

UKRAINE

Report prepared by the Joint UN Team on AIDS

PROGRESS TOWARDS THE FAST-TRACK TARGETS

COUNTRY PRIORITIES/ TARGETS BY END OF 2021	STATUS	RESULTS, END OF 2020
<p>213 300 (90%) of people living with HIV know their status, including in the non-government-controlled areas; 191 970 of those who know their status (90%) are receiving ART.</p> <p>Elimination of mother-to-child transmission of HIV is certified.</p>	ON TRACK	<p>By the end of 2020, 176 871 people knew their positive HIV status; 82% of them (146 488) were receiving ART, including 24 539 who live in the non-government-controlled areas (GAM 2021, Ministry of Health Public Health Centre).</p> <p>Ukraine is ready to apply for elimination of mother-to-child transmission of HIV certification.</p>
<p>90% of key populations have access to prevention programmes, 80% of which are domestically funded; 18 400 people who inject drugs receive OST that is funded with domestic resources.</p>	ON TRACK	<p>By the end of 2020, 75% (192 351) of people who inject drugs, 75% (37 120) of sex workers, and 63% (31 324) of gay men and other men who have sex with men received HIV prevention services funded by the Government; 14 868 people who inject drugs (100%) were enrolled in the government-funded OST (Ministry of Health Public Health Centre).</p>
<p>50% of primary health-care doctors have improved their skills for reducing discrimination towards HIV patients and key populations; barriers to HIV services for key populations are removed.</p>	ON TRACK	<p>The HIV online learning platform for primary health-care doctors was launched in Kyiv city as part of the Fast-Track initiative. From September 2020, around 345 health-care providers gained skills and knowledge for overcoming stigma and discrimination in clinical settings.</p>

JOINT TEAM

UNHCR, UNICEF, UNDP, UNFPA, UNODC, UN WOMEN, ILO, WHO, UNAIDS SECRETARIAT, IOM

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020

Ukraine continues to move closer to the 90–90–90 targets, including in non-government-controlled areas. In 2020, Dnipro became the third (after Kyiv and Odesa) Fast-Track City in Ukraine. Structural barriers to accessing testing and treatment have been an area of particular focus in 2020, with initiatives to address gender inequalities, gender-based violence, and stigma and discrimination against people living with HIV and key populations. Prevention for key populations advanced, through increased coverage of OST and PrEP programmes, and the generation of strategic information to better inform programming.

TESTING AND TREATMENT UPSTREAM ADVOCACY; TECHNICAL SUPPORT

Improvements to the testing and treatment cascade included optimization of ARV regimens, resulting in a 43% increase of patients on dolutegravir and fewer than 10% of patients receiving nonrecommended ARVs. The Ministry of Health was supported to improve HIV diagnosis procedures, registration and organization of medical care for people living with HIV. All licensed health facilities may now diagnose HIV; rapid diagnostic tests are allowed, and physicians trained on ART may initiate HIV treatment.

Technical support was provided to the Ministry of Health to implement the national elimination of mother-to-child transmission plan, including revised and updated regulations for the prevention of vertical transmission. Regional committees were established and validation indicators were collected and analysed.

Technical assistance was provided to HIV service providers in non-government-controlled areas, supporting clinical monitoring teams and psychosocial services to over 250 HIV-positive children and children born to HIV-positive mothers, and providing free medicine vouchers for children and parents in TB and HIV-affected families (over 1,200 beneficiaries between 2019–2020). Global Fund funds were secured to continue providing ART in 2021–2023 to 15 000 people living with HIV in those areas.

PREVENTION FOR KEY POPULATIONS POLICY ADVICE; TECHNICAL SUPPORT; CAPACITY BUILDING

Some 3,000 persons using PrEP have been included into the government-funded package of HIV prevention and care through upstream advocacy, and Ministry of Health guidance on the provision of PrEP is now in line with WHO recommendations and approaches, including prescribing dolutegravir as the preferred option.

An assessment of specific challenges that hinder access to HIV prevention, testing and treatment services was carried out among people who use new psychoactive substances and amphetamine type stimulants, including in two Fast-Track Cities, and a national clinical protocol on the treatment of health disorders among people who use new psychoactive substances/amphetamine type stimulants was updated.

A three-year implementation plan in support of the new National Strategy on HIV/TB/Hepatitis (2020–2023) was developed. Technical support was also provided to the National Coordination Council on TB/HIV/Hepatitis for a successful funding request to the Global Fund for US\$ 137 778 266 to support essential HIV and TB prevention and care services in 2021–2023, including for people living in the non-government-controlled areas.

ADDRESSING STRUCTURAL BARRIERS

POLICY DIALOGUE; ADVOCACY; TECHNICAL SUPPORT; CAPACITY BUILDING

Capacity-building support was provided to networks for key populations and women, including the National Key Populations Platform to strengthen its governance and operational mechanisms, and 80 people were trained on operations, including a gender-sensitive budgeting approach. Women living with HIV effectively advocated with the Government of Ukraine for inclusion of gender-responsive provisions in the draft 2021–2023 Action Plan on Implementation of the State Strategy on Combating HIV, TB and Viral Hepatitis till 2030 (pending approval), including on educational programmes, human rights, gender equality, and for eliminating gender-based violence and stigma and discrimination. The elimination of a discriminatory norm related to restricted opportunities of child adoption for people living with HIV was a direct result of this advocacy work.

Under the umbrella of the Fast-Track City initiative in Odesa, gender-based violence service providers were trained to conduct effective client-oriented, victim-sensitive voluntary pre-test counselling and testing for HIV for gender-based violence survivors. Of the 2,000 HIV tests taken at the centre by survivors of gender-based violence, nearly 2% yielded positive diagnoses; the women received referrals for treatment.

