



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

## **Strategic Plan for 2023 – 2025**

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Tbilisi, Georgia*

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## Acronyms

AIDS – Acquired Immune Deficiency Syndrome

CBT – Cognitive-Behavioral Therapy

CCM – Country Coordinating Mechanism

CSE – Comprehensive Sexuality Education

CSO – Civil Society Organizations

EECA – Eastern Europe and Central Asia

GBV – Gender Based Violence

HIV – Human Immunodeficiency Virus

HPV – Human Papilloma Virus

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 2023-2025 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 both in Georgia and in the region, 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 and in EECA region. Strategic plan was approved by the General Assembly of Tanadgoma on 14th of November, 2022.

## 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

### Vision

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.

### Mission

**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.

### Values

- Dignity
- Health
- Well-being
- Equality
- Inclusiveness

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.

## Target groups, work modalities and geographical coverage

### Target groups

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;
- Collaborating with governmental and non-governmental organizations and conducting joint projects;
- Collaborating with mass media, focusing on Health Care and psychological problems in order to spread the information, advocate and form the public opinion;
- 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 in day out-patient as well as residential rehabilitation centers, through self-support groups, Cognitive-Behavioral Therapy, 12 steps program etc.;
- Conducting research, conferences, training and seminars on different medical, psychological and social issues;
- 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 2022, 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, economic and social environment

The last three years turned out to be very hard for the whole world, for EECA region as well as for Georgia. This was due to COVID-19 pandemic, in the first place, and then due to the war in Ukraine, initiated by Russia.

Tanadgoma's work has been quite affected by the pandemic. During 2020-2021 lockdown was introduced twice, with different restrictions, including state of emergency and curfew. Shortly after the first lockdown (March 2020) Tanadgoma elaborated and approved a special protocol of functioning during the pandemic, which was strictly followed. Most of the staff was working from home, with several people at the office in shifts. Also, as Tanadgoma provides services to the most vulnerable populations, such as sex workers, MSM, transgenders, etc., services were not totally shut down. In order to protect both the staff and the beneficiaries, Tanadgoma used individual protection measures for the frontline service provision at the offices and during outreach activities as well.

At the same time, Tanadgoma managed to introduce COVID-related prevention or support measures in some of the ongoing projects, and also was able to get funding for several projects on coronavirus issues.

The effects of the Russia-Ukraine war was added up to the effects of the pandemic. The war has caused drastic political, social and economic changes globally.

One of the already felt results of the war is influx of Ukrainian refugees, as well as enormous wave of Russian citizens entering Georgia, which has already affected and will affect even more economic, social, healthcare and other fields in the country. Factors such as spread of diseases, poverty, crime, trafficking, sex work have to be considered. By the end of 2022 it is already clear that people that have entered Georgia do not have access to SRHR information and services, even though, according to the decision of Georgian government, all healthcare services are free for Ukrainian citizens.

The recent years, and especially event of 2022 have demonstrated that there is a risk of Georgia changing its course from EU values and becoming democratically closer to EU. Political and economic situation is worsening and implementation of obligations taken upon in Association Agreement with EU is slowing down. Although there are developments, but mostly they are on paper and not in implementation. Non-discrimination law and how it is enforced is a clear example of this approach.

Extremely unstable political situation, as well as dire economic situation influencing prioritization of the human rights, especially SRHR topics, which are not enough supported by the international aid in our country. As an example: CSE, abortion or LGBTQI topics are always a tool to manipulate opinions prior to elections.

Civil society, in our case meaning organizations working in the field of SRHR in Georgia, has not been strong enough to substantially push forward SRHR agenda. This is partly because of lack of such organizations, on one hand, and lack of support to the existing SRHR actors both inside and from outside of the country, on the other hand.

