

SITUATIONAL REPORT

as of 20.05.2022

Responding to challenges caused by the Russian invasion of Ukraine

POST-OCCUPATION: regions liberated from Russian occupation

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SUMMARY

Kyiv, Chernihiv and Sumy oblasts have been seriously affected by the war. Prior to the outbreak of hostilities, projects for prevention and treatment of HIV, tuberculosis and hepatitis C virus were active in these locations. Destruction of cities and displacement of the population have significantly affected project implementation. Though the situation is gradually improving, **it is too early to speak of returning to normal life.**

PREVENTION:

- ❗ The non-governmental organizations note a **decrease** in the number of new clients enrolled, due to the flow of people to other regions.
- ❗ The main activities of non-governmental organizations are now aimed, **first and foremost, at meeting the essential needs of clients who remain in the affected areas: chiefly the provision of food packages and material humanitarian aid.**
- ❗ In order to ensure uninterrupted provision of their services, **non-governmental organizations have kept in close contact with their clients** by adjusting their working hours and adapting to the challenges of war.
- ❗ **The Alliance for Public Health has simplified the procedure for fuel procurement** and has made practical use of **mobile ambulatories during the war.**
- ❗ Thanks to collaboration of all the principal recipients and the Global Fund, with the proactive support of the Public Health Center of the Ministry of Health of Ukraine, **the Alliance for Public Health has provided emergency financial support to non-governmental organizations** by using GF funds to compensate their costs in the period from January to March 2022 to cope with the negative consequences of suspension of governmental funding of the basic package of prevention services for people who inject drugs, sex workers and men having sex with men.
- ❗ **Thanks to timely planning and funding provided by the Alliance for Public Health, the non-governmental organizations** have been able to purchase Naloxone and **provide the clients with the vitally important drug.**
- ❗ Because of the forced migration of clients of the projects, **the non-governmental organizations quickly agreed reallocation of their activities with the Alliance for Public Health and worked to ensure sustainability of prevention services.**



ACCESS TO ANTI-RETROVIRAL TREATMENT

- ❗ The central challenge **is that it is impossible to reach the liberated territories because of landmines, damaged roads and episodic bombardment**. Following the expulsion of Russian forces, the teams try to renew provision of services of projects in full and extend help to clients in the newly liberated territories. To do so, they closely cooperate with volunteers providing humanitarian aid and helping deliver anti-retroviral treatment and pre-exposure prevention to project clients.



TUBERCULOSIS

- ❗ During the occupation, **tuberculosis offices stopped working in nine settlements** of Kyiv oblast. So far, **only three of them have renewed their work**.
- ❗ In spite of these interruptions, **case managers of the project have been persevering with their work**. They paid special attention to providing tuberculosis drugs to the patients and keeping in touch with them by phone. They tried to contact those who went missing on a daily basis.
- ❗ As of the end of March, **68** clients were remained uncontactable, but by mid-April, **49** of those clients were reconnected with staff.



OPIOID AGONIST TREATMENT

- ❗ Because of partial occupation of the territory and lack of opioid agonist treatment drugs, **opioid agonist treatment patients were forced to move to alternative locations, usually within the same oblast**.
- ❗ In Kyiv, the total number of the patients **decreased by 3.1%** - however, **there is an increase in the number of new patients in Kyiv oblast**. The quantity of patients decreased by **3.82%** in Sumy oblast; in Chernihiv oblast, there was a slight increase in the number of patients (as of 31.03.22).
- ❗ During active hostilities, **an opioid agonist treatment site in Chernihiv oblast** was badly damaged, and the stock of medications was destroyed. Opioid agonist treatment sites in Kyiv and Sumy oblasts remain intact.
- ❗ In the city of Kyiv, **private sites** suspended operations, which caused an increase in the number of clients wishing to join the state-funded opioid agonist treatment program. At the time of writing, private sites are renewing their work. Presently, **state-funded opioid agonist treatment sites in general and on newly liberated and de-mined territories have sufficient stocks of opioid agonist treatment drugs**.

SITUATION OVERVIEW

In early April 2022, thanks to a successful counter-offensive launched by the Ukrainian Armed Forces, almost 1,500 villages and towns have been liberated in Zhytomyr, Zaporizhzhia, Kyiv, Mykolaiv, Sumy, Kharkiv and Chernihiv oblasts. The territories of Kyiv, Chernihiv, Zhytomyr and Sumy oblasts have been fully cleared of occupying Russian forces. These regions have suffered significant destruction of civic infrastructure (e.g., in Chernihiv, which was not directly occupied, 70% of buildings have been ruined or seriously damaged, according to local authorities; Irpin and Bucha, two towns that have tragically become infamous around the world, are 50% destroyed). These regions have been significantly affected by the war: infrastructure is destroyed, there are many casualties among civilians, and many locals have moved to safer regions of Ukraine or abroad. Before the war, projects for the prevention and treatment of HIV, tuberculosis and viral hepatitis were active in these regions. This report presents current information about the situation in the liberated regions.



