

CONTINUITY OF HARM REDUCTION AT WAR:

experience from Ukraine (2022-2024)

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April 28, 2025

Drug use and HIV/HCV in Ukraine

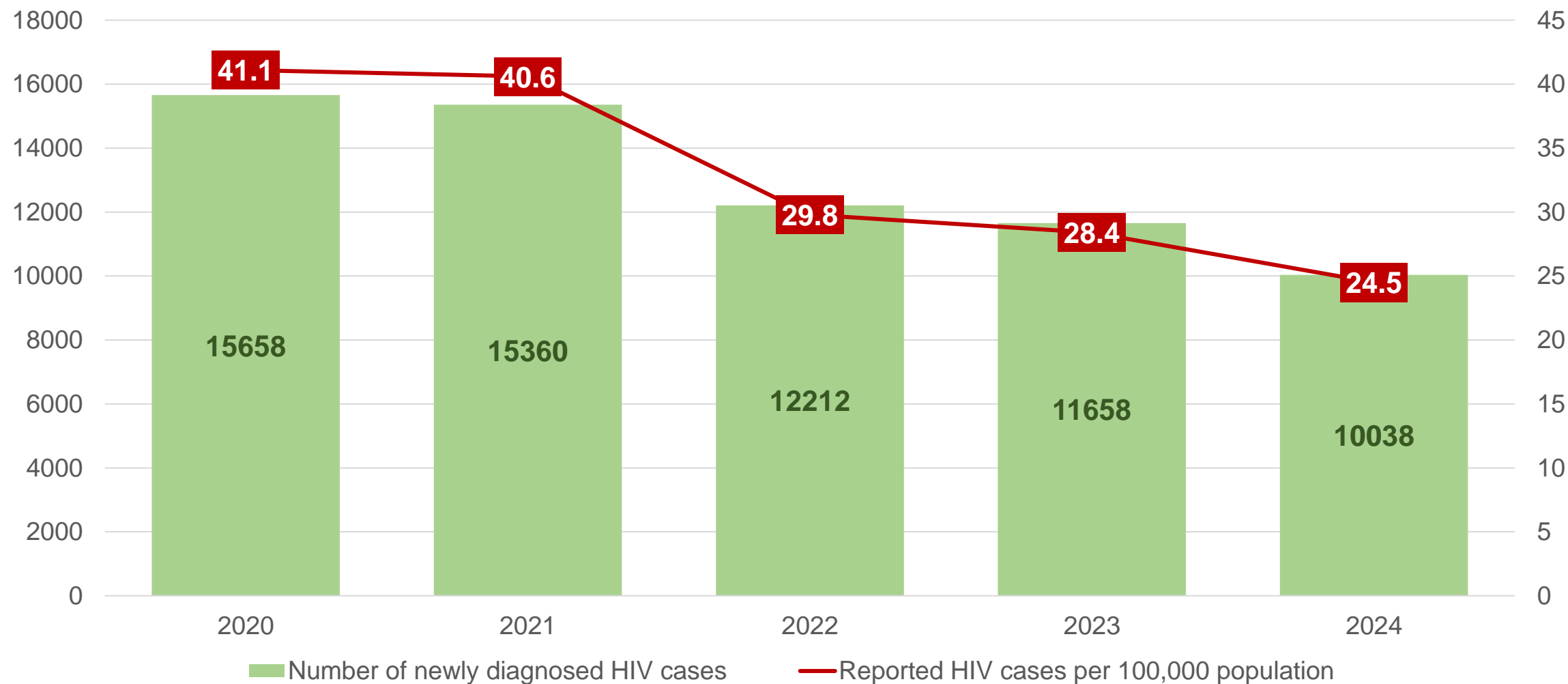
- According to the 2020 Integrated Bio-Behavioral Survey (IBBS), Ukraine has an estimated **317,000 PWID**.
- Among them, 200,661 (**63.3%**) are **opioid users**, 38,674 (**12.2%**) **use stimulants**, and 77,665 (**24.5%**) **use multiple types of substances**.
- **HIV prevalence is at 20%, HCV prevalence - 68%** (2020 IBBS).
- HIV transmission: **20% new HIV infections** registered among PIWD in 2023-24
- Before full scale invasion, **national budget was funding** prevention and treatment; after February 2022 it is mainly sourced by **Global Fund and US**
- As of January 1, 2025:
 - **180,975 (56%)** were reached by **prevention** program annually
 - As of 2023, the number of PLHIV receiving **pre-exposure prophylaxis** stood at 2,470
 - 21,845 (**5.8%** of those in need) patients were enrolled in **OAMT** programs nationwide, primarily through methadone- and buprenorphine-based treatment regimens