SRHR is one of the fields especially affected by the pandemic and the war. Inequalities related to the marginalized and vulnerable groups - women and girls, ethnic and religious minorities, LGBT, persons with disabilities, etc - have become even more evident. Inequalities in SRHR are interacting with other inequalities in social and economic fields. As a response to this, advocacy targeting prioritization of these needs shall increase and forces shall be joined with civil actors working on healthcare, social and economic issues. Intersectional approach shall be embedded. Below are some major global and national level developments that may influence Tanadgoma's work:

- As a result of the war, Ukraine, Moldova and Georgia were invited to submit applications for EU candidacy. Although Georgia could not get the candidacy status, the country was given opportunity, after meeting some criteria and implementing some changes, to resubmit the application. So, there is currently the window of opportunity for civil society organizations to become more active in promoting and pushing forward important issues. SRHR, as an integral part of human rights, is among these issues.
- In 2022 Georgia elaborated national human rights protection strategy (2022-2030 წწ.). Unfortunately, civil society had minimal opportunity to participate in its elaboration. The date for strategy's approval is not known yet, so CSO participation could be still relevant.
- At the UPR last round, on January 26, 2021, Georgia has received six recommendations, related to inclusion of CSE based on UNESCO standards. Recommendations were made by the following countries: Uruguay, Mexico, Spain, Iceland, France and Luxembourg. Using these recommendations, Tanadgoma will continue working on CSE with more evidence base.
- Starting from 2023 it is planned to renew SDG nationalization process, whereas advocating for SRHR topics will be possible. So, Tanadgoma will continue participation and engagement in the working groups for nationalization process.
- In 2021 Georgian Parliament approved National Youth Policy Concept. However, approval of the policy document has not happened yet. It is known that the policy document includes SRHR topics, which provides for Tanadgoma's engagement in the policy implementation process in the future.
- In 2021 National Strategic Plan on HIV/AIDS for 2023-2025 and country's proposal to TGF have been elaborated. Tanadgoma took active participation in this process. The Strategy has not been approved by the CCM so far.
- During the process of TGF gradually leaving the country, the state has started transition and took over testing part of the HIV prevention programs. Some problems related to this process are as follows: the national program does not meet the needs of civil society and community organizations, which would contribute to their sustainability. It is important that civil society proactively advocates and communicates with the state authorities for mobilization of state resources and changes in the implementation schemes regarding these resources.
- HPV vaccination program has expanded in 2021, but this expansion is not accompanied by the communication component, hence, the population does not have access to both information and services under this program.
- Despite frequent changes in the staff of the Ministry of Education and Science of Georgia, the process of Healthy Life Skills incorporation is continuing. By the end of 2022 SRHR topics were partially incorporated into the educational standards of up to 9<sup>th</sup> grade (basic level). In parallel, an elective obligatory CSE subject module for 10-12 grades has been developed (secondary level). After its piloting, there is a perspective that the Ministry of Education and Science will approve this subject' standard in 2023.
- Gender Equality Council of the Georgian Parliament initiated launching of so called "Doctor's Hour" in public schools. This is a response measure to the increasing cases of sexual violence and pedophilia. As a result of this initiative, Tanadgoma is already actively engaged in elaboration and piloting of "Doctor's Hour", in cooperation with the Ministry of Education and UNFPA.
- In 2020, following the initiative of the Interagency Council Against Drug Abuse and Georgian Ministry of Justice, with support of EU, a National Strategy for Prevention of Drug Abuse for 2021-2026 has been elaborated and approved. The strategy is based on four main directions, one of them being treatment and rehabilitation. Even though rehabilitation is not explicitly described in the document, still the strategy provides one more ground for Tanadgoma to continue working on rehabilitation programs.



## Funding

The pandemic caused financial crisis. For Tanadgoma, despite opening some new opportunities, these opportunities were still much smaller than anticipated risks and damage connected to these risks. The crisis especially deepened due to the war, which caused decrease in already existing or potential funding. It is expected, that this unfavorable economic situation could turn out critical for the organization and Tanadgoma is forced to restructure and rationalize existing resources, in order to secure organizational functioning and reaching its goals.

In 2020-2022, the trend in decline of international funding has become more visible. For many donors, healthcare is no longer a priority in the same modality, as before, as the pandemic and then the war caused important shifts and big amounts had been redirected to support needs of refugees and victims of the war. Healthcare needs are, of course, on the top of the priorities' list, however, not as much in relation to SRH, compared to mental health.

