

February 2024

SITREP:

Two years on: UNAIDS supports Ukraine's commitment to the HIV response

KEY FIGURES

Two years of war in Ukraine have resulted in significant humanitarian consequences:

- **14.6 million people**, or 40 percent of the current population of Ukraine, are in need of humanitarian assistance.¹
- **6.4 million refugees** have fled the country.²
- **3.6 million people are internally displaced.**³
- **1570 attacks** on health facilities, **630 health facilities** damaged, where 454 768 people are treated monthly on average.⁴
- Russian strikes have continued to wreak havoc on Ukrainian cities, causing death and destruction, impacting access to water, electricity, heating, and health services for millions of civilians.
- **9.6 million** people in Ukraine are estimated to be at risk of, or living with a mental health condition, and 3.9 million people are estimated to suffer from moderate to severe symptoms⁵
- **Risks of gender-based violence (GBV)**, including conflict-related sexual violence (CRSV), human trafficking, and intimate partner violence, have been heightened. As of 1 February 2024, the UN Human Rights Monitoring Mission (HRMMU) documented 220 cases of CRSV, and the Office of the Prosecutor General of Ukraine recorded 270 cases of CRSV.⁶

¹ Source: HNRP 2024. The number of people in need has decreased between 2023 and 2024, as many Ukrainian families are now in need of post-emergency assistance, to provide sustainable solutions fostering their resilience and socioeconomic recovery. In addition, the humanitarian response in 2024 will focus on communities living in territories directly impacted by the war, those in close proximity of active conflict zones. Finally, the 2024 figures do not include people in need in non-government-controlled areas (Luhansk, Donetsk oblasts), contrary to 2023 figures.

² UNHCR UKRAINE SITUATION. FLASH UPDATE #63

<https://data.unhcr.org/en/documents/details/106476>

³ UNHCR UKRAINE SITUATION. FLASH UPDATE #63

<https://data.unhcr.org/en/documents/details/106476>

⁴ [SSA Home | Index \(who.int\)](#)

⁵ https://cdn.who.int/media/docs/default-source/documents/emergencies/2024-appeals/2024-who-ukraine-emergency-appeal_en.pdf

⁶ UA RDNA3 report EN.pdf (un.org) https://ukraine.un.org/sites/default/files/2024-02/UA%20RDNA3%20report%20EN.pdf?fbclid=IwAR1QDk5z5Md5x_70KX3VdR374sDyIny7m0mHY9XL7zMDpBymzZT9Xk4Q-jg

- While complaints of domestic violence recorded by the National Police initially decreased in 2022, they rose again in 2023 to 243,980 cases by November.⁷
- The majority of Ukraine's adult population (72%), believes that LGBTQ+ individuals "should have the same rights as others." This unprecedented solidarity was revealed following a nationwide survey titled "Opportunities and Obstacles to Ukraine's Democratic Transition," conducted by the Kyiv International Institute of Sociology in November 2023.⁸

KEY MESSAGES AT A GLANCE

- Despite the challenges, Ukraine remains committed to the HIV response through a strong coalition of government, civil society, international organizations, and donors, first and foremost The United States President's Emergency Plan for AIDS Relief (PEPFAR) and The Global Fund to Fight AIDS, Tuberculosis, and Malaria. This collaboration has secured vital supplies of antiretroviral therapy (ARV), tuberculosis medicines, and opioid agonist therapy (OAT), ensuring uninterrupted HIV treatment and services.
- UNAIDS Secretariat, Co-sponsors and UN agencies joined forces to provide a unified response, ensuring that vulnerable populations, including those on the frontline and in the most severely affected areas, receive comprehensive support. This collaborative effort aims to bridge gaps and address the unique challenges faced by women, people living with HIV and key populations, including the delivery of crucial humanitarian aid and HIV services.
- A UNAIDS Emergency Fund has enabled partners across the country to sustain HIV care and support services, as well as providing direct humanitarian assistance and targeted support to the most vulnerable, including shelters for internally displaced persons, including people who use drugs, LGBTIQ+ people, and other key populations linking HIV service providers with available humanitarian assistance programmes.
- Timely delivery of humanitarian relief items and HIV services, particularly in hard-to-reach areas, remains a challenge due to an ongoing lack of security and logistical constraints.
- The situation in the occupied territories (Eastern and Southern oblasts) remains dire for all people, including those in need of HIV services. There is a lack of information about access to HIV treatment and care services.
- More than 2,9 million refugees applied for different national protection schemes in 10 European countries, featured in the Refugee Response Plan, with the

