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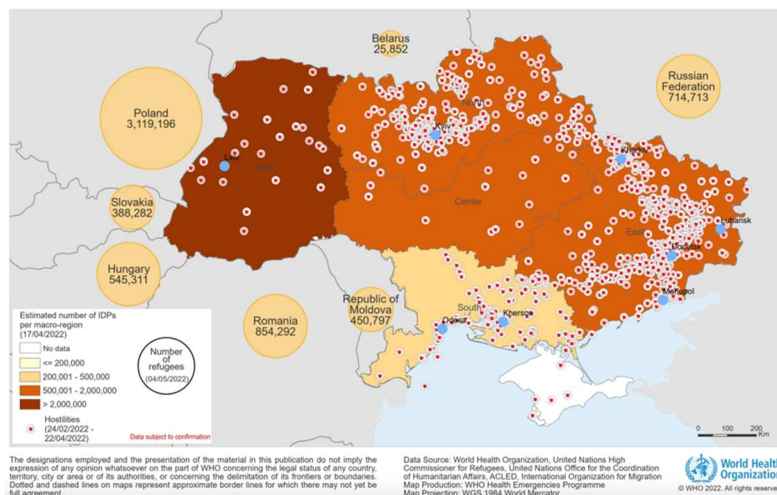
SITREP: UNAIDS' response to the crisis in Ukraine

KEY FIGURES AND MESSAGES AT A GLANCE



- UNAIDS' key priority remains ensuring continued access to HIV treatment, HIV prevention services, including harm reduction, and emergency humanitarian support for people living with HIV and key populations.
- Total in-country supplies of antiretroviral therapy are sufficient thanks to the combined efforts of the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund), the United States President's Emergency Plan for AIDS Relief (PEPFAR), Ukraine's Public Health Center, the World Health Organization (WHO), UNAIDS and civil society organizations. However, shipment of antiretroviral therapy and other HIV-related commodities to the eastern and southern parts of Ukraine remains hazardous and difficult due to ongoing military action, and upscaling of support to the civil society networks organising deliveries remains vital.
- Linkage to, and retention in, care remains challenging. The cumulative number of people living with HIV who started antiretroviral therapy in 2022 is 30% less than during the same period in 2021 (2793 as of 1 May 2022). The number of people who dropped out of treatment in March 2022 exceeded the number of people who started treatment.
- Access to diagnostics, including CD4 and viral load testing is fully disrupted in Kharkiv, Mariupol, Donetsk, Luhansk and Slavyansk and is partially disrupted in Kherson due to shortages of commodities and difficulties with delivery.
- Civil society organizations play a critical role in the provision of support to key and vulnerable populations and are in urgent need of additional resources, which have not been met.
- The mental health of men and women has been impacted by the war, resulting in an increased risk of psychological distress, long-term mental health problems and negative coping mechanisms.
- Mental health and psychosocial support services are among the most reported urgent needs for survivors of gender-based violence.

Figure 1. Distribution of internally displaced people and refugees in Ukraine and in refugee-hosting countries as of 4 May 2022.