HIV PREVENTION

GENERAL TRENDS:

📌 Work by non-governmental organization has not stopped!

- 📌 In the newly liberated towns and villages, rescue operations and demining are still ongoing, there is no stable mobile connection, in some places curfews persist. The only transport allowed is that with an official permit to deliver humanitarian aid.
- 📌 Non-governmental organizations see a **decrease in** the inflow of new clients caused by internal migration
- 📌 Social workers provide counseling and referrals remotely, **online**.
- 📌 Non-governmental organizations have reformatted their activities and now work, **first and foremost, to meet the essential needs of project clients who have remained there: namely the provision of food packages and material humanitarian aid.**
- 📌 We see that **people are returning to liberated areas**, and partner projects are constantly monitoring the situation to increase clients' involvement in prevention programs.



CONSULTATIONS
AND REFERRALS BY SOCIAL
WORKERS **ARE MOSTLY
CONDUCTED ONLINE**



KYIV OBLAST

Activities before the war began (January 9 to February 23, 2022):

- 📌 **1172** visits of clients to mobile ambulatories.
- 📌 **343** clients from among people who inject drugs received services, including **33** new clients
- 📌 **81** clients from among men having sex with men received services, including **26** new clients

Impact on activities of partner non-governmental organizations:

- 📌 **Suspension of offline work** of programs for overdose prevention, improvement of access to diagnosis and treatment of opioid agonist treatment, anti-retroviral treatment and tuberculosis because of shelling of civilians and mass destruction of buildings.
- 📌 **Evacuation of most non-governmental organization personnel**, as saving their lives was a priority.
- 📌 **Many clients have left**, though some stayed, and non-governmental organization employees continued providing online counseling even in dire conditions. During the war, services were provided (according to preliminary data) to **298** people who inject drugs, including **19** new clients, and **49** men having sex with men.

In Kyiv oblast, there are approximately up to **200** people who inject drugs in need of prevention services HIV/sexually transmitted infections/tuberculosis at present. The clients require harm reduction services (handout materials), humanitarian aid (food, household goods, etc.), access to diagnosis and treatment of drug dependence and HIV (opioid agonist treatment, anti-retroviral treatment, tuberculosis), and transportation.

- 📌 Some organizations have been forced to fully **relocate their activities**.

Non-governmental organization Alliance.Global

Implementation of **‘Capacity building of men having sex with men and other key populations and improving access of men having sex with men to HIV services’** project (implemented by non-governmental organization Alliance.Global with financial support from the Alliance for Public Health) was threatened by martial law and fighting in Kharkiv, Chernihiv, and the Kyiv oblast towns of Bucha and Irpin. According to statistics provided by HORNET (a company that owns a dating app for men having sex with men and can track activities and movements of men having sex with men), a large share of existing and prospective clients of the organization have moved to western Ukraine, i.e. Lviv, Chernivtsi, Ivano-Frankivsk, Zakarpattia, Ternopil and Volyn oblasts.

In Kyiv oblast, before the Russian invasion, non-governmental organization Alliance.Global worked in Bucha and Irpin, providing pre-exposure prevention and transporting new clients to health care facilities to receive medication. The plan was to provide services to **351** clients involving two social

workers and two doctors, but after the outbreak of hostilities, Irpin hospital was evacuated to Kotsiubynske settlement.

Since many clients moved to the western regions of Ukraine, the organization adapted and now actively works with clients who have moved to Lviv. A pre-exposure prevention site has been opened there and a taxi-based delivery service has been established in the region. **In the first five days of work in the new office in Lviv, the non-governmental organization admitted 41 new pre-exposure prevention clients.** To put this into perspective, before the war the organization added 30–35 new clients of pre-exposure prevention in Kyiv oblast every month.

The non-governmental organization says that following the withdrawal of invading Russian forces, the doctors and social workers intend to return to work in the Kyiv region as soon as working in Bucha becomes safe, demining is completed and clients return to the oblast.





CHERNIHIV OBLAST

Activities before the war began (January 9 to February 23, 2022):

- 📌 The optimized HIV case finding' project worked with **43** clients.

Impact on activities of partner non-governmental organizations (Alliance.Global):

- 📌 All activities have nearly **ceased**.
- 📌 A social worker is now outside the region, yet continues providing **counseling and social support of clients** through social media, mobile phone calls, etc. .