The HIV stigma Index 2.0 study was rolled out, and supplemented by "REAct" data and analyses to further integrate data on human rights violations, and stigma and discrimination in community-led monitoring. As Fast-Track cities, both Kyiv and Odesa have received technical support and advice in generating and analysing data to inform programming and a tailored stigma and discrimination response.

Addressing stigma and discrimination in the workplace was supported through ten online and face-to-face training sessions, through which a total of 115 food sector workers were trained (over 50% women) on HIV, COVID-19 and workplace violence and harassment. Additionally, 30 young trade union leaders from different economic sectors were sensitized on HIV at work; 57 employees of the State Migration Service received awareness training on HIV, TB, COVID-19, stigma and discrimination related to HIV, TB and LGBTI issues, and 11 participants became national trainers. A Memorandum of Understanding on the implementation of the Decent Work Country Programme for Ukraine for 2020–2024 signed with the Ombudsman's office in December 2020 paved the way for collaboration on non-discrimination at work.

CONTRIBUTION TO THE COVID-19 RESPONSE

In response to new challenges for HIV response in Ukraine due to the COVID-19 pandemic, the regional Joint Team provided guidance to the National Coordination Council on TB/HIV/Hepatitis to put forward two successful funding requests to the Global Fund. The grants (worth US\$ 15.3 million) have been used to procure essential diagnostic and personal protective equipment for TB and HIV service providers, including those from the nongovernmental sector.

Funds were reallocated to support COVID-19 response measures, including installing protecting transparent barriers in 10 regional asylum centres of the State Migration Service; meeting the costs of travel to drug dependence treatment facilities for 200 patients on OST during lockdown; supplying 245 bioprotective suits for prison medical staff; and providing protection equipment to 13 safe shelters that offer assistance to people living with HIV and gender-based violence survivors.

Key stakeholders were mobilized to monitor the continuity of HIV-services via the HIV-Service-Tracking Tool, and an analysis was made of the socioeconomic impact of the COVID-19 in Ukraine, including its impact on the provision of health services. The impact of COVID-19 on internet drug trade was also studied to understand the scope and variety of drugs traded online, to use in further HIV prevention and harm reduction programmes.

Women living with HIV participated in the Rapid Gender Assessment of the COVID-19 in Ukraine to collect gender data on the differentiated impact of the pandemic on women and men, including representatives of vulnerable groups. Results informed a comprehensive UN inter-agency Assessment of the Socio-Economic Impact of COVID-19 In Ukraine, Response and Recovery Plan, and other policy and programmatic measures led at regional and local levels. For instance, COVID-19 awareness-raising campaigns targeting 10 000 women living with HIV were rolled out on social media.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

Through advocacy and dialogue, the Ministry of Economic Development, Trade and Agriculture included gender-responsive propositions to the Voluntary National Review on SDGs 3 and 5. Active inclusion in the process was assured for women's CSOs, gender advocates, women living with HIV, internally displaced women, and rural women.

PERSISTING AND EMERGING CHALLENGES AND BOTTLENECKS	KEY FUTURE ACTIONS TO RESPOND TO CHALLENGES AND UNBLOCK BOTTLENECKS
<p>The HIV treatment cascade at the national level obscures regional differences; regional HIV treatment cascades must be created and monitored to identify regions where progress is lacking, to enable tailored guidance. More people must receive ART within seven days of a confirmatory test result (currently 54%; 81% for 12 PEPFAR regions) and 3–6-month MMD should be available for stable patients. ART regimens must be optimized to improve treatment outcomes and retention.</p>	<p>Identify gaps in regional HIV treatment cascades through assessment of standardized ART profiles and comparisons over time and between ART sites; develop ART scale-up plans, simplified HIV testing algorithms and HIV treatment pathways. Offer on-site technical guidance, strategic direction and direct mentoring support for scaling up HIV testing and treatment, implementation of optimized ART regimens, rapid initiation of ART, and MMD. Strengthen the capacity of relevant municipal institutions in Fast-Track Cities to provide strategic information and analysis.</p>
<p>New psychoactive substance/stimulant drug users' HIV/ HCV prevention needs are poorly addressed in current HIV prevention programmes, particularly online drug user interactions.</p>	<p>Focus on HIV/hepatitis C prevention needs of users of new psychoactive substances and stimulant drugs. Build capacities and equip local HIV-service providers with a model to reach 1,500 online drug-users with HIV-risk behaviour assessment and HIV testing, allowing enhanced counselling, case-management and referral to friendly doctors in HIV/ substance misuse/mental health services.</p>
<p>HIV integration in primary health care is critical to ensure optimal access to ART, but patients fear that they may encounter more HIV-related stigma and discrimination compared with dedicated ART sites.</p>	<p>Map the HIV-friendly primary health-care facilities and identify the system gaps for further actions to ensure UHC, facilitating choice of medical facilities at the primary health care level.</p>
<p>There is a need to strengthen the capacities of judges, lawyers and other relevant legal experts and law enforcement officials to promote the rights of people living with HIV and develop skills to ensure equitable legal processes.</p>	<p>Strengthen the judicial expertise of stakeholders in the HIV and Law Commission (through capacity building, guidance and technical documents, exchange missions) to ensure equitable access to justice for people living with HIV, and decrease stigma and discrimination during judicial and procedures.</p>
<p>35 000 people are stateless/at risk of statelessness in Ukraine; access to health-care and HIV/TB services, including HIV testing, is weak due to poor cooperation between the regional departments of the State Migration Service with the relevant stakeholders, and discrimination is prevalent.</p>	<p>Strengthen the capacity of the State Migration Service staff to provide stigma and discrimination-free HIV services, and increase access to HIV/TB-related services and testing.</p>

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