

Global AIDS Monitoring 2019: Ukraine

Summary

Epidemiological background: Ukraine bears the second-largest HIV epidemic in Eastern Europe and Central Asia. An estimated number of people living with HIV (PLHIV) in Ukraine is 250,777 in 2019 (Spectrum).

In 2019, 2977 AIDS related deaths (14% less than in 2018) and 16,405 newly diagnosed HIV cases (4% more than in 2018) were reported. HIV epidemic is mixed in Ukraine. Prevalence of HIV among general population is 0.9-1% and significantly higher among certain key population groups, where epidemic is concentrated: 22.5% among PWID, 5.2% among sex workers (SW), and 7.5% among men who have sex with men (MSM) (IBBS 2017). When the epidemic began in Ukraine, it mainly affected people – predominantly men – who inject drugs. But since 2008, sexual transmission of HIV has been driving the epidemic, with sexual partners of people from key population groups particularly at risk. Among 16,405 newly diagnosed in 2019, 73.6% of HIV cases has sexual and 25.8% parenteral mode of transmission.

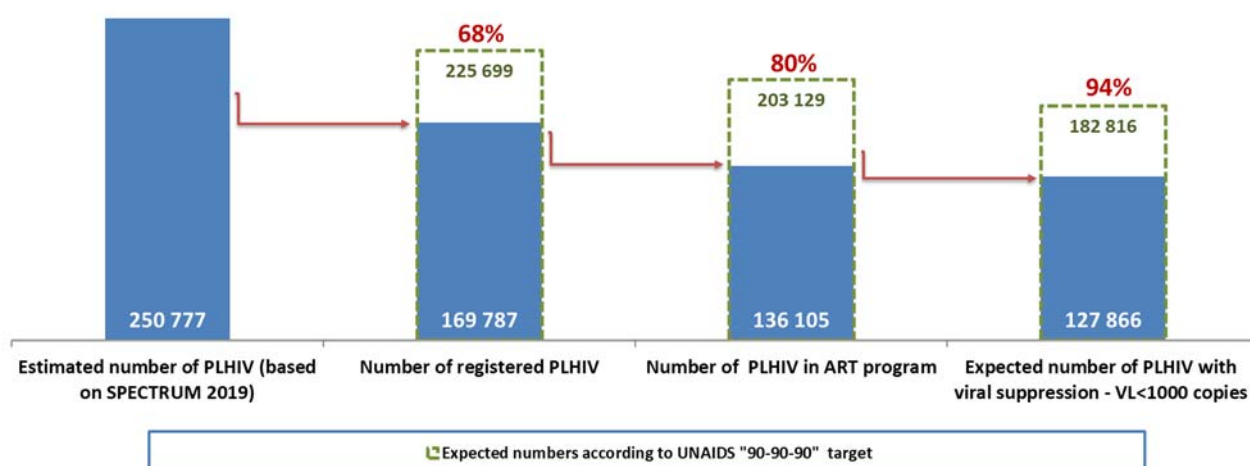
Ukraine's HIV epidemic remains geographically concentrated in seven administrative regions, with six of them located in the South and East. According to official statistics, 65% of PLHIV who were under medical supervision at the end of 2019 lived in 7 out of 25 regions of Ukraine. In three regions HIV prevalence more than twice exceeds the national average 355.1 per 100 000 of the population: Odessa region (823.8), Dnipropetrovsk region (765.0), Mykolayiv region (714.3).

Government and civil society have generally been proactive in responding to HIV and there has been some success in rolling out antiretroviral treatment (ART) and harm reduction programs. However, the difficult situation in the non-controlled by Ukrainian Government territories of Donetsk, Lugansk regions and the Crimea may lead to limited access of KPs and PLHIV to services, which may negatively affect the achieved success. Risks of ART, harm reduction services, preventing mother-to-child transmission services and pediatric treatment interruption and sexual violence are undermining of the impact of Ukraine's national HIV response in non-controlled by Ukrainian Government territories, which were already disproportionately affected by the epidemic.

