Fast Track’s catalyzed decentralization of medical services and innovations: sustained HIV response in Kyiv city in war emergency situations

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Kyiv city epidemiology:

Population before the full-scale invasion: 2,9 mln (official) (up to 4 mln unofficial)

- PLHIV estimated: 20068
- PWID estimated: 33700
- SW estimated: 14600
- MSM estimated: 32345
- Mother to child transmission rate: 1.4%
Kyiv city under threat and facing new war-time reality (24 February 2022 – 1 June 2022)

During the period of active hostilities in the Kyiv region, a curfew was introduced, all the capital's bridges were closed, and public commute was stopped. City population decreased to 800K people.

The occupation of cities of Kyiv metropolitan area, the completely non-working Kyiv Regional Center for AIDS Prevention and Control were extremely negative and frightening factors for HIV response prospectives and even services existence.

PLH partially lost the opportunity to visit their physician, receive medications, and conduct scheduled examinations on time.

Outreach prevention became questionable.

HIV testing at health care facilities dropped.

The number of internally displaced people, including PLH increased daily after de-occupation of the Kyiv region and lifting movement restrictions.
Kyiv city under threat and facing new war-time reality (24 February 2022 – 1 June 2022)

The main challenges in the HIV and TB response at the most critical stage of warfare in Kyiv metropolitan area:

- the retention of patients who were already on treatment (ART, TB and OMT) and enrollment in treatment those who were newly diagnosed with HIV;

- maintenance of prevention services for key populations

- active enrollment of internally displaced representatives of key populations and PLH in preventive and treatment services.
Kyiv city under threat and facing new war-time reality (24 February 2022 – 1 June 2022)

As of the beginning of 2022:

- 40 ART sites with 12,920 people on ART
- 7 MAT sites with 2,877 people on OAT
- 89 health care facilities provided HIV testing with an average number of 7,780 people tested monthly.

Coverage with services on the both banks of the river!

When the invasion started Municipal treatment programme continued the both banks !!!! but with smaller capacities: 10 ART sites, 4 OAT sites with almost the same volume of patients. Number of health care providers almost halved.
How we managed:

ART – multi-month dispensing widened when enough ARVs arrived, patients follow up – roll out of telemedicine, acute cases – transportation with the support of civil society, adherence support – CSO “100 Percent Life.

OAT – 90% of clients were transferred to the 30-day dispensing (till September 2022). Stocks of drugs at both banks of the river.

Health care department and health care facilities timely conducted procurement of drugs and commodities within Fast-Track programmes (value = 0.5 mln USD)

Donor’s granted NGOs provided supportive services in acute cases, transportation of people, medications and bio-samples, crises peer counselling and humanitarian aid.
Factors and preconditions for success

- Implemented since 2017 decentralization of treatment and testing sites
- Communication and coordination of decision making and implementation at the national and municipal level;
- Pulling resources of the municipal programme, donor’s funded programmes safeguard availability of pharmaceuticals, services and access to them;
- Donors’ support to the Ukraine HIV and TB response (PEPFAR, USAID and GFATM made available their funds to procure all necessary ATVs, TB and OMT drugs;
- Timely procurement of drugs, commodities and food items envisaged in the municipal Fast Track programmes reduces risk of services interruption and secure the wellbeing of patients in the limited living conditions of warfare and economical decline.
HIV treatment cascade
Epi data for Fast-Track

Epi indicators, Kyiv

- HIV prevalence (per 100K)
- AIDS prevalence (per 100K)
- AIDS related deaths (per 100K)

Years: 2016 - 2022
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UN Joint Programme of Support in Ukraine
Thank you for attention!

Comments? Questions?