Ukraine Health at War

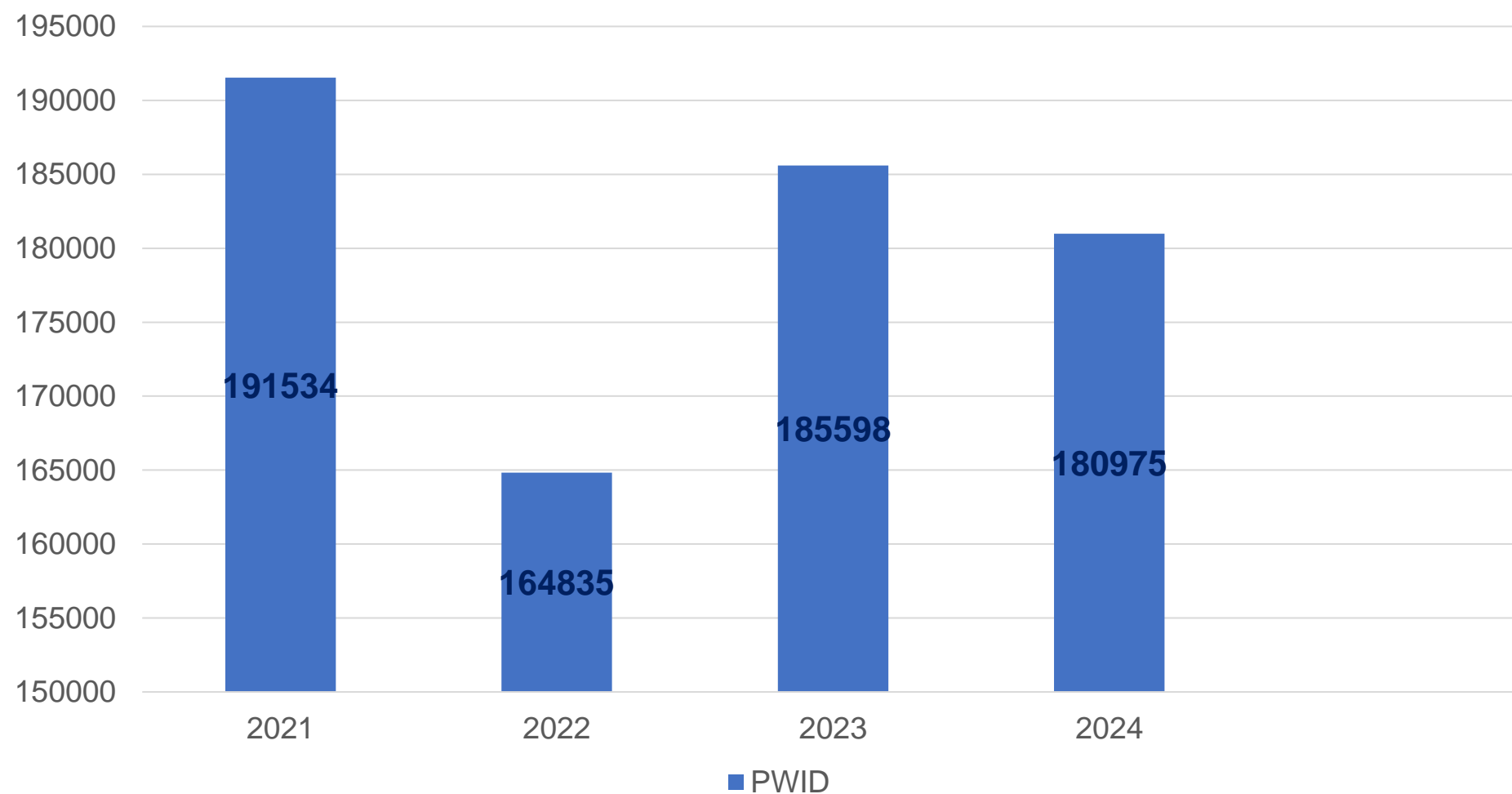
- **18%** of territory is occupied by russia.
- **The population of Ukraine in 2024 is 25 million**, excluding the occupied territories (down from 52 million in 1991).
- **6 million people have been displaced internally** while another **8 million have fled** to neighboring countries. Displaced populations are more vulnerable to infectious diseases such as TB.
- **1 in 10 healthcare facilities** has been damaged or destroyed. Healthcare services are particularly scarce in border areas.
- **77% of Ukrainians experience the stress** caused by the war.



HIV situation in Ukraine under control



PWID prevention coverage during war



Sustaining OAT program during war

As of 31.12.2024:

