



## Center for Information and Counseling on Reproductive Health - Tanadgoma

# Strategic Plan for 2020 – 2022

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Tbilisi, Georgia*

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## **Acronyms**

AIDS – Acquired Immune Deficiency Syndrome

CCM – Country Coordinating Mechanism

CSE – Comprehensive Sexuality Education

CSO – Civil Society Organizations

EECA – Eastern Europe and Central Asia

FP – Family Planning

GBV – Gender Based Violence

HIV – Human Immunodeficiency Virus

HLS – Healthy Life Skills

LGBT – Lesbian, Gay, Bisexual, Transgender

MSM – Men who have Sex with Men

PLHA – People Living with HIV/AIDS

PUD – People who Use Drugs

SRHR – Sexual and Reproductive Health and Rights

STI – Sexually Transmitted Infection

SW – Sex Worker

TB – Tuberculosis

TGF – The Global Fund to fight AIDS, Tuberculosis and Malaria

## Introduction

This document presents a 2020-2022 strategic development plan of Georgian non-governmental organization "Center for Information and Counseling on Reproductive Health – Tanadgoma". During elaboration of the plan, Tanadgoma underwent consultations with the representatives of the target populations, as well as with several key stakeholder organizations, in order to ensure relevance of the strategic plan to the existing environmental needs and demands. Also, these consultations aimed at supporting compliance of the plan with the main tendencies of programming and funding in the country. Strategic plan was approved by the General Assembly of Tanadgoma on 18th of October, 2019.

## Brief history of the organization

The full legal name of organization is "Center for Information and Counseling on Reproductive Health Tanadgoma". Association Tanadgoma is a non-profit organization that performs its activities according to Georgian Constitution, Georgian Civil Code and own Statute (article 1.2. of the Statute, new edition (2011)).

Tanadgoma was created on the basis of MSF Center - informational-counseling center established by international humanitarian organization "Medecins Sans Frontieres" (MSF) Greece. Before completing its mission, MSF Greece accepted a suggestion from the local staff to turn MSF Center into a Georgian Non-Governmental Organization named "Tanadgoma" (Support), which aimed to maintain sustainability of on-going projects, carry on and broaden activities of MSF Center. On October 16, 2000 Tanadgoma was registered as an association (hereinafter 'Association').

Association is allowed to perform all activities that are not prohibited by Georgian law, among them income-generating activities according to the law. The profit from income-generating activities cannot be shared among the members of Association; it should serve achieving the objectives of Association.

## Vision and mission

Tanadgoma's **vision** is physically and mentally healthy society, where human right to health is protected, sexuality education is a part of education system, citizens have access to effective reproductive health services, hence spread of infectious diseases is hindered, number of abortions is decreased, use of family planning methods is high, specific attention is paid to high risk behavior groups (key populations), accordingly, psychological problems related to these topics are less prevalent and psychosocial rehabilitation services are widely available.

In order to realize this vision, **the mission of Association Tanadgoma is to improve the physical and mental health of Georgian population** through implementing prevention, educational, diagnostic and rehabilitation programs, as well as advocacy of these programs. Also, Tanadgoma provides technical support and expertise to improve capacities of the relevant organizations, communities and other stakeholders.

Tanadgoma shares and conducts its activities based on the following principles:

- All human beings are equal despite their race, sexual orientation, gender identity, religious affiliation or ethnic origin;
- Gender, human rights and non-discrimination are cross-cutting issues in organization's work.

Tanadgoma works throughout the country. Services of Tanadgoma are accessible for general population of reproductive age, however, the organization gives special focus and elaborates proactive programs for women and vulnerable, high risk behavior groups (key populations): men who have sex with men – MSM, People who Use Drugs – PUDs, sex workers – SWs, young people, prison inmates, LGBT community, victims of trafficking, people living with HIV, internally displaced persons – IDPs, etc.

