

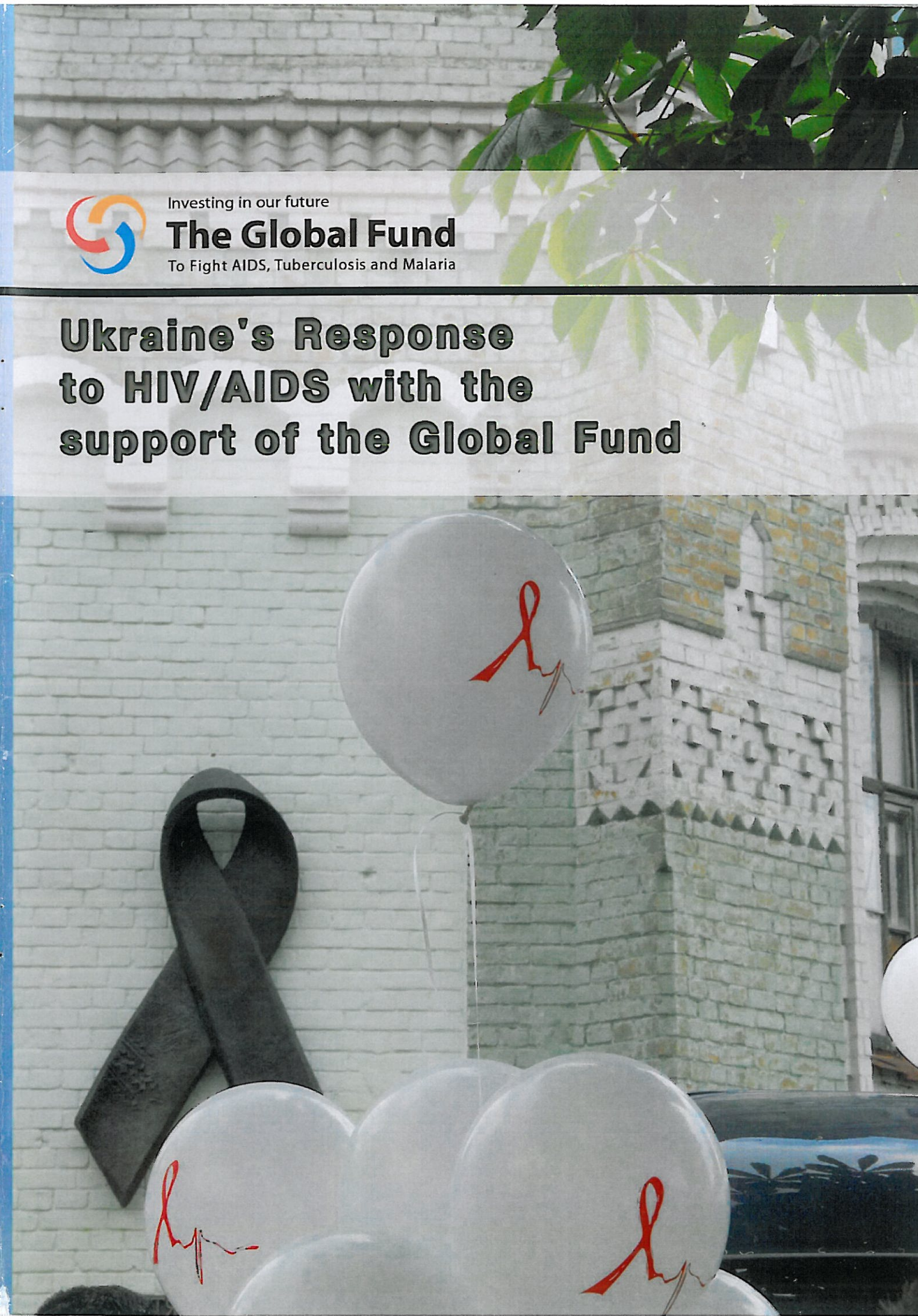
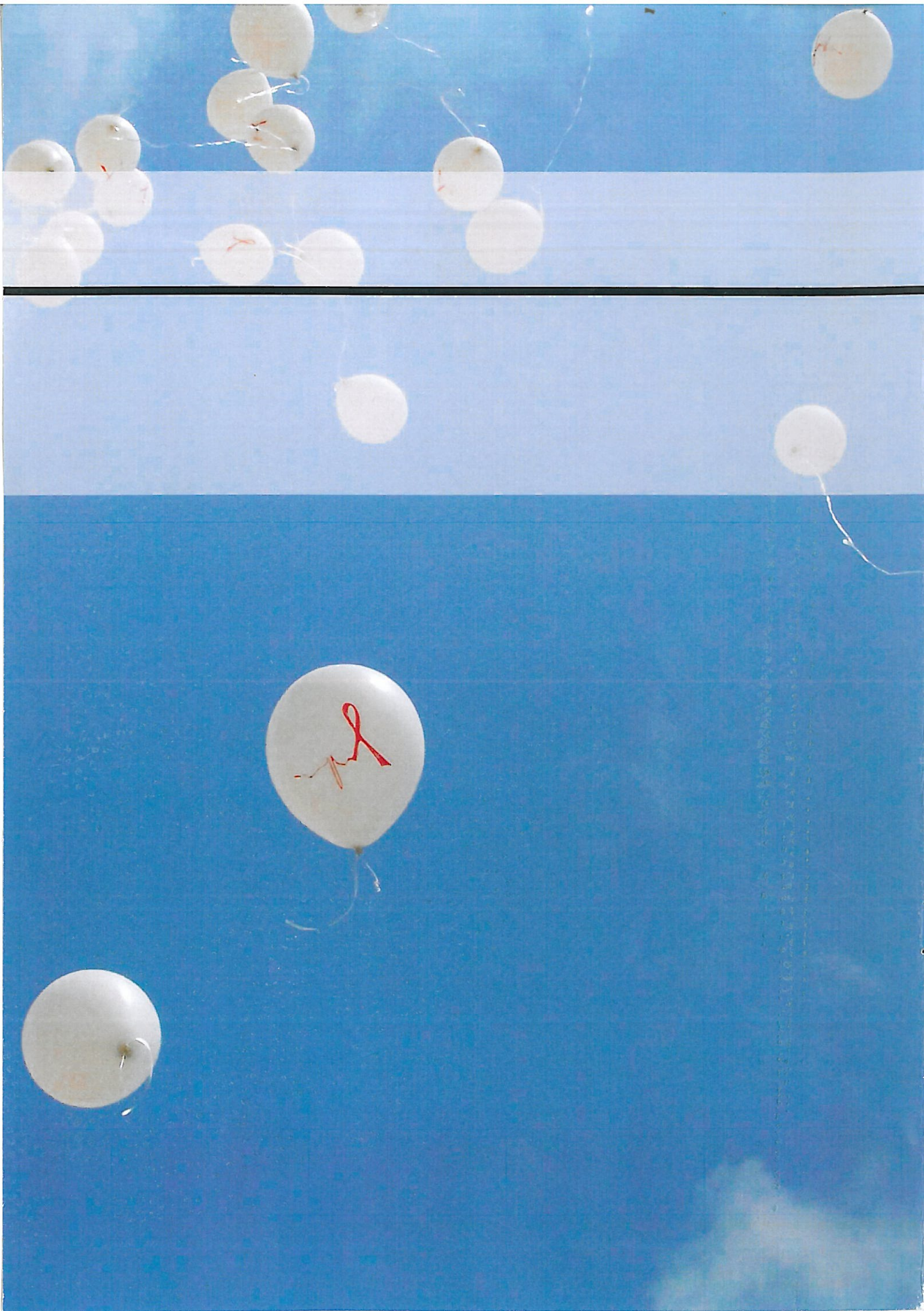


