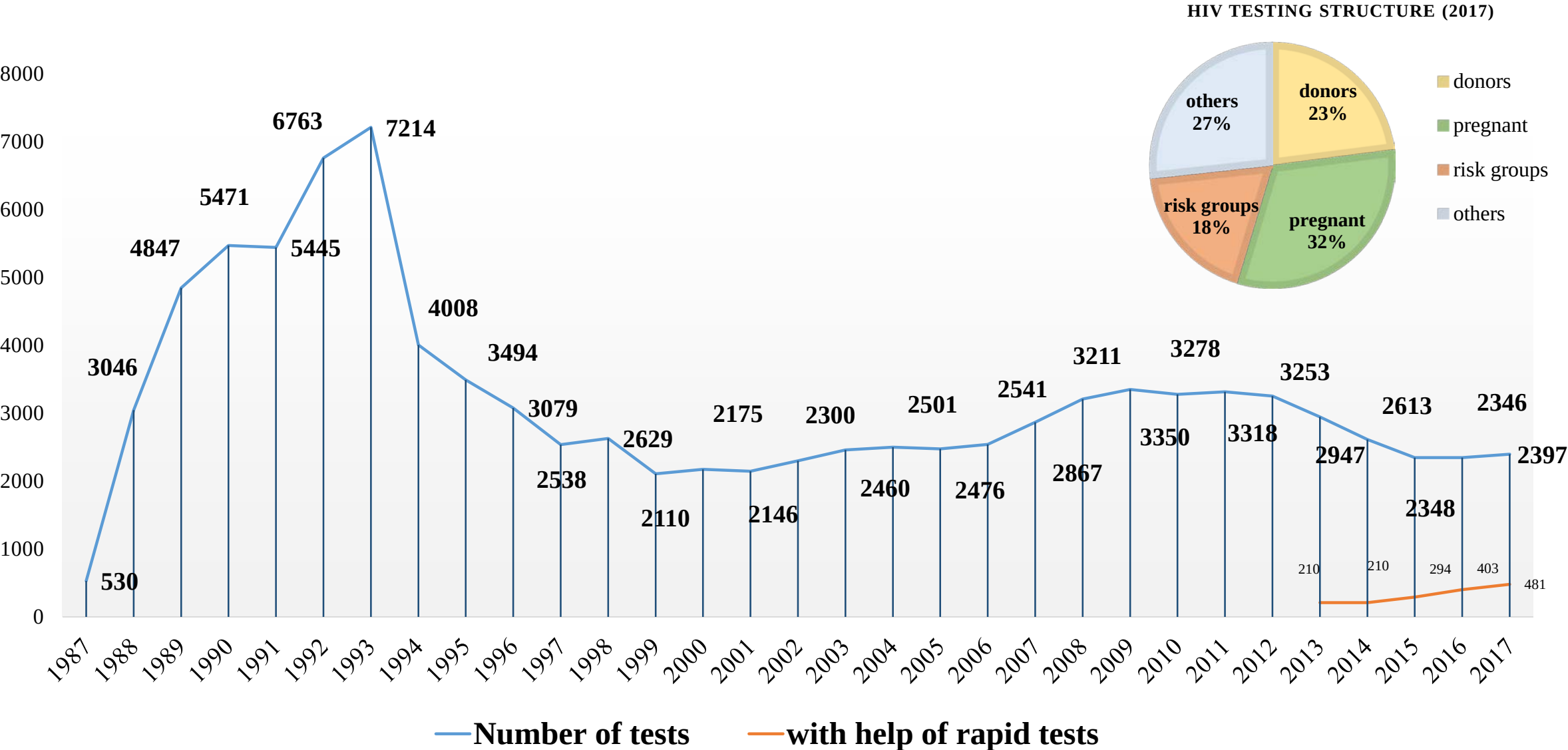


National summary recommendations on HIV/AIDS on involvement for getting services

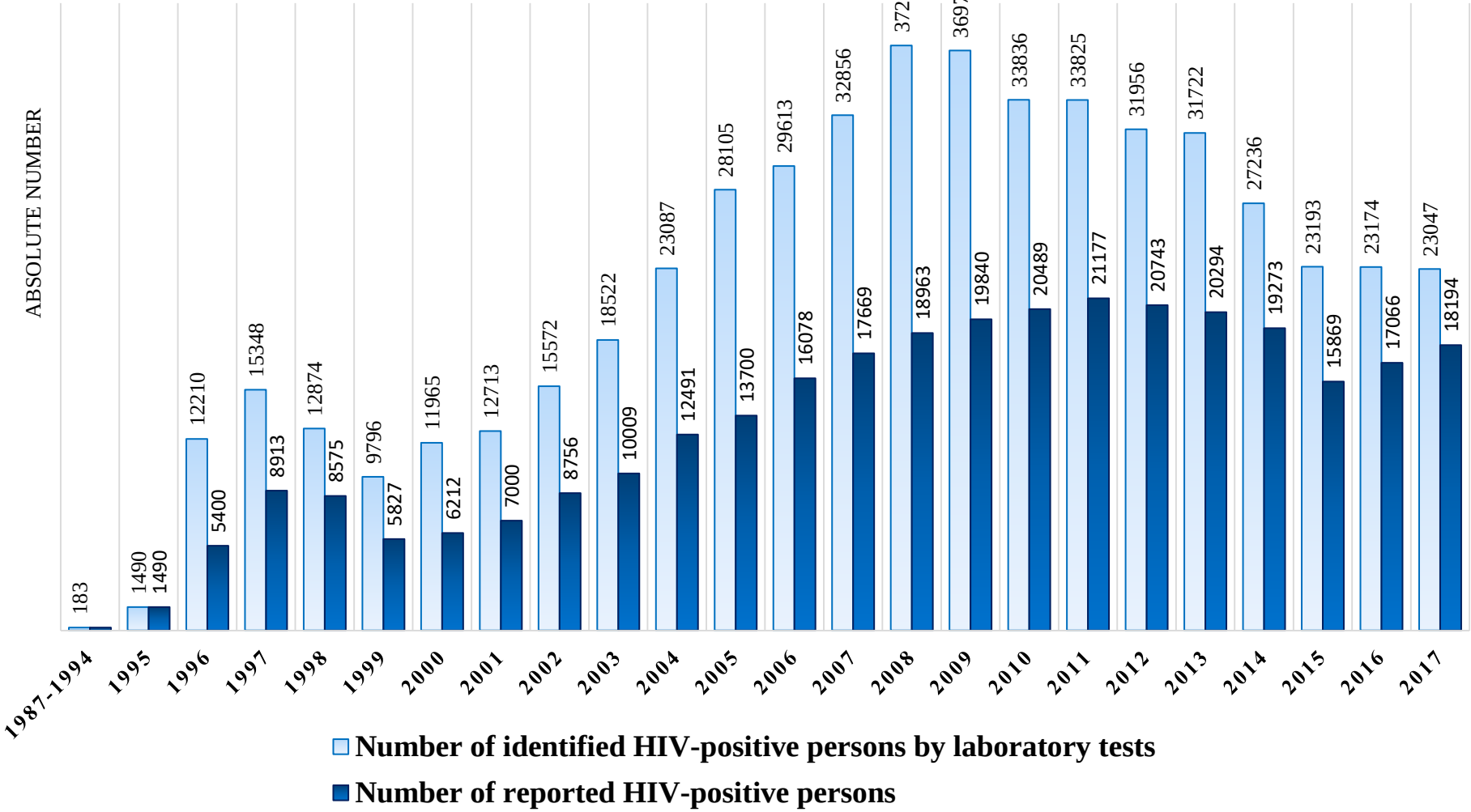
Violetta Martsynovska, Epidemiologist, Research and Evaluation Specialist of PHC, PhD, MD

**The National Conference "Results of research and strategy for the dissemination of best practices"
February 6-7, 2018 Kyiv**

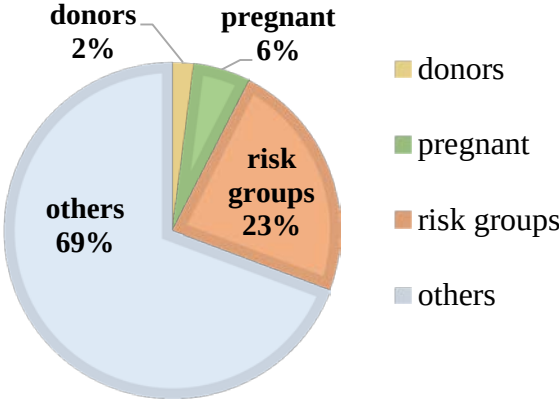
The number of HIV tests in Ukraine (1987 – 2017)



