

2nd Workshop
Identification of best practices
Helsinki, Finland
June 18-19, 2014

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| Reference | Workshop 2 Info 2 |
| Title | Protocol |
| Submitted by | Regional NGO Stellit |

Wednesday, 18 June 2014

1. Organizational and financial issues were discussed. This part of the meeting was chaired by Mr. Marek Maciejowski.

1.1. AIDS-Hilfe Hamburg e.V. position on the availability to be part of the HIV prevention project was discussed. On request of Mr. Marek Maciejowski Dr. Olga Kolpakova described to the participants of the meeting the current situation with the participation of partners from Germany in the project. As all the other project partners AIDS-Hilfe Hamburg e.V. has been contacted for the first time at the stage of the project development. Their role in the project and their part of the budget were discussed in details, the letter of commitment confirming their interest in the project has been received. After the project has been officially started, AIDS-Hilfe Hamburg e.V. has been contacted as all the others partner organizations, representatives of AIDS-Hilfe Hamburg e.V. were invited to take part in the first Steering Group meeting and First Workshop, which were held in St. Petersburg, November 27 – 29, 2013. Project coordinator from AIDS-Hilfe Hamburg e.V. Mr. Christian Szillat-Weichelt rejected to take part in both meetings because of intensive time schedule, necessity to organize important events related to December 1 and lack of human resources in organization. The decision was made that Protocols of both meetings will be sent to Mr. Christian Szillat-Weichelt and the organization will join the project activities later. Both Protocols have been sent to Mr. Christian Szillat-Weichelt as agreed. In January – April 2014 Mr. Christian Szillat-Weichelt has been contacted on the necessity of signing the contract on project implementation between the NDPHS Secretariat as a Lead Project Partner and AIDS-Hilfe Hamburg e.V. Again the role of AIDS-Hilfe Hamburg e.V. in the project was discussed, the decision was made that representatives of the organization won't take part neither in project steering group meeting and workshop in Helsinki, nor in the training for stakeholders in St. Petersburg (as it was planned at the project development stage) but will contribute to the needs assessment and to the development of the final leaflet within the project. Mr. Christian Szillat-Weichelt informed Dr. Olga Kolpakova that he is going to have a business trip to St. Petersburg within other project at April and they preliminary agreed to use this opportunity to meet and to discuss the cooperation within the project in details. It has never happened. In May Mr. Christian Szillat-Weichelt asked to extend the deadline for best practices collection within needs assessment stage of the project, the deadline has been extended till the middle of June. In the middle of June he informed Mr. Marek Maciejowski and Dr. Olga Kolpakova that he was not able to describe best practices and asked on if their organization should continue taking part in the project or should resign. Mr. Marek



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Maciejowski and Dr. Olga Kolpakova agreed to discuss it with project partners at the workshop in Helsinki.

After that participants of the workshop discussed two possible options regarding the participation of German partners in the project. One option was to write them an official e-mail and to ask them to resign from the project. The other option was to give the AIDS-Hilfe Hamburg e.V. the last chance, to set up final deadlines for the review of best practices and in case they do not follow them to ask them to resign from the project. The decision was made not to give the last chance and to ask AIDS-Hilfe Hamburg e.V. to resign from the project.

After that the possibilities for project partners to implement the work foreseen for AIDS-Hilfe Hamburg e.V. to ensure as little harm to the project as possible were discussed. The decision was made that the Finnish National Institute for Health and Welfare (THL) will do its best to ensure the work foreseen for AIDS-Hilfe Hamburg e.V. would be implemented in cooperation with their partners in Germany. Consequently, the budget allocated for AIDS-Hilfe Hamburg e.V. (4,000€) will, instead, be allocated to THL.

1.2. An interim financial report was discussed. Mr. Marek Maciejowski clarified with each project partner their expenses within the project up to date, submitted documents and clarified all the questions he had to each partner based on the information about project expenses they have submitted to the NDPHS Secretariat before the meeting. Each project partner has agreed with Mr. Marek Maciejowski on which documents should be provided to the NDPHS Secretariat.

