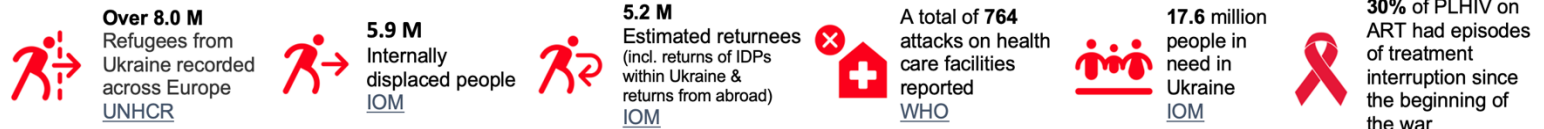


February 2023

SITREP:

UNAIDS' response to the crisis in Ukraine

KEY FIGURES AND MESSAGES AT A GLANCE



- A coalition of government, civil society and international organisations is a cornerstone of the effective HIV response in Ukraine during the war.
- UN agencies and partners on the ground are working closely with local authorities of newly accessible territories to determine needs and arrange deliveries of life-saving humanitarian assistance to the worst-affected areas.
- Sufficient stock of anti-retroviral therapy (ARV), Tuberculosis medicine and opioid substitution therapy (OAT) in Ukraine has been ensured by multiple partners and community-led organizations in partnership with the Ukrainian Public Health Centre to maintain life-saving services and medicines to all people in need.
- After a year of war in Ukraine:
 - 17.6 million people, or 40% of the country's entire population, require humanitarian assistance;
 - Nearly one-third of Ukrainians have been forced from their homes, creating one of the largest human displacement crises in the world since the World War II;
 - Around 14.5 million people in Ukraine are estimated to need health assistance. The situation is particularly critical in the areas of Donetska, Kharkivska and Khersonska oblasts, where the government of Ukraine regained control in the past months;
 - 30% of people living with HIV and receiving antiretroviral treatment had episodes of treatment interruption since the beginning of the war;
 - Each month, more than 3,000 of internally displaced persons living with HIV have to receive services in their new place of residence.
- Ukraine already had one of the highest rates of HIV in Europe and there are concerns that the spread of HIV and other STIs may increase because of compromised diagnostic capacity, interruptions in treatment, lack of access to condoms and higher rates of gender-based violence (GBV.)
- The country's capacity to provide health care and access to health services has been severely impacted due to the war because of security concerns, broken supply chains, restricted mobility, energy crisis, mass displacement including of doctors and nurses. Massive destruction has also impacted production and procurement of medical supplies.
- Intense hostilities are exacerbating humanitarian needs at the front lines and in large parts of the east and south of the country. Regaining control over certain areas made them accessible to humanitarian assistance. Top priorities in the newly accessible areas are to deliver winter supplies

and help with heating as well as critical assistance to people living there, including medical assistance.

- The capacities of host communities in western oblasts of the country are overstretched, with a shortage of accommodation reported in collective centres and transit facilities. Along with food and shelter, the most pressing needs of people impacted by the war in Ukraine include mental health and psycho-social support services.
- The critical needs of civil society organisations, who provide support to people living with HIV and key and vulnerable populations in refugee-hosting countries are still not being fully met by the international community. Additional funds are urgently required to plan further support for vulnerable groups.

Situation and response update on access to HIV services: UKRAINE

Access to antiretroviral therapy, diagnostics, and opioid agonist therapy

Situation update

The cumulative 12,212 new HIV cases registered in Ukraine during 2022 is 20% less than during 2021 (15,360). This indicates a gap in HIV diagnoses during first half of 2022 and less detection of new HIV cases due to destruction of laboratories and equipment, shortages in supply of commodities and disruption of delivery - HIV testing decreased by 36% as compared to the respective period in the previous year.

There is a lack of statistical data on Kharkiv, Luhansk and partially Donetsk oblast for the 1st quarter of 2022. This contributed to the decrease in the number of new HIV cases registered in 2022.

As of 1 January 2023, the cumulative number of people receiving antiretroviral therapy was 121,289, the number of people started antiretroviral therapy in December 2022 was 9,394, and 4,999 people have been receiving antiretroviral therapy abroad. New patients' engagement in antiretroviral therapy rate decreased by 32% as compared to the respective period in the previous year. In the regions with ongoing active hostilities, the data regarding the PLHIV timely visits to get antiretroviral therapy is missing for 9,514 persons. From the beginning of the war in Ukraine, up to 30% of patients have had episodes of antiretroviral therapy interruption.