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. By 2023 TGF funding has been replaced by the state funding to a remarkable extent, but the mechanisms, volume and quality insurance approaches are not satisfying and do not meet the needs of civil society organizations. Hence, Tanadgoma does not see rationale to invest efforts and resources in this direction. It will most probably be enriched through minor innovative and research components and turn into routine work under the state financed program. Already in the previous strategic cycle Tanadgoma started developing different directions, such as expertise in SRHR, as well as mental health domain, research, advocacy, collaboration and networking.

At the same time, other SRHR issues, such as providing technical assistance to community organizations, promoting sexuality education, combating gender-based violence, stigma and discrimination, as well as provision of mental health service and psychosocial rehabilitation 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. It is a priority for Tanadgoma to use raised funds more efficiently while moving towards strategic goals. 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, yet, the pandemic significantly hindered this process.

One more direction that will help Tanadgoma to endure increased competition and shrinking funding landscape, is offering new, innovative methods to work on SRHR. In this regard, institutional funding can help Tanadgoma to strengthen the human resources, acquire new knowledge and implement it in practice. Tanadgoma being is actively represented in various regional or international networks and coalitions, in its turn, contributed to cooperation possibilities and fundraising on regional 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. During the last strategic cycle Tanadgoma conducted several significant studies and identified needs, response to which will be mostly objective of the current strategy. These needs for the moment are as follows:

- During the last several years Tanadgoma conducts content and budget analysis of SRHR programs. It is clear, that the programs target reproductive health and sexual health is practically ignored in the state financing. Also, the analysis remonstrated that there is annual saving within the state programs' funding, which could be used for other SRHR needs. It is necessary to initiate advocacy process in this direction.
- Besides, Tanadgoma studied SRHR needs among women with oncological diseases, persons with disabilities, persons with mental health problems. The list of identified needs

is quite long, from the lack of knowledge and information among these groups, to stigma and ignorance of SRHR issues during medical services provision.

- One more important problem, which concerns both Tanadgoma programs, is small and often negative role of media in coverage of SRHR and mental health issues. The organization has been working on this direction for several years already, yet, long-term efforts are necessary for achieving palpable results.
- Introduction of sexuality education (called Healthy Life Skills education in Georgia) started in 2014. In 2017-2022, 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, piloting “Doctor’s Hour”, etc. Currently, the Ministry expresses high interest in continuation of CSE incorporation and declares Tanadgoma as one of the important partners in this endeavor.
- 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. Since 2017 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. Besides, during the last strategic cycle Tanadgoma started working on access to safe medical abortion. A research conducted on this topic has revealed that access to this service is especially hindered for rural and socially marginalized women, such as internally displaced women. Hence, working on access to abortion responds to the population’s needs.
- Gender-based violence and discrimination remain a problematic issue in Georgia. The reasons behind are gender inequality and gender stereotypes. The pandemic the problem got worse, and especially affected various vulnerable groups, such as sex worker women, women who use drugs, LGBT, women with disabilities, representatives of ethnic or religious minorities. Besides, sexual violence cases have been increasing and causing large public resonance. The efforts of state and non-governmental sectors are not sufficient to meet the needs of victims of violence, especially of the most vulnerable women.
- According to routine work and to studies conducted by Tanadgoma, the prevalence of HIV and other STIs among MSM has not been decreasing. This situation, as well as prevention of other HIV-related diseases (viral hepatitis, tuberculosis, etc.) requires adequate and continuous response. Despite prevention programs being implemented for a long time, it is necessary to pilot and launch innovative approaches, to enable prevention programs to reach those individuals, which are in most need of services.
- Field of mental health in Georgia is not regulated and develops spontaneously. During the last years there are some developments in this direction, caused by the global focus on mental health due to pandemic, and especially by influx of the populations affected by the war to various countries. There is enough evidence that quality mental health services are in high demand in Georgia. Tanadgoma, based on its experience, believes it can make some valuable input in provision of mental health services, especially because of Tanadgoma’s target groups being the most vulnerable and marginalized populations.
- 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.). Despite both state and civil society make some efforts in this direction, the demand for those services is very high. Tanadgoma acknowledges the need for promotion, development and institutionalization of such services. The organization currently develops and strengthens a comprehensive model of rehabilitation, which will bring substantial benefits to both people in need and the state.