⁷ UA RDNA3 report EN.pdf (un.org) https://ukraine.un.org/sites/default/files/2024-02/UA%20RDNA3%20report%20EN.pdf?fbclid=IwAR1QDk5z5Md5x_70KX3VdR374sDyIny7m0mHY9XL7zMDpBymzZT9Xk4Q-jg

⁸ <https://www.ndi.org/publications/opportunities-and-challenges-facing-ukraine-s-democratic-transition-1?fbclid=IwAR0MY1NmlxAYcNp3G7Q9pxc1x0ECGnLQzyp9YYBfIM2YSXK5x4ygvjcgCo4>

biggest number in Poland (1.6m). Another 2,5m refugees applied for support in other European countries with the biggest number in Germany (1m). Host countries' governments committed to the inclusion of refugees, including people living with HIV, in the national protection schemes in line with international standards for protection of their rights and access to services.

Epidemiological update and the HIV response

According to the latest data from [The Ukrainian Public Health Center](#), prior to the war, Ukraine had made significant progress in reducing HIV incidence (-47%) and AIDS-related mortality (-81%) since 2010. Despite the initial disruption to the national AIDS response at the onset of the war, the national AIDS programme has gradually resumed routine operations.

As of the end of 2023, the number of patients on antiretroviral therapy (ART) was only slightly below the pre-war figure, standing at 118,348 (130,724 as of February 2022). Additionally, approximately seven thousand patients are known to receive ART abroad. In the last two years, the number of patients on opioid agonist therapy (OAT) increased by 38%, reaching 27,511 people. Pre-exposure prophylaxis (PreP) more than doubled, reaching 12,354 people.

In the first nine months of 2023, there was a notable 40.8% increase in HIV testing services, totalling 1,561,754.

Due to the temporary loss of administrative control over parts of Ukraine, comprehensive epidemiological information is incomplete and/or inaccessible in occupied parts of Donetsk, Luhansk, Zaporizhzhia, Kherson regions, AR Crimea, and the city of Sevastopol. The same occurred in 2023. Despite these challenges, the surveillance system in the government-controlled areas remains operational, ensuring the completeness and quality of data on HIV prevention, testing and treatment services.

[Public Health Center](#)

Challenges:

Due to the significant migration of the population within and outside Ukraine, there is a notable impact on the clients' pathways within the HIV prevention and treatment programmes. This has introduced challenges in the planning and implementation of support, as well as the follow-up of clients participating in HIV prevention, treatment, and care programmes.

The country's capacity to provide health care and access to health services has been impacted due to lack of staff and budget deficit. Some facilities were forced to temporarily suspend their operations due to hospital destruction or temporary occupation of territories.

And of course, timely delivery of humanitarian support, particularly to hard-to-reach areas, remains a challenge due to the ongoing lack of security and logistics constraints.

A number of shelters operating in Ukraine could provide services to people living with HIV and other key populations. However, representatives of these groups have limited access to traditional support networks among displaced and host communities, experiencing challenges in shelter access and facing stigma and discrimination.

As a result, the affected population is at elevated risk for adverse mental health outcomes. Health care workers face challenges of working beyond their capacity due to understaffing and are themselves at increased risk of psychological distress and burnout.

National protection systems and mechanisms for women survivors of violence, and sexual and gender-based violence services are in high demand.

The invasion exacerbated existing inequality and discrimination of LGBTIQ+ people and caused an increase in homo- and transphobic violence. Local civil society organizations believe that GBV has increased but is significantly underreported due to stigma, a culture of silence, and a lack of services and police capacity made worse by the war. The risk of trafficking is also rising.