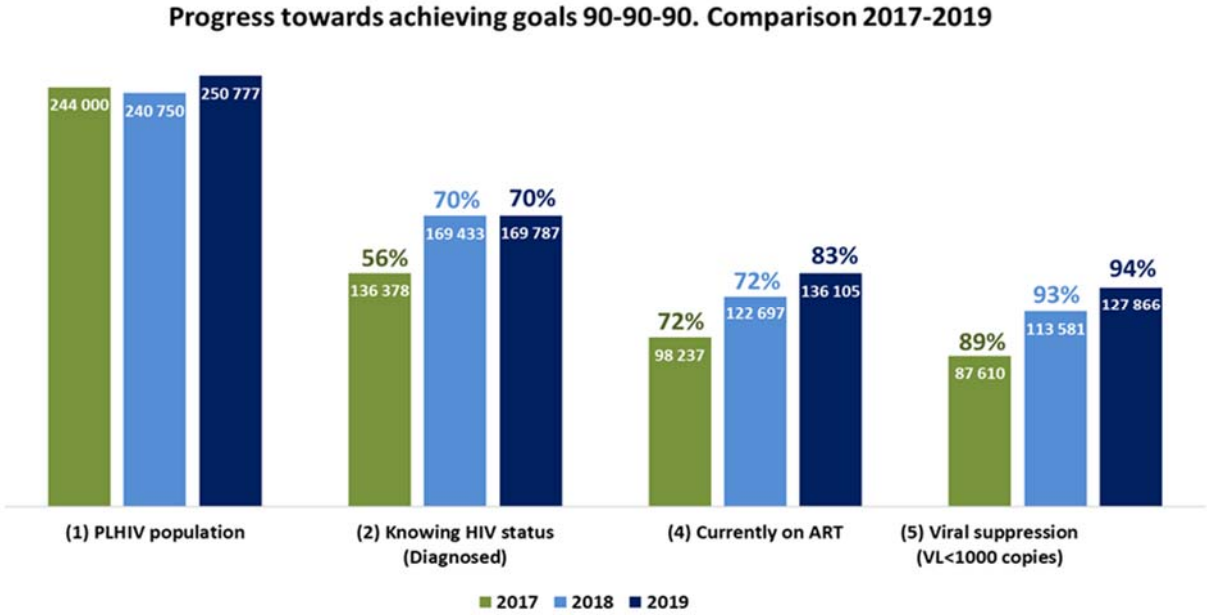
HIV Service Cascade for PLHIV, 2019

In 2017, Ukraine committed to the UNAIDS 90-90-90 Fast-Track targets. Achievements were that 68% (169,787 people) of PLHIV were aware of their status and 80% (136,105 people) of them were receiving treatment by the end of 2019. Of those on treatment, 94% have had viral suppression. Overall, this equates to 54% receiving treatment and 51% with viral suppression of all PLHIV in Ukraine (250,777 people).

Cross-sectional HIV cascade Ukraine, 2019



Compared to the 2018, Ukraine has achieved significant progress in achieving the 90-90-90 objectives in 2019. The great success was achieved in the scaling up of ART from 72% in 2018 to 83% in 2019 and improving the effectiveness of HIV treatment to 94% of PLHIV of those receiving ART (compared to 93% in 2018).



The data for displaying the cascade includes information from all over Ukraine. The data was collected from the official statistical reports of 25 regions of Ukraine (government-controlled territory), and from the programmatic report of All-Ukrainian Network of PLWH, which has the Global Fund funded project on non-controlled by Ukrainian Government territories.