Situation and response update on access to HIV services: UKRAINE

Access to antiretroviral therapy, diagnostics and opioid agonist therapy

<p>Situation update</p>	<p>Thanks to the combined efforts of PEPFAR, the Global Fund, Ukraine’s Public Health Center, WHO, UNAIDS and civil society organizations, total in-country supplies of antiretroviral therapy are sufficient, but logistical and security challenges remain. Antiretroviral therapy has been delivered to all regions (with a partial delivery to Kherson of 2500 packages), except Donetsk and Luhansk oblasts.</p> <p>As of 3 May 2022, 39 antiretroviral therapy sites were closed in the occupied territories and where hostilities are taking place, interrupting services for clients. As of 1 May 2022, the cumulative number of people who started antiretroviral therapy in 2022 is 2793, which is 30% less than during the same period in 2021. The number of people who dropped out of treatment in March 2022 exceeded the number of people who started treatment.</p> <p>Access to diagnostics, including CD4 and viral load testing, is available in 15 regions of Ukraine and is disrupted in six regions—it is fully disrupted in Kharkiv, Mariupol, Donetsk, Luhansk and Slavyansk and is partially disrupted in Kherson, where the delivery of commodities is still not possible. Ten regions reported shortages of ELISA tests to confirm HIV diagnosis. The Global Fund financed the purchase of 29 backup power generators to support the continuing functioning of laboratories.</p> <p>Antiretroviral therapy for post-exposure prophylaxis (PEP) for survivors of sexual violence is available. PEP is distributed in antiretroviral therapy sites, AIDS centres and hospitals and is available 24 hours a day, seven days a week.</p> <p>The Public Health Center is continuing to exchange information with medical facilities and people in refugee-hosting countries in order to avoid treatment interruption and delays.</p> <p>The International Treatment Preparedness Coalition for Eastern Europe and Central Asia developed and launched the HelpHIVRu website to help people living with HIV who moved to the Russian Federation, either voluntarily or forcibly, to apply for and receive antiretroviral therapy.</p> <p>As of 1 May 2022, 15 opioid agonist therapy sites are closed, with clients being referred to other sites. Private opioid agonist therapy sites are resuming their work in some areas. Civil society organizations have planned for the evacuation of people on opioid agonist therapy from some locations in order to avoid interruption of treatment in the event that Russian forces take control of more territory. The Ukrainian pharmaceutical company Interchem has resumed operations and is renewing the local production of methadone and buprenorphine.</p>
<p>Challenges</p>	<p>Disruption of diagnostic services and a shortage of HIV testing kits have negatively impacted access to HIV testing. Information systems have been disrupted and there is a reliance on paper copy reports/telephone calls for reporting the results of HIV testing.</p> <p>Spending of the emergency funding released by the Global Fund has been delayed due to the need to identify health product gaps and to avoid duplication of orders made by other agencies. However, emergency fund health product lists have been drawn up to help replace stocks that have run out. The United</p>

	<p>Nations Children’s Fund (UNICEF) is working closely with the Public Health Center, the Ministry of Health and the Global Fund to finalize existing orders for opioid agonist therapy, HIV diagnostics, laboratory diagnostics and HIV prevention products. Emergency fund health product orders are expected to be placed soon. In parallel, the Global Fund approved local opioid agonist therapy procurement to ensure adequate and timely supplies.</p> <p>Delivery of life-saving aid, including antiretroviral therapy and opioid agonist therapy, in the eastern and southern parts of Ukraine remains extremely difficult due to the disruption of logistic chains and military action.</p>
<p>Action required</p>	<p>Monitor access to and focus support on ensuring access to HIV testing, the provision of testing products and the uninterrupted work of testing laboratories.</p> <p>Strengthen linkage to and retention in care for people living with HIV in order to prevent drop out of treatment and adherence to antiretroviral therapy. Explore all means for the delivery of HIV commodities, including utilizing humanitarian convoys and the private sector.</p>
<p>HIV prevention and care services/civil society organizations and communities</p>	
<p>Situation update</p>	<p>HIV prevention services are being provided, and demand is increasing. However, the rapidly changing environment and issues with linkage and retention in care require the development of novel approaches and the remodelling of HIV prevention packages.</p> <p>Mental health and psychosocial support services are among the most reported urgent need. Around 50% of women and men participating in the Rapid Gender Analysis conducted by UN Women and CARE International indicated that their mental health had been impacted by the war. Civil society organizations are doing their best to address the psychological support needs. The Eurasian Coalition on Health, Rights, Gender and Sexual Diversity launched a chatbot to provide consultations for Ukrainian lesbian, gay, bisexual, transgender and intersex (LGBTI) people.</p> <p>Among the estimated 15.7 million people in need of protective assistance in Ukraine, 3.3 million need protective services against gender-based violence.</p> <p>A number of shelters are operating in Ukraine providing services for people living with HIV and key populations.</p> <p>Three civil society organizations in Ukraine coordinate and organize the delivery of hormone therapy for transgender people.</p> <p>Civil society organizations continue to support the evacuation of people from war zones.</p>
<p>Challenges</p>	<p>Lack of access to health-care services, especially for survivors of gender-based violence and pregnant women and new mothers (there are at least 265 000 pregnant Ukrainian women), as well as rising fears of gender-based violence, especially in the war zones.</p> <p>Limited access to psychological and psychiatric support in the light of the increased risk of psychological distress, long-term mental health problems, negative coping mechanisms (e.g. addiction, abuse, self-harm) and a growing demand for such services.</p>