Access to health care and provision of antiretroviral therapy is ensured in Ukrainian-controlled territories with deliveries commencing as planned and provision of ARVs to patients for 3-6 months. However, access to antiretroviral therapy in occupied territories continues to be a challenge with a number of sites either not operating or facing shortages in health care personnel (30% of sites providing antiretroviral therapy located in the areas of active hostilities are understaffed).

The Ukrainian Public Health Centre started [information campaign to inform Ukrainian people about HIV prevention, testing and treatment during the war](#).

The Ukrainian Public Health Centre started releasing the Situational report on provision of Opioid Agonist Therapy in Ukraine monthly (available in Ukrainian only). As of 1 December 2022 (latest publicly available data), 27,211 people were receiving OAT (no data is available from Luhansk oblast). OAT programme has been gradually renewing in the de-occupied territories during the last months. Provision of OAT with prolonged form of buprenorphine (Buvidal) is started. Buvidal is designed to be administered by subcutaneous injection once a month¹. It is expected that using the prolonged medicine for OAT will decrease number of visits to the OAT sites which is particularly important during the war when access to health care facilities is complicated and often not safe. 500 annual treatment courses will be distributed in 10 oblasts in 2023.

¹ Currently OAT in Ukraine is provided with daily intake of methadone or buprenorphine in tablets and methadone in syrup in penitentiary system

Challenges	<p>Due to migration of the population both inside and outside of Ukraine patients' pathways have changed, the connection between doctors and healthcare facilities where patients are under surveillance has been lost, and there is a need for the search for new points of entry for receiving services. Each month, more than 3,000 IDPs (Internally Displaced Persons) living with HIV need to receive services in their new place of residence.</p> <p>Country's capacity to provide health care and access to health services are severely impacted. During active hostilities, some facilities were forced to temporarily suspend their operations due to hospital destruction or temporary occupation of territories. Since the beginning of the war, an average of 38 antiretroviral therapy sites have not been functioning; more than 20 hospitals that had been providing services to PLHIV have been damaged or completely destroyed: in Kyiv, Donetsk, Zaporizhzhia, Mykolaiv, Luhansk, Kharkiv, Chernihiv oblasts. Laboratories in Donetsk and Luhansk oblasts have temporarily suspended their operations.</p> <p>Timely delivery of humanitarian relief items, particularly to hard-to-reach areas, remains a challenge due to ongoing lack of security and logistics constraints.</p>
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Action required	<p>Support and finding a novel approaches to help patients displaced in Ukraine and nearby countries get reconnected to the health care and medicine they need.</p> <p>System tracking clients receiving antiretroviral treatment and opioid agonist therapy is needed to track people and their movements.</p> <p>Timely delivery of humanitarian assistance across the country, impeded by the ongoing insecurity and logistics constraints, needs to be improved.</p>
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HIV prevention and care services/civil society organisations and communities