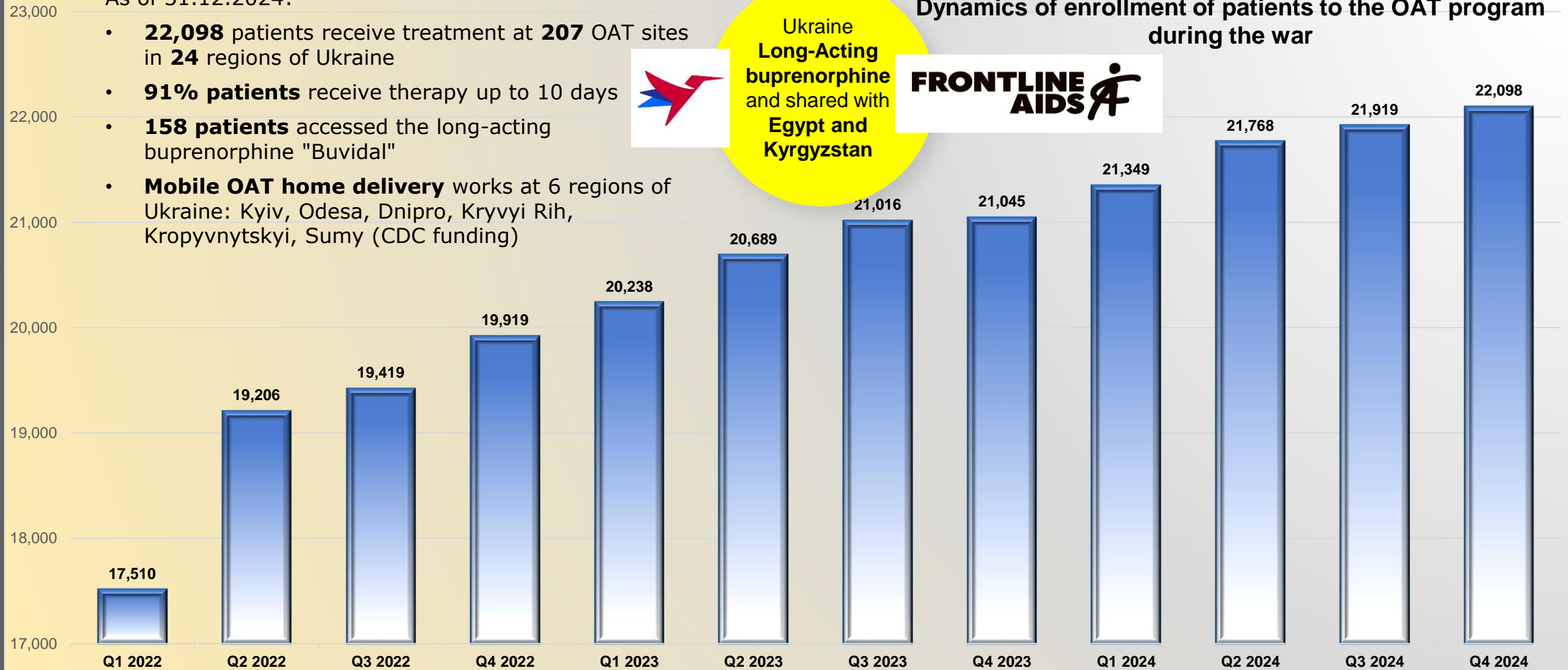
- **22,098** patients receive treatment at **207** OAT sites in **24** regions of Ukraine
- **91% patients** receive therapy up to 10 days
- **158 patients** accessed the long-acting buprenorphine "Buvidal"
- **Mobile OAT home delivery** works at 6 regions of Ukraine: Kyiv, Odesa, Dnipro, Kryvyi Rih, Kropyvnytskyi, Sumy (CDC funding)



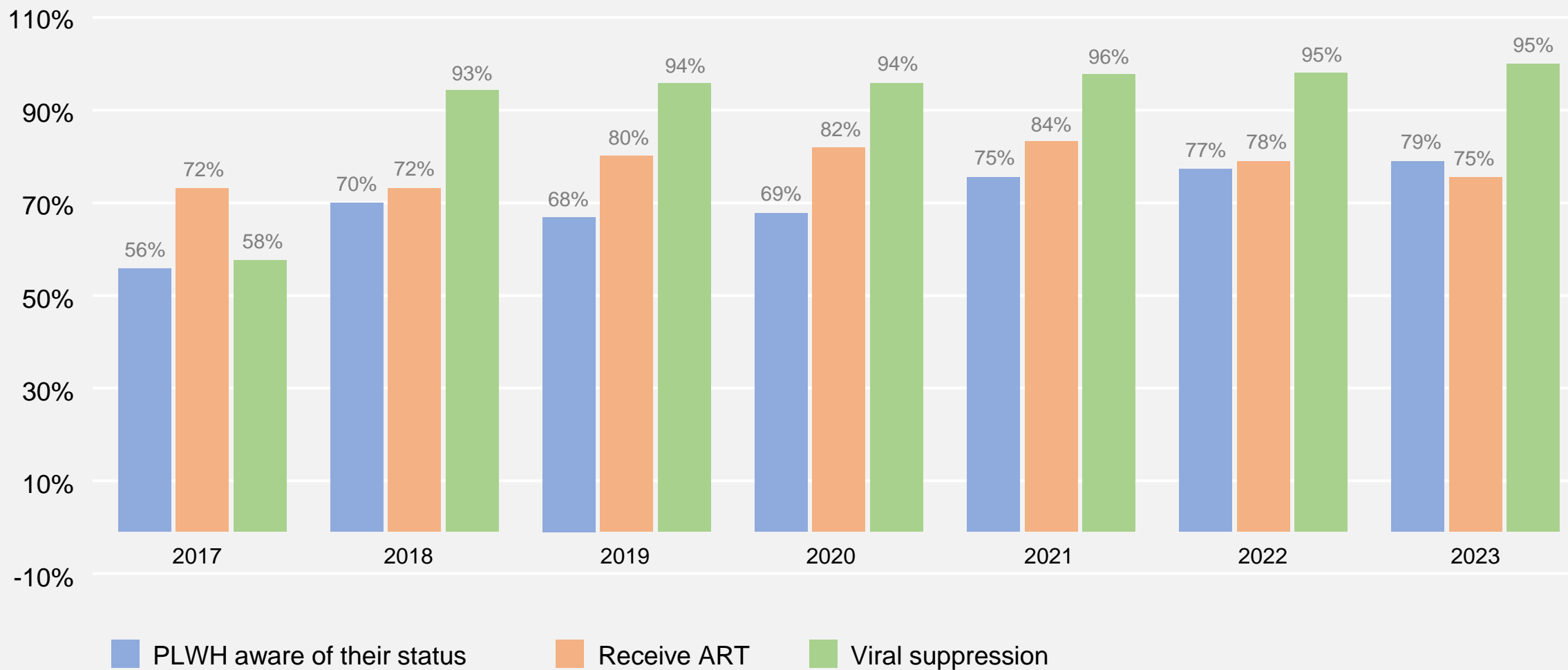
Ukraine
Long-Acting
buprenorphine
and shared with
Egypt and
Kyrgyzstan