	<p>Activists and staff of civil society organizations are on the verge of burnout and need psychological support.</p>
Action required	<p>In a rapidly changing environment, there is a need to systematize, arrange and keep track of the shelters operating in Ukraine for the general population and specific population groups, including people living with HIV and key populations, such as a regularly updated interactive map of shelters with the services provided, beds available, etc.</p> <p>There is now an urgent need for training in basic crisis responses to stress—psychological first aid for the staff of civil society organizations.</p> <p>An increase in gender-based violence within Ukraine needs a regional cross-border approach.</p> <p>Prioritize funding for civil society organizations, including women’s civil society organizations, to stay operational, as they are providing vital support to their communities.</p> <p>Ensure that women’s civil society organizations, especially those representing marginalized groups, including women living with HIV, are included and meaningfully participate in coordination mechanisms and decision-making processes at all levels.</p>

Response: UNAIDS Secretariat and Cosponsors

UNAIDS (through the Technical Support Mechanism) supported the establishment of a working group on psychological assistance, which maps psychological services and needs and will provide training and support on a basic crisis response to stress for social workers, volunteers and people working in shelters.

The United Nations signed a [framework to assist survivors of sexual violence](#). The framework supports the development and/or strengthening of national policies and programmes on the prevention of and response to conflict-related sexual violence, strengthening the protection of internally displaced people from sexual violence as well as the prevention of conflict-related trafficking. The agreement also addresses comprehensive service provision for survivors, including sexual and reproductive health services, medical and specialized mental health services, legal assistance and livelihood support.

The Health Cluster Ukraine, led by WHO and linking 106 partners (nongovernmental organizations, United Nations agencies, national authorities, donors and observers), released its [April Update to the Public Health Situation Analysis](#) for Ukraine.

UN Women and CARE International conducted the [Rapid Gender Analysis of Ukraine](#), which reveals that the war is disproportionately affecting internally displaced people and marginalized groups, such as female-headed households, Roma people, LGBTI people and people living with disabilities.

The United Nations Population Fund (UNFPA) and the gender-based violence sub-cluster released the [Conflict-Related Sexual Violence \(CRSV\)](#) guideline, which outlines the key messages for different actors who may discuss, engage with or support work around conflict-related sexual violence. UNFPA is working with the Ukrainian Medical Mission to provide support to survivors of sexual and gender-based violence, including surgical repair, in the northern parts of Kyiv region through mobile health teams. Support continues to 30 shelters, crisis rooms and daily care centres for displaced women and survivors of gender-based violence and to a national hotline with 20 operators responding to cases of gender-based violence, including sexual violence. Supplies for reproductive health in 17 hospitals in nine

oblasts (including Dnipro, Kharkiv, Kyiv, Zaporizhzhya, Chernihiv, Sumy, Kherson, Odesa and Mykolaiv), covering the needs of 2.55 million people, have been provided. A mobile maternity unit was delivered to Chernihiv oblast to provide reproductive health services, including safe deliveries.

The United Nations Development Programme (UNDP) assessed the training needs on legal aspects of stigma and discrimination and improving legal and other barriers to accessing HIV services in Kryvyi Rih and Dnipro.

The World Food Programme (WFP) is finalizing an agreement with 100% Life for both in-kind and cash-based transfers in various oblasts across Ukraine. Nutrition support in the form of an integrated nutrition package is being included in an agreement to support children aged 6–23 months alongside general food assistance (in-kind and cash-based transfers) or rapid response activities.

The International Organization for Migration (IOM) is conducting displacement tracking and has released three [internal displacement reports](#) providing the first available high-level estimates on the number of internally displaced people within Ukraine, as well as a comprehensive understanding of the needs and vulnerabilities of internally displaced people and those who have remained at their places of habitual residence.

Situation and response update on access to HIV services:

RECEIVING COUNTRIES

Access to antiretroviral therapy and opioid agonist therapy	
Republic of Moldova	
Situation update	As of 6 May 2022, 453 848 refugees (91% Ukrainians) have passed over the borders of the Republic of Moldova since the beginning of the war; 93 012 refugees remain in the country. One hundred and twenty-seven people living with HIV have been provided with HIV treatment. Of those, 15 people received antiretroviral therapy in the Transnistrian region. Five people have been provided with pre-exposure prophylaxis. Fifteen people have received opioid agonist therapy. About 3000 refugees, including people living or affected by HIV, have been assisted by civil society organizations active in the tuberculosis and HIV field.
Challenges	<p>The Transnistrian region, besides its security and military-related vulnerable situation, is facing difficulties with managing humanitarian aid to refugees from Ukraine.</p> <p>As the number of refugees who are living with HIV is increasing, the national AIDS programme is concerned about securing additional antiretroviral therapy.</p> <p>Mental health and psychosocial support are very much in need for people living with HIV and members of key populations.</p>
Action required	Fundraising to cover humanitarian-related needs, including mental health and psychosocial support for people living and affected by HIV in the Republic of Moldova and the Transnistrian region.