Situation update	<p>Since the beginning of the war demand and use of counselling on different HIV-related issues have been decreased among all key populations and displaced by humanitarian needs. For example, counselling on HIV testing among sex workers decreased from 77% to 55%, among PWUD from 78% to 65%, and among MSM from 80% to 71%; counselling on sexual and reproductive health among sex workers decreased from 56% to 47%; counselling on OAT issues among PWUD from 76% to 61%. The only exception is counselling on GBV prevention which increased among sex workers – from 30% to 40%.</p> <p>Housing needs remain high among IDPs - over 11.2 million people need emergency shelter or vital household items. An additional 1.7 million people have winter-related needs. 38% of IDPs indicated that they did not have sufficient funds to rent or pay for housing through the remaining winter months. Most collective centres for IDPs require general care and maintenance and repairs of various severity. According to the latest Collective Sites Monitoring over 65% of the centres need food supplies, around 55% – additional sleeping items. More than 20% of collective sites have reported the need for generators due to frequent power cuts.</p> <p>Eurasian Harm Reduction Association with support of Elton John Foundation provided equipment (generators, fuel, batteries, power banks, sleeping bags etc.) for shelters and day centers for the clients of OAT programme and PWUD in Khmelnytskyi and Poltava regions.</p> <p>About 15 million people might require psychological support and treatment due to war-related acute stress, anxiety, depression, substance use and post-traumatic stress disorder. Of the 15 million, three to four million people potentially require medication-assisted treatment. Concerns have been raised about the long-term mental health impact of the war in Ukraine.</p>
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	<p>Short videos on psychological help for clients from key populations have been developed with support of the Alliance for Public Health; the videos also include contacts of psychologists and psychiatrists, as well as screening on Help24: https://youtu.be/2LYWOPiR5Lg</p> <p>Crises and emergencies exacerbate all forms of SGBV (Sexual and Gender Based Violence), including sexual exploitation and abuse. Multiple forms of SGBV cases are being reported, with particularly high insecurity and risk for women and girls on the move, at border crossing points and transit/collective centres, and in bomb shelters. More than 60% of bedrooms in collective sites are not separated by gender, according to a GBV safety audit in 47 collective centres. More than half do not have GBV referral pathways or visible information and reporting mechanisms for the prevention of sexual exploitation and abuse.</p> <p>After the escalation of the war, LGBTIQ+ people in Ukraine have reportedly faced increased concerns about discrimination. Trans women and intersex people face specific challenges, including the refusal to pass internal checkpoints, inability to leave the country and military conscription due to their identity documents not matching their gender markers. They may be exposed to discrimination and violence, and fear losing access to crucial hormone replacement therapy and other necessary medications.</p>
<p>Challenges</p>	<p>There is an overall lack of certainty around the figures and locations of the population moving back to Ukraine from abroad or to other locations within the country. This poses a significant challenge to the collection of timely and accurate data on the numbers, locations, and needs of IDPs across Ukraine, further complicating efforts in humanitarian assistance planning, implementation and effectiveness.</p> <p>Due to active hostilities and evacuation of the personnel responsible for HIV monitoring and evaluation there is a significant lack of data and reliable information on HIV services required for operational assessment of the situation and immediate managerial decision-making.</p> <p>According to the Ministry of Health, health facilities in areas where the Government of Ukraine's regained control have suffered considerable damage, with some completely destroyed. One of the main critical needs, according to the Ministry, is the provision of medicines and medical assistance to people with chronic diseases who have been deprived of access to health care for months.</p> <p>A number of shelters operating in Ukraine could provide services to people living with HIV and other key populations. However, representatives of these groups are often excluded from traditional support networks among displaced and host communities, experiencing challenges in shelter access and facing stigma and discrimination. There are ongoing reports about the eviction of people from shelters and manifestations of physical violence against community representatives.</p> <p>The affected population is at elevated risk for adverse mental health outcomes and there is consequently an urgent need for continued mental health and psychosocial support services. Health care workers face challenges of working over capacity due to understaffing, and are at increased risk of psychological distress, burnout and mental health issues.</p> <p>National protection systems and mechanisms for women survivors of violence have also been compromised, and sexual and gender-based violence services are mostly unavailable in areas affected by active hostilities and non-government-controlled areas.</p> <p>Winterization activities are being implemented, but the winter targets and needs exceed the capacity of the partners – especially in the east.</p>

<p>Action required</p>	<p>Address barriers to safe and equal access for key populations to social services and programmes, develop tailored programmes/specialised shelters to ensure key populations in displacement and/or affected by the war in Ukraine enjoy equal rights.</p> <p>Advocate for equitable and non-discriminatory provision of services to key populations by humanitarian actors, civil society organisations, government, and law enforcement agencies. Interaction between communities and military administrations is required.</p> <p>Increase options to integrate HIV-related services (information, testing, prevention packages) into a broader set of humanitarian services, led by humanitarian organisations. This approach should work for hosting countries as well.</p> <p>Urgent work is needed to repair shelters and distribute winter fuel to the most vulnerable during the rest of winter season.</p> <p>In areas where the Government of Ukraine regained control, there is a need for psychosocial support for the traumatized population, particularly people in rural areas, who witnessed or experienced numerous human rights violations and ongoing hostilities.</p> <p>Capacity building for CCCM knowledge and technical capacity is needed for stakeholders at all levels to ensure a coordinated response in collective sites.</p>
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Response: UNAIDS Secretariat and Cosponsors

UN agencies and partners on the ground are working closely with local authorities of newly accessible territories to determine needs and arrange deliveries of life-saving humanitarian assistance to the worst-affected areas.