## Organizational analysis

<b>Strengths</b>	<b>Weaknesses</b>
<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>• Flexibility;</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>• Great dependence on donors' funding;</li><li>• Less notoriety in mental health domain;</li><li>• Rarely renewed human resources;</li><li>• Lack of management resources;</li><li>• Need for strengthening advocacy direction</li></ul>

# Strategic Development Plan 2023 – 2025

In 2022 Tanadgoma elaborated a three-year strategic development plan for 2023-2025. 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 2023-2025 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 realization of sexual and reproductive health and rights in Georgia.**

### Outcomes:

- **State prioritizes SRHR issues, which is reflected in implementation of obligations mentioned in policy documents and in increased funding of SRHR programs**
- **Comprehensive Sexuality Education<sup>1</sup> is integrated into the formal education system and is also implemented through informal education**

### Indicators:

- More national policy documents include SRHR topics;
- Obligations included in the national policy documents are reflected in central and local action plans and are implemented;
- State funding for SRHR issues has increased by 10%;
- National Education Curriculum includes 70% of topics, according to UNESCO standard;
- Approved textbooks and/or elective subjects for all education levels include SRHR;
- Informal CSE in school environment is systemic and fully incorporated;
- Digital space has CSE resources responding to the needs of young people.

### Objectives:

- 1.1. Systematic study of SRHR issues and response to identified needs at both national and international levels.**

Tanadgoma has been implementing advocacy activities in SRHR field for ten years already, based on research conducted and evidence collected both by Tanadgoma and other organizations. During the previous strategic cycle, Tanadgoma conducted several important studies on SRHR needs among oncological patients, persons with mental health problems, persons with disabilities, also, on access to medical abortion, on coverage of CSE in media and on attitudes towards CSE in Georgian population. Continuing and strengthening of the research

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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.

component remains one of the strategic priorities for the organization. Expanding evidence base, which is also one of the strategic priorities for 2023-2025, will be used for the advocacy activities. Besides, communication and cooperation with other actors in SRHR will remain within Tanadgoma's focus. SRHR coordination platform established by Tanadgoma will play an important role in information sharing and analysis, as well as in joint advocacy processes. Another dimension of this direction is providing technical assistance on SRHR issues to community groups, community, and professional and civil society organizations. One of the focuses of technical support will be contributing to SRHR capacity building, especially in regions inhabited by ethnical and religious minorities. Besides, Tanadgoma will aim at more engagement in regional and international projects with SRHR expertise.

**Lines of action:**

- Systematic study of SRHR issues and advocacy on local, central, regional and international levels;
- Maintaining and strengthening strategic partnership with the organizations working on SRHR for increased advocacy efforts – functioning of SRHR coordination platform;
- Planning and implementation of communication plans for promotion of SRHR topics;
- 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.

**Expected results:**

- **SRHR topics are systematically studied, problems are identified and reacted upon in cooperation with the various stakeholders.**
- **SRHR topics are covered by media in a broader, more positive and correct way.**
- **Tanadgoma is acknowledged as expert organization on SRHR issues.**

**1.2. Contributing to implementation of CSE in Georgia through its incorporation into formal education system as well as through innovative informal education approaches.**

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. The process is long-term and requires constant revision to achieve results. By the end of 2022 SRHR topics were partially incorporated into the educational standards of up to 9<sup>th</sup> grade (basic level). In parallel, an elective obligatory CSE subject module for 10-12 grades has been developed (secondary level). After its piloting, there is a perspective that the Ministry of Education and Science will approve this subject's standard in 2023. Main activities during 2023-2025 will stay the same, namely, Tanadgoma will continue already established cooperation with main stakeholders in the CSE field, such as the Ministry of Education and Science of Georgia, relevant UN agencies and international organizations and experts, as well as with CSOs active in the SRHR. Also, implementation of the CSE communication strategy targeting changes in public attitudes towards CSE will continue. Collaboration with media and with the teachers will play a major role in this strategy.