Investing in our future

The Global Fund

To Fight AIDS, Tuberculosis and Malaria

Ukraine's Response to HIV/AIDS with the support of the Global Fund





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UKRAINE

| Schedule | 9-10 December 2010 |
|-----------------------|--|
| | Route 1 - 9 December 2010 |
| 08:30-09:00 | Transfer from the hotel to the first site. |
| 09:00-09:40 | Substitution maintenance therapy (SMT) site, stationary syringe exchange point for injection drug users (IDUs). Communication with clients, doctors, social workers, and SMT programs activists. |
| 10:00-11:30 | Lavra AIDS Clinic: treatment, care, and support for PLWHA, ART adherence, ARV/TB adherence programs, MSM (men having sex with men) self-support groups, counseling for discordant couples, training center for doctors, "Time for Life" NGO. |
| 1:30-12:30 | Site-seeing at Kyiv Pechersk Lavra, UNESCO World Heritage Site. |
| 12:30-14:00 | Lunch. |
| 14:00-14:40 | Transfer to the next site. |
| 14:40-15:10 | ART site at Trust Room, where patients receive treatment with funding from the Government and the Global Fund. STI (sexually transmitted infections) doctor working with most-at-risk groups. |
| 15:30-16:00 | Following social workers on their street outreach route targeting IDUs. |
| 16:10-17:30 | "Convictus" NGO Community Centre for FSWs (female sex workers) and IDUs: voluntary counseling and testing (VCT) with rapid tests for HIV, STIs, Hepatitis B and C. |
| 17:30-18:10 | Transfer back to the hotel. |
| Night options: | |
| 20:00-21:15 | Following social workers on their MSM outreach route along Kyiv central streets. |
| 20:00-21:50 | Places where street children live. Following Kyiv municipal social services mobile group route - rapid testing and counseling. |
| 22:00-24:00 | Mobile gynecological clinic night field work with female sex workers (rapid testing and counseling, distribution of condoms & prevention materials). |



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UKRAINE

Route 2 - 10 December 2010

08:30-09:00

Transfer to the first site.

09:00-10:30

Kyiv AIDS Center – integrated services: ART, SMT, ART/TB, treatment, care, support, and prevention. Meeting clients, doctors, and social workers.

10:30-11:10

Transfer to the Penal Colony.

11:10-13:10

Penal Colony No. 85. Prevention, care, treatment, and support activities among prisoners, information lectures.

13:30-15:00

Lunch.

15:00-15:40

Transfer to the next site.

15:40-17:00

Kiev Affiliate of the All-Ukrainian Network of PLWH, Comprehensive center for children and adults. Model of cooperation and co-financing with a governmental authority.

17:10-17:30

Drug store nearby. HIV/AIDS prevention work through pharmacies: meeting clients, pharmacy workers and NGO activists implementing the project

17:30-18:10

Transfer back to the hotel.

Night options:

20:00–21:15

Following social workers on their MSM outreach route along Kyiv central streets.

20:00-21:50

Places where street children live. Following Kyiv municipal social services mobile group route - rapid testing and counseling.

20:00-24:00

Mobile clinic field work with IDUs.

Overview

Ukraine covers a geographical area of more than 600,000 square kilometers and has a population of approximately 46 million people. It is the second-largest country in Eastern Europe and the fifth most populated country in Europe. Ukraine is composed of 24 oblasts (provinces), one autonomous republic (the Crimean peninsula) and two "special status" cities: Kyiv (Ukraine's capital and largest city), and Sevastopol (located in the Crimea). Gross national income per capita is US\$ 2,550. Average life expectancy in Ukraine is ca. 68 years (2008 est.): 62 years (men) and 74 years (women). The population growth rate is negative and the UN warns that Ukraine's population could fall by as much as 10 million by 2050.