The following main points important for all project partners have been mentioned:

- All the project partners in the nearest future should provide the NDPHS Secretariat with Time Sheets for project staff for May 2014;
- To confirm that focus groups moderators have fulfilled their work all the project partners should send to the NDPHS Secretariat the transcription of the focus groups and to mention for the focus groups moderator a number of hours equal to 2 working days at the section "Foreseen and actual staff costs" of the "Project finances" excel document distributed by the NDPHS Secretariat. No timesheets for focus groups moderators will be needed. All the fees paid to focus groups moderators should belong to the salary section in the budget;
- All the project partners should make sure that translation is an external service. In case the translation is made by the project staff project partners should discuss it with the NDPHS Secretariat;
- Finnish partners should translate key words in financial documents confirming project expenses before submitting them to the NDPHS Secretariat. Other project partners should translate key words only in case the NDPHS Secretariat will ask them to do so after reviewing the financial documents they have submitted;
- As required by the Grant Contract signed with the EU, reports shall be submitted in [euros] and may be drawn from financial statements denominated in other currencies on the basis of the Beneficiary's applicable legislation and accounting standards. For reporting, conversion [into euro] shall be made using the rate of exchange at which the contracting authority's contribution was recorded in the beneficiary's account. Costs incurred in other currencies than the one used in the Beneficiary's accounts shall be converted using the monthly Infoeuro on the date of payment.



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- In case project partners have used the wrong rate of exchange for salaries etc., they should recalculate all the payments using the correct exchange rate. After that correction payments could be made if needed (for example to correct the salaries to the project staff).

1.3. An interim narrative report was discussed.

The agreement has been made that all the project partners should submit to the NDPHS Secretariat before June, 27, 2014 brief description on how the information about the project has been disseminated.

Dr. Olga Kolpakova will be responsible for collecting from the project partners information needed to develop the draft version of the interim narrative report and will submit the draft of the interim narrative report to the NDPHS Secretariat at the end of July. Regional NGO Stellit will be responsible for the part of the interim narrative report related to the implementation of the Work Package 4.

All project partners have been asked to submit to the NDPHS Secretariat the questionnaire developed by the NDPHS Secretariat for the interim internal evaluation of the project.

2. Results of the needs assessment were discussed. This part of the meeting was chaired by Dr. Olga Kolpakova.

2.1. Results of focus groups with stakeholders who work with young migrants

Project partners made short presentation of results of the focus group conducted in their country/region. Ms. Evija Dompalma presented results of the focus group and interviews with stakeholders conducted in Latvia, Mr. Tomasz Malkuszewski – results of the focus group conducted in Poland, Ms. Inessa Vyshemirskaya – results of the focus group conducted in Kaliningrad, Dr. Olga Kolpakova – results of the focus group conducted in St. Petersburg. Each presentation contained brief information about focus groups participants, feedback on focus groups guide, and information on young migrants' needs in prevention programs. (All presentations are available at the Workshop web page: http://www.ndphs.org/?mtgs,hiv_project_workshop_2).

After that results of all 4 focus groups with stakeholders who work with young migrants were discussed. The following groups of young migrants important in the context of HIV and AI prevention at the NDPHS region were identified:

- Asylum seekers, illegal migrants;
- Migrants from Muslim countries, South-Eastern Asia, Sub-Saharan region should be a special target group as there is a cultural specifics of work with them and they mostly have very low knowledge on HIV and AI;
- Labor migrants;
- Foreign students;
- Compatriot people who have returned back to their home country from other countries.

HIV and AI prevention programs targeted at young migrants should include the following components:

- outreach activities to work with people at greatest risk;
- programs shouldn't be focused on HIV and AI prevention only and should include activities interesting for young people such as information on possible ways of spending free time, sport activities etc. – that will motivate young people to take part in the program;
- information materials developed in the native languages of migrant youth;



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- peer-to-peer components;
- training on how not to become a victim of ethnic violence and where to get social assistance;
- HIV and AI component: basic information, ways of transmission, testing, information on how person could protect him/herself;
- basic information on sexual health;
- information on where to get medical assistance if needed;
- information on STDs, hepatitis B and C, tuberculosis;
- facilities for rapid testing, access to the network of trusted doctors.

That is very important to train stakeholders who will implement HIV and AI prevention program, some elements could be conducted by migrants themselves or young trainers after special training (peer-to-peer components).