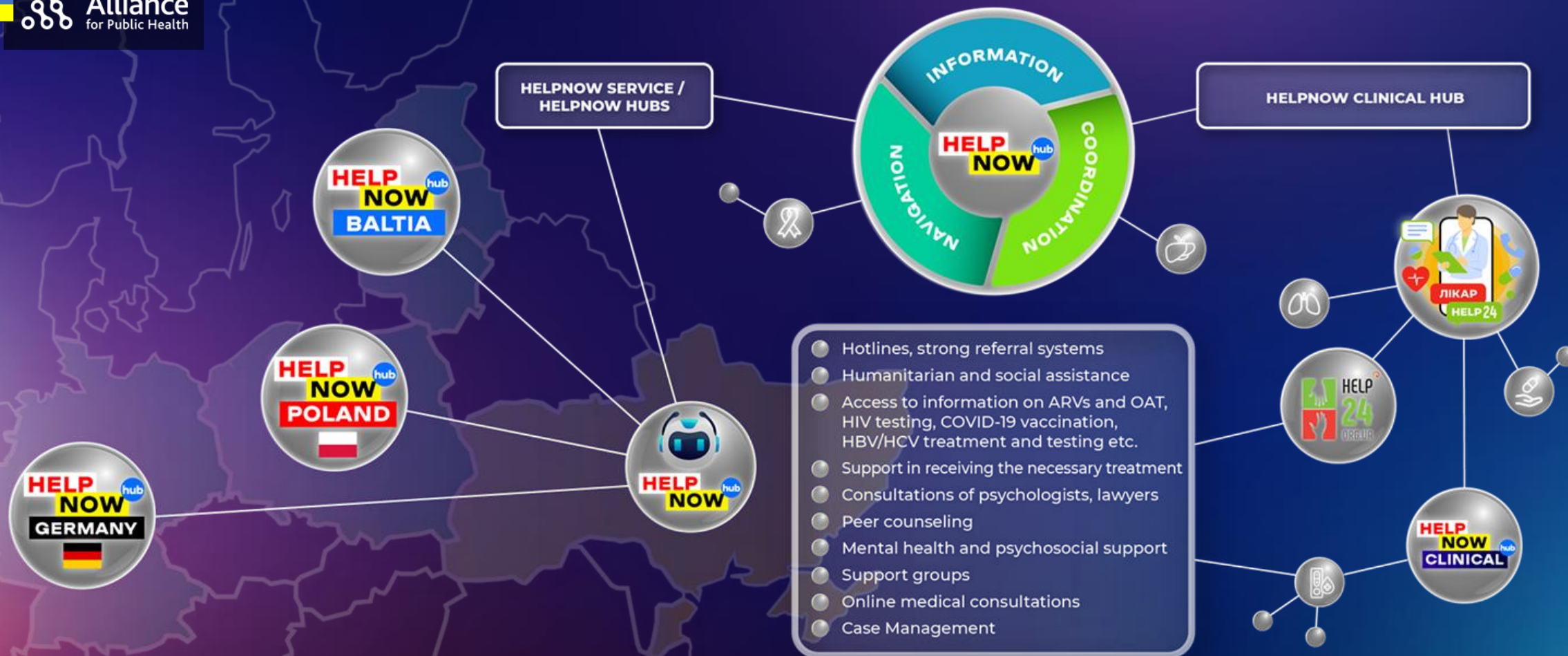
**FRONTLINE
AIDS** 

Dynamics of enrollment of patients to the OAT program during the war



HIV care cascade in Ukraine over 2017-2023





HELP NOW 


APH used partnership networks to provide continuum of services (ART, OAT) for almost 40,000 appeals from displaced/migrating KPs and PLHIV moving to 50 countries during 18 months

Telehealth: online order, delivery, consultations



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Sainchuk Anzhela

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Experience 10 years


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Experience 14 years

More



Suprunenko Tetiana

Specialization Infectious diseases
Experience 28 years

More

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Specialization

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Services on Help24 online platform	2022	2023	2024
Doctors' consultations	1 386	13 267	13 040
Psychologists' consultations	981	1 663	2 036
Paralegal consultations	49	186	192
Social workers' consultations		187	6 275
Mailing of HelpBoxes	2 421	8 153	17 206
ART medications deliveries			1545

Virtual Social Worker / Digital Assistant - TWIIN

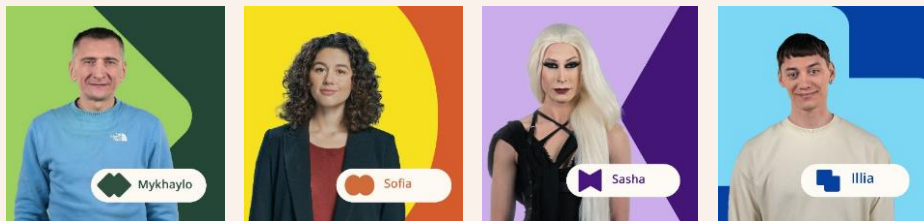
twiin.apph.org.ua gives HIV advice 24/7, anywhere