**Work of Tanadgoma consists mainly of the following activities and services:**

- Providing medical, psychological and social support to socially unprotected groups of population, with specific focus on Sexual and Reproductive Health and Rights, HIV/AIDS, STIs, viral hepatitis, Tuberculosis, etc;
- Creating and distributing informational materials concerning public health issues;
- Primary screening on STIs/HIV/Hepatitis B/C through mobile laboratories;
- Assistance in referring target population to the appropriate medical facilities;
- Providing psychosocial rehabilitation and re-socialization services through Social Bureaus, rehabilitation center, social enterprise as well as self-support groups, Cognitive-Behavioral Therapy, 12 steps program etc.;
- Conducting research, conferences, training and seminars on different medical, psychological and social issues;
- Collaborating with mass media, focusing on Health Care and psychological problems in order to spread the information, advocate and form the public opinion;
- Collaborating with governmental and non-governmental organizations and conducting joint projects;
- Providing consultancy and technical support to community organizations and civil society organizations according to Tanadgoma's fields of expertise;
- Advocacy for improved SRHR and rehabilitation/re-socialization of vulnerable groups of population through collecting and presenting evidence-based information, conducting policy dialogues and elaborating collaborative plans with the relevant non-governmental, state and international stakeholders.

## **Geographic coverage**

As of 2019, Tanadgoma has a central office in Tbilisi and 4 branches - in both West and East regions of Georgia: in Batumi (Adjara region), Zugdidi (Samegrelo region), Kutaisi (Imereti region) and 1 center in East Georgia – Telavi (Kakheti region). Besides, in 2016 Tanadgoma established a rehabilitation center for people with addiction problems in Gremi, Kakheti region.

## Context analysis

### Political, legislative, economical and social environment

During the recent three years there were no major changes in the Georgian political context, which would affect dramatically Tanadgoma functioning.

Below are some developments that happened on national level and are relevant to the organization:

- Financial crisis and devaluation of Georgian Lari has influenced overall economic situation in the country. Devaluation that took place in the end of 2018 and during the whole 2019 is especially worth mentioning. Dire economic situation so far has not been critical to the organization. However, Tanadgoma received financing from donors in various currency and there is a threat of additional expenses within the projects (due to frequent fluctuation of the exchange rates), which will not be reimbursed by donors. Taking into consideration financial crisis and decreased donor financing in the region, during the recent years Tanadgoma managed to diversify funding, mainly through raising funds from new donor organizations and through decreasing The Global Fund's share of organization's funding from 60% to 45%.
- In the process of transition from The Global Fund financing to the state funding it is important that the state takes over the commitments currently implemented by The Global Fund. Big share of the treatment and diagnostics has already been taken by the state, however HIV prevention among the key populations is still on TGF funding. Hence, it is vital that the civil society stays active and implements effective advocacy and communication with the state for mobilizing finances for prevention.
- In 2017 Parliament of Georgia approved the new statute of Gender Equality Council of the Parliament of Georgia and a new action plan for 2018-2020. Important steps were undertaken during the recent years in terms of violence towards women and domestic violence. The legislation has been amended and punishment for domestic violence has become stricter. As a result of recommendations of the Public Defender of Georgia, at the Ministry of Internal Affairs an Office of the Coordinator of Witnesses and Victims was created, a new checklist to assess risks in domestic violence incidents was created and launched, which is an important guarantee for victims' security and prevention of repeated violence.
- In 2018 Georgian Public Defender's Office, with support of UNFPA, conducted a national study of Sexual and Reproductive Health and Rights. The study demonstrated that family planning services are not fully integrated in the primary healthcare. Consequently, there is no comprehensive and systemic approach towards provision of family planning information, education and services, which creates important accessibility barriers for women. Also, access to safe abortion remains a problem.
- In 2018, the CCM of Georgia approved the National HIV/AIDS Strategy and based on it a new concept for 2019-2022 HIV program was submitted to GFATM. The country's 3-years HIV program was approved in 2019, with funding of 9 438,000 \$ for 2020-2022.

- Adjara Regional 2019-2023 HIV Strategy was developed based on the recommendations of UNAIDS, WHO and GFATM. Working on strategy started in 2018 and the document was finalized in 2019.
- In 2017, the “National Maternal & Newborn Health Strategy 2017-2030” was adopted, with a significant focus on reproductive health, sexual education and youth SRHR issues.
- During the last 3 years, there have been frequent changes of ministers and other senior staff in the Ministry of Education, Culture, Science and Sport of Georgia. These were accompanied by changes in the management structure within the Ministry and a wave of important reforms in the field of education was announced each time. After appointing of the current Minister some reforms were planned. However, the specific details of the expected reforms are still unknown. Yet, the process of introducing Healthy Life Skills Education into the education system continued. By the end of 2019, the standards including HLS education were approved for 9th grade in subjects “Biology” and “Citizenship”. Also, in 2018, the Department of National Curriculum at the Ministry started working on teachers’ roadmap for subjects “Biology” and “Citizenship”.
- Hepatitis C elimination program continues in Georgia. In 2019, as a result of changes to the program, along with treatment, all types of diagnostic procedures became free of charge for all beneficiaries.
- National Drug Policy Platform was created in 2017. The NGO sector, along with the Parliamentary Committee on Health, was actively involved in the process of drug policy changes. However, in 2018, for political reasons, the government slowed down and delayed the discussion on drug policy liberalization. The platform is no longer active and plans for 2019-2020 depend on a rapidly changing political environment.
- As a result of the active advocacy actions of Tanadgoma and its partners, the Tbilisi City Hall signed two important documents - the Paris Declaration and the Zero TB Declaration. With these signatures, Tbilisi City Hall joins the world's leading cities in combatting HIV and TB and recognizes the importance of these problems at the municipal level.