After the invaders withdrew:

The social worker will be able to return to the region after demining, provided staying in the region is safe, to renew provision of prevention services to local clients as soon as possible. The non-governmental organization is planning to catch up on targets and organize uninterrupted provision of services to its clients in the near future.



SUMY OBLAST

Activities before the war began (January 9 to February 24, 2022):

- 📌 Under the OCF component for PWID and members of their families, 100 clients were receiving services before the war.
- 📌 Under 'Overdosing prevention component', social workers counseled PWID, purchased and issued 40 vials of Naloxone.
- 📌 One new client was enrolled on the PrEP program.
- 📌 Key population members made 670 visits to the MA to get HIV/STI prevention services.

Impact on activities of partner non-governmental organizations (Sumy Oblast non-governmental organization Club Shans):

Though the city was controlled by the Ukrainian Armed Forces, it was shelled from March 2, with battles downtown and in the suburbs. The city was surrounded by Russian checkpoints.

- 📌 In the first days of the war, the organization **partially suspended its activities** to adapt to new conditions and reassess how it could continue providing services to its clients in a safe manner.
- 📌 All social workers kept in touch and provided **phone counseling** to clients; they also **issued prevention materials** upon appointment.
- 📌 A documenter living near the office **occasionally issued prevention materials** (syringes, alcohol wipes, condoms, etc.)
- 📌 The social worker from the mobile ambulatory remained in touch and **provided counseling in the field**.
- 📌 Temporary sites for dispensing HIV/STI prevention kits were organized at the homes of social workers.
- 📌 Social workers used **bicycles** to move around the city to provide services to project clients.
- 📌 **From March 10, the mobile ambulatory made trips according to a schedule adapted to the new conditions.** During the period from 24.02 to 10.04, **650 visits** of clients to the mobile outpatient clinic were made.
- 📌 From **March 21**, the prevention component and administration of Naloxone was restarted. There were no problems with procuring the medication, as it was purchased before February 24. Since service provision was renewed, **300** vials have been given to clients.
- 📌 There was **no recruitment** of new clients under the component of pre-exposure prevention for men having sex with men and other key populations

After invading Russian forces withdrew:

- ✓ Since April, the **mobile ambulatories have been operating according to their normal schedule**. Currently, diesel fuel is in short supply, and gas stations accept only cash. The organization is using some fuel vouchers left from 2021. To deal with this problem, The Alliance for Public Health has simplified the procedure for procurement of fuel and approved using cash for that purpose.
- ✓ Management of the AIDS Center has been informed about the need for **pre-exposure prevention drugs**; delivery of 120 packages of pre-exposure prevention is expected and recruiting new clients will continue.
- ✓ Under the Optimized case-finding component for people who inject drugs and their social networks, **services for clients were reopened** on March 27, as soon as shelling decreased, and 43 clients have visited the site and received the minimum package of services (six-month target is 315 clients). Work is going as planned.



STORIES FROM DIFFERENT REGIONS:

Sumy Oblast non-governmental organization Club Shans

'Some people deliver ammo, some bake bread, and some dispense syringes.' HIV prevention in Sumy during the war.

A mobile ambulatory is parked on the outskirts of the city of Sumy. Inside the bus, Oleksandr (Sasha), a social worker, places boxes of syringes and needles on a small table. 'Everyone has got a frontline of their own,' he says. "Some bake bread, some deliver ammo. And some dispense syringes."

Every day, the mobile ambulatory of Club Shans serves about **30** clients. 'Bombing does not scare us. We've got ourselves this armored train here,' jokes Oleksandr. He says that they worked on adrenaline in the first month of the full-scale war. When everything started on February 24, he took all handout materials in the office and brought them to his home. For a few weeks, he dispensed syringes to people coming to his home or at some pre-arranged places agreed upon by phone, walking or riding a bicycle to places where people using drugs gather to give them syringes.

"We published the announcement that clients of Club Shans in need of clean syringes could call the personal phone numbers of social workers. We collected information about the number of people and the locations where they would

prefer to receive handout materials," he says.

As there was no public transport, clients struggled to get to stationary sites to receive services. In two weeks, the mobile ambulatory renewed its work and **sometimes went to meeting points even during air raids and shelling**.

"It was important for us to not interrupt provision of HIV prevention in the city. We could not stop the work we had been doing for 16 years. Not even for a day," Oleksandr says. "I don't know about now, but then one could not buy syringes at all. There were three-hour long queues in drugstores. Pharmacists sold only one syringe of a certain size to one customer. So our clients were in great need of syringes."