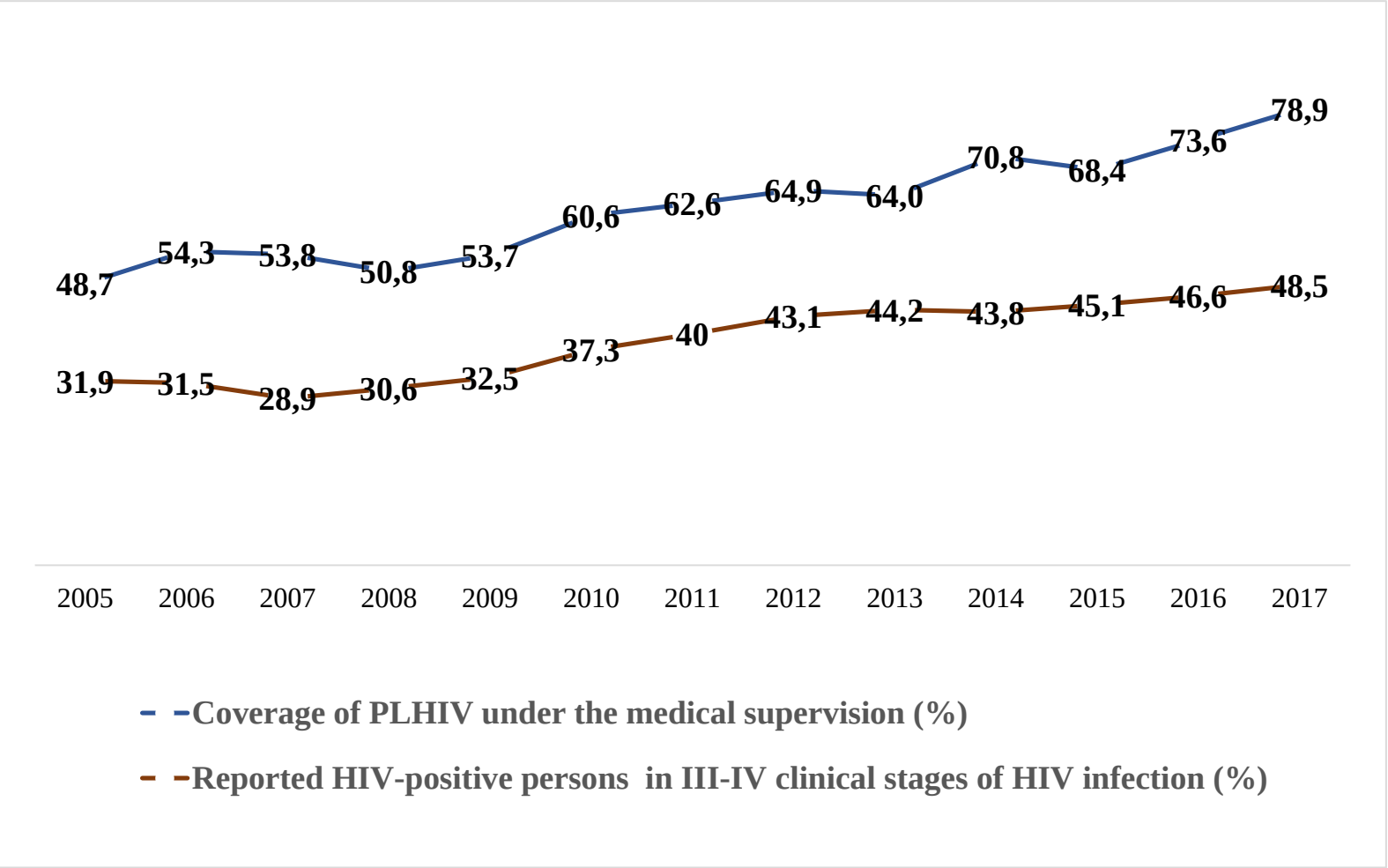
The number of identified and reported HIV-positive persons in Ukraine (1987 – 2017)



IDENTIFIED HIV-POSITIVE PERSONS
STRUCTURE (2017)



Coverage of PLHIV under the medical supervision



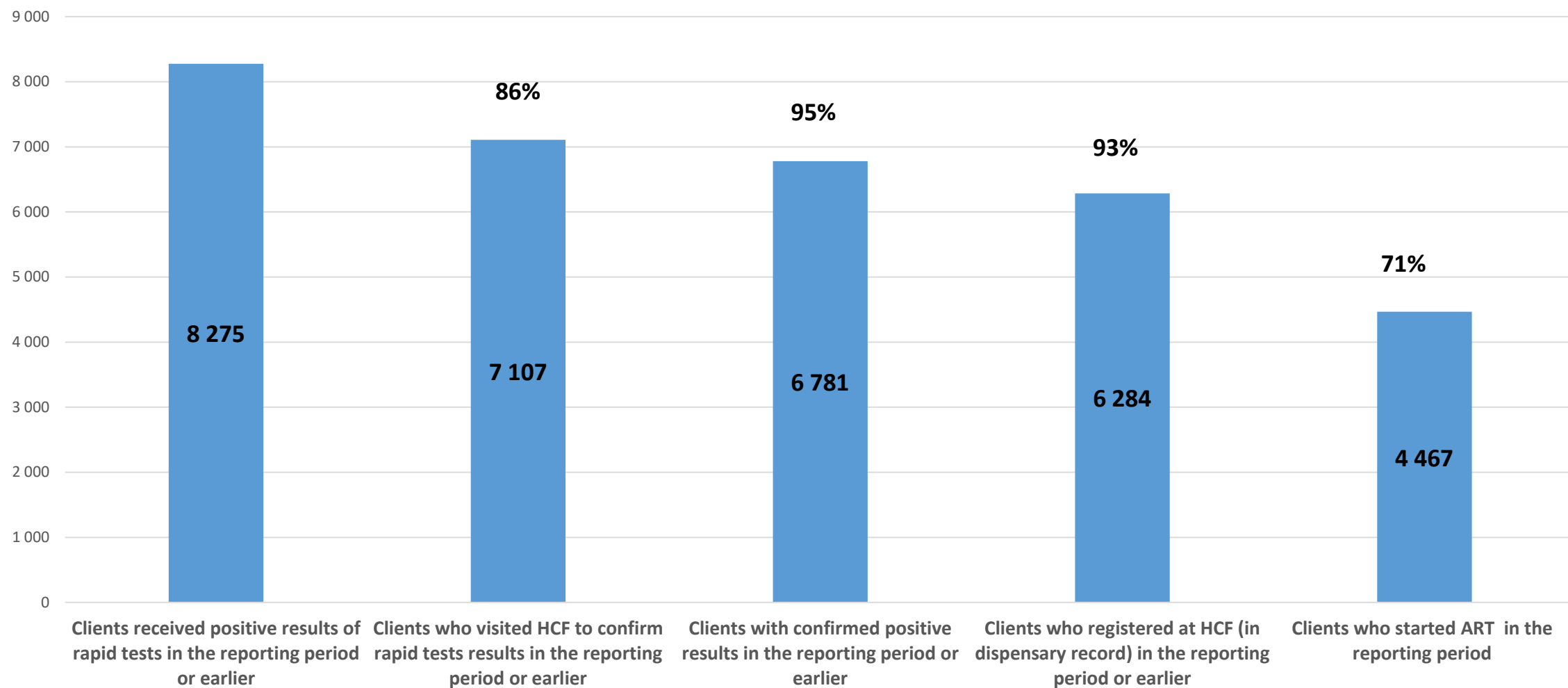
Distribution of people who have been tested for HIV and know their results by "entry points", Ukraine (2016), %