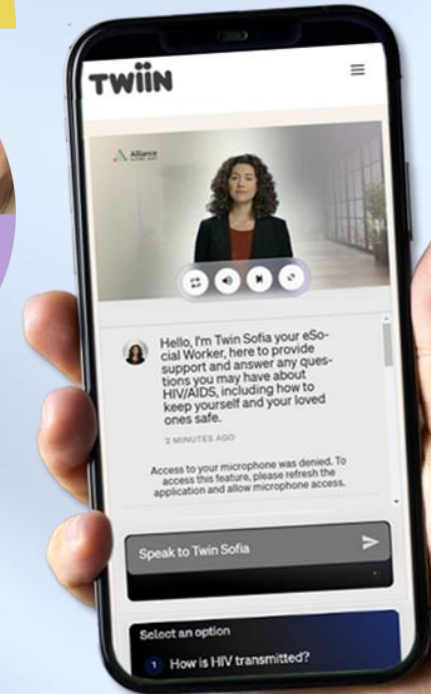
- IT solution based on artificial intelligence using the technology of digital humans
- Consultants are based on existing peer-to-peer outreach workers and use their voice
- HIV, harm reduction, sexual and reproductive health, mental health, etc
- Provides a range of information, answers to questions, access to services (contacts, information about available services) - orally or in writing
- Over 5500 people have performed over 38,000 sessions with TWIIN since September 2024



Our digital assistant



- Online chat with AI - website
- Offline app (coming soon)



Mobile HIV case finding (MCF)

MODEL

- **Optimized Case Finding (Social Network Strategy)** approach to effectively identify HIV cases -> **Risk-based AI referral algorithm**
- **Community Initiated Treatment Intervention (CITI)** – same-day ART initiation: in the AIDS Center or directly in the van for clients living in remote areas
- **Community Initiated Retention Intervention (CIRI)** – long-term social patient-centered support, lasting up to 12 months, through personalized individual sessions focusing on improving retention in care and adherence to ART
- **Referral and linkage to PrEP**
- **Referral and linkage to MAT**



OPERATIONS

- **17** mobile teams in **14** regions
- Covered with services PWIDs and their partners and new risk groups (NRGs): non-injection drug users; people who have alcohol abuse; internally displaced persons; homeless people; military personnel; sex-worker
- The MCF operates through mobile vans at locations where **no other projects** are present and damaged health facilities and roads **limit access to HIV services**



ACHIEVEMENTS

From February 2022 until October 2024 (during full-scale war)

- Total tested – **81,298**; HIV positive – **3,352**, yield – 4,4%
- **3,326** clients first started ART; **1,183** people who interrupted treatment were returned to care
- **1,841** clients started PrEP, and **1,549** clients were linked to MAT program
- Clients' migration to western parts of Ukraine leads to launch of MCF team in new (first non-PEPFAR) region in September 2022 – mobile team in Lviv; **yield – 6%**
- ART and PrEP initiation directly in mobile van involving medical staff in remote and hard-to-reach settlements: Chernihiv, Odessa, Lviv, Kyiv

Tailored shelters/safe spaces, including for LGBTQI+, PWID and disabled



26 SHELTERS supported during 2022-2023

Safe Spaces shelters for PWUD and LGBT.