	An additional procurement of antiretroviral therapy is to be decided by the Ministry of Health and covered through UNICEF or the Global Fund (available resources to the Republic of Moldova from the emergency fund).
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Response: UNAIDS Secretariat and Cosponsors

The HIV Crisis Cell is aimed at supporting Ukrainian people living with and affected by HIV and key populations. It is led by the Positive Initiative nongovernmental organization and is supported by UNAIDS, the United Nations Office on Drugs and Crime (UNODC) and the Global Fund.

Three civil society organizations supported by UNAIDS are providing mental health and psychosocial services in the Republic of Moldova. Several grants have been offered by UNAIDS and UNODC to HIV civil society organizations in the Transnistrian region to support refugees.

Brochures and posters with sexual and reproductive health information, including for LGBTI people, in Ukrainian and Russian were delivered by UNFPA through UNAIDS to HIV civil society organizations offering services to refugees.

The Global Fund provided €1 156 323 to the Government of the Republic of Moldova for the procurement of additional antiretroviral therapy and tuberculosis medicines to address the needs of Ukrainian refugees.

European Union countries receiving refugees

Situation update

Although the number of border crossings out of Ukraine into neighbouring countries is still high, the trend is declining. As of 6 May 2022, more than 3 million people had arrived in Poland, 857 846 in Romania, 557 001 in Hungary and 391 592 in Slovakia.

The number of people applying for antiretroviral therapy in hosting countries was approximately 3000 by mid-April and has started to increase during the past few weeks. Approximately 850 people have already applied for antiretroviral therapy in Poland and more requests are anticipated in the coming weeks. Countries with a federal structure don't have centralized registers keeping lists of patients, which makes tracking the number of refugees applying for treatment difficult. WHO has called on health-care facilities to prepare for an influx of refugees and to develop contingency plans.

Challenges

Estimating the needs in the neighbouring countries and understanding the scope and types of services required remains challenging due to the dynamic of the population movement from Ukraine to neighbouring countries and back and within European Union countries.

Some of the antiretroviral therapy and tuberculosis medicine regimens used in Ukraine are not available in the neighbouring countries as the European Union has a lower burden of those diseases and because European Union regulations limit the use of the [Stringent Regulatory Authority](#) approved generic versions available in Ukraine. While a recent amendment to legislation in Poland now allows the transport and use of TLD (tenofovir, lamivudine and dolutegravir), there is still a challenge for other refugee-hosting countries.

Civil society organizations in some refugee-hosting countries (Bulgaria, Hungary, Romania, Serbia) report challenges with accessing antiretroviral therapy or opioid agonist therapy.

	<p>Refugee-hosting countries are facing a shortage of licensed professionals to provide essential mental health and psychosocial services such as psychological first aid.</p> <p>Civil society organizations providing HIV services are lacking human and financial resources and are in urgent need of extra capacity.</p>
<p>Action required</p>	<p>Advocate for and continue to work with governments in European Union countries to allow TLD and generic antiretroviral therapy use specifically for Ukrainian refugees who have previously taken those medicines.</p> <p>Monitor access to antiretroviral therapy and actively engage with governments and partners in refugee-hosting countries to prevent treatment interruption.</p> <p>Provide additional support to local civil society organizations in refugee-hosting countries, including expanding support to provide mental health services to refugees in shelters and community centres. The health-care providers, volunteers and staff of civil society organizations are themselves in need of psychosocial support and resources.</p> <p>Additional resources are critically required to mobilize extra capacity for civil society organizations given the continuous high workload in meeting the needs of refugees.</p>
<p>Response: UNAIDS Secretariat and Cosponsors</p>	
<p>The UNAIDS Secretariat is in ongoing dialogue with refugee-hosting countries on their needs in addressing the refugee challenge and in ensuring continued access to treatment and services.</p> <p>UNFPA is partnering with the Geneva-based Centre for Reproductive Rights and local partners to strengthen national capacities in European Union countries neighbouring Ukraine to provide sexual and reproductive health care to women, girls and marginalized populations fleeing the war.</p> <p>UNICEF is using its multisectoral footprint to ensure the continuity of services where there is insufficient local support and that the needs of the most marginalized are considered.</p> <p>IOM supported three psychosocial mobile teams in Poland working in six long-term stay centres in Warsaw and providing psychological first aid, individual psychosocial counselling and group sessions for Ukrainian refugees.</p>	

UNAIDS' RESPONSE STRUCTURE AND RESOURCES

UNAIDS released an initial US\$ 200 000 in emergency core funds to address urgent humanitarian and programme demands in seven cities that have large HIV epidemics (Chernihiv, Dnipro, Kharkiv, Kryvyi Rih, Kyiv, Odesa and Poltava) and provides more than US\$ 400 000 (US\$ 200 000 through the Technical Support Mechanism) for the region. It is reprogramming at the regional and country level (Ukraine and the Republic of Moldova).