(official data on the reporting form No. 3)

AIDS Centers	21,4
Cabinets/Offices of Trust	19,7
Infectious clinics	13,9
Antenatal clinics	12,8
TB clinics	11,4
Facilities of primary health care	10,6
STI clinics	2,1
Drug Rehab clinics	1,5
Donor service	1,4
NGO	1,3
Other facilities	3,9
	100,0%

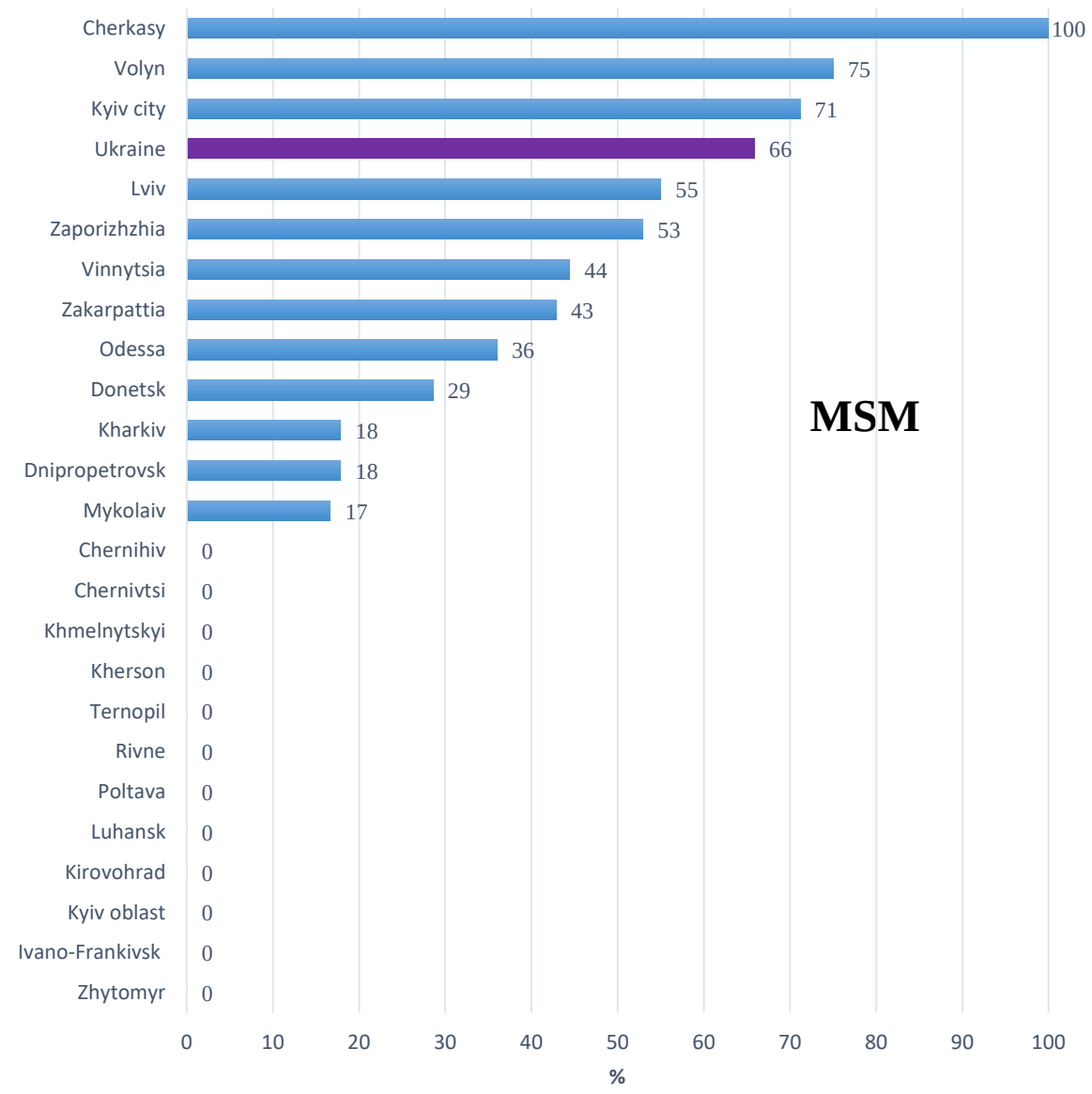
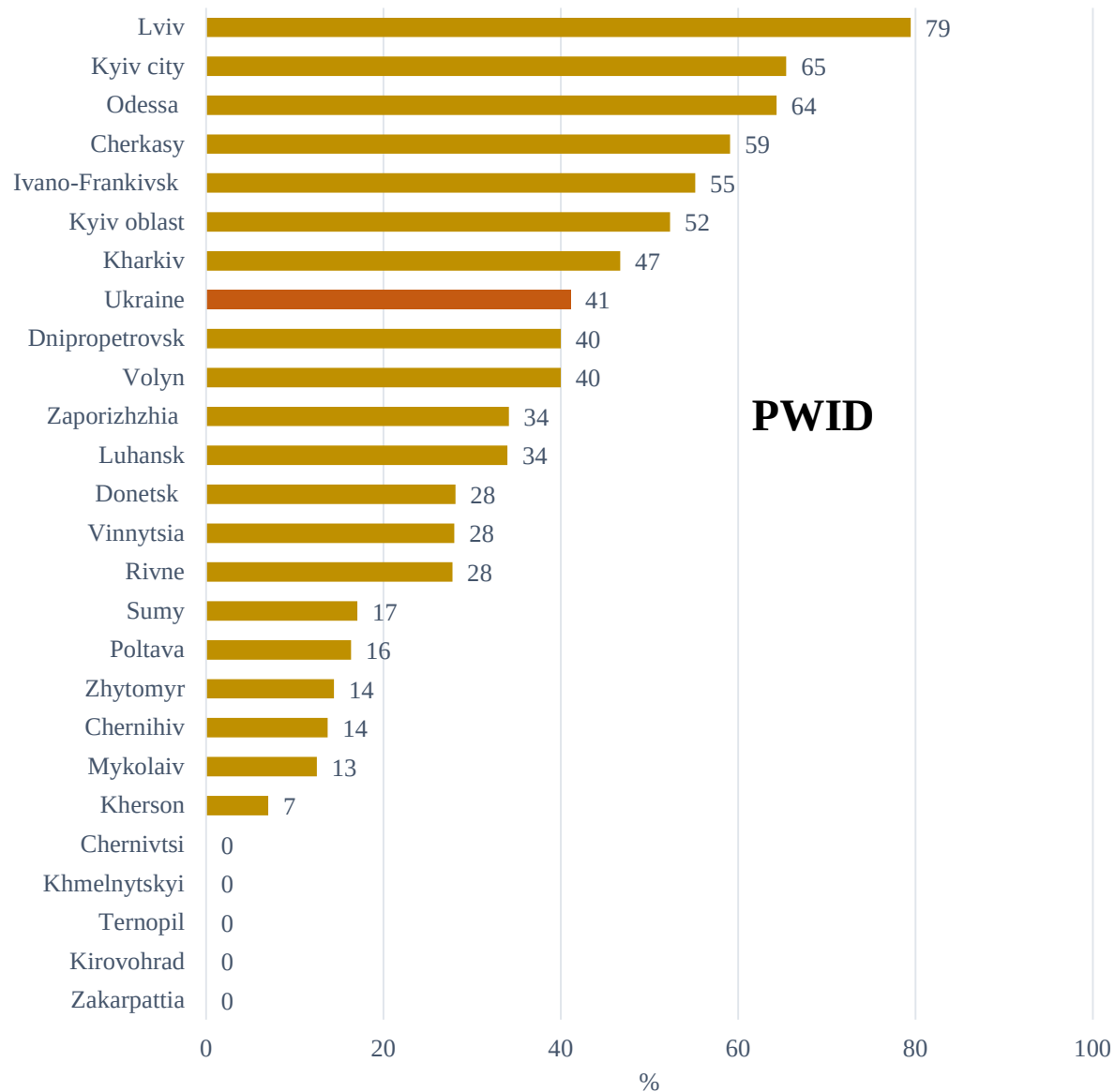
Linkage with medical supervision in NGOs