## **Demand**

Tanadgoma periodically scans the environment to identify needs or demands within the scope of organization's interest. Some of these needs remained the same as during the previous strategic cycle, but there are some additional and/or changed needs as well. The following will be addressed to some extent by the present strategy:

- Introduction of sexuality education (called Healthy Life Skills education in Georgia) started in 2014. In 2017-2019, Tanadgoma continued active collaboration with the Ministry of Education. Our efforts, together with the UNFPA, were focused on the following: revising the national curriculum, working with authors of selected books, piloting lessons with innovative teaching techniques in selected schools, developing guidelines for teachers and developing information-educational materials for parents. Besides, at the request of the Ministry, Tanadgoma got involved in piloting of the “New School Model” and training of coaches on SRHR topics. It is expected that Tanadgoma will be asked to engage in follow up of this model, since the Ministry plans its expansion.
- Family planning has been largely ignored in the last decades in Georgia. Information on family planning, as well as access to its services is still low. In 2017-2019, Tanadgoma intensified the promotion of family planning issues through various channels. Special

focus was made on the media component and awareness raising among the representatives of the state structures and journalists. Tanadgoma will continue this direction in the future as well.

- Gender-based violence and discrimination remain a problematic issue in Georgia. There is no unified standard procedures and methodology for collection and processing statistical data on cases of domestic and other violence against women. The problem of effective involvement of social workers in domestic violence cases still remains unaddressed due to the shortage of social workers and overload with scope of work per each social worker. The efforts of state and non-governmental sectors are not sufficient and the needs of victims of violence and other vulnerable women remain unmet.
- According to studies conducted by Tanadgoma and its partner, the prevalence of HIV and other STIs among MSM has been dramatically increasing during the recent years. This situation, as well as prevention of other HIV-related diseases (viral hepatitis, tuberculosis, etc.) requires to be adequately addressed.
- According to WHO and national data, there has been a decline in TB prevalence rates in Georgia in recent years, though the rate is still significantly higher than in the EU region. Besides, there is an increase in XDR-TB cases in our country (from 15% in 2017 to 18% - in 2018). Therefore, early detection of TB cases, public awareness and treatment adherence remains a persistent issue where Tanadgoma will be actively involved in coming years. It is worth mentioning that there is demand for more social and psychological services in the TB program. Tanadgoma has gained sufficient experience in that field and will try to fill existing gaps.
- There is dramatic lack of psychosocial rehabilitation and re-socialization services in Georgia for various vulnerable populations (prisoners, probationers, IDUs, women affected by reproductive system cancers, PLHIV, victims of gender-based violence, etc.). Both state and non-state actors admit that the demand for those services is very high. Tanadgoma will actively work for promotion, development and institutionalization of such services.
- The improvement and expansion of psychosocial rehabilitation and re-socialization programs is directly linked to reforming of drug legislation in the country. The drug policy platform is no longer active due to political reasons. However, Tanadgoma will participate actively if the process revitalizes.

## **Funding (donors, government)**

In 2017-2019, the trend in decline of international funding has become more visible. For many donors, healthcare is no longer a priority as Georgia shifted from low-income to middle-income countries' list. Besides, funding for service provision becomes less of a priority for donors. In the recent years, prevention of HIV/AIDS and STIs was one of the most well-funded areas of Tanadgoma's work. Much of this funding came from TGF. However, this funding is planned to be replaced by state funding by 2023, but the mechanisms, exact amount and other conditions are still unknown. Therefore, already during the previous strategic cycle, Tanadgoma started to develop and strengthen other areas of its work, such as expertise in SRHR and mental health, research, advocacy and networking.

At the same time, other issues, such as providing technical assistance to community organizations, promoting sexuality education, combating gender-based violence, stigma and

discrimination, as well as psychosocial rehabilitation and re-socialization, have better perspectives for funding from donors.