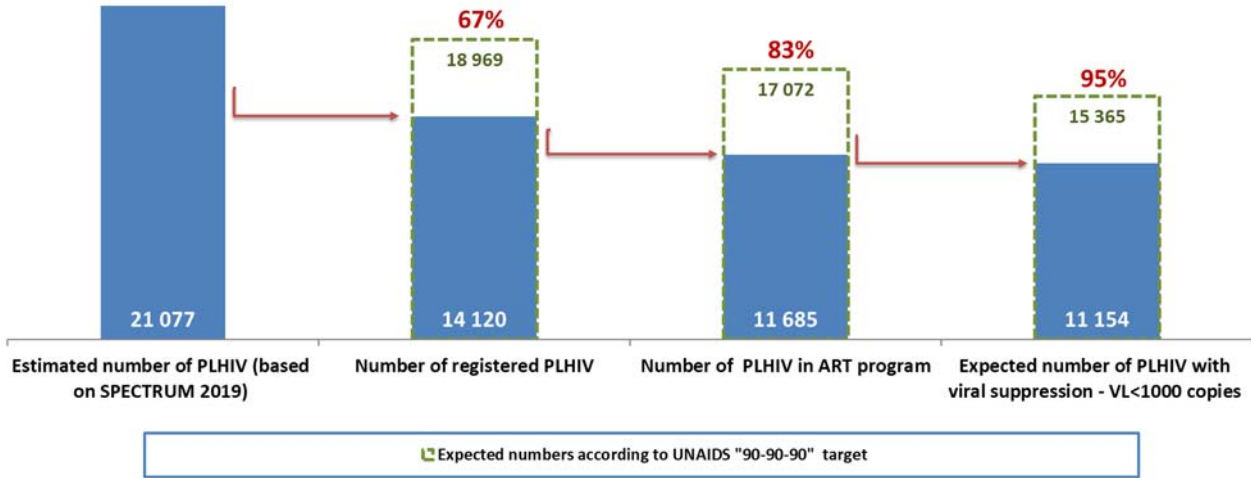
The number of PLHIV who were receiving ART in 2019 was 113,046 on controlled and 23,059 on non-controlled by Ukrainian Government territories respectively. On non-controlled territories number of PLVHIV includes 7,423 people in Crimea, 1,631 in the city of Sevastopol, 11,805 in Donetsk and 2,200 in Luhansk oblasts.

Fast Track Cities

Kyiv (2016) and Odessa (2017) signed the Paris Declaration on Fast Track Cities initiative.

In the city of Kyiv, progress as of the end of 2019 was that 67% (14,120 people) of PLHIV were aware of their status and 83% (11,685 people) of them were receiving treatment. Of those on treatment, 95% have had