2.2. Results of focus groups with stakeholders who work with children and young people involved or at high risk of being involved into commercial sexual exploitation

All the project partners presented results of the focus group conducted in their country/ region: Ms. Evija Dompalma presented results of the focus group and interviews with stakeholders conducted in Latvia, Mr. Tomasz Malkuszewski – results of the focus group conducted in Poland, Ms. Inessa Vyshemirskaya – results of the focus group conducted in Kaliningrad, Dr. Olga Kolpakova – results of the focus group conducted in St. Petersburg. Again, in all the presentations brief information about focus groups' participants and feedback on focus groups' guide was provided, needs of children and young people at risk of being involved or involved into commercial sexual exploitation in HIV and AI prevention programs were described. (All presentations are available at the Workshop web page: http://www.ndphs.org/?mtgs,hiv_project_workshop_2).

After that project partners discussed if children and young people involved or at high risk of being involved into commercial sexual exploitation are at risk of getting HIV and AI in their countries, which subgroups of children and young people should be paid a special attention in the context of HIV and AI prevention at the NDPHS region and which components HIV and AI prevention programs targeted at this group of children and young people should include.

All the project partners have agreed that children and young people involved or at high risk of being involved into commercial sexual exploitation should be a special target group in the context of HIV and AI prevention.

The following subgroups of children and young people at high risk of being involved into commercial sexual exploitation or victims of commercial sexual exploitation should become target groups for HIV and AI prevention programs:

- In Poland: children and young people who stay in closed correctional institutions for young people (for those who don't attend schools, have substance abuse, problems with law etc.); children and young people involved into sex work, young MSM;
- In Finland: young sex workers, young migrants, young injection drug users, those who have violence experience;
- In Latvia: those who live in orphanages, have mental dysfunctions, children and young people from dysfunctional families etc. – they are all of the same priority;



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- In Kaliningrad: children who stay in closed boarding schools including children with intellectual disabilities, both boys and girls;
- In St. Petersburg: children who stay in social and rehabilitation centers and shelters, children and young people who came to the city from other regions/ countries without parents or guardians, children and young people from dysfunctional families.

HIV and AI prevention programs targeted at children and young people involved or at high risk of being involved into commercial sexual exploitation should include the following components:

- information about HIV and AI;
- block on assertiveness, choosing a partner, choosing the right moment to start sexual life, developing sense of responsibility;
- block on personal development, forming system of values etc.

There should be different programs for different age groups of children and young people (from 5 to 25 years old). Stakeholders should know how to communicate with youth on those issues. Internet could be used as a basis for prevention programs (especially for those who have problems with finding partners for new relations).

2.3. Results of the survey conducted among adolescents and young people experimenting with drugs in St. Petersburg, Kaliningrad, Latvia and Poland

Ms. Alexandra Luibimova and Ms. Veronika Odinkova presented main results of the survey (presentation is available at the Workshop web page: http://www.ndphs.org/?mtgs,hiv_project_workshop_2).

Participants of the meeting provided a feedback on survey results. All the project partners think that data are very interesting, will be useful in their future work and look realistic. The decision was made that Polish partners will provide to Stellit team more detailed information about types of institutions they have covered within the survey – there might be some mistakes in the database on the type of educational institutions.

3. Possibilities to develop joint articles for peer-reviewed journals were discussed.

The following decisions have been made:

- Project partners from Latvia and Poland are interested to take part in the development of a joint article, Kaliningrad and Finnish partners are not interested.
- At first one joint article based on a common data base should be published in a peer-reviewed journal and after that each national team could publish articles based on their national data. Thus, Polish team could make a short summary of research results for the newsletter issued by the AIDS Center.
- Possible journals where the joint article could be published are the following: Scandinavian Journal on Infectious Diseases (Anda has a publication there), International Journal of Drug Policy. In case it doesn't work with these journals, we could go to a bit less-known etc. until we find a journal which will be interested in this publication.
- The work will be coordinated by Regional NGO Stellit but project partners from Latvia and Poland will contribute. Thus, Latvian partners could help with looking for the literature for background, with finding evidences for some main points of the article etc.