Contributing to CSE implementation through informal and innovative ways is a relatively new direction for Tanadgoma. Under its frames, introducing informal CSE in the school spaces will continue through, e.g. launching "Doctor's Hour". Also, initiative of introducing Digital CSE, which started in 2022, will expand, necessary evidence will be collected and be used as a basis to create and use innovative digital ways to educate and inform young people. Creation and piloting of

digital products based on youth's needs and demands is the key element of this direction, which will use inclusive and intersectional approaches.

Initiatives of the previous strategic cycles (e.g. parents' courses, meetings with the textbooks authors, monitoring of the approved textbooks, etc) will continue also during 2023-2025.

**Lines of action:**

- 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;
- Collaboration with media for informing general population about CSE and changing attitudes towards CSE;
- Contributing to incorporation of informal CSE into the school environment;
- Launching Digital Sexuality Education;
- Collaborating with the international organizations and experts for sharing experience and best practices 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:**

- **National Education Curriculum includes topics recommended by UNESCO standard;**
- **and/or elective subjects for all education levels include SRHR;**
- **Informal CSE in school environment is systemic and fully incorporated;**
- **Digital space has CSE resources responding to the needs of young people;**
- **Teachers' awareness on SRHR topics included in the National Education Curriculum has increased;**
- **CSE topics are covered by media in a more positive and correct way.**

**1.3. Prevention of STIs, HIV, TB, viral hepatitis, COVID-19 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 was included in implementation of the national prevention program, which is gradually expanding, and so is its funding. However, quality of the services under this program, as well as funding scheme, which does not provide for the organizational sustainability and maintenance of minimal administrative resources, remains a problem. Advocacy for solving these issues will become an important focus for the next years.

Also, during the previous strategic cycle, Tanadgoma participated in elaboration of the National HIV/AIDS Strategic Plan 2023-2025. So, Tanadgoma's work under the prevention program will be aligned with this plan. In the cycle of 2023-2025 Tanadgoma will continue provision of prevention services, which incorporate also prevention of Tuberculosis, STIs and viral hepatitis. Also, gradually SRHR and mental health services will become part of the prevention packages. Research, piloting of innovative approaches, ensuring access and quality of the services, as well as provision of technical expertise and support to communities will also remain in focus under this strategic objective.

**Lines of action:**

- Provision of preventive and/or screening services for STIs, HIV, TB, viral hepatitis and oncological diseases of Reproductive System, as well as of COVID-19 among vulnerable populations based on approved prevention standards
- Provision of expanded prevention packages with integrated SRHR and mental health services
- Expanding geographic area of preventive programs with specific focus on hard to reach regions
- Elaboration and piloting of innovative prevention/screening/testing service models
- Advocacy for increased state funding of prevention services, as well as improved funding schemes under the state supported programs

**Expected results:**

- **Prevalence of HIV among key populations is not increased by 2025;**
- **Expanded prevention package for the key populations is implemented and includes SRHR and mental health services;**
- **Geographical coverage of the prevention program has expanded to cover especially hard to reach regions;**
- **Innovative prevention models are piloted and launched;**
- **Share of the state funding of the prevention programs has increased and meets the needs of civil society organizations;**
- **Beneficiaries are satisfied with the quality of services provided.**

**1.4. Increase access to reproductive health and family planning services and information for women.**

Access to SRHR information and services represents a separate objective under 2023-2025 strategic cycle, which is based on Tanadgoma's experience during the last years. Analysis of various research data of both Tanadgoma and other organizations, as well as analysis of information collected through different meetings, demonstrated that access of population on SRHR information and services remains a great challenge.

There is low awareness among general population on family planning as well as diverse effects of abortion. Rural women have hindered financial and geographical access to safe abortion services due to high prices and weak development of the public transportation. Abortion stigma also represents one of the barriers to access. Waiting period introduced in the law forces women to make several visits to the clinics, which also contributes to hindered accessibility. All these factors increase use of non-medical ways for terminating unwanted pregnancy.