UNAIDS mobilized US\$ 1 million to support service providers on the territories with high HIV prevalence and severely affected by the war, transit territories for IDPs, frontline and de-occupied territories, and Fast-track cities (Kyiv, Odesa, Dnipro, Kryvyi Rig). Operation of the health care institutions providing HIV and TB treatment has been ensured by provision of power generators, notebooks, power banks, equipment to keep cold chain to preserve medicines in hospital storages in Chernigiv, Kharkiv, Dnipro, Kyiv, Kryvyi Rig, Odesa, Zaporizhzhia. Community organizations have been supported to continue HIV prevention and care services and support PLHIV and KPs in provision humanitarian kits, protein food kits, hygiene kits/certificates, financial aid, STI (Sexually Transmitted Infections) testing for women-IDPs, reconstruction of the community centres damaged by shelling, providing assistance in transportation to health care facilities and medicines delivery, assistance in evacuation etc. Shelters for IDPs from KPs have been established: in Kyiv, Dnipro, Chernivtsi, Lviv, Ivano-Frankivsk for LGBTIQ+ population; in Kryvyi Rig for PWUD and PLHIV; in Dnipro, Kyiv and Zaporizhzhia for women from KPs with children.

Health Cluster partners have provided over 300 generators to health facilities across the country. Partners have also joined forces to expand operations and provide timely and critical assistance to people in need in areas regained by the Ukrainian authorities, especially in Kharkivska and Khersonska oblast.

IOM conducted the 12th round of a [Rapid representative assessment of the general population in Ukraine](#) to gather insights into internal displacement and mobility flows, and to assess local needs.

WHO in Ukraine joined the United Nations humanitarian interagency convoy delivering key humanitarian needs including medicines and consumables to the frontline areas where the Ukrainian government has recently restored control. The UN humanitarian interagency includes WHO, UNHCR, UNICEF & IOM.

UNDP conducted a series of trainings on "Psychosocial support of medical workers accompanying people who have experienced violence," which took place in Dnipro, Poltava, and Vinnytsia. The purpose of the trainings was the development of medical workers' skills in recognizing, establishing contact, and providing psychological first aid to people who show signs of sexual violence (men, women and children), and referral.

Since February 2022 IOM through the MHPSS (Mental Health and Psychosocial Support) Hotline carried out more than 10,000 consultations including psychological first aid sessions, sessions within the framework of short and medium-term psychological counselling and psychotherapy, and psychiatrists' consultations. In addition to Lviv, Vinnytsia, Poltava, Chernivtsi, Sumy and Kharkiv regions, IOM expanded its Health coverage to Zakarpattia, Ivano-Frankivsk, and Zaporizhzhia regions through onboarding of implementing partner Medicover to provide free medical care to displaced populations by mobile teams.

WHO held a five-day training on providing psychiatric assistance to new multidisciplinary mobile teams from five regions in Ukraine in addition to 21 teams already working. The WHO CO continues to train coaches on the large-scale Self-Help Plus intervention to promote the National Mental Health and Psychosocial Support (MHPSS) Programme, initiated by the First Lady of Ukraine Olena Zelenska in May 2022. Self-Help Plus is WHO's five-session stress management course designed to help adults in extreme distress to learn stress management.

UNFPA continues to support survivors of gender-based violence in Ukraine and neighbouring countries. Three Survivor Relief Centres located in Zaporizhzhia, Lviv and Dnipro have helped around 1,200 internally displaced people and GBV survivors in the last two months. More than 121,500 people have received structured psycho-social support through 101 UNFPA-supported psychosocial mobile teams, national GBV hotline and partners over recent months. Specialized psychotherapy services have also been provided to women subjected to sexual violence across through an online Aurora platform. Over 50,000 people received materials from UNFPA and national partners containing referrals to available services for people who suffered from conflict-related sexual violence.

Under the Global Fund Emergency Grant, in collaboration with Public Health Centre of Ukraine, UNICEF procured HIV diagnostics, valued at US\$2.4 million, to test and confirm the HIV status of 625,000 people including pregnant women and children. Moreover, additional supplies for HIV prevention, treatment monitoring and viral load testing will be procured for the HIV programme in Ukraine emergency response. Around 15,000 Ukrainian injecting drugs users will receive services and 50,000 people living with HIV will benefit from viral load testing for their lifelong treatment monitoring in 2023.