All this is work for the future. Several months of interruption in preven-

tion activities can lead to a spike in spread of preventable disease in the region.

People gather near the bus for counseling, to seek answers to questions, and to receive support and screening for tuberculosis. "It is scary to use one needle several times. And it is not so bad when it is your own needle, but if it's someone else's it's no good. I am trying to avoid that," says one client. 'Pharmacies had no syringes. They are worth their weight in gold for us. We came here and were given everything for free. Sometimes, Sasha brought the goods right to my house'.

In March, the mobile ambulatory also offered testing for HIV and HCV. Now, there are only tests for hepatitis left. Because of the war, logistics are complicated, so delivery is still pending.

"This is our frontline — saving these people," says Oleksandr.

Valeriy, the mobile ambulatory driver, agrees. Driving a large (and quite old) bus in a war-stricken city is not easy. And it gets especially interesting when an air raid begins.

Since April, the mobile ambulatory of Club Shans works daily, following its usual schedule.

Activities of the mobile ambulatory of Club Shans are possible thanks to funding from the Alliance for Public Health and SI Public Health Center of the Ministry of Health of Ukraine.



TESTING FOR HIV (HealthLink project)



KYIV OBLAST

Activities before the war:

- From 01.01.2022 to 23.02.2022, **777** persons were tested for HIV, and **20** were found to be HIV+.

Activities after the start of the war:

- From 24.02.2022 to 31.02.2022, **163** persons were tested for HIV, and **7** were found to be HIV+.

Two health care facilities working with the project were on occupied territories: Irpin Central Town Hospital and Ivankiv Central Rayon Hospital.



CHERNIHIV OBLAST

Activities before the war:

- From 01.01.2022 to 23.02.2022, **266** persons were tested for HIV, and **3** were found to be HIV+.

Activities after the start of the war:

- There is no data about the period from 24.02.2022 to 31.03.2022 because contact was lost with the testing sites.

So far, testing is still implemented at town hospitals in Novhorod Siverskiy, Nizhyn, Borzna and Chernihiv, and at Chernihiv Oblast Hospital. During the occupation, all testing at these health care facilities was limited to blood sample collection sites. Managers of health care facilities used the project's tests, on agreement with the manager of the project.

STORIES FROM DIFFERENT REGIONS:

Irpin and Ivankiv

Irpin Central Town Hospital was shelled, partly destroyed, and then evacuated to Bila Tserkva. The infectious disease doctor had to hide for weeks in shelters without phone connection, in very difficult conditions. **Testing for HIV and HCV is temporarily suspended, as well as other medical services.** Some medical services have been resumed at the level of primary healthcare. Irpin Central Town Hospital is now being restored. The polyclinic department is expected to restart work in late April or early May; then clients of the project will be able to use its services.

Ivankiv Central Rayon Hospital was on occupied territory. The building has not been damaged, but there are problems with communications. Testing for HIV and HCV is still provided, but only for clients with clinical indications because there are many wounded and few employees, who are extremely overloaded. A quote from a health worker: 'Testing for HIV and HCV is not relevant now except for individual cases where there are clear clinical indications.' After communications are restored and personnel are back, the project will return to its pre-war activities.

ACCESS TO anti-retroviral treatment

Information about activities under Centers for Disease Control and Prevention project supported **'Improving HIV Treatment Cascade for Key Populations through Differentiated Case Detection and Linkage to Care and Increased Capacity at the Center for Public Health and Strategic Information in Ukraine'** project:

'Expanding access to HIV treatment' component



KYIV OBLAST

Activities before the war began (January to February 24, 2022):

- ❗ There were 31 operating anti-retroviral treatment sites in the oblast.
- ❗ Anti-retroviral treatment was sent to patients in the oblast via **Nova Poshta** service.
- ❗ Blood samples were transported; 15 health care facilities closed contracts with non-governmental organization Convictus Ukraine for compensation of fuel costs incurred during transportation of blood samples to laboratories.

Activities after the war began

- ❗ At the beginning of the war, Nova Poshta offices were not operational, so it was impossible to send anti-retroviral treatment via post in the first three weeks.
- ❗ In March, blood samples were not transported to laboratories because of limited capacity during active fighting. It was problematic to deliver samples to Kyiv (because of curfew, changes in the route and long trips, numerous checkpoints).
- ❗ No patients were transported.