HIV/AIDS in Ukraine

Together with Russia, Ukraine has one of the most serious HIV/AIDS epidemics in Eastern Europe and Central Asia and is experiencing one of the fastest-growing HIV epidemics in the world. The first case of HIV was identified in 1987; since that time, 171,661 cases have been officially recorded, with 19,389 deaths. According to official data from 2009, 54 people were infected with HIV, 12 developed AIDS, and seven people died of AIDS-related diseases every day of the year. Although, the number of newly registered HIV-infection cases has been growing annually since 1999, the growth rate has declined steadily between 2006 and 2009 (16.8 percent, 10.5 percent, 7.6 percent and 5.7 percent per year, respectively).

It is widely accepted that the official data underestimate the scale of the HIV/AIDS epidemic in Ukraine and do not represent the real number of people infected with HIV. But updated HIV/AIDS estimates show that there were 360,000 HIV-positive persons (ages 15 and over) living in Ukraine at the beginning of 2010. The difference between official statistic and estimated numbers shows that only 28 percent of those living with HIV in Ukraine have taken an HIV test and know their HIV status.

In 2009, more than three-quarters of HIV-positive Ukrainians were of reproductive age (i.e. 15 to 49 years old). At the same time, the proportion of HIV cases in the 15–24-year-old age group as a percentage of all new cases has declined in recent years, suggesting a certain stabilization of the overall epidemiological situation, perhaps owing to young people's shift to less risky behaviors.

In the last three years the incidence rate among pregnant women was 0.33 – 0.34 percent and among blood donors – 0.13-0.14 percent. Primary testing reveals an average 0.55 percent HIV prevalence among pregnant women.

The HIV epidemic in Ukraine is concentrated among most-at-risk populations. The parenteral route of HIV transmission associated with injecting drug use represented the main pathway for the spread of the disease in Ukraine from 1995 to 2008. Only in 2008 did sexual transmission overtake parenteral transmission as the main pathway. In 2009 the percentage of HIV infections due to heterosexual transmission reached 43.5 percent of the total number of cases. In the first half of 2010 the share of transmission through injection drug use continued to decline, from 36 percent in the previous year to 34 percent as of 1 July 2010.

HIV prevalence among vulnerable populations

Prevention work among IDUs is currently the only area of HIV response that has demonstrated to have sustained impact on the epidemic in Ukraine. This has been acknowledged in the UNAIDS REPORT ON THE GLOBAL AIDS EPIDEMIC 2010: "...HIV infections among people who started injecting drugs in only the past two years (and are thus more likely to represent incident infections rather than ones acquired much earlier) decreased from a peak of 30% in 2004 to 11% in 2008". According to data from routine epidemiological surveillance, the HIV prevalence among IDUs dropped from 15.3% in 2007 to 13.3% in 2009. This steady reduction of HIV prevalence among drug users can be considered one of the most important achievements of prevention programs (implemented in Ukraine mostly due to the Global Fund support).

"Ukraine has the highest prevalence of HIV in Europe, but an emphasis on harm reduction in the two main risk groups—drug users and commercial sex workers—is bearing fruit." Hayward, P. (2010). World Report. First reduce harm: tackling HIV in Ukraine. The Lancet.

Between 2005 and 2009 an increasing absolute number of HIV infection cases among men who have sex with men was registered each year. Only 37 such cases have been officially registered in the first half of 2010. However, sentinel surveillance data point to a substantial under-registration of HIV cases among this group. According to the last sentinel surveillance study published in 2009, HIV prevalence among men who have sex with men is 8.6 percent.

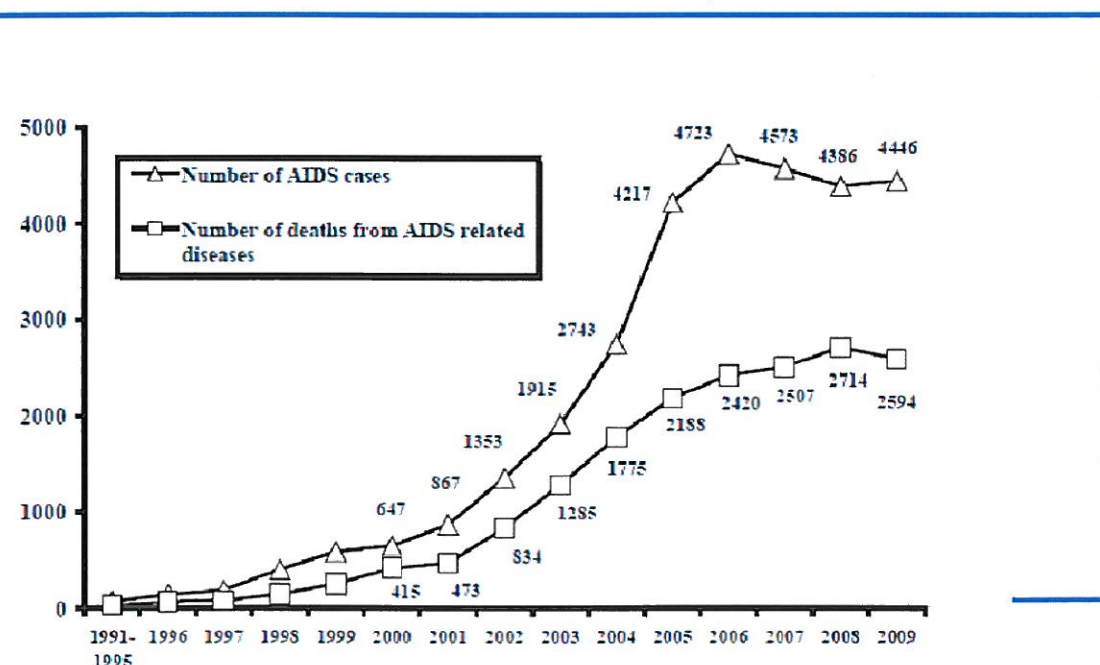
Ukraine does not register HIV infection cases among sex workers, as this group cannot easily be disaggregated from all sexually transmitted cases. However, sentinel surveillance data indicate a broad and growing epidemic among this population. According to the latest studies HIV prevalence among sex workers is 13.2 percent.