Coverage of population by the HPV vaccination is low, which is based on spread of negative information on vaccination in general and on HPV vaccination in particular. This is aggravated by absence of communication campaign in the state program. Especially during the pandemic, due to existing restrictions in public transportation, as well as anti-vaccination movements, the coverage of the vaccination program decreased.

Tanadgoma actively collaborates with the NCDCPH for population awareness raising on reproductive health issues, under various strategies and action plans. In 2020, a communication strategy was developed regarding reproductive health and family planning topics. In 2021 the strategy was renewed to cover period of 2022-2024. Under the strategy, printed and digital media channels are used to reach general population. Besides, Tanadgoma works with the local municipalities and gender equality councils to reach rural population.

In 2021 a communication plan for supporting HPV vaccination in Georgia was created, targeting awareness raising on the vaccination through social, TV and printed media.

Increasing access to safe medical abortion among rural women through launching telemedicine model is also planned under this objective.

**Lines of action:**

- Advocacy for improved access to reproductive health and family planning services and information;
- Cooperation with state structures on both central and local levels, especially during elaboration of SRHR strategies and programs;
- Increase access to safe abortion through telemedicine and innovative approaches, communication campaigns and training of medical personnel;
- Advocacy for reducing barriers to access to safe abortion.

**Expected results:**

- **General population, and especially women of reproductive age, has access to reproductive health and family planning information;**
- **Women and girls have access to safe abortion services, including through telemedicine approaches, despite their geographical location.**

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

This direction was first included in 2017-2019 Strategic Plan as an objective and Tanadgoma has been actively working on GBV topics ever since. During the recent years contributing to gender equality and dismantling gender stereotypes was incorporated into this direction. Hence, in the following strategic cycle this direction will become more comprehensive. During 2023-2025 the organization intends to strengthen partnership with other CSOs and local initiative groups working on gender topics, to improve referral system using new approaches, to collaborate with organizations working on women's rights and gender equality both in Georgia and in the region. As for community groups of vulnerable women (e.g. sexual, religious, ethnic, persons with disabilities 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:**

- Provision of free legal, medical and psychorehabilitation services to women victims of sexual and gender-based violence and discrimination
- Capacity building and mobilization of CSOs and especially vulnerable women for gender equality
- Cooperation with the organizations working on violence prevention and providing services for improved response to sexual and gender-based violence

**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 able to advocate for gender equality;**
- **Established and functional referral system, based on the services' online tool.**



## 2. Mental Health program

### **Strategic Goal 2:**

**Promotion and contributing to access to mental health, psychosocial rehabilitation and resocialization services among target groups.**

### **Outcomes:**

- **Mental health services are incorporated in Tanadgoma's work**
- **Tanadgoma's models of psychosocial rehabilitation and resocialization for vulnerable populations are successfully functioning**
- **State supports and partially finances psychosocial rehabilitation**

### **Indicators:**

- Mental health services are accessible at Tanadgoma for all target groups
- Tanadgoma's models for psychosocial rehabilitation and resocialization successfully function and self-financed by 20%
- Tanadgoma psychosocial rehabilitation and re-socialization model for vulnerable populations is partially funded by the government.

### **Objectives:**

#### **2.1. Incorporation of mental health services in Tanadgoma's work**

Tanadgoma has always been interested in development and expansion of mental health services. During years Tanadgoma's target groups had possibility to receive individual and group psychological counseling. Counseling has been provided to beneficiaries of HIV/STI prevention program, however, during the recent years, this service was regular. Tanadgoma has an elaborated CBT-based stress management module for women with oncological diseases. Based on this module, the organization conducts therapeutic group sessions. During the pandemic period, through Tanadgoma's Facebook platform "Support to parents", online meetings with the parents were conducted, dedicated to various psychological topics, e.g. relations with the children, stress management, etc. Work of the mental health specialist is also very important within the psychosocial rehabilitation program.