After the invaders withdrew:

- ✓ Buchanska Centers for Disease Control and Prevention site has been reopened; there is no data yet about when other health care facilities will return to work. Patients from damaged health care facilities can be temporarily reassigned to Kyiv Oblast Dermato-venerological Dispensary or to the closest operating sites (as many of them have been evacuated).
- ✓ Nova Poshta offices have opened, and the patients now can receive medication by post. As almost all the population in areas of heavy fighting have been evacuated, it is recommended that patients temporarily receive medical aid and anti-retroviral treatment at their current place of stay. Volunteers help with delivering medications. Where necessary, medical aid can be temporarily provided to PLWH at the Kyiv Oblast Dermato-venerological Dispensary or at the closest operating sites (as many local residents have been evacuated).
- ✓ Since 28.03.2022, blood sample collecting capacity has returned to 100%, and blood samples are transported whenever required. Health care facilities have been transporting blood samples over April.
- ✓ Transportation of patients by taxi in Kyiv oblast is now somewhat problematic due to damaged logistical routes, increased distances, checkpoints, and other unforeseen dangers that may occur on the way. Where required, this service will be used as much as possible and within the range of work of service providers. **After the significant destruction of towns during heavy fighting, this service will be very timely for the HIV+ patients of the eight sites.**



Mobile teams

- ⚠ About **100** clients still remain on previously occupied territories; contact has been established with **16** of them.
- ⚠ So far, it is impossible to renew all services because curfews and landmines make some locations unreachable.
- ⚠ **Clients' needs** are quite diverse, from receiving supportive consultations, anti-retroviral treatment medicines and doctor's advice, to essentials such as food, hygienic goods, clothes, diapers, baby food, etc.
- ⚠ Clients are in a very **bad psychological condition** and need basic services (food, medical aid, safe and warm lodging).
- ⚠ Currently, **consultations on adherence to anti-retroviral treatment are provided, as well as socio-psychological support; the mobile team has completed the first mobile ambulatory trip to deliver anti-retroviral treatment.**

STORIES FROM DIFFERENT REGIONS:

Borodianka

During the occupation, the Trust office in Borodianka was forced to suspend its work. The project team provided remote support to clients; social workers helped clients to find a site to receive services depending on the client's location. At the time of

writing, the polyclinic in Borodianka has started to resume work in austere field conditions, as electricity and water supply has not yet been restored. The Trust office is expected to return to full-time operation by the end of the month.



CHERNIHIV OBLAST

- ❗ The town of Horodnia was occupied (eight persons who received anti-retroviral treatment and pre-exposure prevention), with nearby settlements encircled by Russian forces (e.g. Kobyzhcha village of Bobrovytsia community, where there are three clients on anti-retroviral treatment and two on pre-exposure prevention). Visits of the mobile team to Nizhyn (seven clients) were temporarily suspended due to active bombing.
- ❗ The main need is for **therapy and humanitarian aid**. At the moment, most clients have anti-retroviral treatment because they received a 2–3-month supply of the medicines. Right after access to the cities was restored, volunteers were able to reach them, and the project team delivered anti-retroviral treatment, pre-exposure prevention and food packages to clients.
- ❗ The project team **is always in touch with clients**, thus clients were constantly under medical observation and took anti-retroviral treatment on time.

ACTIVITIES UNDER HEALTHLINK PROJECT

During the active fighting, HIV+ clients stayed at home. Clients in need of anti-retroviral treatment received it in full. Those who were staying in **Chernihiv** received the therapy at the infectious disease department of the oblast pediatric hospital to which the medicines had been delivered from the oblast AIDS Center. All clients coming to the organization's office were referred there as well.

In Novhorod-Siverskii, Nizhyn and Borzna, clients received medicines at the Trust office. Medicines were delivered to the villages of Nizhyn (former Borzna) rayon and Novhorod-Siverskii rayon via volunteers and acquaintances. Medicines were also handed over at pre-arranged locations.

SUCCESS STORY:

Patient support

During the occupation, the mobile team in Chernihiv oblast tried to call clients in the occupied territories to deliver medicines (where possible) and provide psychological support.

When enemy forces surrounded Kobyzhcha village, one client found herself running low on medicines. In just a few days, the team found an opportunity to deliver her anti-retroviral treatment drugs via volunteers. This method was then used to deliver medicines to all clients in that location to sustain them for a month.

The team learned that one client in Horodnia had been able to move abroad. They kept in touch with him, providing psychological aid, and emphasized how important it was for him to continue treatment abroad.

Going to liberated Horodnia is still forbidden by the military, so the team uses volunteers to deliver food packages, hygienic goods, clothes, etc. Fortunately, mobile communications were never interrupted in Kobyzhchi, so personnel could contact clients with motivational calls and psychological aid every day.