HIV treatment cascade of Alliance projects clients in 2017 (preliminary data)



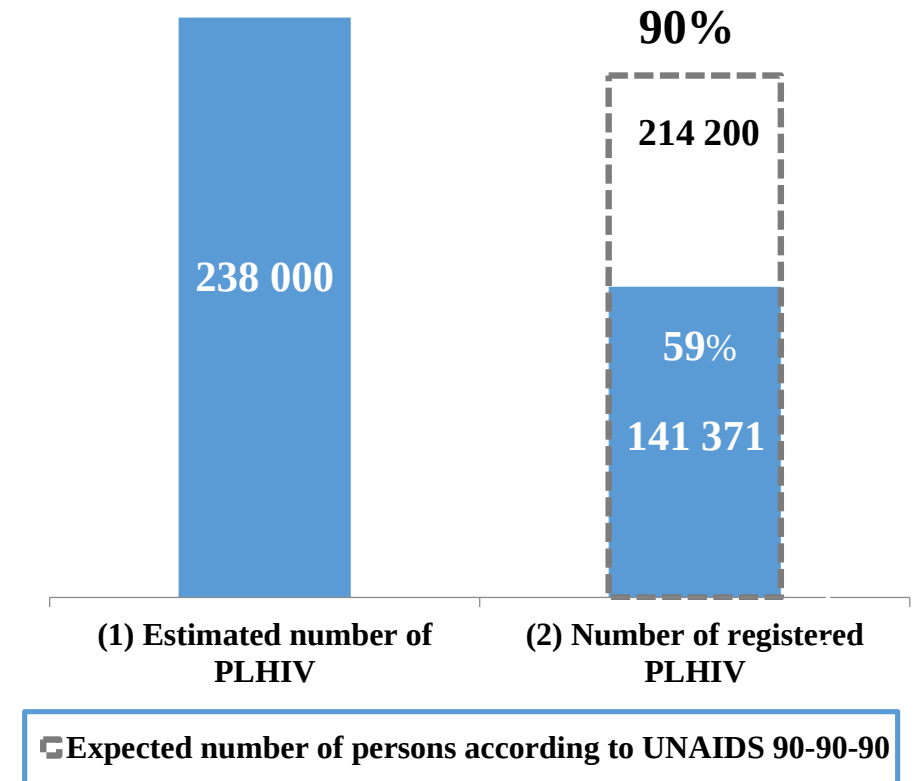
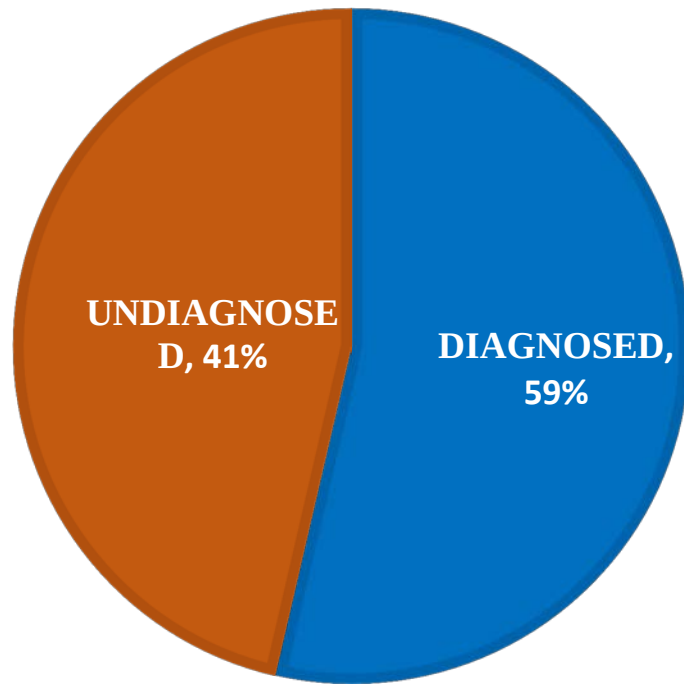
Taking MARPs referred from NGO to HCF of AIDS Service under medical supervision (2017)