UNICEF provided technical assistance to develop a SUPPORTME website – an information portal with online consultations for adolescents to raise their awareness on sexual and reproductive health, HIV, and mental health.

Situation and response update on access to HIV services:

RECEIVING COUNTRIES

Access to antiretroviral therapy and opioid agonist therapy

Republic of Moldova

Situation update

According to [UNHCR data](#), 765,011 border crossings have been registered from Ukraine and 108,885 refugees recorded in the country. 217 people living with HIV have been provided with HIV treatment (135 women and 82 men; 11 people got PrEP, 7 women and children got PMTCT support). All treatment centres all over the country are involved in ART delivery.

Civil society organizations are providing thousands of refugees with integrated HIV/TB/hepatitis/SHRH/mental health and psycho-social support. In the period from October to January 2023, the CSOs (Civil society Organizations) provided integrated HIV/TB/Viral hepatitis prevention/screening/testing services to about 500 refugees. Refugees are also supported to get their ARV treatment in the host countries, while transiting Moldova. Psychological support, mental health and SHRH are among the services provided to refugees. Due to high stigma and discrimination and fear to approach the primary health services, the persons from key populations are being provided and referred to the family medicine for general therapeutical issues.

The Government led humanitarian response is considering more and more the integration of the refugees into the society. Thus, the Government of Moldova approved at the beginning of 2023 the temporary protection mechanism for refugees, which establishes the ways to ensure the fundamental rights of refugees to health, education, accommodation, social assistance, as well as their protection towards abuses, exploitation and discrimination.

Response: UNAIDS Secretariat and Cosponsors

2,599 frontline partners, government and CSOs staff who have been trained on GBV (Gender-Based Violence) safe disclosure and referral mechanisms to support the rollout of guidelines on referral pathways. Several referral pathways covering the entire country have been updated, while the [GBV pocket guide](#) has been translated into Romanian and distributed among partners.

The [Inter-Agency Winterization Plan for Moldova](#) for the period between November 2022 and March 2023 has been developed. It foresees to address the winter-related needs of 130,000 refugees.

UNAIDS is supporting CSOs providing assistance and referral for the refugees to obtain the temporary protection and are providing support for job-related inclusion. Basic humanitarian assistance, including the one related to winterization needs are being offered.

European Union countries receiving refugees

Situation update

According to the government data compiled by the Office of the United Nations High Commissioner for Refugees ([UNHCR](#)), more than 8 million refugees from Ukraine were recorded across Europe as of 07 February 2023 and almost 5 million registered for temporary protection or similar national protection schemes in Europe.

The majority of refugees are recorded in Poland (1,563,386), Germany (881,399), and Czech Republic (487,393). France, Italy, Bulgaria, Spain, United Kingdom, Romania, Slovakia each have more than 100,000 refugees recorded. According to the IOM among those Ukrainians considering a move abroad currently, 56% indicated a country within the European Union, with Poland, and Germany mentioned most frequently.

A meeting of high-level officials was held in Brussels to discuss humanitarian support options for Ukraine in the context of the winter period. The meeting was attended by Deputy Prime Minister of Ukraine, representatives of European Union Member States, humanitarian organizations of the United Nations, the International Committee of the Red Cross, the World Bank, and other humanitarian organizations and donors.

The flow of people moving to Germany has recently increased; this also applies to key populations. Most of these individuals target the large cities of western Germany and require support in accessing HIV, OAT and general health services as well as accommodation and psycho-social services.

Challenges

Neighbouring countries' capacities to provide long-term and safe shelters are being stretched and the situation may worsen during winter season.

According to the WHO estimates, the number of adults living with HIV who will end up abroad could be more than 30,000 persons. No statistical data concerning the number of people living with HIV who had been receiving ART treatment in Ukraine and crossed the border are available. The process of exchange of medical information on a patient and statistical data between European and Ukrainian healthcare facilities is yet to be established.

Civil society organisations providing HIV services to people living with HIV and key populations are lacking human and financial resources and are in critical need of extra capacity and require urgent financial assistance to continue services provision.