TUBERCULOSIS



KYIV OBLAST

Activities before the war

At the beginning of the war, there were **318** persons with tuberculosis (including **185** with drug-susceptible tuberculosis and **133** with multidrug-resistant tuberculosis) who received medical and psychosocial support from the Kyiv Oblast Organization of the Red Cross of Ukraine implementing the Alliance for Public Health's project 'Providing medical and social support to patients with tuberculosis/ multidrug-resistant tuberculosis. Building patients' adherence to tuberculosis treatment' in Kyiv region.

Activities during active fighting

- ❗ During the occupation and/or active fighting, **47** clients left the region. They were provided with a supply of tuberculosis medicines for 30 days or more. VideoDOT, phone or SMS reminders are used to ensure the evacuated clients took their drugs.
- ❗ In Kyiv oblast, the work of **tuberculosis offices** was suspended in Irpin, Bucha, Ivankiv, Borodianska, Makariv, Slavutych, the village of Krasiatychi (Polissia rayon), and in Velyka Dymarka and Kalyta amalgamated communities in Brovary rayon. The doctor and nurse from the Borodianska tuberculosis office evacuated because of sustained shelling and damage to their homes.
- ❗ In Kyiv oblast, **healthcare facilities have been damaged** where tuberculosis patients used to receive medical aid. After a direct hit, a shell partly ruined the building of the tuberculosis office of Makariv CRH. Shots have broken windows of the tuberculosis office at Borodianska CRH. Russian soldiers caused great damage to the tuberculosis office in Bucha (smashing furniture, breaking windows, destroying medicines, stealing medical devices and office equipment). In Irpin, a blast broke the windows of the tuberculosis office.
- ❗ Through the duration of the war, **case managers of the project continued their work** and called their clients, trying daily to reach those who were out of touch. A lot of attention was also paid to ensuring supply of tuberculosis medications.



Tuberculosis office in Borodianska



Tuberculosis office in Irpin



Makariv Central District Hospital

After the invaders withdrew:

- ✓ Currently, there are **316** clients (including **177** with drug-susceptible tuberculosis and **139** with multidrug-resistant tuberculosis) continuing treatment.
- ✓ As of 25.03.2022, contact was lost with 68 clients of the project, but thanks to efforts made afterwards, **49** clients had been found again by 14.04.2022.
- ✓ Immediate **delivery of tuberculosis drugs to clients of the project** in liberated towns and villages, including personal delivery to patients in severe condition or via Nova Poshta (at the expense of the project) to those locations where its offices have already resumed work, was organized, to avoid interruptions in treatment.
- ✓ **Clients' needs for psychological services has increased**, while psychologists can only work with their patients by phone and conduct motivational conversations to strengthen adherence to treatment, provide psychological support helping clients deal with fear, stress, etc. So far, **the psychologists have provided more than 80 consultations since the beginning of the war**. As part of the project, provision of legal consultations is ongoing, and clients are systematically informed about its availability. Seven such consultations have been provided upon request since the beginning of the year.



In the period since 24.02.2022, psychologists and tuberculosis doctors have conducted **four screenings for depression in new patients with MDR- tuberculosis** just initiating treatment. In one of the patients, depressive syndrome was found, and he was referred to a psychiatrist who later prescribed him antidepressants and psychiatric therapy.

Altogether, **40 patients are receiving treatment for depression**, including 21 receiving combined medicinal and psychiatric therapy. Out of 21 patients, six completed their six-month medicinal treatment during the invasion (four were successful, and two feel worse now after the war started). Two patients whose condition has got worse are under observation by a psychiatrist; their antidepressant treatment may soon be extended to nine months.

The difficulty of implementing the project is now related to patients' migration to other oblasts: it is difficult to transport medications to dispensing sites and deliver the drugs to patients who have left the oblast because of the war. The psychiatrist provides consultations at the Kyiv Oblast tuberculosis Treatment Center on a weekly basis; there are sufficient stocks of drugs to keep the patients on therapy and prescribe new treatments.

PERSONAL STORY

Yulia Reshetniak, a case manager of the project from Bucha, was a true hero during the occupation. During shelling, she stayed in a shelter together with her children, parents and pets. She had to face Russian occupation of her own house. Now, Yulia continues working with clients, helping to find those who are missing, collecting information about individual needs, helping them to renew their treatment, and providing tuberculosis drugs to clients of the project in liberated Bucha and the surrounding area.