In 2009, HIV prevalence among prisoners was studied for the first time in Ukraine as part of the national sentinel surveillance effort. According to 2009 survey data, the HIV prevalence rate among prisoners was 15 percent.

AIDS cases

The number of AIDS patients in Ukraine increased annually up to a record level of 4,723 cases in 2006. Due to the introduction of large-scale antiretroviral (ARV) therapy, the country for the first time registered a slight decrease in the number of AIDS patients at the end of 2007.

Number of new AIDS cases and deaths of AIDS related diseases among citizens of Ukraine, 1991-2009:



And in 2009, for the first time, the number of AIDS-related deaths declined from 5.8 per 100,000 population to 5.6, which is the first significant evidence of the impact of the ARV scale-up supported by the Global Fund program.

But much remains to be done in terms of scaling up ARV treatment. The rate of treatment of active injecting drug users remains limited (according to 2009 data, only 7.5 percent of the total number of those receiving ARV therapy) because of insufficient availability of substitution therapy, and hence problems with treatment adherence.

Pharmacy

The pharmacy we visit distributes syringes and condoms procured and supplied by the Alliance-Ukraine for injecting drug users. In the pharmacy information materials are provided on safer sex, safer drug use, as well as general HIV prevention information. Pharmacists have participated in trainings on HIV and other sexually transmitted infections prevention and counseling techniques. Currently, 111 pharmacies in 13 regions of Ukraine and in the city of Kyiv are involved into HIV/AIDS prevention activities in cooperation with nongovernmental organizations, and needle exchange is carried out in 33 pharmacies (in ten cities and five localities). In 2009 14,264 clients (injecting drug users and sex workers) received prevention services in the pharmacies in the course of 140,000 visits.

Overview of Grants in Ukraine

| Round | Principal Recipient | Amount Committed to Date | Total Lifetime Budget | Amount Disbursed to Date |
|--------------|--|--------------------------|-----------------------|--------------------------|
| HIV/AIDS | | | | |
| Round 1 | The International UK HIV/AIDS Alliance | US\$ 99,137,829 | US\$ 99,137,829 | US\$ 98,495,327 |
| Round 6 | International HIV/AIDS Alliance in Ukraine | US\$ 131,527,035 | US\$ 131,527,035 | US\$ 85,068,138 |
| | All-Ukrainian Network of People Living with HIV/AIDS | | | |
| Tuberculosis | | | | |
| Round 9 | To Be Determined | US\$ 34,584,205 | US\$ 103,459,608 | N/A |



The Municipal Social Services Centre for Children, Family and Youth of Kyiv is a specialized state institution implementing a project on disease prevention among the street children of Kyiv. It is currently assisting 600 street children between the ages of 14 and 18. The center uses multidisciplinary team approach to provide social and medical (when needed) support for street children, inform them about available free social services, warn them about the dangers of their risky behavior. The project also involves youth volunteers to assist the target group in socializing. If Ukraine is successful in their Round 10 application, that grant will be used to further scale up this program.

Mobile Clinic Program

Starting in November 2008, 15 nongovernmental AIDS service organizations have been providing mobile HIV/STI counseling and medical assistance to groups most vulnerable to HIV, including sex workers and injecting drug users in 12 Ukrainian regions. As of 1 January 2010 the clinics have handled more than 56,000 visits by people who use drugs, 40,000 visits by sex workers, 1,300 by men who have sex with men, and more than 1,000 sexual partners of those in vulnerable populations.

Kyiv AIDS-Center

The visit will include a stop at the Kyiv AIDS center, one of the country's network of AIDS Centers specially established to provide HIV testing, treatment and care to HIV-positive persons. Kyiv AIDS-Center is a medical institution which provides the following services: HIV counseling and testing, prescription of ARV therapy and support of those patients who are on therapy, testing and treatment of opportunistic diseases, etc. There is also a substitution therapy site which is currently serving 354 clients who get methadone and buprenorphine. Club "Eney" (a nongovernmental organization) organized a stationary syringe exchange point where syringes, condoms, informational materials, and peer consultations are provided. The international charitable fund "Vertical" is also implementing a range of activities for HIV-positive patients and people who use drugs within the center.

"Today, thanks to money from the Global Fund to Fight AIDS, Tuberculosis and Malaria, the clinic treats 1300 adults and 120 children and monitors their CD4 counts and HIV levels in their blood. There are computers everywhere. The clinic also does TB diagnosis and has an IDU community center where they can exchange needles." Cohen, J. (2010). HIV/AIDS in Eastern Europe. The Science.

Bucha Penal Colony No. 85

The Kyiv branch of the All-Ukrainian Network of People Living with HIV/AIDS, with the support of the Global Fund, has implemented a number of services in Bucha Penal Colony No.85. Some of these activities include: prevention programs, counseling with infectious disease specialists, peer-to-peer consultancies, activities for monitoring adherence to ARV treatment, access to testing for CD4, viral load, self-help groups, informing of prisoners' families about all aspects of life with HIV.

In addition "Vertical" supported by Alliance-Ukraine is also implementing a project on HIV/AIDS prevention in three colonies of the Kyiv region (with total annual coverage of 1,200 prisoners) including Bucha Penal Colony No. 85. Condoms and informational materials are distributed, while psychologists and epidemiologists conduct trainings on harm reduction, HIV prevention, STI for inmates and the colony employees. Twice a month seminars take place as well as self-support groups. Volunteers are selected among inmates to participate in the extended training course of nine training sessions with exam and certification level of knowledge on HIV/AIDS to be measured at the beginning and at the end.