UNAIDS has issued an urgent call to the international community for an additional US\$ 2.42 million for civil society organizations providing HIV services in Ukraine and in countries receiving refugees in need of HIV services.

MORE INFORMATION [War in Ukraine | UNAIDS](#)

UNAIDS SECRETARIAT PRESS STATEMENTS

Civil Society Responds – as Health Care Facilities in Ukraine Come Under Attack

Op-Ed by Eamonn Murphy, UNAIDS Deputy Executive Director

<https://www.ipsnews.net/2022/05/civil-society-responds-health-care-facilities-ukraine-come-attack/>

VIDEOS

[Ukraine: Restore HIV services and provide treatment to all across all regions](#)

["The war in Ukraine has brought about needs no one anticipated"](#)



UNAIDS SECRETARIAT WEB STORIES

["A litmus test of civilization" - How the war in Ukraine has impacted LGBTI people](#)

TWEETS

https://twitter.com/Winnie_Byanyima/status/1522574577322364930?s=20&t=T7EBFq6nAMVe_r5KO2JIRQ

https://twitter.com/Winnie_Byanyima/status/1522251021644406785?s=20&t=T7EBFq6nAMVe_r5KO2JIRQ

https://twitter.com/UNAIDS/status/1522194007945793540?s=20&t=T7EBFq6nAMVe_r5KO2JIRQ

https://twitter.com/UNAIDS/status/1521369714387079169?s=20&t=T7EBFq6nAMVe_r5KO2JIRQ

https://twitter.com/UNAIDS/status/1521207394742661120?s=20&t=T7EBFq6nAMVe_r5KO2JIRQ

https://twitter.com/UNAIDS/status/1521173164763529216?s=20&t=T7EBFq6nAMVe_r5KO2JIRQ

https://twitter.com/Winnie_Byanyima/status/1520000823467589633?s=20&t=T7EBFq6nAMVe_r5KO2JIRQ

https://twitter.com/UNAIDS/status/1519710616633675777?s=20&t=T7EBFq6nAMVe_r5KO2JIRQ

COSPONSORS` SITREPs

UNHCR	<u>Situation Overview: Movement of Ukrainians back into Ukraine from Poland, Slovakia, Hungary, Romania and Moldova</u>
UNHCR	<u>Ukraine Emergency: UNHCR Operational Response and Delivery Updates 2 May 2022</u>
UNHCR	<u>Ukraine Situation: Flash Update #10</u>
UNHCR	<u>Ukraine Situation Flash Update #11</u>
UNICEF	<u>Ukraine Humanitarian Situation Report #10</u>
UN Women	<u>Rapid Gender Analysis of Ukraine</u>
WFP	<u>WFP Ukraine and Neighbouring Countries External Situation Report #15</u>
WHO	<u>Emergency in Ukraine: external situation report #9, published 28 April 2022: reporting period: 21–27 April 2022</u>
WHO	<u>External Situation Report #10, published 5 May 2022 Reporting period: 28 April–4 May 2022</u>
WHO	<u>Health Cluster Ukraine Bulletin # 16</u>
UNHCR/UNICEF	<u>Ukraine emergency: children fleeing Ukraine – the advocacy agenda for action</u>
UNFPA	<u>Ukraine Emergency Situation Report #8 – 29 April 2022</u>
UNFPA	<u>GBV Considerations for Women and Girls - Cash in Ukraine and the Regional Refugee Response</u>
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IOM	<u>Regional Ukraine Response Situation Report #16</u>
IOM	<u>Regional Ukraine Response - Situation Report #17</u>
IOM	<u>IOM Flash appeal - Ukraine and neighboring countries</u>
UNOCHA	<u>Ukraine: Humanitarian Impact Situation Report 27 April 2022</u>
UNOCHA	<u>Ukraine: Situation Report</u>