Background

Increased numbers of tuberculosis (TB) cases, coupled with a rise in human immunodeficiency virus (HIV) and multi-drug resistant TB (MDR-TB), are a significant public health problem—as well as an economic threat—in Ukraine. TB rates more than doubled in Ukraine between 1992 and 2002, a result of the economic and social challenges that came with independence, stabilizing by 2004 at 82 notified cases per 100,000 population, the second highest burden of 53 countries in the World Health Organization (WHO) European Region. This represents an estimated 40,000 TB cases per year.

PATH has worked successfully in TB control in Ukraine in close collaboration with local, national, and international partners since its work as a subcontractor to the World Health Organization (WHO) on the first phase of the Donetsk DOTS Pilot Project (2001-2003). With USAID support, PATH now implements comprehensive DOTS expansion activities in eight regions of the country (five oblasts, one autonomous region, and two municipalities: Donetska, Dnipropetrovska, Kharkivska, Khersonska, Zaporizhska, Crimea, Kyiv City, and Sevastopol City). Since work began in 2003, PATH has successfully overcome stiff political resistance to implementing the DOTS strategy.

Project Goal and Objectives

The primary goal of the project is to expand DOTS rapidly throughout the country to provide access to effective TB diagnosis and treatment for all patients.

The objectives of the PATH project:

- Improve capacity for DOTS expansion by advocating for political support, including appropriate legislation and assistance in developing pilot sites.
- Improve the quality of diagnostic services in selected oblasts.
- Improve the use of monitoring and surveillance data for TB program management.
- Reduce diagnostic delay, increase case detection, and improve treatment adherence.
- Improve provider practices by improving capacity to diagnose and treat TB based on the DOTS strategy, and enhance knowledge and response to TB/HIV interaction.

Main Accomplishments through September 2007

- Ukraine has adopted national guidelines that comply with international standards and is moving forward on DOTS expansion. The Second National TB Control Program and other TB control legislation are developed according the STOP TB strategy approaches.

- PATH has expanded high-quality implementation of DOTS in eight regions of Ukraine. DOTS coverage has gone from 6% to 40% since 2001. PATH is covering additional oblasts through its work under USAID’s Technical Assistance Support Contract II (TASC2).

- A laboratory network is functioning in eight oblasts with a quality control system in place.

- PATH designed, introduced, and supported adoption of a standardized paper and electronic management information system that is able to collect and analyze cohort data according to international standard practices.
• As a result of the project, more than 3,300 TB specialists, general health practitioners, laboratorians, data managers, and prison health facility staff have been trained in DOTS implementation.

• DOTS training has been incorporated into the curricula of medical institutions for both pre-service and post-graduate (in-service) training. TB case detection has been incorporated into primary health care (PHC) settings as a routine activity.

• PATH expanded TB services based on the DOTS strategy to the detention and penitentiary system in Dnipropetrovsk oblast (one prison for TB patients and 3 detention facilities). It is the first successful TB pilot project in Ukraine’s penitentiary system.

• According to survey data, training of providers to improve communication with their clients has had a very positive effect on client-provider relationships and has the potential to support increases in treatment completion.

• PATH’s work with the Ukrainian Red Cross Society has resulted in a successful and sustainable model for TB patient support for treatment completion.

• PATH assessed the current state of HIV-TB policies, mechanisms for collaboration, and services in pilot regions and supported establishment of local mechanisms for HIV and TB program collaboration. We continue to help strengthen collaboration between the existing TB and HIV vertical services to reduce fragmentation of care.

• PATH is facilitating the establishment of oblast-level TB/HIV Collaborative Task Forces to review policies and practices and revise existing guidelines to better support management of and support to co-infected individuals.

• PATH works with the All Ukrainian Network of People Living with HIV and AIDS and the Ukrainian Coalition of AIDS Service Organizations to improve outreach, peer education, and support for PLHIV and to increase TB treatment completion among co-infected individuals.

• A high level of understanding of TB transmission and symptoms continues in the general public.

Objectives for 2007-2011

PATH will continue to support TB control activities in line with international standards in two additional regions of Ukraine (Lvivska and Odeska Oblasts) to reach the target of 50% coverage of the population with high-quality DOTS services and 30% of population with MDR-TB services. Additional key objectives include scaling-up TB-HIV co-infection services, reducing stigma and discrimination towards persons with TB and TB-HIV co-infection, and increasing transparency, accountability, and rule of law in TB policy processes and program implementation.

Project Partners
PATH has collaborated with a wide range of national and international agencies as part of its work in Ukraine. These include the Ministry of Health of Ukraine; the F.G. Yanovsky Institute of Tuberculosis and Pulmonology of Academy of Medical Sciences of Ukraine; oblast and city authorities in the target regions; the Ukrainian Red Cross Society; the World Health Organization; the Royal Netherlands Tuberculosis Association (KNCV); the Royal Tropical Institute of Netherlands (KIT); the World Bank; Constella Futures Group; and numerous local NGOs.

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