"Step by Step"

"Step by Step" is a nongovernmental organization which has been working since 2000. They operate an HIV prevention and psychosocial rehabilitation center for chemically dependent people. Thanks to Global Fund financing it provides services to more than 6,500 people who use drugs annually, including needle exchange, condom and informational materials distribution, voluntary counseling and testing and sexually transmitted infections testing with rapid tests, counseling by peers and professionals, self-help groups, etc. It also provides psychological help to individual drug users and their families. They also started a special group intervention to address stimulant drug users' needs.

The Ukraine has the biggest tuberculosis (TB) control problem of any country in Europe with the exception of the Russian Federation. In 2008, according to the World Health Organization (WHO), Ukraine had an incidence rate (all forms) of 100 (82 - 120) per 100,000 population, a TB prevalence of 76 (19 - 150) per 100,000 and a TB mortality of 15 (7.1 - 26) per 100,000. Sixteen percent of all new cases and 44 percent of all repeat cases present with multidrug-resistant TB. The prevalence of HIV among TB patients is estimated to be 20 percent (2007) and a recent study has shown that HIV infection is significantly associated with multidrug-resistant TB.

The current national TB program (NTP) was approved in 2007, establishing two bodies: the "Committee on HIV/AIDS and other socially-dangerous diseases", a state body with responsibility for strategic direction; and the "Ukrainian Center for TB Control" under the Ministry of Health (MoH) which has responsibility for implementation. The NTP aims to decrease TB morbidity and mortality, prevent multidrug-resistant TB, improve laboratory services, increase treatment effectiveness and institutionalize the training of health care workers. It has 15 objectives, each of them with indicators for monitoring progress and a budget of US\$ 240 million. By 2011, the NTP should achieve 95 percent DOTS coverage and 60 percent detection rate with a treatment success rate of 85 percent among the annual incident sputum-smear positive pulmonary TB cases.

In 2001, the WHO, with financial assistance from the United States Agency for International Development (USAID) and in collaboration with the local authorities, established a DOTS pilot project in the Donetsk region and expanded the program to all regions in 2003. Since 2006 and under support of the Rinat Akhmetov Foundation for Development of Ukraine (FDU), WHO is assisting the implementation of the first MDR-TB pilot project of the country following Green Light Committee (GLC) recommendations in Donetsk region.

From 2002 to 2004, the KNCV has implemented a DOTS project in the capital city of Kyiv with financial support from the European Commission. Since 2005 and with the support of USAID, WHO and PATH have been expanding DOTS in an additional five regions (Kharkiv, Kherson, Crimea, Dnipropetrovsk, and Zaporizhzhya). In 2008, USAID agreed to support PATH expanding DOTS to Kyiv city, Sevastopol city and the Luhansk and Odesa regions. Where DOTS has been implemented, the TB control targets of case detection and treatment success are improving but are not yet reaching targets because of high levels of treatment defaulting and drug resistance.

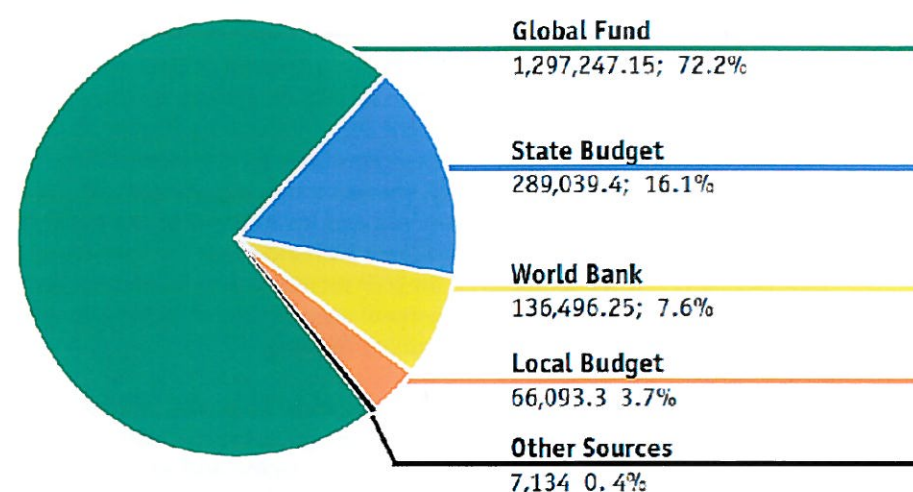
HIV/TB co-infection in Ukraine

TB remains the main cause of death in those affected by AIDS. 2,539 HIV-infected persons died of TB in 2009, which is 43.3 percent of all AIDS-related deaths. Also the number of TB/HIV co-infection cases goes up. If in 2007 the number of such co-infection cases was 5.0 per 100,000 of population, in 2009 this indicator was already 7.4 cases.



Global Fund Programs in Ukraine

Sources of Funding: National AIDS Program 2004-2008
(thousands hryvnias)



ROUND 1

In January 2003, the Government of Ukraine signed a grant agreement with the Global Fund to implement a national HIV and AIDS prevention and treatment program to be implemented by three Principal Recipients. A year later, the Global Fund suspended the grant amid concerns over how it was being managed, the speed of disbursement and how the Principal Recipients were implementing the work. A new Principal Recipient was chosen, the civil-society organization International HIV/AIDS Alliance in Ukraine. This program ran from March 2004 to March 2009, with a budget of US\$ 98 million for the five-year period. It shaped the national response to HIV and AIDS in Ukraine.

This program included the rapid scale-up of ARV therapy, a comprehensive package of care, support and prevention services for most-at-risk populations, and the rollout of substitution maintenance therapy. There were a number of significant results, as outlined below.

