

## **Partnership to Fight HIV/AIDS in Ukraine**

Ukraine is experiencing the most severe HIV/AIDS epidemic in the European region and the Commonwealth of Independent States. At the end of 2009, the estimated HIV prevalence among adults (15-49 year old) was 1.1%. UNAIDS estimates that there are more than 350,000 people living with HIV in Ukraine, and the annual number of newly reported cases has been increasing, with the number of new cases reported to be 19,840 in 2009, compared to 12,491 in 2005 and 6,212 in 2000. The epidemic continues to be driven by unsafe drug injection and sexual practices, and remains concentrated among key populations, including people who inject drugs (PWID), prisoners, female sex workers (FSW), their clients, and men who have sex with men (MSM). Since 2007, the reported primary mode of HIV transmission seems to be shifting from injecting drug use to sexual transmission through the partners of key populations.

The PEPFAR program in Ukraine follows the principles of the USG Global Health Initiative and is guided by the HIV/AIDS Partnership Framework between the USG and the Government of Ukraine. The over-arching PEPFAR goals in Ukraine are to: reduce the level of HIV transmission among PWIDs and other most-at-risk-populations; improve the quality and cost effectiveness of HIV prevention, care and treatment services for key populations, particularly PWIDs and their sexual partners; and strengthen national and local leadership, capacity, institutions, systems, policies and resources to support the achievement of national AIDS program objectives.

## Saving Lives: PEPFAR Program Results

In most concentrated epidemic countries, PEPFAR does not deliver services directly. Instead, support focuses on provision of technical support, and may include development of innovative program approaches and technically sound guidelines, and policy and advocacy, especially to enable key populations to access HIV services. Because PEPFAR does not provide direct service delivery, reports typically represent achievements of only small-scale model programs. Progress achieved in Ukraine through direct PEPFAR support during fiscal year (FY) 2011': •14,100 HIV-positive individuals received care and support (including TB/HIV) •23,800 individuals received counseling and testing



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•Adult (15–49) HIV prevalence, 2009: 1.1%<sup>3</sup>

> PWID: 22.9%<sup>5</sup> Prisoners: 15.0%<sup>5</sup> FSW: 13.6%<sup>5</sup> MSM:8.6%<sup>5</sup>

Estimated adults and children (ages 0-49) living with HIV, 2009:350,000<sup>3</sup>
HIV-related deaths, 2009: 24,000<sup>3</sup>
Estimated number of people needing antiretroviral therapy based on WHO 2010 guidelines, 2009: 160,000<sup>4</sup>

## U.S. Support for Ukraine

PEPFAR Bilateral Funding for Ukraine (US\$ in millions)								
FY 2004	FY 2005	FY 2006	FY 2007	FY 2008	FY 2009	FY 2010	FY 2011	Total FY04-11
\$5.5	\$7.1	\$5.9	\$6.7	\$5.9	\$8.2	\$12.0	\$22.2	\$73.5

Ukraine has also benefitted from grants from the Global Fund to Fight AIDS, Tuberculosis and Malaria, to which the U.S. is the largest single contributor. For more information on grants from the Global Fund, visit <u>www.theglobalfund.org</u> Additional Information

•PEPFAR Ukraine Page: http://www.pepfar.gov/countries/ukraine/index.htm

•Ukraine Global Fund Grant Portfolio: http://portfolio.theglobalfund.org/en/Country/Index/UKR

Ukraine Partnership Framework: www.pepfar.gov/frameworks/ukraine/

1 PEPFAR defines direct support as data that captures the number of individuals receiving prevention, care, and treatment services through service delivery sites or providers directly supported by U.S. Government (USG) interventions or activities at the point of service delivery. An intervention or activity is consi ered to be direct support if it can be associated with counts of uniquely identified individuals receiving prevention, care, or treatment services at a unique program or service delivery point benefiting from the intervention or activity. 2 Total bilateral planned funding does not include funds programmed to central initiatives and allocated for use in country. Funding levels include all sources of PEPFAR funding. All funding levels are planned and subject to change due to reprogramming or the allocation of additional funds upon the Global AIDS Coordinator's approval.

3 UNAIDS, Report on the global AIDS epidemic, 2010.

4 WHO, UNAIDS and UNICEF, Towards universal access: Scaling up priority HIV/AIDS interventions in the health sector, 2010.

5 National Report on Monitoring Progress Towards the UNGASS Declaration of Commitment on HIV/AIDS, covering period of January 2008 – December 2009, 2010