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- Core authoring rules are the following: in a joint paper in a peer-reviewed journal all the main partners should be mentioned (1-2 persons from country, those who take part in the article development).
- Regional NGO Stellit team should develop a table to collect from each project partner information on the procedure of data collection (how many cities have been covered, how many institutions etc.).
- Each project partner should form a list of “insights”, “golden thoughts” which came to his/her mind during the research.
- Partners from Poland, Latvia and St. Petersburg should come with ideas on articles and then the project group chooses one for the main article and other themes will go for subarticles for future analysis. After that the draft concept note of the joint article should be developed.
- Everyone who publishes article based on the needs assessment results or presents the needs assessment results at any conference should inform Stellit about that.
- It would be good to register a dropbox for sharing the documents which will be needed to develop an article.

4. Possibilities to present the needs assessment results at the thematic conferences were discussed.

The following conferences have been mentioned:

- Annual AIDS conference (Barcelona);
- XXVIII IU STI Migration, recreation and sexual health;
- STI 2014 Leiden;
- Annual NDPHS Conference on drug and alcohol abuse (Moscow, November 2014) – Ms. Uliya Mihailova coordinates this conference and forms the program for Russia;
- Other conferences on public health, drug abuse, sex and sexuality.

Thursday, 18 June

5. Best practices in the field of HIV and AI prevention among children and young people at high risk of getting HIV and AI

5.1. Project partners presented best practices in the field of HIV and AI prevention among children and young people experimenting with drugs, children and young people involved or at high risk of being involved into commercial sexual exploitation, as well as migrant children and young people. Dr. Anda Karnite presented best practices available in Latvia, Mr. Tomasz Malkuszewski – best practices available in Poland, Ms. Outi Karvonen – best practices available in Finland, Ms. Inessa Vyshemirskaya – best practices available in Kaliningrad, Dr. Olga Kolpakova – best practices available in St. Petersburg (presentations are available at the Workshop web page: http://www.ndphs.org/?mtgs,hiv_project_workshop_2).

After that the situation in the field of HIV and AI prevention among children and young people at high risk of getting HIV and AI in all the project countries have been discussed. Main conclusions are the following:

- There are almost no prevention programs which include effectiveness estimation component conducted in accordance with academic standards;



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- Mostly prevention programs are implemented by NGOs so in most cases they are small-scaled, project based, sporadic and not stable;
- None of the partners was able to find an HIV and AI prevention program targeted at young people at high risk of getting HIV and AI which was published in a peer-reviewed journal.

5.2. The issue on which best practices in the field of HIV and AI prevention targeted at children and young people at high risk of getting HIV and AI should be included into the final leaflet was discussed.

Project partners have identified the following criteria which best practice should meet to be included into the final leaflet which is going to be developed within the project:

- Focus on an HIV and AI intervention among youth at high risk;
- Individual, group or community level prevention;
- Conducted in Europe, with special focus on the NDPHS;
- Program is regarded as effective by a group of experts taking part in the project *Building capacity in HIV prevention targeted at youth at risk in the Northern Dimension area*.

The decision was made to include into the leaflet all the programs identified by project partners and presented at the workshop. Experts' opinion on the prevention program "LaDya" have been divided: some experts thought the program does not meet the WHO standards for reproductive health interventions and thus should not be included into the final leaflet, other experts thought the program could be included into the final leaflet with special remarks. The decision was made to come back to this issue on the stage of the final leaflet development.

5.3. Elements of best practices which are going to be piloted in St. Petersburg and Kaliningrad within the project were discussed.

Based on the results of the presentations St. Petersburg team has decided that it might be interesting to pilot some elements HIV and AI prevention programs which are implemented in vocational schools in Latvia including peer-to-peer component and some elements of drug abuse prevention program implemented in Poland. The decision was made that colleagues from Poland and Latvia should send to Stellit more detailed information about those programs and after that the final decision about piloting will be made.

Kaliningrad team will need more time to discuss which elements of prevention programs they will pilot. The decision was made to organize Skype between Stellit and Yla to discuss it.

6. Training program for stakeholders working with young people experimenting with drugs, migrant youth, children and young people involved or at high risk of being involved into commercial sexual exploitation

6.1. Knowledge, skills and competences stakeholders should have to work effectively in the field of HIV and AI prevention among children and young people at high risk of getting HIV and AI were discussed. Such experts should:

- be fluent in HIV and AI prevention;
- be familiar with interactive methods of HIV and AI prevention work;
- have knowledge and skills of effectiveness estimation (be able to use sample questionnaires provided by representatives of an academic community, to obtain, proceed and analyse data);



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- be tolerant and respect diversity including diversity in sexuality;
- share harm reduction approach;
- implement prevention programs taking into account gender specifics;
- have effective communication skills.