With decreased funding opportunities, as in the previous years, there will be very high competition for funding among NGOs. Taking into account this increased competition, Tanadgoma shall further strengthen and present its expertise on the regional level. Practical steps in this direction have already been taken, and during 2018 and 2019 Tanadgoma experts were engaged in provision of technical expertise in countries of EECA region. Offering innovative methods to work on SRHR issues is another strong point for Tanadgoma to overcome the increased competition on SRHR market. In this regard, institutional funding can help Tanadgoma to strengthen the human resources, acquire new knowledge and implement it in practice.

It should be also noted that the state health budget is increasing and there are perspectives of improvement for cooperation between state and non-state actors in order to gain access to public funds. Such cooperation will be especially important after TGF withdraws from the country. However, serious advocacy work should be done to introduce and promote effective social contracting mechanisms in the country.

During the recent years, there has been a trend of funding projects with regional scope. Tanadgoma has the strong and long experience of receiving such funding. In addition, Tanadgoma is actively represented in various regional or international networks and coalitions, which provides for cooperation and fundraising on regional level.

## Organizational analysis

Strengths	Weaknesses
<ul style="list-style-type: none"> <li>• Organizational experience in the field of SRHR and psychosocial rehabilitation;</li> <li>• Being well-known and having good reputation;</li> <li>• Broad network of partners;</li> <li>• Qualified personnel in the field of service provision and working with vulnerable populations;</li> <li>• Access to target groups;</li> <li>• Innovation-oriented and organizational openness</li> <li>• Material and technical resources being owned by organization</li> <li>• Wide geographical coverage</li> </ul>	<ul style="list-style-type: none"> <li>• Total dependence on donors' funding;</li> <li>• Less experience and practice in public relations;</li> <li>• Rarely renewed human resources;</li> <li>• Advocacy experience is increasing, but still needs development</li> </ul>

## Current programs and services

In 2014-2016 Tanadgoma has been implementing two programs – Sexual and Reproductive Health and Rights program and Mental Health program. The first program was aimed at promotion of SRHR issues through coordinated advocacy and improving access to certain services. Mental Health program was more oriented towards direct provision of services and contributing to improved access and institutionalization of services. Despite the fact that in 2017-2019 the organization dedicated more time and focused more on expert and advocacy work, provision of the services was still an important part of both programs. These services are: raising awareness and educating key populations and general population on SRHR issues; prevention of HIV infection and STIs among general population and key populations; informing women of reproductive age about family planning methods; prevention of sexual and gender-based violence among vulnerable women. In the frames of the Mental Health program Tanadgoma continued provision of psycho-rehabilitation services in 4 cities, started working on national concept and action plan of psychosocial rehabilitation with involvement of state and non-governmental organizations. However, social enterprise ceased functioning. It is worth mentioning that under this program Tanadgoma launched art therapy – working on clay. As of 2019, the organization conducts the following activities targeting the following target groups:

Target groups	Services
General population of reproductive age	Anonymous and confidential hot line, face to face and online counseling; free of charge and anonymous testing on HIV; free dissemination of informational materials; Public campaign for promotion of Family Planning; mobile phone application on Family Planning, informational campaign about Tuberculosis.
Key populations: CSWs, MSM, PUDs, prisoners	Anonymous and confidential hot line, face to face and online counseling; outreach; free of charge and anonymous testing on HIV, hepatitis B and C; free of charge and anonymous testing and treatment of STIs; free dissemination of informational materials and condoms/lubricants; Peer education, educational and community mobilization meetings/training; psychosocial rehabilitation of prisoners and IDUs.
Youth	Anonymous and confidential hot line, face to face and online counseling; Peer education, educational meetings/training; free of charge and anonymous testing on HIV, hepatitis B and C; free dissemination of informational materials and condoms.
People personally affected by HIV/AIDS	Conducting self-support groups in prisons and psychological support groups for PLHA MSM.
People personally affected by Tuberculosis	Treatment adherence support – external services; support of a psychologist, a social worker and a peer educator; supporting community activism development – informational meetings for identifying

	needs; informational work with patients and their families.
Victims of GBV, discrimination and trafficking	Anonymous and confidential hot line, face to face and online counseling; free dissemination of informational materials and condoms, psychological support; community mobilization of vulnerable women for better access, advocacy and use of services of protection against discrimination and violence.
LGBT, SW and PUD community organizations	Providing technical support, consultancy, assisting in organizational and program development within Tanadgoma competence.