Based on this, and especially after the pandemic and during the war, development and expansion of mental health services has become very relevant for the organization. Consequently, this direction is prioritized in the strategy for 2023-2025.

Under this objective, Tanadgoma will concentrate on several particular directions, such as using existing practices in a more systematic manner, their institutionalization and/or advocacy for their funding with the state resources, taking care of the staff capacity development and preparing for self-financing of the mental health services.

### **Lines of action:**

- Provision of mental health services to the target groups and development and implementation of online screening tools
- Development of online version of stress management module
- Advocacy for state funding of the CBT module
- Staff capacity building and/or adding qualified staff
- Ensuring funding and self-financing of the mental health services

**Expected results:**

- Mental health services are incorporated in Tanadgoma's programs and projects
- online version of stress management module is developed
- Staff has increased capacity of providing mental health services
- Financial resources are available for mental health services

**2.2. Ensuring stable, comprehensive and regular psychosocial rehabilitation services provision to vulnerable populations.**

Under this direction Tanadgoma aims at launching and strengthening comprehensive programs, as well as their promotion. International treatment standards for persons with addiction indicate that treatment is more successful, when treatment services are comprehensive and diverse. Tanadgoma's experience has shown that only residential rehabilitation services are not enough and cannot fully meet the needs of beneficiaries.

In order to diversify services Tanadgoma has taken some steps in 2020-2022. In particular, a day rehabilitation center was established in 2022, also, online rehabilitation program was launched, as one of the effective ways to maintain access to services during the pandemic.

Tanadgoma will continue working to make the existing programs sustainable. During 2020-2022 standards and protocol for residential rehabilitation were developed. The pandemic hindered advocacy process targeting state financing of the residential rehabilitation, and this shall be implemented in the coming years. Also, it is important to pilot crowdfunding strategy for development and maintaining of various services (infrastructure of the residential center, support of the ceramic studio, etc).

Tanadgoma will also continue collaboration with other interested parties and partner organizations to expand the services, which implies technical support to potential service providers – community, civil society or state organizations, so that they develop or strengthen knowledge and skills in psychosocial rehabilitation and resocialization.

Along with this, one more direction of the activities is providing psychological support to vulnerable populations. This includes: CBT, stress management for various groups, such as PLHA, MSM, oncological patients, women survivors of gender-based violence, etc.

**Lines of action:**

- Functioning of comprehensive rehabilitation model for people with addiction problem;
- Promotion of Tanadgoma's rehabilitation model;
- Establishing a network of people in rehabilitation;
- Expanding work with the family members of people in rehabilitation;
- Strengthening existing programs of rehabilitation, launching additional services.

**Expected results:**

- **Comprehensive rehabilitation model for people with addiction problem**
- **Continuous provision of psychosocial rehabilitation and medical services to the vulnerable populations;**
- **Increased number of beneficiaries;**
- **Beneficiaries are satisfied with the quality of services provided.**

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

Along with ensuring that services are provided, as goal of Tanadgoma under this direction still remains to persuade state that rehabilitation and re-socialization is the best option for prevention of repeated crime and relapse in using psychoactive substances.

Since it was not possible to make significant progress in this direction during the pandemic, advocacy for financial support of rehabilitation services with the state remains as a challenge. 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.

**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 and relevant institutions and use treatment and rehabilitation as alternative to imprisonment.**

### **3. Organizational development**

**Strategic Goal 3:**

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

**Outcome:**

**Tanadgoma has sufficiently developed management systems and successfully raises funds 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 to and development of human, technical and administrative resources**

During 2020-2022 Tanadgoma continued taking care of support and development of the internal systems, in order to maintain and develop its staff, better implement programmatic directions and be presented at various national or international platforms. The next strategic cycle provides hopes for more opportunities in this direction, as the pandemic-related restrictions are lifted. Hence this objective is still relevant. Besides, Tanadgoma shall continuously take care of not only human, but also 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 through 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. Management systems development.**

Tanadgoma's goal is to continuously work on management systems development, with particular focus on financial and administrative components. 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. During 2017-2022 some progress was achieved in terms of systems' development, and this process will continue in the coming years. The organization intends to refine administration and other general overhead costs policy, as well as human resources policy and procedures. At the same time, Tanadgoma believes that it will need some consultations and services related to improvement of the systems. Yet, 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:**

- Development of administration and other general overhead costs policy;
- Refining and implementation of human resources policy and procedures;
- Consultancy/training regarding administrative, financial, legal and other issues, based on the context requirements.