Cross-sectional HIV cascade: Kyiv, 2019

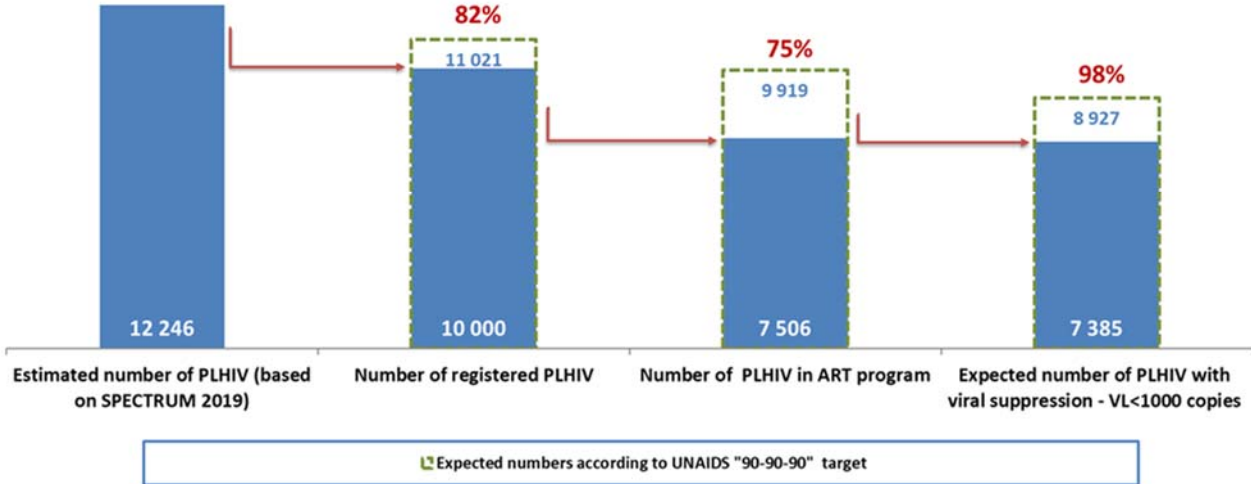


viral suppression. Regarding the estimated number of people living with HIV in Kiev: 55% are covered by the ART program and 53% have achieved viral suppression.

The biggest progress is in increasing the coverage of treatment for people who know their status: an increase from 73% in 2018 to 83% in 2019. The negative dynamics of the number of people who know their status, compared to the 2018 (11,890 people), can be explained by a large number of people excluded from the register in 2019 (a total of 2303 patients, 18% of whom died). Indicator of treatment effectiveness remain at a high level.

In the city of Odesa, progress as of the end of 2019 there was 82% of people living with HIV were aware of their status (people), of whom 75% (7506 people) were on treatment. Of those on treatment, 98% have achieved viral suppression. Overall, this equates to 61% of all people living with HIV in Odesa on treatment and 60% have achieved viral suppression.

Cross-sectional HIV cascade: Odesa, 2019



Key affected populations and HIV in Ukraine

It is estimated that 1.4% of the adult population of Ukraine inject drugs. This equates to approximately 350,300 people, 75% of whom are men and 25% are women. HIV prevalence among people who inject drugs was estimated as 22.5% (source - IBBS 2017). Last year, the percentage of people who were infected due to

inject drug use was 26% of all newly registered HIV cases in Ukraine (4,214 people). According to programmatic data, 67% (233,905 people) of people who inject drugs had access to HIV prevention services in 2019.

According to recent estimates, Ukraine has 86,600 sex workers (SW), the HIV prevalence rate is 5.2% (source - IBBS 2017). In 2019, 53% (45,446 people) of SW had access to HIV prevention services. There is no reliable data on the number of SW involved in treatment programs, as they often hide their involvement in commercial sex.

Recent estimates suggest that there are about 179,400 men who have sex with men (MSM) in Ukraine. The HIV prevalence in this group was estimated at 7.5% (source - IBBS 2017). In 2019, according to program data, 29% (51,544 people) of men who have sex with men had access to HIV prevention services. In 2019 the percentage of MSM was 3% (468 men) of all newly registered HIV cases in Ukraine, however 71% of them were identified in Kyiv city and in three regions (Odesa, Kharkiv, Dnipropetrovsk).

In 2019 HIV prevention services for transgender were launched within GFATM supported project with national wide coverage of 1,747 people. There are no estimates of the number of transgender people in Ukraine yet.

Prisoners are another group at particular risk of HIV. According to the Administration of the State criminal-executive service of Ukraine Ministry of Justice of Ukraine population of the penitentiary system was 52,863 persons as of 01.01.2020 year. The HIV prevalence in prisons is officially estimated at 7.2%. In 2019, 87% of prisoners living with HIV (3,824 people) were receiving ART (3,343 people).

HIV testing and counselling (HTC) in Ukraine

Based on data from various sources, more than 3.3 million people in Ukraine were tested for HIV in 2019.

According to epidemiological monitoring data in 2019 2.5 million people underwent HIV testing and counselling (HTC), which is 6.6% of the Ukrainian population. Almost half of them (48%) were pregnant women and blood donors. The use of rapid tests (RT), which allow to inform the person who is being tested about the screening result on-site is increasing annually. In 2019, every third person out of 2.5 million was examined using a RT. The overall effectiveness of RT testing according to the annual report was 1.4%.

