



UKRAINE

HIV PREVENTION SHADOW REPORT 2020

Summary of civil society analysis

Over the past year, there have been significant improvements, including the expansion of opioid substitution therapy in prisons. Ukraine is also making steady progress when it comes to transitioning from donor to domestic funding, with a significant proportion of HIV treatment and prevention services now being funded by the government.



That said, the government continues to fund only a basic package of services, which excludes critical aspects like psychosocial support. While new strategies commit to addressing harmful laws and policies, significant change is still not forthcoming.

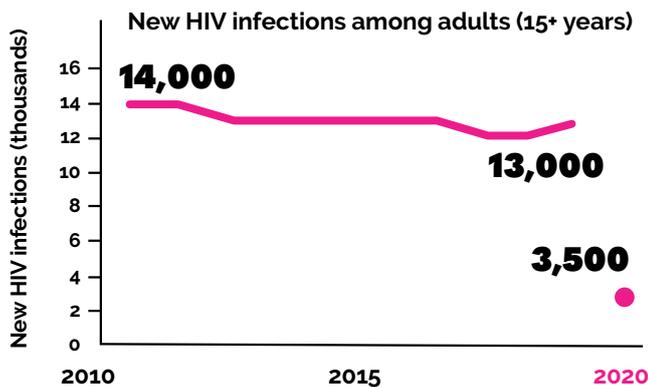
10 ACTIONS: A CIVIL SOCIETY PERSPECTIVE

1	Needs assessment	●
2	Prevention targets	●
3	Prevention strategy & leadership	●
4	Legal and policy reform	●
5	Key population size estimates	●
5b	Defined key population package	●
6	Capacity development & technical assistance plan	●
7	Social contracting	●
8	Financial gap analysis & strategy	●
9	Strengthen monitoring	●
10	Performance review & accountability	●

● Good progress ● Partial progress ● No or little progress



ON TRACK TO MEET THE 2020 TARGET?



Global HIV Prevention Coalition 4th Annual Progress Report



KEY POPULATIONS: DATA, SERVICES, STIGMA

	Men who have sex with men	Sex workers	People who use drugs	Transgender people
Latest size estimates	2018	2018	2018	NO DATA
HIV prevention services utilisation	11%	40%	48%	NO DATA
Avoidance of health care due to stigma & discrimination	NO DATA	NO DATA	NO DATA	NO DATA

KP Atlas, Global HIV Prevention Coalition 4th Annual Progress Report

LAWS THAT CRIMINALISE

Same-sex sexual acts	NO SPECIFIC LAWS
Sex work	CRIMINALISED
Drug use or possession for personal use	CRIMINALISED
Criminalisation of transgender people	NO SPECIFIC LAWS
HIV transmission, non-disclosure or exposure	CRIMINALISED

NAIDS Laws and Policies Analytics

HARM REDUCTION

<p>Safe injecting practices people who inject drugs</p> <p>96.6%</p>	<p>People who use drugs receiving opioid substitution</p> <p>4.5%</p>
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Global HIV Prevention Coalition 4th Annual Progress Report

HIV PREVENTION 10-POINT PLAN

A CIVIL SOCIETY ANALYSIS

In 2017, governments, civil society, UN agencies and donors launched the Global HIV Prevention Coalition. The Coalition developed a global HIV Prevention 2020 Road Map, to catalyse action and work towards reducing new HIV infections. The Road Map acknowledges common barriers to progress including lack of political leadership; restrictive laws and policies; insufficient funding; and lack of implementation at scale of combination prevention programmes. Each year the Coalition publishes a report, which tracks each country's progress against these barriers. This shadow report sets out civil society's perspective on how Ukraine performed in 2020.



STRENGTHENING POLITICAL LEADERSHIP

In 2019, Ukraine elected a new President, and a new cabinet was formed. Since then, the Minister of Health has changed three times, due to their handling of the COVID-19 crisis. The Director of the Public Health Centre (PHC), the agency responsible for HIV prevention and one of the lead agencies responsible for the COVID-19 response, also resigned. These changes, combined with the COVID-19 crisis, have meant that leadership and action on HIV prevention have taken a back seat.

The Global Fund's Country Coordinating Mechanism (CCM) continues to be overseen by the Cabinet of Ministers, but ultimate coordination now sits with the Minister of Health instead of the Vice Prime Minister. Whilst this change hasn't altered the day-to-day operations of the CCM the platform has lost its wider political influence.