**Expected results:**

- Administration and other general overhead costs policy is developed and enforced;
- human resources policy and procedures are refined
- Various organization systems are functioning and aligned with the context requirements.

## Strategies use for achieving the goals

Tanadgoma stands on the following pillars in achieving its goals:



If we cooperate with all stakeholders and interested parties, if we contribute to strengthen our organization and all other actors in SRHR and mental health, and if we use joint communication and advocacy resources, then we will be able to contribute to achieving strategic goals of the organization and make important steps towards fulfilling our mission.

These pillars define approaches and strategies, which Tanadgoma will use for achieving its future goals:

- **Cooperation with non-governmental, international and state structures and institutions**, such as Ministry of Education and Science, 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.
- **Strengthening** includes both organizational development, professional and technical capacity building of Tanadgoma, as well as **technical support** in SRHR field to community organizations and CSOs (**increasing knowledge and skills, incorporating intesectional appoaches, mobilization**), and **networking** for joint advocacy both on national and regional/international levels.
- **Communication and advocacy** implies **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. Along with this, this pillar includes using **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**).

## Short-term vision for the end of 2025

By the end of 2025 Tanadgoma expects the following changes to happen in the fields of its work (on different levels):

1. State prioritizes SRHR issues (policy level) and implements international obligations
2. SRH programs and services are better funded by the government;
3. Big share of SRHR issues (CSE) are part of the school curriculum;
4. Big share of SRHR issues (CSE) is provided to young people through informal education, both in school environment and through innovative, inclusive digital channels, meeting the needs of young people;
5. Society has increased tolerance towards SRHR issues (society level);
6. SRHR-related organizations are coordinated to protect SRHR of vulnerable communities and individuals (society and individual levels);
7. HIV/AIDS, STIs, Tuberculosis, viral hepatitis, COVID-19 prevention services for vulnerable populations (PLHA, LGBT, people with addiction problems, etc) exist and are mostly financed by the state (policy level);
8. Mental health services, psychosocial rehabilitation and re-socialization services for vulnerable populations (PLHA, LGBT, people with addiction problems etc) exist and are partially supported by the state (policy level);
9. Tanadgoma is an acknowledged expert in SRHR field (organizational level): provides expertise and technical support to various organizations; conducts successful advocacy of SRHR in Georgia and on international level;
10. Tanadgoma has increased potential for provision of services in mental health field;
11. Tanadgoma maintains sustainability through continuous development of human resources and management systems, and sustainable organizational funding (organizational level).

## Long-term vision for the end of 2028

Despite unstable political, economic and social situation, Tanadgoma still identified certain long-term goals, which will be revised and corrected according to the circumstances. By the end of 2028 Tanadgoma expects the following changes to happen in the fields of its work:

1. State has expanded SRHR programs and they are continuously financed;
2. SRHR issues (CSE) are almost fully incorporated into the school curriculum and continuously provided to young people through informal education and digital channels;
3. Society has increased tolerance towards SRHR issues and influence of opposing rightist movements is decreased;
4. Quality of HIV/AIDS, STIs, Tuberculosis, viral hepatitis, COVID-19 prevention services for vulnerable populations is ensured, are mostly financed by the state and funding schemes are more favorable to the civil society organizations;
5. Mental health services, psychosocial rehabilitation and re-socialization services for vulnerable populations (PLHA, LGBT, people with addiction problems etc) have expanded and are partially supported by the state;
6. Tanadgoma is one of the leading experts in SRHR field and conducts expert-level and advocacy activities;
7. Tanadgoma is an acknowledged actor in provision of mental health services;
8. Share of self-financing in Tanadgoma's funding has increased;
9. Tanadgoma's organizational sustainability is maintained.