

A Europe free of AIDS, TB, and viral hepatitis - and no one left behind

<u>CSF Ukraine Regional NGOs Response</u> <u>Coordination Call¹</u>

22 June 2022, 11-12:00 CET

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ACTION POINT 0: Follow-up request to WHO/EACS to provide clearer guidelines about when/how to switch regimens.

1. TLD Generics in Poland

- In Poland there are currently around 3.5 million Ukrainian refugees. The number of people turning to HIV clinics in increasing (1,400 at the beginning of vs 400 at the end of March).
- Shortages: patients get one month ARVs supply. The number of patients has doubled, while the number of medical personnel has remained the same. Medical consultations with Ukrainian refugees tend to take double the time: need to collect info about the clinical history, language barriers.
- **TLD generics** from India: Distribution is supposed to happen directly in HIV clinics. WHO offered to organise the shipment. Nothing has been received yet.

ACTION POINT 1: CSFs to write a joint letter with Polish organisations to WHO (HIV Programme) to speed up the bureaucracy behind the shipment of TLD.

Status update: EATG reached out to WHO Europe and as of 1 July, the info is that the first batch of donation should be in Poland very soon as all documentations have been completed. On 19 July, the ECDC-WHO HIV network meeting will examine issues around continuity of HIV services for refugees with the Public Health Centre of Ukraine and focal points from various countries including Poland.

2. Naloxone Shipment from Czech Republic

Following a call between Ukrainian and Czech stakeholders, including the office of Czech National Anti-Drug Coordinator, and ad hoc responses to the needs of the key populations, it was proposed to send 1,000 doses of naloxone to Alliance for Public Health under the supervision of the Minister of Health of Czech Republic. The procedure was officialised through a letter approved by the Ministry of Health and Public Health Centre Minister. The stock, however, has not been delivered yet.

¹ This is a report from the CSF Ukraine regional NGOs response call. The information shared is reported as heard. The report was not run by speakers. Please, treat this report with caution as the situation and actions of different actors evolve rapidly and because personal data is shared to help link people to care and for no other purpose.

ACTION POINT 2: Milutin Milošević to check separately and then follow up.

Status update: The 1,000 doses of the Naloxone from Czech Republic are on their way and supposed to arrive to a warehouse in Poland on 1 July 2022.

3. Update from France

There is an increase in the number of requests from Ukrainian refugees arriving in France. This might be related to the on-going "second wave of migration" towards France, Belgium, Netherlands and Germany and to the fact that Poland (both Polish government and local authorities) has progressively less economic resources for social support.

- Ukrainian refugees will soon be required to pay for public transports in Warsaw and trains (free of charge up until now).
- Uncertainty about accommodation which was free for the first 90 days.
- Lack of rentable flats; prices 20-30% higher than before the conflict.
- Ukrainian clinicians leaving because they would need to speak Polish to work there.

The language barrier remains a central issue in France. Basic information has been translated into Ukrainian but there are language issues during thorough medical check-ups.

Suggestions:

- Cooperation with HelpNow /Alliance for Public Health: helpline, chat box. They can support translations through colleagues potentially based in France.
- EACS and WHO Protocol: European clinician who have Ukrainian patients can send information with the name and surname to the Ukrainian Public Health, who will send the whole medical history of this patient in English. This option works also for TB: there is now a link with the national TB Programme in Kyiv, which will organise the records as necessary.

4. Disclosure of HIV Status in Hungary, Cyprus and Slovakia

In Hungary, refugees are afraid of coming forward with their HIV status, thus access to HIV treatment and care, due to a specific legislation which states that people coming from third countries must report their HIV status to authorities. Although this cannot be the basis of expulsion from the country or refusal of the residency status, nor permit to study and does not apply to refugees, there are rumours in the community that before the conflict people disclosed their HIV status and were denied the residency status – using other reasons.

Similar legislations in the EU are in place in Cyprus and Slovakia, this latter being a target country for Ukrainian refugees. In these two countries non-EU citizens living with HIV cannot receive the residency status.

ACTION POINT 3: CSF coordination team to write a letter to the UN and European Commissioner for Health and Food Safety to push these three countries to get rid of this legislation.

5. Update on OAT in Ukraine

On a national level, the Ukrainian Ministry of Health approved a new order that allows supply of methadone and buprenorphine upon request to the public health centres and not just on a quarterly basis. Also, GF engaged with OAT sites in Ukraine.

Issue: Dozens of OAT sites are completely closed. National producers were closed and factories destroyed. The only one currently working is in Odessa. Relying on international support (e.g. Italian company Molteni and methadone coming from the U.S.). Difficult to ship it to territories occupied by Russian troops.

6. Next CSF Ukraine Regional NGOs Response Coordination Call 22 June 2022 – 11:00-12:00 CET

https://eu01web.zoom.us/j/63598396804?pwd=bDB0ZXdObzRoTFdzVHZwQ1dCMUs5Zz09