministries to facilitate collaboration on areas within the Partnership Framework.

The MOH charges the MOH Service against HIV/AIDS and other socially hazardous diseases to maintain operational coordination of the Partnership Framework Participants' activities on behalf of the CMU.

Considering that the GF ATM and UNAIDS are currently collaborating with CMU and USG in supporting the national AIDS response, it is anticipated that the UNAIDS coordinator in Ukraine and the GF ATM Portfolio Manager in Ukraine will take part in strategic and operative coordination, planning, realization and management of the Partnership Framework activities. Other donor stakeholders such as the Clinton Foundation, WHO, GIZ, UNODC and the International Renaissance Foundation, are considered Collaborating Partners to the Framework. In this, they are to be invited to participate regularly in Partnership Framework discussions and provide ongoing input into Framework planning, implementation and monitoring.

In the spirit of inclusive partnership and to reaffirm the importance of broad country level engagement, and acknowledging the contribution that the broader HIV/AIDS stakeholder community of UN Agencies, international and local NGOs and other implementing groups makes to achieving national program objectives, Partnership Framework core partners intend to engage regularly with these stakeholders to solicit their input, monitor progress and lessons learned on the program and ensure that the Framework is to be part of a coordinated, collaborative country level effort.

The Participants to the Framework acknowledge that if U.S. assistance is to be provided directly to the CMU under this Partnership Framework, CMU contributions should be expected to meet host country cost sharing requirements under U.S. Foreign Assistance programs.

Section 6

In implementing and managing this Partnership Framework, the CMU and the USG intend to be guided by the applicable domestic law on both sides.

Section 7

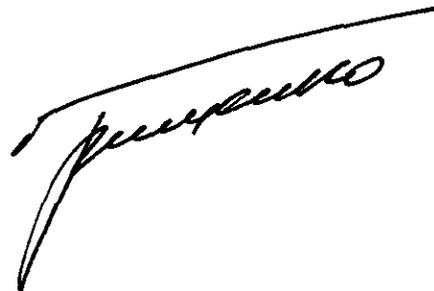
This Framework is to become operational on the day of signature and to remain operational for five (5) years. Either Participant may discontinue its participation in this Framework at any time, but should endeavor to give the other Participant at least six months written advance notice, through the diplomatic channel, of its intention to do so.

SIGNED at Washington this 15th day of February 2011 in English. A translation of the Partnership Framework into the Ukrainian language should be prepared and should be considered of equal status to the English text upon an exchange of letters between the Participants indicating conformity with the English text.

**For the Government of the United
States of America**

A handwritten signature in black ink, appearing to be "E. Portylo", written in a cursive style.

**For the Cabinet of Ministers of
Ukraine**

A handwritten signature in black ink, written in a cursive style, positioned below the text for the Ukrainian representative.