According to program monitoring data provided by non-governmental organizations, in 2019 nearly 866 thousand of the number of key population groups were examined by a rapid test. Of these, 2.9% received a positive HIV test result and were sent to clinics to confirm the diagnosis.

The statistics shows that people are often diagnosed at a late stage of infection. In 2019, 91% among people with newly diagnosed HIV infections were covered by CD4 testing and 59% of registered HIV infected had less than <350 cells / μ l of CD4 cells.

Ukraine is dealing with this challenge through the intensification of HIV testing. In 2018-2019 there was launched a large-scale project to accelerate HIV / AIDS efforts - HealthLink (this activity is implemented within PEPFAR COP), which covered 12 regions of Ukraine, where the burden of the epidemic is the highest. In 2019 the new protocols for HIV testing and treatment, which comply with the current WHO guidelines, were developed and approved by the Ministry of Health. The HIV testing algorithm was changed, involving primary care physicians for testing. Now HIV screening test is included into the basic primary health care package.

Various approaches are being implemented to increase HIV testing uptake. Ukraine implements assisted HIV self-testing for key population groups. PEPFAR funded project "ACCESS PRO" is working on implementation and dissemination of effective models and approaches for the identification of people who live with HIV (testing on the basis of non-specialized medical institutions, testing partners of people who have been diagnosed with HIV) and involving them in treatment.

Also, the model of PITC (testing at the initiative of a health care practitioner) was introduced in all HCF of Ukraine. PITC includes testing on clinical indications and on the presence of risky behaviour (Order of MOH No 388). An effective method for identifying HIV-positive is index testing, which is implemented at both the HCFs and NGOs levels. In addition, the method of full (100%) HIV-testing is implemented in tuberculosis and dermatological dispensaries. Contingents of the population who receive mandatory screening are pregnant

women, recruits, prisoners, and donors. The project is also piloting the implementation of the index HIV testing model. As part of the pilot project, over 60 thousand index cases were identified over 12 months, of which only one third agreed to provide contact information. Among the contact persons, one out of four (4560 people) was able to determine HIV status, of which 826 (18.1%) already knew about their HIV-positive status. Of the 3,734 contacts with unknown status, 555 (14.9%) people with HIV were identified for the first time.

HIV prevention programmes in Ukraine

Ukraine has adopted a public health approach to countering epidemics and in 2019 the Cabinet of Ministers of Ukraine approved a new unified HIV/TB/Hepatitis strategy up to 2030 with Fast Track targets.

The strategy uses a patient-centered, combined approach that focuses on prevention programs targeting key populations while expanding access to treatment. Ukraine uses ambitious global goals for its national strategy. A methodological framework has been developed to facilitate the transition of HIV prevention and care services and support from GFATM to domestic funding.

Ukraine has been providing opioid substitution therapy (OST) on a relatively small scale since 2004. Since its inception, OST programming has been largely funded by the Global Fund to Fight AIDS, Tuberculosis and Malaria. However, in 2017, the Global Fund significantly reduced its financial support for Ukraine, and in 2018 the Ukrainian government took over full financial support of its OST programme, making it the largest of its kind in eastern Europe and central Asia. In 2019, the government committed to fund access to OST for over 12,411 people at 215 healthcare facilities.

In 2019, coverage of PWID with prevention programs was 66.8% (58.3% in 2018). Ukraine has been scaling up its needle and syringe programme (NSP) since 2012. National policy stipulates that NSP services should be free of charge and 'low-threshold', meaning that people are not required to meet specific criteria in order to receive injecting equipment. In 2019, there were 2,377 NSP sites in Ukraine across 27 regions. Every person who inject drugs receive an average of 53 clean syringes per year. As of 2017 Integrated Bio-Behavioural Survey (IBBS) among PWID in Ukraine suggests that 97% of respondents used sterile injecting equipment at last use we may assume that long lasting prevention national wide programme resulted in behaviour change of the most at-risk drug users, who purchase sterile syringes themselves additionally to prevention package.