Actions required:

- 1) Implement a tracking system of clients receiving health services, including antiretroviral treatment and opioid agonist therapy including via community-led monitoring (CLM).
- 2) 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 enjoy equal rights.
- 3) Advocate for equitable and non-discriminatory provision of services to key populations by humanitarian actors, civil society organisations, government agencies.
- 4) Increase options to integrate HIV-related services (information, testing, prevention packages) into a broader set of humanitarian services, led by humanitarian organizations.
- 5) Scale up gender-based violence prevention programmes and programmes of psychosocial support for people traumatized, notably persons who witnessed or experienced numerous human rights violations and/or hostilities. Gender equality and nondiscrimination approaches need to be an integral part of recovery and reconstruction planning, with civil society organizations and advocacy groups that represent women and LGBTIQ+ individuals participating fully and equally in state and local planning processes.⁹

⁶ [UA RDNA3 report EN.pdf \(un.org\)](#)

UNAIDS and Co-sponsors updates

In 2023:

UNAIDS Secretariat enhanced the capacity of 13 community-based HIV providers, enabling them to support more than 21,500 people living with HIV and key populations with essential support, including food, hygiene, clothing, and counselling. In addition, they provided access to 5 safe spaces, accommodation in 8 shelters (totaling 110 beds) in 9 cities with high HIV epidemics near along the frontline. The Secretariat also assisted 15 healthcare facilities in key regions - Kyiv, Odesa, Mykolaiv, Kherson, Kriviy Rig, and Zaporizhzhia oblasts.

The UNAIDS Secretariat and Cosponsors provided technical support to the National Coordination Council on TB, HIV, and Hepatitis to develop a high-quality, evidence-based funding request to the Global Fund, which mobilized US\$165 million to support the national HIV/TB response in 2024-2026 under the condition of the war time and the state budget deficit. The funding request addressed the war-induced gap in the state funding for the prevention services for the key populations which were transitioned to domestic funding from 2018. Even in time of war, the Ukrainian government remained committed to applying state procurement system for these services with GF funding.

WHO Ukraine supported and guided the country's ambitious oral PrEP expansion despite the ongoing war. The WHO HIV team organized eight training events on integrating HIV services for 329 primary healthcare centers managers in Chernihiv, Odesa, Lviv, Kharkiv, Ternopil, Ivano-Frankivsk, Kirovograd, and Cherkasy.

UNICEF sustained support to MOH/UPHC via the Global Fund Emergency Grant, providing prevention supplies (syringes, needles, condoms) for the national HIV response amid the ongoing armed conflict. This encompassed procuring and delivering 19 mobile clinics for treatment in remote areas. Additionally, in response to UPHC's request, UNICEF supplied 203 generators to facilities offering HIV/TB services, ensuring service continuity during power shortages.

WFP, in partnership with the All-Ukraine Network of People Living with HIV (100%LIFE), assisted 335,962 people, including 183,728 from key populations, through general food distribution and institutional feeding programmes.

UN Women empowered women living with HIV by actively involving them in decision-making and policy advocacy, supporting 80 women in Ukrainian Women's Forums on HIV and AIDS and engaging 50 in decision-making on humanitarian responses. This effort resulted in recommendations to expand women's access to social and medical services. With UN Women's support, two new branches of "Positive Women" were established in Chernivtsi and Khmelnytskyi. Additionally, 600 WLHIV and 200 children received tailored humanitarian support through "safe spaces" in seven cities, providing assistance, legal support, income opportunities, and psychological aid. Over 11,000 war-affected women accessed information, and a survey involving 270 WLHIV informed future research and advocacy campaigns.

UNFPA expanded its reach, establishing 86 new Service Delivery Points (SDPs) across 23 oblasts in Ukraine, providing medical assistance to over 55,000 women. The most demanded services included STI support for 8,421 women, HIV assistance for 4,116 women, unplanned pregnancy care for 2,883 women, and emergency contraception for 671 women. SDPs also aided 4,955 internally displaced persons (IDPs) and 3,173 persons with disabilities (PwDs). Additionally, Inter-Agency Emergency Reproductive Health Kits for Humanitarian Settings were distributed to 70 maternity hospitals, supporting various sexual and reproductive health services for 236,000 women. 1,899 GBV survivors received integrated psychosocial support and HIV screening. Training

sessions on HIV counseling and testing were conducted in Odessa and Dnipro, enhancing services for GBV survivors. Communication materials targeted key populations and women, disseminating information on available services. Regional round tables and a national-level event facilitated collaboration among stakeholders to discuss integrated service models and nationwide HIV testing for GBV survivors.

