Organizing access to care and treatment for marginalized groups in Ukraine

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Role of Harm Reduction programs in access to comprehensive care for IDUs living with HIV

- Outreach strategies are key component of access to treatment for IDUs;

- Experience of prevention programs should be used effectively in treatment education, developing motivation and adherence and breaking myths and fears about treatment;

- Harm Reduction is a vanguard of comprehensive treatment for IDUs, starting from prevention kit to specific intervention like HAART;

- Integration of Harm Reduction services and Care and Treatment programs for IDUs is a practical example of consolidating Treatment and Prevention;
Ukraine 2006. Launching pilot projects on integrating HR into care

- Piloting substitution treatment projects;
- Scale of ARV treatment in all regions of Ukraine;
- Implementation of the adherence projects; Расширение проектов заместительной терапии
- Main objective: to ensure involvement of HR projects into care and treatment programs providing ST and ARV for IDUs;
- Successful sites: Odessa, Mykolaiv, Dnepropetrovsk;
• Experience of pilot projects became basis for developing application to GFATM for Ukraine - main focus on people with dual and triple diagnosis

• 2007 - Network was nominated as a PR for the GFATM projects 6th round;

• 2007 - launch of the first integrated care sites and expanding ST to general healthcare and TB infrastructure
Network’s priorities for expanding comprehensive care model for IDUs

- To develop effective regulatory basis to enable expanding up integrated care model in Ukraine;
- To create 10 sites of Integrated Care for IDUs with triple and dual diagnosis;
- Scale up ST in TB infrastructure both for inpatient care and ambulatory (DOTS-based programs);
- Launch gender focused projects for women (reproductive health, Harm Reduction, PMTCT, ST treatment for pregnant women etc.)
What is integrated care site

- 2008 three sites launched and established:
  - license for ST medicines;
  - support for innovation (counseling room, TB diagnostic etc);
  - HAART delivery;
  - VCT, adherence work, case management;
  - HR services on-site;

- 4 TB sites got license for ST to start TB control (including DOTS based programs for IDUs);

- Launch of 2 rehabilitation programs for the clients of ICS;

- Network plans to launch 46 new ST sites by the end of 2009;

- The order for ST launch in 146 sites has been signed on 28th of July (Alliance, Clinton, Network)
How to launch Integrated care site - tips

- Find a partner clinical site;
- Ensure support for getting license for narcotic medicines;
- Make intensive training with a team (build good case management team);
- Provide support for renovation to make sure TB/HIV diagnostics is possible (sputum collection, blood sampling);
- Make sure community space is there;
- Get TB and AIDS-centers as partners (documented)

Present ICS to healthcare administration and get their support
Main aims of Network

- To make Integrated care sites as a national model of serving MARPS with multiple problems;
- To ensure effective TB control programs (DOTS/ST);
- To review and reform HR prevention programs to serve best universal access to care, treatment and prevention;
- Make sure effective drug treatment will be easily accessible through all healthcare network;
Devoted to Taya, Treatment activist, died 2008 from TB