Only 255 people in Ukraine were receiving ARV therapy as of 2004. But by the end of September 2008 there were 6,070 people (including 911 children) receiving ARV therapy through the Global Fund grant. As a result, AIDS morbidity gross rates in this five-year period decreased by 75 percent from 38 percent morbidity in 2004 to 8 percent in 2008. In 2008, 80 percent of pregnant women living with HIV had received treatment to prevent mother-to-child transmission through the Global Fund supported program (up from 35 percent in 2003) and as a result transmission rates had fallen from 10 percent in 2003 to 7 percent four years later.

Prevention program reached more than 210,000 people who inject drugs and more than 2,600 drug-dependent people in 26 regions of Ukraine were receiving substitution maintenance therapy by the end of the Global Fund supported program. In addition, prevention programs were incorporated into the general school curriculum reaching more than 3 million pupils.

The program exceeded the vast majority of its targets, demonstrating that a civil society organization with experience of community mobilization and working in partnership can effectively make a difference in a national response.

Forming the major part of Ukraine's response to HIV and AIDS, the Global Fund-supported program has had a significant impact on the epidemic as follows:

- The absolute number of new HIV cases per 100,000 tests decreased from 632.8 in 2006 to 590.2 in 2008.
- After ten years of consistent growth, the number of new cases of HIV among people who inject drugs started to decrease in 2007 from 7,127 in 2006 to 7,009 in 2008.
- As a result of intensive scale-up of ARV therapy, the AIDS morbidity rate has been declining consistently for the last three years.

The Global Fund also provides support for «Time for Life +», an organization for HIV-positive people, one of the first in Ukraine. It organizes support for the treatment of HIV-positive people, including providing and monitoring adherence to ARV treatment, social and psychological help based on the multidisciplinary approach, and providing counseling for family members, relatives and friends. Palliative care is another important service. Support groups for HIV-positive men who have sex with men are also conducted here.

Kyiv Affiliate of the «All-Ukrainian Network of People Living with HIV/AIDS»

With support from the Global Fund, the organization provides services for adherence to ARV therapy for HIV-positive children; prevention of mother-to-child transmission (PMTCT); non-medical care at home for HIV-positive adults; palliative care for adults with HIV/TB/drug dependency; community centers for HIV-positive adults; day-care centers for HIV-positive children and children born to HIV-positive mothers; support of HIV-positive prisoners.

The organization is based in the offices of the Kyiv city center of social services for children family and youth but some activities are also carried out in the hospital where there is access to the target group. However, many of the services are provided offsite: at home (for non-medical care), the orphanage (HIV-positive children deprived of parental care) and two prisons (for HIV-positive prisoners), in antenatal clinic. This is necessary because location and transport are important factors in adherence to treatment.

The staff includes both people who are positive themselves and the professionals who have higher education in social work, psychology and medicine.

Trust Cabinet

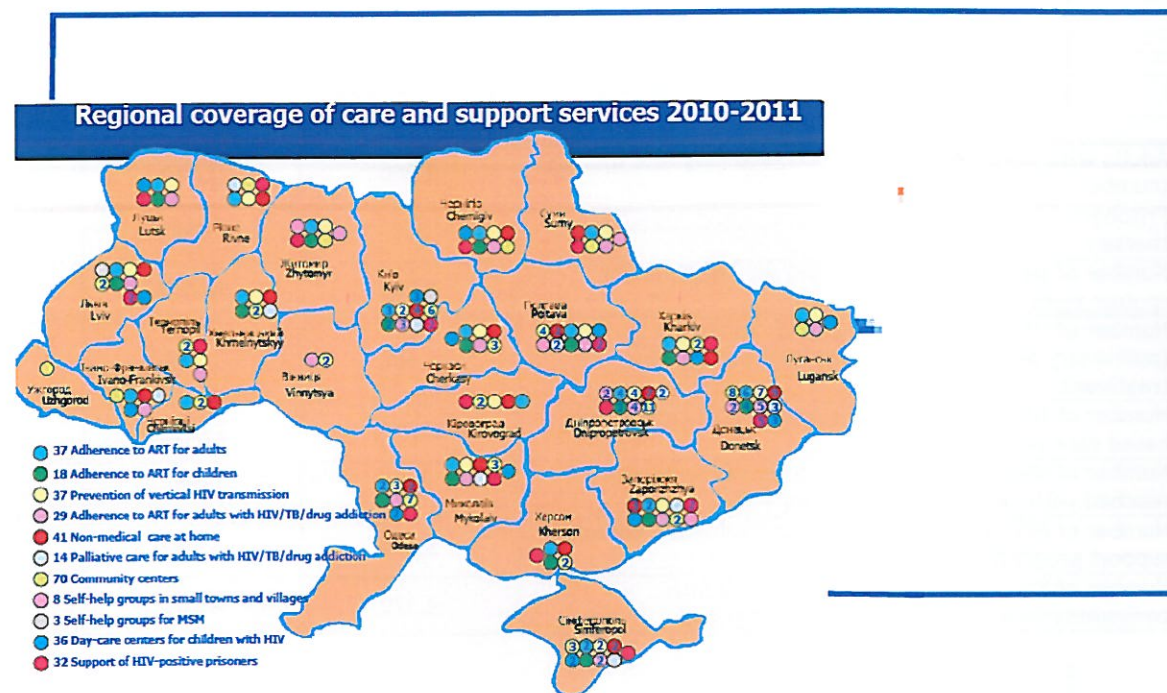
The site was opened in October 2009 within Kyiv city AIDS Center structure to achieve decentralization of services. Almost 300 patients are receiving ARV therapy (both through the Global Fund and through the state program). The center provides voluntary counseling and testing services and the local nongovernmental organization «Life without Dependencies», based at the clinic, provides integrated support to 50 patients with triple diagnosis HIV/TB/injecting drug use. Another civil society organization, «Convictus», also provides referrals to this center.