(from new registered HIV cases among PWID and MSMs)



Estimated number of undiagnosed PLHIV in Ukraine as of 01.01.2018

(preliminary data)

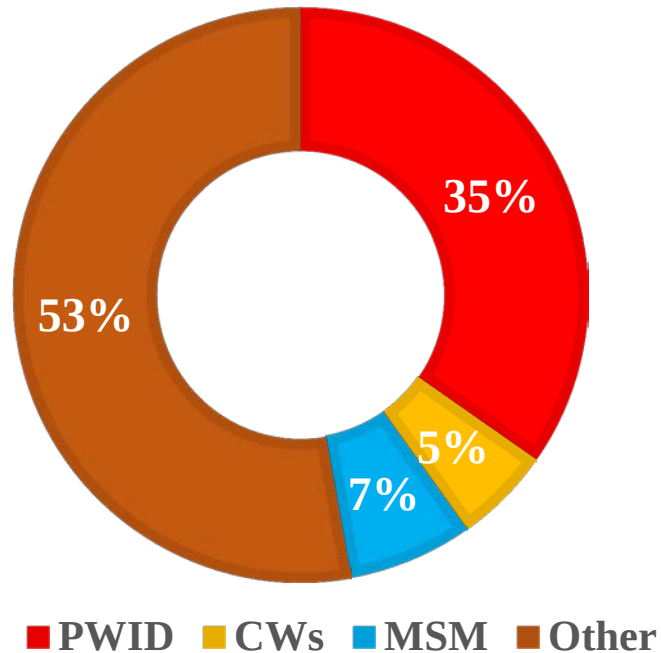


The estimated number of PLHIV who do not know their HIV-positive status and/or are not registered in the HCF – **96 629 people (41%)**

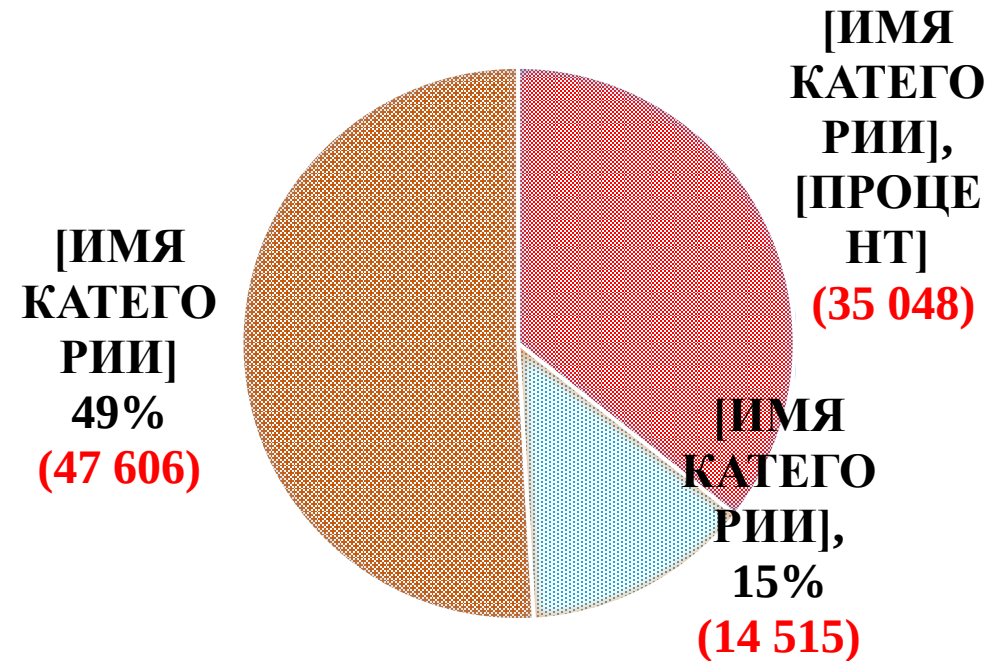
To achieve the first 90% it is necessary to register – **72 829 people**