Supporting relocation to securer areas and humanitarian aid

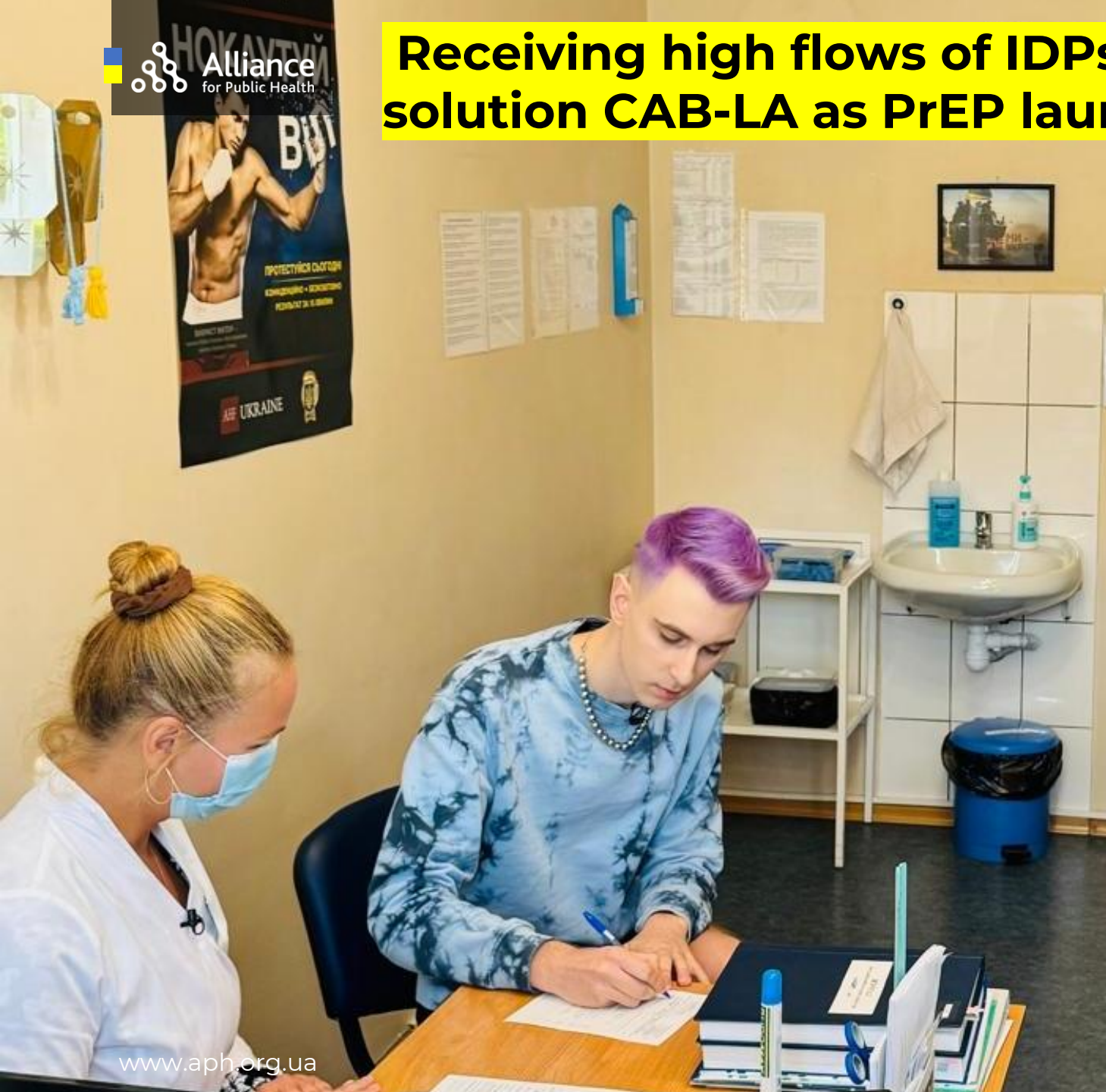


During war, **922 mini-grants** were issued by APH to initiative groups from representatives of key populations.

Overall **776 340 people** received critical support.

Receiving high flows of IDPs in safer locations, innovative solution CAB-LA as PrEP launched in Lviv and Kyiv

More than 100 patients have already received their second CAB-LA injection with ambitious plans to scale the number up to over 500 clients.



PREVENTION SERVICES FOR EXPERIMENTING YOUNG PEOPLE

Target groups:

- young people who practice high risk behaviours but may not self-identify as members of vulnerable populations such as PWUD, SW or LGBTQI+
- other vulnerable young people such as those who experience various forms of violence and mental health challenges.

- Support de-stigmatisation, appreciation of diversity, nurture inclusivity;
- Offer effective solution to address mental health needs of young people;
- Establish effective, reliable and safe communication with people who use PAS in recreational and other settings and experimenting young people;
- Minimise the potential harms associated with PAS use and improve the quality of life of people who use;
- Provide experimenting youth with objective information on psychoactive substances, sexual and reproductive health, interpersonal relationships;
- Collect and analyse key data on the drug scene and the use of psychoactive substances, sexual practices that are associated with risks;
- Introduce more accurate methods of drug checking (international cooperation and changes in legislation);
- Develop a mindful attitude to one's own health, to prevent transitions to more problematic and harmful patterns of PAS use and the development of substance use disorders;
- Solving challenges related to the war (mental health, PAS use etc.)

PREVENTION SERVICES FOR EXPERIMENTING YOUNG PEOPLE

RESULTS 1.01.2023 - 31.12.2024

drugstore
project



Party Box prevention kits

6 462



Online participants

597 487



Parties **177**
distribution of prevention
products 61 173



Online consultations

14 512



Face-to-face consultations

10 142



Educational events **180**
Participants 8 923

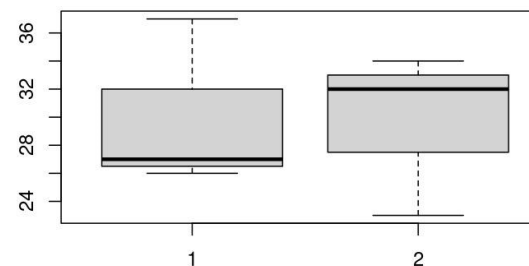
6 024 counseling on HIV
prevention and harm reduction
5 931 by psychologists
427 lawyer
631 by infectious disease specialist
1 499 by psychiatrist

6 885 peer-to-peer counseling on HIV
prevention and harm reduction
1 237 by psychologists
866 on psychoactive substances
243 by psychiatrist
911 participants of integration groups

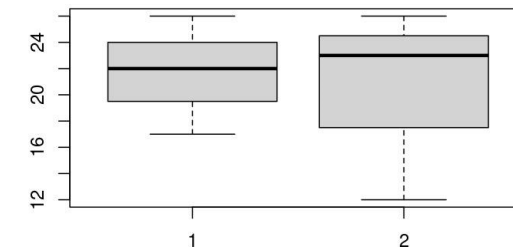
MAT - methylphenidate for people with ADHD who use stimulant drugs