«Convictus» community center

The nongovernmental organization «Convictus» was established in Sweden in 1986 and has been working in Ukraine since 2006. It operates a community center where clients can have a shower, watch movies on HIV and sexually transmitted infection prevention, or receive counseling on HIV prevention. Support groups are also organized. There is also a harm reduction project, employing innovative tools such as the «Educational lottery» to educate and refer people to services. They provide services to approximately 2,500 people who use drugs and 600 sex workers. The site visit will allow the group to visit the center and to observe outreach work.

Outreach Route – Men Who Have Sex With Men

This outreach program services Kyiv's main street, a gathering place for Kyiv's gay population. The group will observe the work of the local civil society organization «Gay Alliance», the biggest nongovernmental organization in Ukraine conducting HIV prevention among men who have sex with men. It is a community-based organization and its services include condom and lubricant distribution, along with the development and distribution of informational materials, VCT and STI testing with rapid tests, peer and professional counseling. The organization also runs a health clinic for men who have sex with men, providing services to 6,800 people.



ROUND 9

Ukraine was awarded a grant in Round 9 for a five-year program to expand and enhance access to high-quality TB services. The program has following objectives:

- To improve tuberculosis diagnostics by optimizing the TB laboratory network in civil and penitentiary facilities
- To improve access to high-quality services for people who, for whatever reason, have limited access to TB health services
- To strengthen the capacity of the Ukrainian health care system to respond to TB by improving governance (leadership, monitoring and evaluation, human resource development) necessary for the successful delivery of the TB program
- To increase overall access to TB diagnosis, treatment and care through awareness raising, mobilization of political support and reduction of stigma.

The grant agreement for Phase 1 of this program is currently under negotiation.

SITE VISITS

Sociotherapy Clinic

On this site the civil society organizations "Hope and Trust" and "Drop-in Center" center provide psychological and social services for patients on substitution maintenance therapy including individual counseling on HIV prevention, TB, Hepatitis and STI, self-support groups and seminars, legal aid, help with employment, and other services. 166 patients on the site are covered currently. On the same site the SUNRISE project provides integrated medical, psychological and social services for 20 HIV positive people who use drugs.

AIDS Clinic at Kyiv Pechersk Lavra Monastery

This clinic, formally known as the Institute of Epidemiology and Infectious Diseases, is housed next to the famous Kyiv Pechersk Lavra Monastery and thus has become known as 'the Lavra Clinic'. The clinic's HIV/AIDS treatment department was the first hospital in Ukraine to provide ARV therapy. Dr Svetlana Antoniuk, director of the clinic, has become a key expert on ARV scale-up and helped to develop the center's comprehensive approach.

There were only 48 patients on ARV-therapy in the clinic before the Global Fund Round 1 Program, there are 1255 now.

The program has helped to strengthen the country's health systems, making HIV and AIDS care provision and other areas of health care more accessible, accountable, universal and affordable. This work has included developing treatment protocols, creating training and ongoing mentorship programs for medical staff, and introducing innovative treatment structures.

Moreover, the program supported the development of the All-Ukrainian Network of People Living with HIV/AIDS, which was the major sub-recipient for the care and support component. The experience which the network gained in working on the Round 1 grant gave them the necessary background to be nominated as a Principal Recipient for the next grant.

150 new and existing nongovernmental organizations in turn provided services, a voice and a platform for those affected by HIV. With relationships already established, these nongovernmental organizations were best placed to work with marginalized populations. By mobilizing additional capacity they also improved the quality of grant implementation.

ROUND 6

Thanks largely to success of the Round 1 program, Ukraine was approved for another HIV grant in Round 6. This grant focuses primarily on most-at-risk populations and is set to cover the period 2007-2012 and is being implemented by two Principal Recipients: the International HIV/AIDS Alliance in Ukraine (Alliance) and the All-Ukrainian Network of People Living with HIV/AIDS. This program aims to increase access to prevention, treatment, care and support for those most at risk.

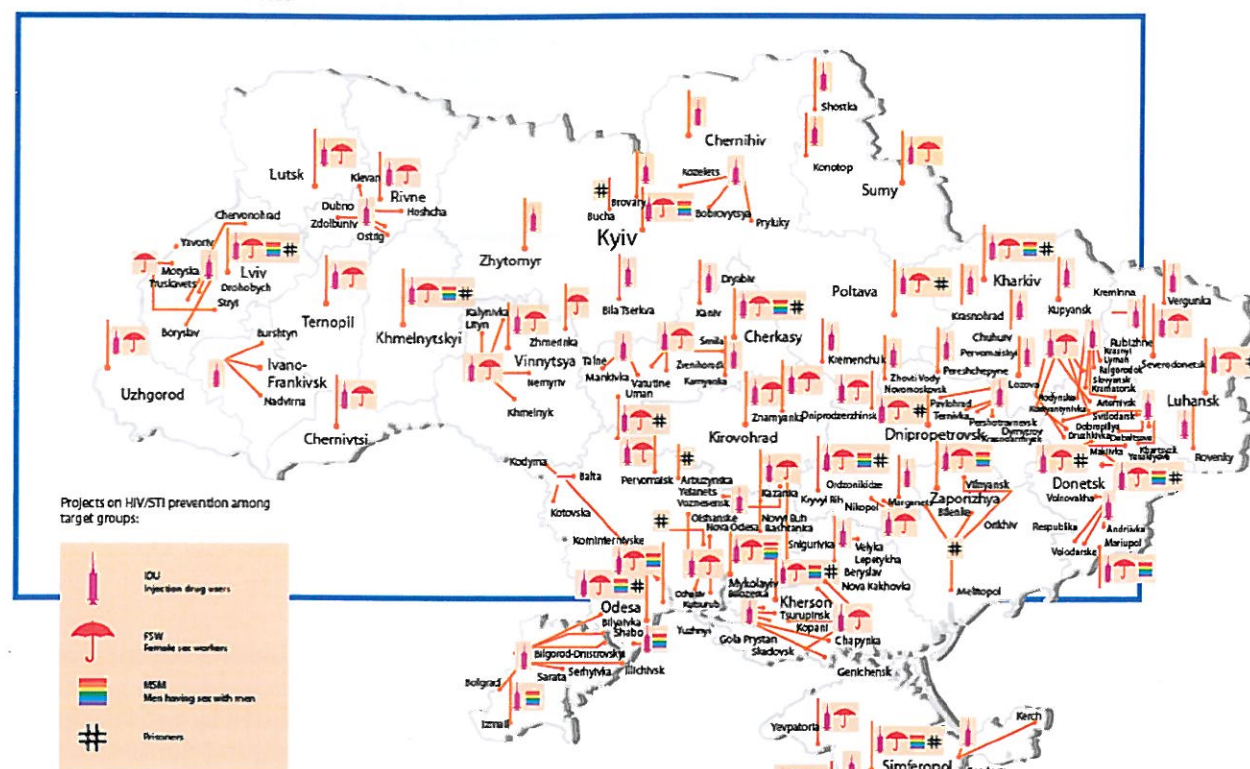
The program has five key objectives, as follows:

- To ensure adequate access to integrated prevention, treatment, care and support for marginalized populations (implemented by Alliance)
- To scale up comprehensive HIV care and treatment and ensure equitable access to services for people who use drugs and other vulnerable populations (implemented by the Network)
- To expand access to comprehensive adherence counseling, psychosocial support and care (implemented by the Network)
- To create a supportive environment for a sustainable and effective response to HIV/AIDS in Ukraine (jointly implemented by Alliance and the Network)
- To monitor and evaluate grant implementation and strengthen the national monitoring and evaluation system (jointly implemented by Alliance and the Network)

In the first twelve months of implementation (to end June 2010), 58.5 percent of people who use drugs, 36.5 percent of sex workers, 15.7 percent of men who have sex with men and 20 percent of inmates have been reached through prevention activities.

"Community organisations lead the fight against HIV among drug injectors and sex workers in Ukraine" Hurley, R. (2010). The worst HIV epidemic in Europe. The British Medical Journal.





Results against targets as of 30 June 2010

| Indicators of outcome and impact | Target % | Achieved % |
|---|----------|------------|
| HIV prevalence among people who use drugs (calculated for those with a drug use history of less than three years) | 28 | 17 |
| Percentage of people who use drugs who reported use of sterile drug injection paraphernalia during the most recent injection | 85 | 90 |
| Percentage of people who use drugs who reported use of a condom during the most recent sexual intercourse | 57 | 58 |
| HIV prevalence among sex workers | 18 | 21 |
| Percentage of respondents who provided paid sex services and reported use of condom during the sexual intercourse with the most recent client | 85 | 89 |
| Percentage of men who used a condom during the most recent sexual intercourse with a male partner | 80 | 64 |

| Indicator (cumulative) | Intended Target | Actual results | % |
|--|-----------------|----------------|------|
| Number of people who use drugs reached | 220,000 | 308,878 | 140% |
| Number of sex workers reached | 44,000 | 51,559 | 117% |
| Number of men who have sex with men reached | 25,000 | 33,660 | 135% |
| Number of prisoners reached | 62,000 | 91,393 | 147% |
| Number VCTs conducted for HIV | 208,565 | 269,401 | 129% |
| Number of sexually transmitted infections screening tests provided | 178,308 | 242,330 | 136% |
| Number of visits to mobile clinics | 32,980 | 84,110 | 255% |
| Number of condoms distributed | 34,605,000 | 44,610,453 | 129% |
| Number of patients receiving substitution maintenance therapy | 5,500 | 5,552 | 101% |

ARV therapy was first made available in Ukraine in 2001 in the two cities of Kyiv and Odessa. Today, ARV therapy is available in two national centers and 27 regions. As of 1 July 2010 there were 19,370 persons on ARV therapy in Ukraine, 2,740 (14,1%) are supported through the Global Fund Round 6 grant.

| | | | |
|---|--------|--------|-----|
| Adults with advanced HIV infection receiving ARV therapy (number and percentage) | 2,800 | 2,740 | 98 |
| Prisoners with advanced HIV infection receiving ARV therapy | 350 | 534 | 153 |
| Number of patients with HIV tested for TB, including sputum tests | 8,000 | 10,578 | 132 |
| Number of HIV-positive patients with active TB (pulmonary and extrapulmonary) referred for TB treatment | 1,600 | 2,243 | 140 |
| Number of HIV-positive adults reached with community-based care and support services | 37,108 | 33,186 | 89 |
| Number of HIV-positive men who have sex with men reached with care and support programs | 150 | 170 | 113 |
| Number of HIV-positive prisoners reached with care and support programs | 3,200 | 4,030 | 126 |
| Number of HIV-affected children reached with community-based care and support programs | 4,320 | 4,766 | 110 |

Other important results of this program include:

- a steady decline in the HIV prevalence among people who use drugs, particularly in the under-25 population
- behavior studies show that a greater percentage of people who use drugs use sterile equipment (as a result of harm reduction programs) and wear condoms
- substitution therapy has been scaled up
- the scale-up of ARV therapy has been accompanied by increased TB diagnostics available within specialized AIDS health care facilities around the country.

As of 1 July 2010, 36 percent of all registered HIV-positive adults, 52 percent of HIV-affected children and 66 percent of prisoners are reached with care and support services. Gender proportion in coverage corresponds to the gender representation among officially registered people living with AIDS.