6.2. Training participants

According to the project proposal it is expected that project coordinators from Finland, Latvia, Poland, St. Petersburg and Kaliningrad will take part in the training and besides that 2 stakeholders from Finland, 2 stakeholders from Latvia, 2 stakeholders from Poland, 6 stakeholders from Kaliningrad and 7 stakeholders from St. Petersburg. The decision was made to invite to the training stakeholders who already implement HIV and AI prevention programs among children and young people at high risk of getting HIV and AI and who on the one hand could share best practices with other training participants and on the other hand could learn new methods which will make their work in this field more effective.

Possible participants from Poland: Mr. Krystian Pawel Silakowski (expert on the program for prevention of psychoactive substances, health care psychologist and drug addiction therapist) + Katargyna Fyschek (trainer working at schools, sexologist).

Possible participants from Finland: Ms. Kristiina Hannila and 1 volunteer from her group (they work with young migrants, victims of abuse, experimenting with drugs)

Possible participants from Latvia: representatives of Red Cross, Papardes Zieds (they work in vocational schools and prisons, with young people experimenting with drugs and at risk of being involved into commercial sexual exploitation).

Possible participants from St. Petersburg: representatives of NGO Stellit, of NGO "Vzglyad v buduswee" and of vocational school which will pilot elements of prevention program.

Possible participants from Kaliningrad: will be identified later (depending on the decision of which elements of best practices will be piloted).

6.3. Content of the training program

The decision was made that all the training participants will be fluent in the field of HIV and AI. The training program will include 3 main blocks: information about the project and needs assessment results, master classes on best practices of HIV and AI prevention in different groups of children and young people at high risk of getting HIV and AI, block on estimation of the effectiveness of HIV and AI prevention programs.

The decision was made not to separate the participants of the training in 3 groups according to the group of children and young people at high risk of getting HIV and AI they work with. In most cases similar methods of prevention work are applicable to different groups of children and young people at risk. Besides that the same expert often works with several groups of children and young people at risk.

Experts who take part in the training will conduct master classes to share their best practices in the field of HIV and AI prevention. Possible topics of master-classes (to be confirmed):

Poland:



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- Preventing risky behaviors under the influence of psychoactive substances in the context of HIV and AI prevention;
- Interactive methods of HIV/ STI prevention in secondary and high schools.

Latvia:

- Peer-to-peer component as a part of HIV and AI prevention among children and young people at risk (2 master-classes).

Finland:

- Sexual counseling and low threshold services as tools for HIV and AI prevention among young people at risk.

Kaliningrad:

- will identify later.

St. Petersburg:

- peer-to-peer methods of HIV and AI prevention;
- HIV and AI prevention among migrant youth.

Each session will take approximately 1,5 hours.

Regional NGO Stellit team will develop a draft training program, will send it to all project partners. Project partners will discuss and confirm experts' availability and will ask experts to write 0,5 page description of their master-class to make sure that the methods of work which will be presented will be different and experts won't overlap.

6.4. Dates of the training, additional training day on piloting of elements of best practices and of Steering Group meeting

The training will take 3 days. One additional day will be organized for Russian experts who will be involved into piloting. And one additional day will be allocated for the Project Steering Group meeting. The decision was made to conduct all the events on the week from September, 28 to October, 3:

September, 28 – project coordinators arrive;

September, 29 – Project Steering Group meeting, participants of the training arrive;

September, 30 – October, 2 – training, participants of the training and project coordinators from Finland, Latvia and Poland leave;

October, 3 – additional training day for St. Petersburg and Kaliningrad team who will pilot elements of HIV and AI prevention programs.

6.5. Next steps and deadlines

June, 23 – June, 27 – project partners from Latvia and Poland check the availability of experts from their countries for the training, NGO Stellit team develops draft training program.

June, 30 – July, 4 – experts who take part in the training describe their master-classes (half of page), experts from Finland do it at the end of August.

September, 15 – all the project partners provide to Stellit team materials for handouts in English and in Russian.



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July, 14 – project partners send to Stellit team ideas for articles and “golden thoughts” on needs assessment results.



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