## 2020 – 2022 Strategic Development Plan

In 2019 Tanadgoma elaborated a three-year strategic development plan for 2020-2022. During this period, the organization plans to continue implementation of the three strategic priorities (two – programmatic and one organizational) defined in the previous strategic cycle. Consequently, in the plan of 2020-2022 there are three identified strategic priorities:

- 1. Sexual and reproductive health and rights**
- 2. Mental health and**
- 3. Organizational development.**

Strategic goals, objectives, major lines of action and expected results according to these strategic priorities are outlined below:

### 1. Sexual and reproductive health and rights program

#### **Strategic goal 1:**

**Contribute to promotion of Sexual and Reproductive Health and Rights issues in Georgia.**

#### **Outcomes:**

- **State prioritizes SRHR issues: state funding for SRHR has increased**
- **CSE<sup>1</sup> is integrated of the school curriculum**

#### **Indicators:**

- State engagement in SRHR issues is enhanced
- State funding for SRHR issues has increased by 10%
- CSE standards for upper grades are approved
- Approved textbooks for all grades include SRHR topics
- Knowledge of SRHR topics is mandatory for the teachers of biology and civic education

#### **Objectives:**

- 1.1. Advocacy and promotion of Sexual and Reproductive Health and Rights both in Georgia and on the regional/international level.**

Tanadgoma already started advocacy activities regarding SRHR, specifically regarding CSE and FP, in 2015-2019. Strengthening of this direction is one of the organization's strategic priorities for the next strategic cycle. During 2020-2022 this direction will be expanded especially with support and cooperation with the local partner CSOs as well as international partners. Various types of research, in which Tanadgoma has extensive experience, will be used as basis for advocacy on the national level, and possibilities for using international advocacy mechanisms will be also

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<sup>1</sup> It shall be mentioned that, as in some other countries, "Comprehensive Sexuality Education" is not a term used by Georgian officials, it is rather "Healthy Life Skills Education". Recently, suggested by UNFPA, another broader term "Healthy Life Skills and Reproductive Health and Rights Education" might be also used in this regard.

sought. More attention will be paid to communication component of advocacy – a communication strategy will be elaborated with a main goal of informing society on SRHR issues and forming a positive public opinion. SRHR coordination platform established by Tanadgoma will play an important role in joint advocacy.

Another dimension of this direction is providing technical assistance on SRHR issues to community groups, community and civil society organizations. During 2017-2019 Tanadgoma has gained some experience in provision of regional technical expertise and consultancy on SRHR, and in the next 3-years period these activities will expand.

**Lines of action:**

- Maintaining and strengthening strategic partnership with the organizations working on SRHR for increased advocacy efforts – functioning of SRHR coordination platform;
- Advocating for SRHR issues at the local, central, regional and international levels through meetings, roundtables, presentation of needs' assessments among vulnerable populations;
- Elaboration and implementation of communication strategy for promotion of SRHR issues;
- Seeking opportunities to assist CSOs, especially women's and community organizations, in development of SRHR knowledge and skills;
- Cooperate with various stakeholders on regional and international levels through engaging in technical assistance as well as participation in joint regional and international projects/programs;
- Improving access to Family Planning information.

**Expected results:**

- **SRHR topics are systematically studied, problems are identified and reacted upon in cooperation with the various stakeholders.**
- **SRHR topics are positively and correctly covered by media.**
- **Tanadgoma is acknowledged as expert organization on SRHR issues.**
- **General population, especially women of reproductive age have access to FP information.**

**1.2. Cooperate with state and non-state stakeholders to contribute to incorporation of Comprehensive Sexuality Education into the education system of Georgia.**

This direction is one of the main strategic priorities of Tanadgoma. Since achieving palpable success is a long process, incorporation of CSE into educational system cannot be implemented in 3 or even 5 years. By the end of 2019 SRHR topics were partially incorporated into the educational standards of up to 10<sup>th</sup> grade. Main activities during 2020-2022 will stay the same, namely, Tanadgoma will continue already established cooperation with main stakeholders in the CSE field, such as relevant UN agencies and international organizations, as well as with CSOs active in the SRHR. Tanadgoma-established coordination platform will continue working and

conducting regular meetings, where state representatives will also be invited based on necessity. This cooperation will be combined with advocacy targeting decision makers and institutions, such as relevant parliamentary committees and higher management level at the Ministry of Education. Initiatives of the previous strategic cycle (e.g. parents' courses, communication with the relevant structures for teachers' qualification raising, meetings with the textbooks authors, monitoring of the approved textbooks, etc) will continue also during 2020-2022. Planned research of factors underlying attitudes towards SRHR education will help Tanadgoma in conducting targeted awareness raising and information campaigns both through media and through other channels – training, working meetings, etc.