- ✓ Many clients call case managers and nurses themselves to **continue the treatment**. Because of the lack of opportunity to provide controlled treatment on territories where Russian forces have been pushed back, **patients are re-assigned to the DOT office of Kyiv Oblast Tuberculosis Treatment Center** where they can get motivational food certificates and other services from the project (mobile account replenishment, fare compensation, etc.) Presently, **motivational food certificates** for the FORA retail network are provided to all clients who can use them in all rayons of Kyiv oblast. **Hygiene packages have been procured** and are expected to be delivered to the warehouse of the organization in the near future. Individual needs of clients are assessed (from purchasing slippers to house reconstruction/rebuilding) in order to meet them as much as possible at the expense of the project.

COORDINATION OF ACTIVITIES

A meeting was held between representatives of the Alliance for Public Health, Kyiv Oblast Organization of the Ukrainian Red Cross and the Director General of Kyiv Oblast Tuberculosis Treatment Center to discuss the current status of project implementation, problems in tuberculosis service, and barriers to overcoming tuberculosis in Kyiv oblast. A request has been received from the management of Kyiv Oblast Tuberculosis Treatment Center for supporting delivery of biologic samples (sputum) from health care facilities in the oblast (Public Health Center, tuberculosis offices) to the laboratory of the Kyiv Oblast Tuberculosis Treatment Center. It was also agreed that a schedule for such trips needs to be established (the first trip was planned for 18.04.2022). The need for delivering patients to Kyiv Oblast Tuberculosis Treatment Center for additional examination, diagnosis and hospitalization was discussed. Overall, many joint solutions were reached to improve tuberculosis-related work in Kyiv region.

OPIOID AGONIST TREATMENT



KYIV OBLAST

Activities before the war

As of 01.02.2022, 1,686 persons were receiving opioid agonist treatment at eight sites — four in Kyiv city and four in Kyiv oblast. Psychosocial support was provided to 311 patients at five opioid agonist treatment sites in the region (two in Kyiv, and three in the oblast in Obukhiv, Fastiv and Bila Tserkva).

Activities during active fighting

- ⚠ During the partial occupation of the territory of Kyiv oblast, the state opioid agonist treatment program continued working. **All opioid agonist treatment sites were on unoccupied territory and continued their operations.**
- ⚠ In March, **there was a risk of opioid agonist treatment interruption** due to insufficient stocks of medicines at the sites, caused by an interruption in re-supply. To avoid this situation, **the patients had to switch to lower doses of the drug**. A lot of extra tension was created by the closure of private opioid agonist treatment sites in Kyiv city. Currently, private sites are renewing their work.
- ⚠ The partial occupation of Kyiv oblast and fighting near Kyiv city caused **forced migration of local residents within the oblast and beyond**. Displaced people from Kyiv oblast and other regions are placed on the opioid agonist treatment program as fast as possible to ensure their treatment is not interrupted.

After the invaders withdrew:

- ✓ **As of 15.05.2022, 2094** persons are receiving opioid agonist treatment in Kyiv city and Kyiv oblast; of them, **40** are internally displaced people and over 100 have switched from a private program to state-provided opioid agonist treatment.
- ✓ **311** patients at five opioid agonist treatment sites of the region continue receiving PSS from social workers (no change).
- ✓ Implementation of the «Intervention by equal forces» pilot project in Kyiv oblast (which involved providing encouragement to bring new patients to the opioid agonist treatment program) **has been temporarily suspended** because the high demand for services (especially because of the inflow of patients from private opioid agonist treatment sites) rendered it irrelevant.



CHERNIHIV OBLAST

Activities before the war

- As of 01.02.2022, **392 patients** were receiving opioid agonist treatment at five sites, and PSS was provided to **135** clients at two opioid agonist treatment sites in Chernihiv oblast.

Activities during active fighting

- The site at Chernihiv Oblast Medical Center for Socially Important and Dangerous Diseases** in Novyi Bilous village **was destroyed**. Considering that Chernihiv was encircled, the medical center had many buildings, and bombing was periodical, patients were moved from destroyed buildings to intact ones. There were no victims or wounded among patients and medical staff. Opioid agonist treatment drugs were destroyed, but the stock was replenished from the stock of the Chernihiv site.
- The office of the Chernihiv chapter of the All-Ukrainian Network of People Living with HIV/AIDS **has been severely damaged**. Fortunately, there were no casualties.
- From the very first days of the occupation the city of Chernihiv, where the largest number of patients were located, was surrounded by Russian troops. However, the site continued working and had a sufficient amount of medication stock. To ensure uninterrupted therapy and reduce risk to the lives and health of patients and employees, the drugs were issued for a longer term.
- From mid-March, contact was lost with Koriukivka Central Rayon Hospital and Bakhmach City Hospital because electricity supply and internet connection were down. There were no opportunities for evacuation.