In April, the second stage of Ukraine's healthcare reform began. Reforms included plans to devolve opioid

substitution therapy (OST) and HIV and TB treatment to the primary healthcare settings, theoretically bringing services closer to people who need them. However, communities worry these reforms have led to a deterioration in the quality of harm reduction services, particularly when it comes to OST. Lack of experience in providing OST in primary healthcare settings also led to budget underestimations, despite PHC providing clear guidance on the costs involved.

Despite these challenges, there is cause for celebration. Cities like Dnipro have signed up to UNAIDS Fast-Track Cities targets and are actively working towards achieving zero new infections. There have also been important breakthroughs on the inclusion of marginalised communities. Women living with HIV now have a seat on the CCM. Eleven candidates representing sex workers, the LGBT community and people who use drugs also stood for local election with the support of a number of mainstream political parties



ADDRESSING POLICY GAPS AND LEGAL BARRIERS

Two important strategies for HIV prevention have been approved: the National HIV, TB and Capitalise Hepatitis strategy, and the HIV/TB and Human Rights Strategy, which aims to address human rights barriers that restrict access to HIV services and runs until 2030. For the first time, they commit Ukraine to a strategy aimed at upholding human rights, guarantee non-discrimination on grounds of sexual orientation and gender identity, and ensure gender equality.

These documents include some hard-won provisions, including pre-exposure prophylaxis (PrEP) for all key populations; the provision of harm reduction services and particularly of OST in prisons; prevention services tailored to the needs of adolescents, investments in structural interventions and the removal of political, legal and socio-cultural barriers that limit access to health services. These actions are now recognised as key priorities by the PHC and as a next step should be fully costed and implemented at scale.

At societal level, violence towards LGBT people is still common. This year, Odessa pride was disrupted by far-right groups, and offices of LGBT-led organisations in Odessa and Mykolayiv were attacked.

There has, however, been progress in improving the legal environment for adolescents. In December 2019, a bill aimed at advancing adolescents' health rights was presented to parliament. If approved, the new law would enable adolescents under 14 to access healthcare services, including anonymous HIV testing services, without parental consent.

There has also been progress on prisoners' rights. In 2020, following positive results from a pilot in Bucha prison, the Minister of Justice approved the scale-up of comprehensive OST to four additional facilities. Also, in an effort to reduce new HIV infections in prisons, civil society have trained and employed more than 50 prisoners as peer educators in prisons.



ADEQUATE AND SUSTAINABLE FINANCING

The Global Fund and PEPFAR remain the major contributors to Ukraine's HIV response. The current 2018-2020 Global Fund HIV-TB grant to Ukraine allocates around \$70 million for Ukraine's HIV program. This includes \$3.9 million for activities for key populations, \$2.3 million for tackling human rights barriers to health services, and \$2 million to support the improvement of health and data systems.

The Ukrainian government significantly increased the state AIDS budget from \$12.5 million USD in 2016 to around \$32 million in 2020. Within this budget, approximately half is allocated to procurement of antiretrovirals. However, this year, the government took over a significant share of the funding for HIV prevention services – allocating \$6 million for key population prevention services – just over 18% of its total AIDS budget.

Although the overall allocation has increased, funding for

HIV prevention programmes, including for harm reduction, is based on a basic package of services, which urgently needs reviewing. For instance, an assessment of the sustainability of OST programmes conducted by the Eurasian Harm Reduction Association found that government OST programmes focused on the procurement of medicines and medical staff salaries, whereas critical activities such as training for health workers and staff, psychosocial support, research and advocacy are no longer being funded.

Similarly, OST patients have raised concerns about the low quality of locally produced methadone and buprenorphine as compared to similar imported drugs. As noted in the 2019 shadow report, community representatives conducted a quality assessment of OST drugs, which led to changes in buprenorphine procurement, but no changes as yet for methadone. With most people on OST being prescribed methadone in Ukraine, further action is needed.



IMPLEMENTING QUALITY PROGRAMMING AT SCALE

There is still a long way to go with achieving adequate HIV prevention programming at scale. The government has produced population size estimates for sex workers, men who have sex with men and people who use and inject drugs and is in the process of finalising results for transgender people. However, when looking at coverage, only 11% of men who have sex with men, 40% of sex workers and 48% of people who inject drugs are routinely reached with prevention services. Even more worrying, according to PHC, only 5.8% of the estimated number of opiate users are covered with OST programmes. Although this is in line with the government's 2020 target, community representatives feel this number remains far too low.