- Pilot in Ukraine launched in 2024; 103 patients enrolled to date; 55 currently on treatment
- Final conclusions yet to be made, but so far evident decrease in amphetamine use, and improvements in overall health (physical and mental), social connections and the health of the environment of the patients
- Patients have been recommending the program to their friends/peers, mentioned it on their blogs; there is interest from different cities and from military personnel

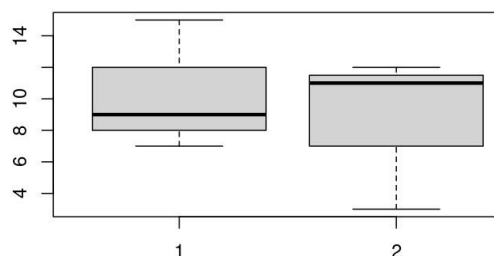
Healthy environment



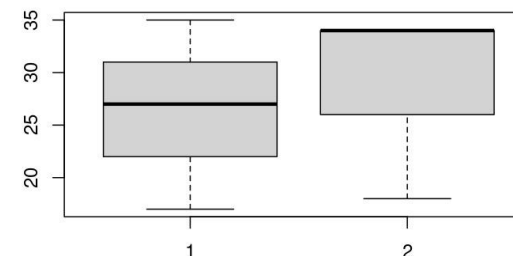
Psychological health



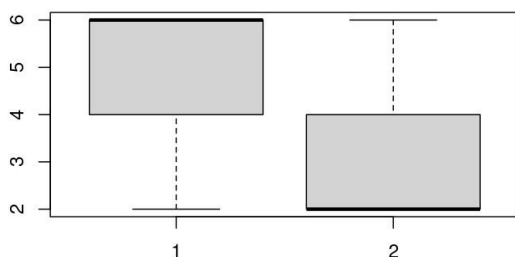
Social connections



Physical health



Amphetamine use



	1 meet		3 months		6 months	
CLIENT	AMPH	METH	AMPH	METH	AMPH	METH
1OLIS	1	2	2	2		
2VOSH	1	2	2	2		
3olzi	2	2	2	2		
1VABA	2	2	2	2		
1ANTU	1	1	1	2	2	2
2VOMA	1	2	2	2		
3DMMA	1	1	1	2	2	2
4VAUP	2	2	2	2		
5ANTO	2	2	2	2		
7MIMO	2	2	2	2		
9SEVE	2	2	2	2		
4TODA	1	2	2	2		

Preliminary observations and feedback



Male, 22, employed,
lives with parents,
Ivano-Frankivsk

I wasn't really looking for anything, but mum brought me here and made me stay. Now I am happy as I've been sober for 3 months and I don't want to go back there again. I even recommend it to friends, but they aren't ready

My addiction was always psychological, not physical. Now I don't feel such a huge urge to take drugs as before. I did miss several days of Concerta, but came back and plan to stick to it. It had really helped!



Male, 19, employed,
lives with aunt and
grandfather, Ivano-
Frankivsk

Patient: ANTU

Was unemployed (specialty - cook, dismissed for absenteeism), often didn't spend nights at home, spent all wages on "street" amphetamines and marijuana; showed signs of ADHD in childhood of moderate severity; after the 1st month of treatment, reported a significant improvement in his psycho-emotional state - "I don't think about drugs at all.", got his previous job back.