ILO collaborated with UNHCR to empower lawyers from the Free Legal Aid Centre (FLAC) in providing counselling on HIV, TB, mental health, and psycho-social support for vulnerable populations, including those living with HIV. 75 lawyers were trained, enhancing their ability to offer improved services in this context. Subsequently, an online training course covering HIV, TB, and psycho-social support at work was developed and uploaded to the VikiLegalAid legal information platform, supported by FLAC. Approximately 500 professionals, including labor inspectors, have completed the course and received certificates. Additionally, ILO focused on expanding voluntary and confidential HIV counseling and testing in Kyiv and Odesa regions, collaborating with trade unions as key partners. This effort reached 15 companies across various sectors, providing over 4,000 workers access to testing, with 942 taking the HIV test at the workplace and 500 using self-testing kits. The collaboration between trade unions, AIDS Centers, and NGOs of people living with HIV has been effectively established.

UNAIDS' RESPONSE STRUCTURE AND RESOURCES

Throughout the two-year war, the UNAIDS Secretariat mobilized funds to address emergency and humanitarian needs among key populations and people living with HIV, with a total allocation of €4,376,000. The breakdown of these funds includes US\$ 200,000 in emergency funding provided by the UNAIDS, US\$27,000 from the Monaco Red Cross, US\$170,000 from CDC reprogramming, €1,050,000 from German funding (allocated for Ukraine, Moldova, and Poland), and €2,500,000 from Dutch funding. These resources were strategically allocated to critical areas of assistance, comprising of:

- Supporting community-based organizations in sustaining HIV prevention and care services, involving first-aid training, provision of first-aid kits, masks, and the reconstruction of community centers damaged by shelling.
- Providing essential resources such as power generators (and fuel), heaters, power banks, notebooks, and other procurement to reach people in remote city districts or those residing outside the city. This also includes the delivery of medicines, food supplies, and transportation of blood samples to central laboratories.
- Offering direct humanitarian assistance to people living with HIV and key populations, including hygiene kits, food certificates, financial aid, STI testing kits for internally displaced women, first aid kits, transportation assistance to healthcare facilities, and medicine delivery. Assistance is also extended to restore identification cards, along with providing blankets, warm clothing, and hot beverages at service points. Special emphasis is placed on supplying medicines for people who inject drugs to address problematic wounds.
- Providing targeted support for mothers living with HIV and their children.
- Establishing shelters for internally displaced people from key populations.
- Ensuring the uninterrupted operation of healthcare facilities to facilitate the provision of services to PLHIV.

[1] Source: HNRP 2024. The number of people in need has decreased between 2023 and 2024, as many Ukrainian families are now in need of post-emergency assistance, to provide sustainable solutions fostering their resilience and socioeconomic recovery. In addition, the humanitarian response in 2024 will focus on communities living in territories directly impacted by the war, those in close proximity of active conflict zones. Finally, the 2024 figures do not include people in need in non-governmentcontrolled areas (Luhansk, Donetsk oblasts), contrary to 2023 figures.

[2] UNHCR UKRAINE SITUATION. FLASH UPDATE #63

<https://data.unhcr.org/en/documents/details/106476>

[3] Surveillance System for Attacks on Health Care (SSA), WHO

[4] WHO press release: Amid a year of relentless war, WHO Regional Director for Europe strengthens commitment for mental health services during visit to Ukraine, February 2023

[5] Well-being and safety of women. OSCE-led survey on violence against women: Ukraine. OSCE, 2019.

https://www.osce.org/files/f/documents/1/3/440312_0.pdf

6,7,8,9 [UA RDNA3 report EN.pdf \(un.org\)](#)

COSPONSORS` UPDATES and SITREPs

WHO <https://www.who.int/europe/news/item/19-12-2023-on-the-frontline-of-the-fight-against-hiv--ukraine-s-resilience-and-who-s-support>

UNICEF <https://www.unicef.org/documents/ukraine-humanitarian-situation-report-december-2023>

IOM <https://www.iom.int/ukraine-iom-response-2022-2024>

UNFPA <https://www.unfpa.org/ukraine-0>

UNHCR <https://data.unhcr.org/en/documents/details/106476>

OCHA <https://www.unocha.org/publications/report/ukraine/ukraine-winter-attacks-humanitarian-impact-intensified-strikes-and-hostilities-flash-update-5-11-jan-2024-enuk>

WFP <https://www.wfp.org/publications/situation-report-ukraine>