Georgia Country Coordinating Mechanism

Oversight Committee

Site visit to Tanadgoma Center of Information and Counseling on Reproductive Health, Telavi Office

September 22 , 2015

David Ananiashvili - Chair of the Oversight Committee

Irina Grdzelidze – CCM, Executive Secretary

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Eka Ruadze – NCDC PIU HIV GFATM M&E Officer

Lia Bitskinashvili- Tanadgoma Coordinator

Marina Gharibashvili - Tanadgoma Social Worker

Tengiz Giorganashvili – Tanadgoma Social Worker

Tamar Tushishvili – Tanadgoma Psychologist

Mariam Khatiashvili – Health Cabinet Doctor (SSR Telavi Health Cabinet)

FSWs

Purpose of the visit:

Assessment of the current status of implementation of GFATM funded GEO-H-NCDC program and identifying the reason of underachievement in coverage of FSWs and MSM. The coverage of FSW reached through HIV prevention programs was 68% in P4, though the SR has demonstrated relatively improved performance 73% in P5. The purpose of the site visit was to discuss the above mentioned to make corresponding conclusions and to issue recommendations for further improvement of the coverage data. PDI methodology proved to be effective among MSM in general. The same strategy was successfully tested among FSWs in Telavi. The PR and SR are continuously working on developing better strategies/methodologies for the NFM period.

The objectives of the visit:

- 1. Review of the challenges in process of the grant implementation
- 2. Review of the challenges of reaching the target beneficiaries
- 3. Discuss the optimal mode of cooperation with the PR

Methodology:

- Discussion with the Project Implementation staff existing challenges in the process of the grant implementation as well as discussion on ways and mechanism of improvement
- Interview with service receiver-patient
- Interview with SSR, Health Cabinet staff

David Ananiashvili presented the purpose of the visit and main features of the oversight to identify the gaps in the process of the grant implementation. Mr. Ananiashvili highlighted that OC can support grant implementers in finding optimal solution for problem solving during such monitoring visits.

Following topics were addressed while discussing the possible ways of improvement the indicator regarding the coverage of FSW.

- To continue to use PDI methodology among FSW as a successful strategy for better coverage of the target beneficiaries was highlighted ;
- To increase frequency of outreach visits, especially in relatively remote area from Telavi region ;
- To expand the geographical area for outreach visits as the need and demand from the beneficiaries of other communities is very high.
- The expansion of geographical areas requires the increase of the amount of fuel for additional travelling that needs to be discussed between PR and Tanadgoma head office
- It was mentioned by OC Chair the possibility of adding Hepatitis C testing to HIV test among target group could be further discussed with the purpose of increase the leverage of both programs.

- Improvement of the effective functioning of the VCT referral mechanism between Tanadgoma and the Health Cabinet was mentioned as key factor for providing better service for the beneficiaries.
- To ensure that medical service by the Health Cabinet for the beneficiaries those who visit the cabinet without referring from Tanadgoma is provided.
- To continue joint trainings, regular coordination meetings of Tanadgoma and Health Cabinet staff for analyzing of achievements and gaps with the purpose of improving of the service they are providing for the target beneficiaries
- Tanadgoma staff raised the issue regarding the need of increasing their capacities in the field of STIs by providing further trainings for them.

OC Chair asked regarding any challenges in terms of the cooperation with PR. Project coordinator mentioned that on programmatic level there is a smooth cooperation with the PR.

After meeting with Tanadgoma and Health Cabinet staff the monitoring team had meeting with two FSWs.. Both of them expressed their full satisfaction with the services received as well as qualification and professionalism of the staff. They have an opportunity to participate in the trainings, to receive informational package, medical check, condoms and psychological counseling. One of the beneficiaries expressed her willingness to attend more training with regards to build their capacity enabling to disseminate the adequate information to their peers. The beneficiaries mentioned that they regularly visit the center to receive the service based on their needs. The need for more trainings on STI was mentioned

Conclusion.

The attendees agreed on the following:

- To conduct additional outreach visits in remote regions after discussing the issue among Tanadgoma head office and the PR
- To discuss the possibility of proposing the beneficiaries Hepatitis C testing during HIV testing
- To conduct more regular coordination meetings between Tanadgoma and HCC staff

David Ananiashvili

Chair of the Oversight Committee

Irina Grdzelidze

Executive Secretary