Structure of the estimated number of PLHIV and undiagnosed HIV-positive persons by key population groups in Ukraine, as of 01.01.2018

Estimated number of PLHIV– 238 000

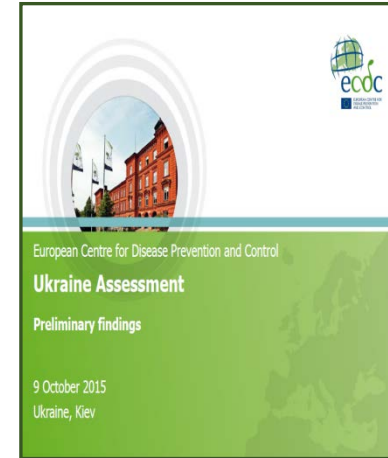


Estimated number of undiagnosed PLHIV and/or are not registered in the HFC – **96 629**



Ways of effective identification of HIV-positive people and their engagement in medical services

- Simplifying the HIV **testing algorithm**
- Extending access to HTS, using **rapid tests in HCF** ("active choice" approach)
- Extending HTS **outside the HCF** - self-testing at community / NGO, as parts of the sentinel surveillance.
- **Engaging partners** of HIV-positive person **in HTS**
- Providing **active support**, using communication technologies. Integration of services for PLHIV
- Compliance with the requirements to provide HTS for **key population groups**, considering certain age groups, risky behavior, decriminalization, etc.
- Engaging trained **providers without medical education** in HTS
- Using **best practices** (OCF CITI, MARTAS, AHF, Internet Outreach and Social Work, "Steps to Health," etc.)



Assessment of the capacity development, health governance, surveillance, preparedness and response in the field of communicable diseases, October 5-9, 2015

Areas of improvement of ES for HIV-infection :

- Development of a target HIV testing strategy;
- Improvement and Optimization of Laboratory Diagnostics;
- Implementation of the electronic register of HIV-positive persons (case-based surveillance).

Changes in the regulatory framework

Legislation includes changes in:

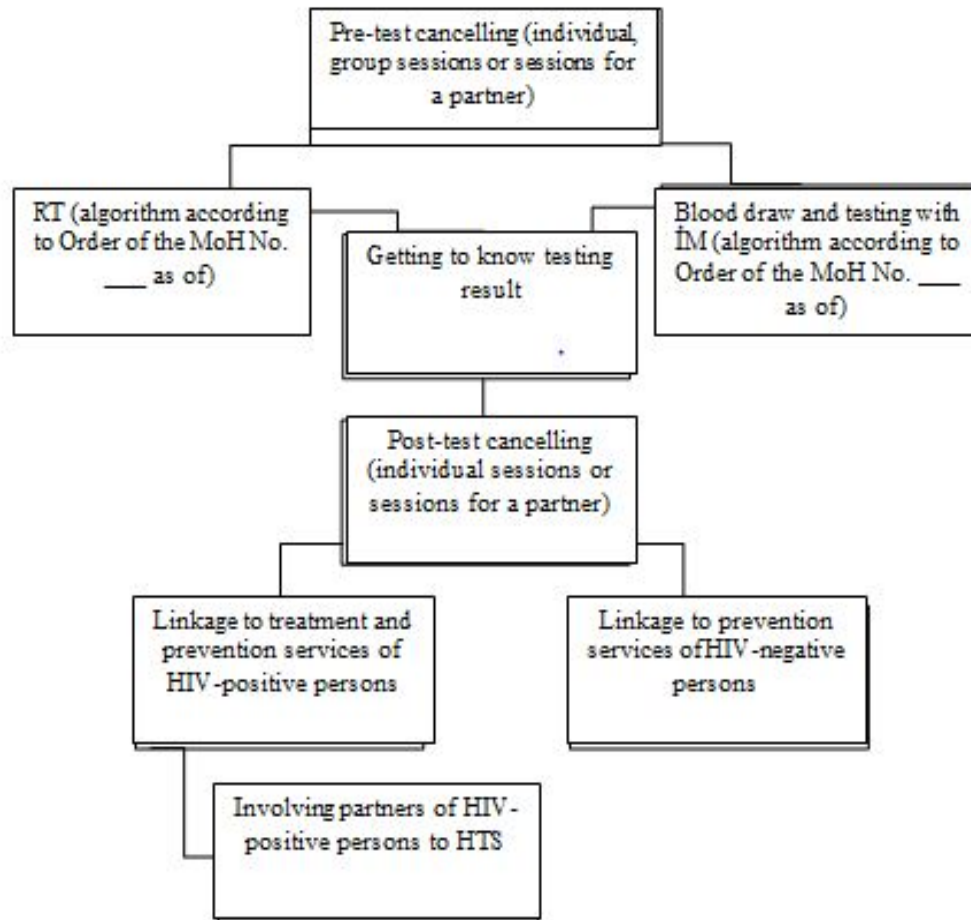


- The Law of Ukraine “About counteraction to spread of the diseases caused by the human immunodeficiency virus (HIV) to both legal and social protection of the people living with HIV”.
- Fundamentals of Ukrainian legislation on health care
- The Law of Ukraine «On protecting the population from infectious diseases