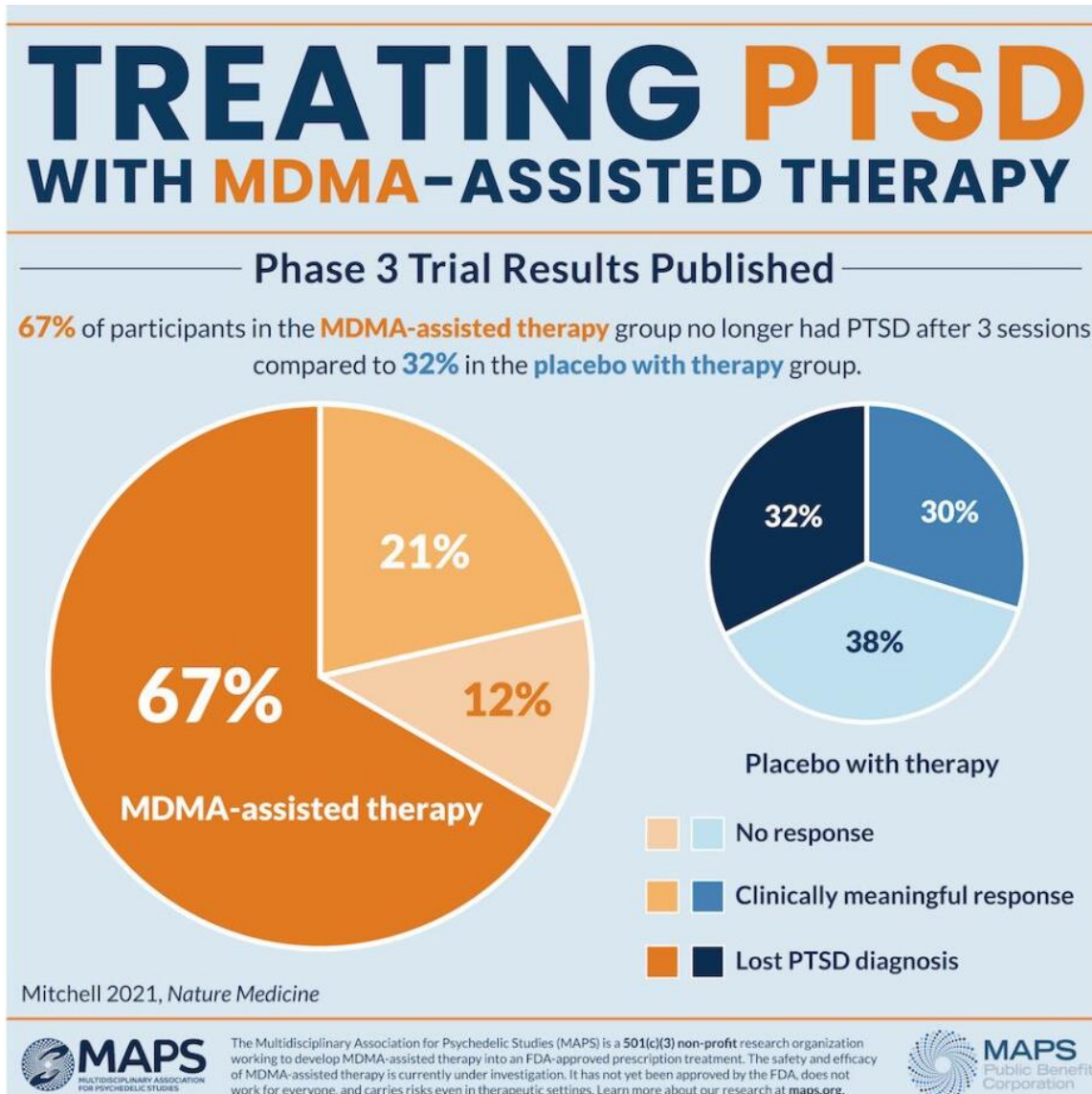
Patient: VOMA

Began therapy after detox and antipsychotic therapy for delusions of jealousy; showed signs of ADHD at school age; behavior was fussy, talkative, restless; after having started treatment and taking a vacation with his wife (doctor, specially took a leave of absence to be around the patient around the clock to control his behavior and to exclude the use of "street drugs"), the patient noted an improvement in his condition, which was manifested in the disappearance of the desire to look for "salts".

Patient: DMMA

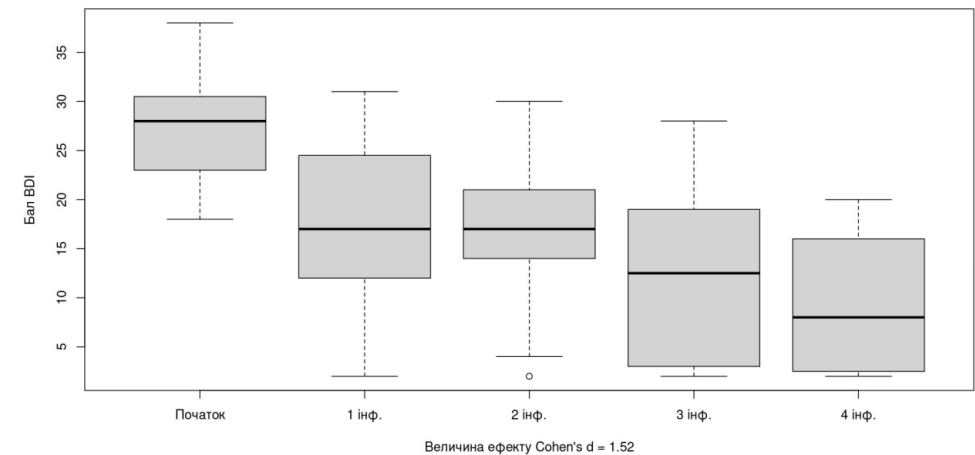
Directed by social service workers for families of children and youth. During the test survey, he showed classic signs of ADHD. Had been systematically using amphetamines for a long time. On the third day of methylphenidate therapy, the patient noted improvement in well-being. Has a high commitment to therapy.

A pilot study on Ketamine-Assisted Therapy for treatment resistant depression in veterans is being conducted in Lisova Polyana (Kyiv, Ukraine) public hospital



- Pilot in Ukraine launched in 2024; several dozen veterans with PTSD took part
- Is a range of psychotherapy sessions with ketamine-assisted sessions

Preliminary results of the pilot (depression)



Drug policy developments at war

- **Legalization of Medical Cannabis (MC)**

Law No. 3528-IX came into effect on Feb 16, 2024, and came into force on Aug 16, 2024. Amends the **Law of Ukraine "On Narcotic Drugs, Psychotropic Substances, and Precursors"** of May 15, 1995, outlining distinctions between MC, its processed products, cannabis plant material, and other cannabis types containing psychoactive substances. It establishes licensing procedures for the cultivation, production, storage, transportation, sale, import, export, and transit of MC and its derivatives. The policy permits MC use for educational, scientific, and research purposes, as well as for producing narcotic drugs, psychotropic substances, and medicines. It specifies requirements for medicinal products containing MC, including registration, quality, safety, effectiveness, packaging, and labeling, and restricts prescription to certified physicians for approved medical conditions.



Conclusions

1. New **subpopulations** and risks – migrants, military, new drug scenes
2. New **locations** – mobile servicing points
- 3. Digital** assistance
4. New **medications** – long-acting options help, MAT for stimulant users, K-AT
- 5. Mental health** overall