**Lines of action:**

- Cooperation with main stakeholders in the CSE field, such as relevant UN agencies and international organizations, as well as with CSOs active in the SRHR;
- Cooperation with state structures: participation in the Ministry of Education and Science working groups, contributing to elaboration of the textbooks and teachers' qualification raising on SRHR;
- Elaboration of communication strategy for promotion of CSE;
- Conducting awareness raising of different groups, such as school headmasters, teachers, young people and their parents, as well as general population, on CSE.

**Expected results:**

- **SRHR issues are part of the school curriculum;**
- **Approved school textbooks include SRHR topics;**
- **Teachers' qualification courses include SRHR topics;**
- **CSE is positively and correctly covered by mass media.**

**1.3. Prevention and/or screening of STIs, HIV, TB, viral hepatitis and oncological diseases of Reproductive System among vulnerable populations.**

Providing prevention services to general population as well as to so-called key populations has been one of the main directions of Tanadgoma since its establishment. However, analyzing both the environment and the organization, already during 2017-2019 Tanadgoma focused more on advocacy, technical expertise and support to the prevention, especially in the light of transition of HIV program from the GFATM to state funding. During the previous strategic cycle Tanadgoma started a new initiative in Tuberculosis, which, apart from working on adherence, includes development and technical support provision to the community organization.

Tendency of focusing less on services will continue in the strategic cycle of 2020-2022, however, service provision may still be maintained if considered vitally important both for the target populations and for advocacy purposes. Access to services and their quality assurance, also, providing technical expertise and support to communities during service provision will also be one of the main focuses under this direction. Thematic area is very broad and includes topics such as: HIV infection, STIs, viral hepatitis, Tuberculosis, safe sexual practices – promotion of condom use, oncological diseases of reproductive system etc. as well as psychological counseling, support and case management related to the topics listed above.

**Lines of action:**

- Provision of preventive and/or screening services for STIs, HIV, TB, viral hepatitis and oncological diseases of Reproductive System among vulnerable populations
- Advocacy for approval of HIV prevention standards for vulnerable populations and conducting prevention activities based on approved prevention standards
- Advocacy for state funding of HIV prevention services
- Integrating external support services (both for treatment adherence and prevention among general population) into national Tuberculosis program

**Expected results:**

- **Prevalence of HIV among key populations is not increased by 2022;**
- **External support services (both for treatment adherence and prevention among general population) are integrated into national Tuberculosis program and implemented by CSOs**
- **Access to prevention services is maintained for the vulnerable populations according to the approved standards**
- **Beneficiaries are satisfied with the quality of services provided.**

**1.4. Contributing to elimination of sexual and gender-based violence and discrimination.**

This direction was first included in 2017-2019 Strategic Plan as an objective, although Tanadgoma has been previously working on prevention of and awareness raising about sexual and gender-based violence through its various programs targeting vulnerable women. During 2020-2022 the organization intends to address these topics more consistently and do not limit work only with violence against vulnerable women. This implies strengthened partnership with ally organizations working on this issue, establishing a referral system for GBV services. As for community groups of vulnerable women (e.g. sexual, religious, ethnic or other groups), working and partnering with them, as well as provision of technical support will continue in the coming strategic cycle.

**Lines of action:**

- Support provision of free legal, medical and psycho-rehabilitation services to women victims of GBV and discrimination;
- Capacity building and mobilization of vulnerable women for improved advocacy for their rights;
- Cooperation with the organizations working on violence prevention and providing related services for establishment and better functioning of the referral system.

