

Ensuring sustainability of Trust Points for Injecting Drug Users in Tashkent City, Uzbekistan, by World Vision Uzbekistan

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Issues

As elsewhere in the Commonwealth of Independent States, in the last decade, Uzbekistan experienced a rapid spread of HIV. Some officials believe that the officially registered number of cases is only the tip of the iceberg, and the real number could be many times the official figure. The HIV epidemic is mainly concentrated among high-risk groups in Uzbekistan which now has the largest and most dynamic HIV epidemic in Central Asia. Injecting drug use is the driving force of HIV epidemic which has its epicentre in the capital of Uzbekistan and surrounding districts. Fuelling the epidemic is an overlap between injecting drug use and commercial sex. Trust Points (TP) widely known as drop-in centre (DIC) is an effective way for engaging Injecting Drug Users (IDU) into Harm Reduction (HR) programming.

Although a good amount of evidence on effective operations of DIC is documented, little guidance is available regarding sustainability of such projects.

Description

World Vision Uzbekistan (WVU) started implementation of HIV project in Tashkent City in 2003. Establishing and making TPs operational for IDUs was the key component of the program. The WVU TPs are small anonymous rooms located within the premises of the district polyclinic in Tashkent. The TPs, as the name infers, are safe spaces where IDUs, sex workers and other marginalized groups can go to for assistance with various problems and issues affecting them. Clients who are unable to or do not want to come to the TP for services are met at their homes or at specified meeting places by the outreach worker or the volunteer. Since the volunteers are current drug users or sex workers, they have regular access to and provide a valuable personal network based services. Around ten TPs were created in the framework of project. The project facilitated unique harmonized multi-sectoral partnership with various governmental entities of Uzbekistan, including the Ministry of Health, the Republican AIDS Centre and the Tashkent City AIDS Centre. Through recognition of the qualities and competencies of each sector and exploration of innovative approaches to channel these for the common goal, the partners shared responsibilities during the program implementation. The government offered spaces for TPs within the Primary Health Care Institutions, legal support and staff while WVU provided capacity building opportunities for TP staff and the provision of harm reduction and drug demand reduction services. The harm reduction services included needle exchange, HIV pre and post test counselling, referrals to HIV testing and sexually transmitted infection services and psychological counselling.

Lessons learned

Critical success factors of TP sustainability are:

- **Governmental ownership over this project gained through equal partnership approach.** The important principle was equity in power and decision making dynamics, resource/capacity acquisition and utilization, ensured shared responsibilities and commitment for application of this initiative
- **Partner engagement from the very early stages of the project.** According to the project evaluation findings, it was one of the most successful projects in Uzbekistan that reversed the trends of the epidemic in Tashkent City with evidence base.

Next Steps

The interventions which require capital investments for creation and sustainable retention of physical spaces for HIV prevention, care and support programs are to be implemented in close partnership with local and national governments.