Decentralising OST services has posed some challenges. Family doctors in primary health care centres are not well practised in supporting people who use drugs. According to activists, this lack of experience means general practitioners

are often reluctant to promote or enrol people in OST services. As a result, the numbers of new OST clients are not increasing, and the quality of care is declining.

Female sex workers have highlighted that the current government prevention packages do not fully meet their needs. For example, the basic package of services for sex workers does not include needles and syringes, so that sex workers end up having to separately access services for people who inject drugs.

Regarding PrEP, the PCH reports that, as of August 2020, there were over 2,500 people in Ukraine using PrEP, including 1,991 men and 552 women, the vast majority being sex workers and other people at substantial risk of HIV infection. Although there is some progress on reaching key populations with PrEP services, the new national HIV strategy does not include any specific PrEP indicators.



THE IMPACT OF COVID-19 ON HIV PREVENTION

The COVID-19 epidemic in Ukraine has heavily impacted HIV prevention efforts but also provided opportunities for innovation.

Lockdown measures were incredibly strict, and all public transport was stopped. However, CSOs organised to avoid any interruption of services to key populations. Thanks to advocacy by people who use drugs and harm reduction leaders, nearly all OST patients had the opportunity to receive take-home doses for an average period of 10 days instead of having to travel to OST sites daily as is the norm. Unfortunately, networks of people who use drugs state that when lockdown restrictions became less strict, doctors started gradually transitioning back to daily doses administered at clinics, instead of seizing the opportunity to commit more permanently to this approach.

Due to COVID-19 social distancing rules, men who have sex with men mixed less socially and visited LGBT drop-in centres less often, preventing them from accessing services. Responding to this challenge, the HealthLink Project launched an initiative called 'Safe Boxes'. These are boxes containing a rapid oral HIV test, condoms, lubricants, information materials and a card with contact details for a local social worker, which are made available online and delivered via post.

Lockdown worsened the economic situation for marginalised people who were on low incomes or unemployed. Civil society and key population-led organisations also reported an increased need for psychosocial support and representatives of the National OST Hotline reported increasing calls from women who reported cases of domestic abuse.



RECOMMENDATIONS

IMPACT OF COVID-19

COVID-19 has disrupted HIV prevention services and exacerbated economic and social drivers, with the risk that new HIV infections may begin to increase. Ukraine must commit to sustaining progress on and funding for HIV prevention, and must protect the human rights of the most marginalised communities.

LEADERSHIP

The new government – in partnership with the PHC – must strengthen leadership on HIV prevention and build political and financial support for key population programming at national, district and city levels.

LAWS & POLICIES

The government must operationalise the new HIV, TB and Hepatitis and HIV and Human Rights Strategies, including by decriminalising people who use drugs and sex workers, implementing programmes that decrease stigma and discrimination by healthcare providers and law enforcement officials, and protecting and fulfilling the rights of marginalised communities, including adolescents.

FINANCING

The government of Ukraine must continue to increase its investment in HIV prevention and ensure that it funds comprehensive HIV prevention packages, beyond the current basic packages. The Ministry of Health must work with the Ministry of Finance and National Assembly to ensure adequate funding for the national health budget.

QUALITY PROGRAMMING

Ukraine urgently needs to address the low rates of HIV prevention coverage for all key populations, and specifically must dramatically increase OST coverage and quality for people who use drugs, as well as continuing to scale up PrEP. To do this, PHC must continue to scale up funding for key population-led groups, as these organisations are in a better position to provide accessible and effective services to the most marginalised.

METHODOLOGY

As a member of the Global HIV Prevention Coalition, Frontline AIDS plays a key role convening civil society and community organisations. After the launch of the Global Prevention Coalition in October 2017, Frontline AIDS supported activists from 22 countries to participate in workshops to learn, share and agree prevention advocacy priorities. As part of this process, activists from different community-based organisations decided to work together to analyse their nation's progress on HIV prevention. The reports are based on responses to a data collection tool developed by Frontline AIDS. In 2020, activists from seven countries agreed to update their reports. These shadow reports voice the priorities of civil society organisations and offer an alternative to the official assessments put forward by governments.

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OUR PARTNERS



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