In 2019, coverage of MSM with prevention programs was 31.2% (25.2% in 2018). Pre-exposure prophylaxis (PrEP) was introduced in 2017 as part of a pilot project for men who have sex with men and transgender people. The project is implemented by the International Public Health Alliance Charitable Foundation and funded by PEPFAR. The pilot project will potentially contribute to the development of a sustainable PrEP delivery model for these groups. In 2019, 1,732 people from different groups with a high risk of infection had access to the PrEP, mainly MSM and discordant couples.

In 2019, coverage of female commercial sex workers with prevention programs was 52.6% (46.0% in 2018).

Preventing mother-to-child transmission (PMTCT). In 2019, based on the data from the early HIV diagnostic rate of MTCT was 1.6% (31 HIV positive children). HIV testing coverage among pregnant women is 99.5%. Among HIV-positive women, 65% know their status before pregnancy. According to Option "B+" 95.6% of pregnant living with HIV were receiving three-component ART; 93.4% of them continue ART after childbirth. Almost all children, who were born by HIV-positive women, are covered by ARV prophylaxis (97.7%) and are bottle-fed (98,6%). In 2018 the PMTCT database was implemented, and in 2019 - the electronic data verification tool for improving the quality of data on PMTCT has begun. In 2019 the National Task Force for validation of EMTCT was established under the Ministry of Health.

Antiretroviral treatment (ART) availability in Ukraine

In 2019, 51% (136,105 people) of all PLHIV in Ukraine were receiving ART. In the same year Ukraine introduced into its national policies the recommendations provided by WHO in the updated (in 2018) Consolidated Guidelines on the use of antiretroviral drugs for the treatment and prevention of HIV infection.

In 2019 20,764 people began to receive ART for the first time, and 8592 patients were repeatedly included in the treatment program on the government-controlled areas of Ukraine.

2018 has been marked by widespread introduction of standardized ART regimens and increase in proportion of the latest HIV treatment regimens with the use of Dolutegravir. At the end of 2019, among 113 thousand PLHIV in the territories controlled by the Government of Ukraine, 43% of people received ART regimens with DTG.

HIV and tuberculosis (TB) in Ukraine

The HIV/TB co-infection situation remains severe. In 2019, tuberculosis was the cause of around a half (32,7%) of all AIDS-related deaths. The country also carries a high burden of TB and is ranked fourth in the world for multi-drug resistant TB (MDR-TB).

Ukraine has the highest HIV / TB co-infection and the second highest absolute number of cases in the European region. In 2019, among the 17,052 PLHIV who were taken under medical supervision due to HIV for the first time, 20.3% (3456 people) were diagnosed with tuberculosis, and 55.8% (9511 people) were covered with preventive treatment.

Funding for HIV in Ukraine

Ukraine conducted a NASA cycle for the period 2017 (total expenditures - \$107,815,069.19). Results of financing in Ukraine in this period demonstrate an increase expenditures to fight the HIV / AIDS epidemic from the state budget (2016 - 23.06%, 2017 - 43%).

Also in 2019, there was an increase in costs from the state budget as HIV prevention services began to be funded entirely from the state budget (expenditures data for 2019 in Ukraine is not available due to the fact that the next NASA cycle is scheduled for end 2020 – early 2021 and will include data for 2019–2020 accordingly).

Of the total costs of the HIV / AIDS epidemic (2017), 46.7% are costs for Treatment, care and support (not including costs for TB / HIV co-infection, diagnosis and treatment - 9.3%), 14.4% are costs for Prevention, 1.1% are costs for Prevention of vertical transmission of HIV, 27.8% are costs for Program management, 0.7% are costs for Creating and enabling environment.