**Expected results:**

- **Improved access to and use of existing services by victims of sexual and gender-based violence;**
- **Strengthened and mobilized community groups of vulnerable women with technical capacities for advocacy of their human rights;**
- **Established and functional referral system.**

## **2. Mental Health program**

### **Strategic Goal 2:**

**Support access to quality psychosocial rehabilitation and re-socialization services for vulnerable populations.**

### **Outcomes:**

- **Tanadgoma Psychosocial rehabilitation and re-socialization model for vulnerable populations is successfully functioning;**
- **Number of psychosocial rehabilitation and re-socialization services in Georgia has increased.**
- **State supports and partially finances psychosocial rehabilitation.**

### **Indicators:**

- **Increased number of psychosocial rehabilitation and re-socialization services**
- **Tanadgoma psychosocial rehabilitation and re-socialization model for vulnerable populations is partially funded by the government.**

### **Objectives:**

- 2.1. Ensuring provision of sustainable and regular psychosocial rehabilitation services for the vulnerable populations.**

Under this direction Tanadgoma plans to strengthen the rehabilitation center and offer it as a model to the state. It has to be mentioned that during the previous strategic cycle Tanadgoma made huge efforts to develop Social Enterprise, as a rehabilitation model. However, the enterprise did not achieve the desired goal and could not become financially independent. Consequently, during 2020-2022 it is planned to conceptually rethink social entrepreneurship and look for some other development ways. This could still be combination of therapy through work and art therapy (clay work), as by the end of 2019 this direction showed some promises. Service provision through Social Bureaus – as another good model of rehabilitation and re-socialization – will be also continued. This model can be enriched through additional services and approaches, and develop into day rehabilitation centers. So, the basic aim of this direction is that the services are available for the target populations in need, and not necessarily provided by Tanadgoma. This implies also technical assistance to other possible service providers - community, civil society or state organizations - in development of psychosocial rehabilitation and re-socialization knowledge and skills.

Other domain of activities under this direction is connected with provision of psychological support to other vulnerable groups. This includes: Cognitive-Behavioral Therapy and stress management for various vulnerable populations, such as PLHA, MSM, women with oncological diseases, victims of sexual and gender-based violence, etc.

**Lines of action:**

- Sustain, improve and popularize functioning of rehabilitation center;
- Reorganize and improve functioning of the Social Enterprise;
- Sustain provision of psychosocial, medical and psychological services to the vulnerable populations;
- Opening day rehabilitation centers on the basis of the Social Bureaus.

**Expected results:**

- **Fully functional rehabilitation center;**
- **Sustainable Social Enterprise;**
- **Continuous provision of psychosocial, medical and psychological services to the vulnerable populations;**
- **Beneficiaries are satisfied with the quality of services provided.**

**2.2. Contributing to institutionalization of sustainable and regular psychosocial rehabilitation services for the vulnerable populations.**

Along with ensuring that services are provided, another goal of Tanadgoma under this direction is to persuade state that rehabilitation and re-socialization is the best option for prevention of repeated crime and relapse in using psychoactive substances. The ultimate goal is that state budget funds the models suggested and piloted by civil society and proved successful. In order to achieve this, Tanadgoma, as a member of existing advocacy platforms and initiatives, will conduct various advocacy activities (including research, media visibility, presentation of the elaborated rehabilitation concept and action plan, etc). Besides, Tanadgoma plans to ensure that necessary skills building of the penitentiary and probation personnel takes place so that institutionalization becomes feasible. At the same time, as current drug policy is seen as a major obstacle for rehabilitation services being ensured by the government, Tanadgoma will also contribute to liberalization of the drug policy through joining advocacy process in order to create favorable environment whereas rehabilitation programs can be implemented.

Along with this, Tanadgoma will continue working with the law enforcement, in order to sensitize them and increase their tolerance towards rehabilitation programs and services.

**Lines of action:**

- Advocacy for implementation and funding of rehabilitation with state resources;
- Advocating for rehabilitation of drug users instead of punishment and imprisonment;
- Skills building of the penitentiary and probation personnel for institutionalization of psychosocial services for the prisoners, former prisoners and probationers.
- Sensitization of law enforcement representatives and their awareness raising about drug use and programs/services of psychosocial rehabilitation.

**Expected results:**

- **State finances part of the psychosocial rehabilitation services for persons addicted to psychoactive substances;**

- State structures are familiar with the psychosocial rehabilitation services and relevant institutions and use treatment and rehabilitation as alternative to imprisonment;
- By 2023, with Tanadgoma support, psychosocial rehabilitation programs (CBT, art therapy) for prisoners with addition problems are launched in all penitentiary establishments;
- Number of psychosocial rehabilitation and re-socialization services in Georgia has increased.

### 3. Organizational development

#### **Strategic Goal 3:**

**Ensuring sustainability of organizational functioning through improving performance management systems and ensuring adequate and diversified funding sources.**

#### **Outcome:**

**Tanadgoma successfully raises funds and has sufficiently developed performance management systems for implementation of its strategic plan.**

#### **Indicators:**

- Amount of funds raised compared to the annual Strategic budget;
- Level of implementation of organizational development action plan.