Important changes to the Draft Law :

- **legalizing the provision** of RT to **people without medical education and organizations** that currently can not have a medical practice license (public associations, social services institutions);
- definition of effective procedures for **admission to the market of test systems**, control of their quality and postmarketing control of test systems;
- determination of **HIV testing algorithm**, according to WHO recommendations and evaluation of its effectiveness;
- definition of procedures of the **confidentiality** of doctors regarding the HIV-positive status of the patient.

Draft Protocol on HIV testing services



Structure:

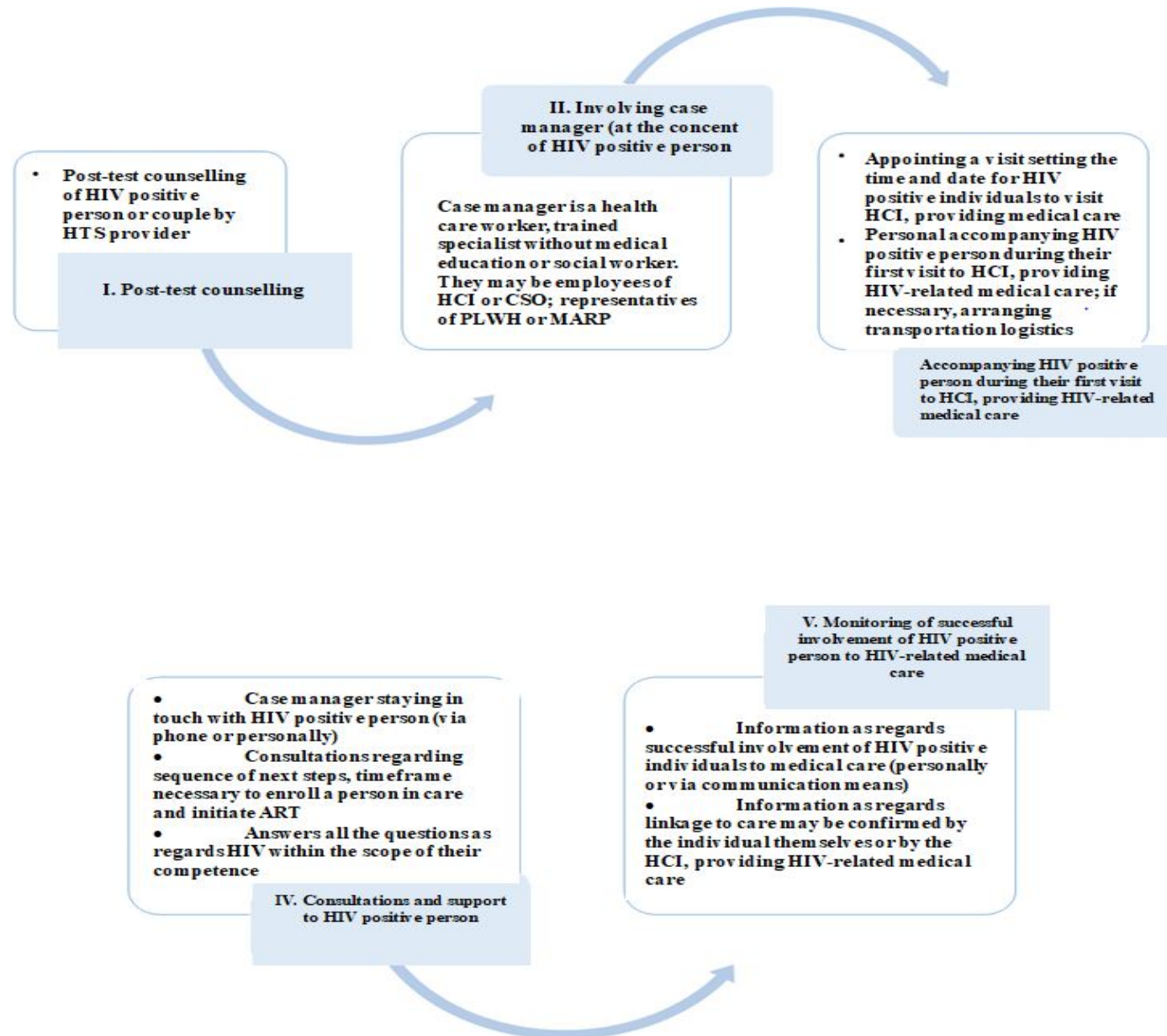
1. General provisions
2. Pre-test counseling
3. HIV testing
4. Post-test counseling
5. Referral for prevention and/or treatment services
6. Involvement of partners of HIV positive people to HTS

Attachments:

- Conditions, symptoms and diseases that give grounds for HIV testing services and their recommended frequency
- Population groups and categories that should be encouraged for HIV testing and recommended frequency of the testing
- Stages of HIV-positive Diagnosis and Status Confirmation
- Special HIV testing services considerations for different population groups



Algorithm of involving HIV positive individuals to medical care and other HIV-related services



Thank you for attention!