After the invaders withdrew:

- Currently, all sites are working except Chernihiv Oblast Medical Center for Socially Important and Dangerous Diseases.** Of the five patients, four are receiving the drug from Chernihiv Oblast Psychoneurological Hospital.
- In April, sites in Koriukivka, Mena and Bakhmach resumed work. As of 15.05.2022, currently, **443** persons are receiving opioid agonist treatment in the oblast.
- During April-May, more than 40 patients (including internally displaced people) were placed on the program..**



SUMY OBLAST

Activities before the war

- As of 01.02.2022, **733** patients were receiving opioid agonist treatment at **nine** sites, and PSS was provided to **239** clients at six opioid agonist treatment sites in Sumy oblast.

Activities during active fighting

- No sites have been damaged** in Sumy oblast.
- In March, during the Russian occupation, the situation with drug stocks at different opioid agonist treatment sites varied. Sumy was in the best situation, while in smaller towns patients had amounts of the drug to sustain them until mid-March. Some clients in Shostka had to buy the drug by prescription using their own funds. Some clients successfully travelled to Poltava to get medication (pre-arranged with the Poltava site). The most difficult situation was in the town of Okhtyrka.
- During the occupation of Sumy oblast, **there was no significant migration** of patients. Two persons moved from Sumy (one stayed in Ukraine and the other moved abroad). **There was no inflow of clients.**

After the invaders withdrew:

- As of 15.05.2022, the situation at the sites is **now stable**. The sites operate as usual, none of them has been damaged.
- After the area was liberated, all sites in Sumy oblast received a **new batch of medication** (methadone, buprenorphine) sufficient for three months. **742** patients receive opioid agonist treatment, and **239** receive PSS services at six opioid agonist treatment sites.

Okhtyrka in Sumy oblast is among the towns most affected by the war. After the war began, the opioid agonist treatment site there continued working. Moreover, when fighting reached the town itself, **doctors and social workers kept on providing services** and supporting each other and their patients.

The town was heavily damaged by shelling and bombing. Luckily, **the building of the opioid agonist treatment site in Okhtyrka remains intact**. During air-raid alarms and shelling, the staff went to the bomb shelter and often saw their clients there.

In the second half of March, the hospital ran out of opioid agonist treatment drugs. Most clients were referred to get methadone in **Poltava**, as the road to Sumy was blocked. Social workers and health professionals of Sumy Oblast non-governmental organization Club Shans provided their clients with **consultations and psychological support**, linking them to Poltava organizations, health care facilities and volunteers, and organizing places for them to stay in Poltava. It was difficult to leave the city, as many drivers were unwilling

to travel because of shooting and landmines. **Out of 34 opioid agonist treatment patients, only eight stayed in Okhtyrka all the time.**

Opioid agonist treatment drugs are already available in the town and clients have received them according to schedule. The social worker and the medical consultant of Club Shans continue providing services to clients and keep in touch with them.

During the fighting there was no food available in stores. Electricity, gas, water supply and heating were unavailable almost everywhere. People shared what food they still had, cooking on open fires. One opioid agonist treatment client's house was damaged during shelling. So far, water supply has been partly restored, the electricity grid is being repaired, and gas supply is under repair. Opioid agonist treatment clients need food and medicines among the most pressing needs.

Health professionals and social workers need heaters, as it is yet unclear whether heating will be restored by next season. Power generators are needed for emergencies.



Photo: censor.net

To support our emergency efforts, please donate any amount of money to the following accounts:

Beneficiary: ICF “Alliance for Public Health”

Address: 24 Bulvarno-Kudriavska St., 01601 Kyiv, Ukraine

Bank name: JSC “Credit Agricole Bank”,

Bank address: 42/4, Pushkinska St., Kyiv – 01004, Ukraine

SWIFT code: AGRIUAUKXXX

Purpose of Payment: Donation.

USD:

Account number: UA073006140000026009500299105

Correspondent bank details for USD: Credit Agricole SA (France)

SWIFT: AGRIFRPP, account number: 20586620000

EUR:

Account number: UA063006140000026000500198937

Correspondent bank details for EUR: Credit Agricole SA (France)

SWIFT: AGRIFRPP, account number: 20586612000

GBP:

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TOGETHER WE ARE STRONG!

CONTACTS: ICF “Alliance for Public Health”

Andriy Klepikov,
Executive Director

e-mail: klepikov@aph.org.ua

Cell: +38 050 334 8899

(also Viber, WhatsApp, Telegram)

Myroslava Andruschenko,
Program Manager: Policy and Advocacy

e-mail: andrushchenko@aph.org.ua

Cell: +38 067 232 4982

(also Viber, WhatsApp, Telegram)

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