

Georgia CCM

Report of Oversight Committee

**Reporting Period:
September_November, 2016**

Introduction:

The report outlines the activities implemented by the Oversight Committee (OC) of Georgia Country Coordinating Mechanism (CCM) during September-November 2016. This includes the following:

- **84th CCM meeting where OC Chair presented Oversight activities and dashboard recommendations**
- **Meeting dedicated to the discussion of the HIV for Period 2 and TB dashboard for Period 9, September 26, 2016**
- **2 site visits: in LGBT Resource Center (October 12, 2016) and New Vector (November 1, 2016)**

CCM meeting

During the reporting period one CCM meeting was convened (84thCCM meeting, November 11, 2016).The current status of GFATM grants implementation was presented to the audience. The main directions of the oversight activities implemented during the period September – November, 2016 was presented by OC Chair. The dashboards for HIV period 2 and for TB period 9 with the recommendations of the OC have been shared and endorsed by the CCM

Oversight Committee Dashboard meeting

On September 26, 2016 the meeting of Oversight Committee dedicated to the discussion of dashboard HIV P2 and TB P9 was held. The recommendations of the OC are given below.
HIV Program

1. Further follow up and meticulous attention is required towards ensuring there are no disparities between the current and safety stock of 1 mg syringes. Comment: already addressed
2. Ensuring sufficient provision of good quality syringes and needles, especially to those HR sites that have a considerably high number of old, low-quality needles and syringes. In addition, in the future, purchases of needles and syringes that are considered and approved by PWIDs' themselves should be conducted. Comment: PR with GF's agreement started purchasing 1 ml syringes locally having prior consultations with the beneficiaries in order

to ensure the high quality of the product and beneficiaries' satisfaction. As suggested by PR the issue of further expansion of the list can be considered in the future.

3. Collecting and analyzing segregated data by age to see the HIV programme's coverage of young MSMs, as well as coverage of urban and rural target populations.

TB Program

1. The underachievement of some indicators (P3, P5, P6) is due to overall decrease of TB patients. Therefore, revision of current targets is suggested. Comment: The targets have been revisited for new TB grant under NFM grant.
2. The slight underachievement with regard to the percentage of previously treated TB patients receiving DST was due to the fact that several patients who failed the ongoing MDR TB treatment were assigned the new treatment regimen (pre-XDR or XDR TB), with no further need for first line drug susceptibility testing (DST).

Site Visits

The two site visits were implemented during the reporting period: the visit to LGBT Resource Centre conducted on October, 12, 2016 and the visit to "New Vector" - on November 1, 2016. During both site visits the following positive trends were revealed: effective communication with the PR, timely fund disbursement, effectiveness of using mobile ambulances for reaching underserved at risk populations, especially for those living in rural areas in Kvemo Kartli, further improvement of data collection and management (adoption of open access software tool - SyrEx by NCDC) is anticipated. During the site visit it was noted that in order to more effectively target and meet the needs of beneficiaries, a more systematic and institutionalized approach is required in terms of a comprehensive approach towards HIV prevention among PWID and their sexual partners. During both site visits concerns regarding tendering procedures challenging the participation of financially/organizationally weak CSOs (e.g. bank guarantee) were underlined by the participants. To address the problem, the LGBT Georgia tries to use modern means of raising funds, such as crowd-funding. However, the resources mobilized via crowd-funding were not enough for the bank advance for tenders. In September "New Vector" faced difficulties paying rent. This was caused by a bank delaying issue of advance payment guarantee to the GHRN (the rent was paid a month late). However, this problem has not affected the implementation of the project in any way. In the upcoming period, there will not be disruptions similar to this because the current programme (started in September 2016) already provides grants up until the end of December 2017. The highly stigmatized and discriminative environment existing in the country is a hindrance for LGBT Georgia hiring an office space for the implementation of its activities. Thus they were sharing their space with another organization, but, in line of extension of the organization's activities, this will not be sufficient to adequately implement the project.

Geographic accessibility to HIV preventive services for MSM in the regions remains problematic, especially considering the highly stigmatized environment in the country. In addition to the offices functioning in Tbilisi, Kutaisi and Batumi, opening of two more resource centers in Gori and Zugdidi

is planned for the upcoming year. The issue of attracting qualified staff was underlined during the site visit to MSM resource center. Most of the staff was hired on a part-time basis during the previous grant where the organization was serving as an SSR of Tanadgoma. This kind of arrangement is generally not suitable for attracting qualified staff and now as known several employees were hired on a full-time basis. (please refer for more information to Site Visit reports)

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