#### **Objectives:**

- 3.1. Support, maintenance and development of human, technical and administrative resources.**

During 2017-2019 Tanadgoma revised staff performance evaluation and development needs' assessment system, in order to have in place updated systems for increase of thematic knowledge. Along with this, financial accounting system was also refined. During 2020-2022, these systems shall be maintained, updated and improved, if necessary. This will enable Tanadgoma to maintain professional personnel, better implement programmatic directions, and be better represented in various national and international platforms. Besides, Tanadgoma shall continuously take care of not only human, but also exiting material, technical and administrative resources. The developments under this strategic direction will enhance capacity of Tanadgoma and give the organization some advantages in the competitive CSO climate. Ultimately, this will contribute a lot to fundraising and sustainable development and reaching strategic goals under Tanadgoma's thematic programs.

#### **Lines of action:**

- Increasing qualification and development of the staff though participation in training, international events and conferences;
- Continue internship programs for recruitment of volunteers and creating pool of new possible staff;

- Upgrade and maintenance of the organization’s material and technical resources;
- Supporting administrative resources.

**Expected results:**

- Organization staff constantly increases qualification through participation in training, international events and conferences;
- Internship program provides for recruiting volunteers and creates pool of new possible staff;
- Organization’s material and technical resources are effectively functioning;
- Organization’s administrative resources are supported.

**3.2. Performance management systems development.**

Tanadgoma shall take care and constantly update performance management systems, with particular focus on financial and administrative systems. It is vitally important that organizational systems respond to the existing demands both in the environment and in the organization. In order to achieve this, Tanadgoma and its systems shall be flexible to adjust to the changing environment. In 2017-2019 some progress was achieved in terms of systems’ development, and this process will continue in 2020-2022. The organization leaves open the question, which particular updates will happen in the next strategic cycle, to be able to adjust to the situation.

**Lines of action:**

- Monitoring/evaluation of the organization’s performance;
- Consultancy/training regarding administrative, financial, legal and other issues, based on the context requirements.

**Expected result:**

- **Various organizational systems function and correspond to the environmental demands.**

**Overall strategies for achieving the goals**

In the coming three years the organization deems necessary to make its programs richer through focusing more on some particular components. Under SRHR, these components are related to sexuality education, advocacy to better prioritizing of SRHR by the state, promotion of Family Planning, using media for better visibility of SRHR, etc. Also, it is intended to focus more on advocacy, expertise and technical support provision rather than on services. Wide experience of the organization in research will give the ground for evidence-based programming and advocacy. Strategies to achieve the expected changes are as follows:

- **Cooperating with the state structures** and institutions, e.g. Ministry of Education, Culture, Science and Sport, Ministry of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs, other state entities under the ministries, so that Georgia's commitments are fulfilled. This strategy includes also working with the municipal structures for improving social contracting conditions for CSOs and community organizations.
- **Raising public awareness** to tackle taboos and social norms or attitudes and increase tolerance towards SRHR through various channels – media, education, collecting and presenting evidence.
- **Advocacy** with support of **evidence-based data** (research, policy analysis etc), through policy dialogues and other channels (social media etc) in partnership with rights holders and partners (**networking**).
- **Technical support** in SRHR field to community organizations and CSOs (**empowerment, mobilization**), **networking** for joint advocacy both on national and regional/international levels.

## Short-term vision for the end of 2022

By the end of 2022 Tanadgoma expects the following changes to happen in the fields of its work (on different levels):

1. State prioritizes SRHR issues (policy level): SRH services are better funded by the government, SRHR issues (CSE) are part of the school curriculum;
2. Society has increased tolerance towards SRHR issues (society level);
3. SRHR-related organizations are strengthened to better advocate, to protect SRHR of vulnerable communities and individuals (society and individual levels);
4. HIV/AIDS, STIs, Tuberculosis prevention services for vulnerable populations (PLHA, LGBT, people with addiction problems, etc) exist and are partially supported by the government (policy level);
5. Psychosocial rehabilitation and re-socialization services for vulnerable populations (PLHA, LGBT, people with addiction problems etc) exist and are partially supported by the government (policy level);
6. Tanadgoma is acknowledged expert in SRHR field (organizational level): provides expertise and technical support to various organizations; conducts successful advocacy of SRHR and psychosocial rehabilitation in Georgia and on international level
7. Tanadgoma has increased sustainability through continuous development of human resources and management systems, and sustainable organizational funding (organizational level).