People fleeing Ukraine, particularly women and girls, continue to face challenges and vulnerability risks as they seek safety in neighbouring countries. Prevention and

	<p>protection from gender-based violence, trafficking, sexual exploitation and abuse remain key concerns.</p> <p>TB patients abroad are facing a lack of necessary medicines for TB treatment (especially for MDR-TB) which is forcing them to return to Ukraine for treatment.</p>
Action required	<p>Ensure humanitarian actions that respond to the needs of both people from Ukraine impacted by the armed conflict and those in host communities.</p> <p>Advocate for and continue to work with governments in European Union countries to ensure continuation of antiretroviral and opioid agonist treatment for people living with HIV and people who receive necessary medication from Ukraine and prevent interruption of treatment.</p> <p>Additional resources are urgently required to mobilise extra capacity for civil society organisations given the continuous high workload in meeting the needs of refugees.</p>
<p>Response: UNAIDS Secretariat and Cosponsors</p> <p>UNAIDS supports 8 CSOs in Poland to improve services for Ukrainian refugees living with HIV and representing key populations.</p> <p>WHO provides support to refugees to access health-care services through national systems, ensuring inclusive access to quality health services, diagnosis and continuity of care. WHO has continued to provide policy guidance and technical support to refugee-hosting countries for disease prevention programmes.</p> <p>UNFPA continues to partner with the Centre for Reproductive Rights (CRR) and the International Planned Parenthood Federation (IPPF) to support the institutional and operational needs of national civil society organizations and service providers in Hungary, Poland, Romania and Slovakia, that are providing SRH and GBV assistance and information to hundreds of refugees from Ukraine.</p> <p>UNHCR together with UNICEF established so far 36 Blue Dots in Bulgaria, Hungary, Italy, Moldova, Poland, Romania, Slovakia, and Slovenia to provide general counselling, support and referrals for health care, education, legal aid, protection referral, and psychosocial support.</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 are seeing significant HIV epidemics (Chernihiv, Dnipro, Kharkiv, Kryvyi Rih, Kyiv, Odesa, and Poltava). In the absence of additional funding, UNAIDS reprogrammed other funds at the regional and country level to address essential needs in Ukraine and support regional communities working with Ukrainian refugees in hosting countries.

UNAIDS strongly appreciates Germany's provision of US\$ 1M in support of the emergency programme in Ukraine and neighbouring countries. In addition, Germany also supported UNODC programme on HIV prevention, treatment and care and support people who use drugs and people in prison settings in Ukraine with US\$ 1 480 000.

The following areas of assistance were covered by the UNAIDS Emergency Fund:

- Assistance to community-based organizations to sustain HIV prevention and care and support services, including first-aid training and first-aid kits, gas masks, reconstruction of the community centres damaged by shelling (Chernigiv, Kyiv); provision of power generators (and fuel), notebooks, heaters, power banks; procurement of fuel to help serve those in remote city districts or out of the city - delivering medicines, food supply, blood samples to central laboratory.
- Direct humanitarian assistance to people living with HIV and key populations, including Hygiene kits, food certificates, financial aid, STI testing kits for women-IDPs, first aids kits, assistance in transportation to health care facilities and medicines delivery, help to restore ID cards, blankets, warm clothes, hot beverages at service points, medicines for PWID (to care for problematic wounds).

- Targeted support of mothers, living with HIV and their children.
- Shelters for internally displaced people from key populations.
- Ensuring uninterrupted operation of the health care facilities, providing services to PLHIV.

UNAIDS has issued an urgent call to the international community for an additional US\$2.5 million for civil society organisations providing HIV services in Ukraine and in countries receiving refugees in need of HIV services.

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

COSPONSORS` SITREPs

WHO/Health cluster	Ukraine: Health Cluster Bulletin #21 (November 2022)
WHO	Ukraine Crisis Response (December 2022 Bulletin)
UNHCR	Ukraine Emergency: UNHCR Operational Response, Delivery Updates
UNHCR	Ukraine situation flash update #39 27 January 2023
WHO	War in Ukraine: situation report from WHO Ukraine country office. Issue #43
UNICEF	Humanitarian Action for Children 2023 - Ukraine and Refugee Response
UNICEF	Ukraine Humanitarian Situation Report No. 24
UNFPA	Ukraine and Refugee Response Crisis: UNFPA Appeal 2023
WFP	Limited Emergency Operation - Ukraine External Situation Report #34

IOM	Ukraine Crisis Response Operational Update (16-22 January 2023)
IOM	Internal Displacement Report - General Population Survey Round 12
UNOCHA	Ukraine Situation Report
UNOCHA	Ukraine Humanitarian Needs Overview 2023 (December 2022)