

Ukraine

Community, Rights and Gender Country Profile

Working Document



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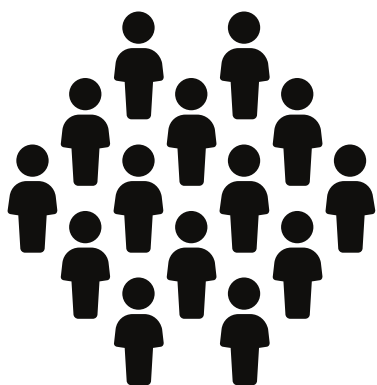


CRG Interventions



CFCS Round 10 Partners

Quick Facts



43.73 million people

Working Document



**High MDR/RR-TB
Burden Country**



**Eastern Europe and
Central Asia**

UNHLM Targets



Resource Needs (2022)

186.46 million (USD)

Available TB Funding 2020 (USD)

Domestic: 99.1 million

International (Excluding Global Fund): 4.8 million

Global Fund: 24.1 million

Funding Needs: 147.7 million

Diagnosis and Treatment Targets (2020)

TB Target: 27,100

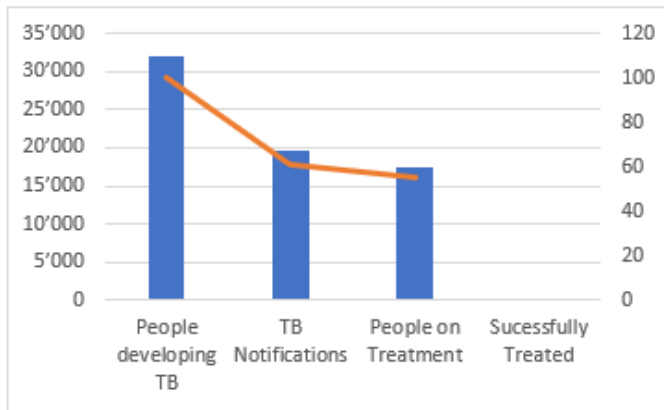
% Target Achieved: 72

National Strategic Plan and Funding Opportunities

- Next National Strategic Plan Development: 2030
- Next Global Fund funding request proposal development: 2023

TB Situation

Epidemiological Data (2020)



Source: Stop TB Country Dashboard
https://www.stoptb.org/static_pages/MappingTool_Main.html

Major Gaps in TB Prevention and Care

- 14,467 Missing people with TB (918 were children)
- 4,100 people died because of TB
- 4,257 Laboratory confirmed people with MDR/RR-TB (WHO data, 2020)

Community, Rights and Gender Data

The CRS assessment conducted in 2018 identified the following:

Accessibility Barriers include limited access to counseling and social support. Also, victims of sexual violence were unable to access services due to unemployment. In addition, women from ethnic minorities, women survivors of GBV, elderly women, women in armed conflict situations, female refugees, women at high risk of HIV and the rural poor have limited access to healthcare. Women's financial dependence on men hinders access to services, women from key population experience stigma & discrimination in healthcare and the lack of national ID is a barrier to services for IDPs

Quality barriers include unnecessary long-term hospitalization for TB, stigmatizing treatment in clinics, lack of TB trained HCWs in PHCs and insufficient use of fixed-dose combinations

Availability Barriers: women from key populations experience stigma & discrimination in healthcare, unnecessary long-term hospitalization for TB; stigmatizing treatment in clinics towards trans persons and PWID.

Discrimination issues: laws and policies contain stigmatizing & discriminatory terminology. Discrimination leads to delays in seeking healthcare. The Law does not protect labor rights of people with TB, they usually lose their jobs during treatment eg workers who refuse or fail to take TB test in stipulated time shall be dismissed under law.

Similarly, the Law does not prohibit TB discrimination in education; students who refuse TB test, contacts of people with TB, or those who aren't vaccinated may be banned from school. There is no legal prohibition of TB discrimination.

Freedoms: TB transmission criminalized by law, people with TB can be prosecuted and subject to isolation. Also, there is no legal protection for right to privacy or confidentiality for people with TB.

Gender: Women from ethnic minorities, women survivors of GBV, elderly women, women in armed conflict situations, female refugees and women at high risk of HIV have limited access to healthcare. Also, women's financial dependence on men hinders access to services. Roma women were found to be vulnerable and cannot seek healthcare without husband's consent. Similarly, women from rural areas lack access to social protection and health services.

Key and Vulnerable population prioritized: PLHIV, prisoners & detainees, PWID, people with alcohol dependency, homeless, urban & rural poor and IDPs. They experience access barriers to counseling and social support, Also undocumented foreigners, people with prison history, PWID lack access to integrated OST/HIV/TB services.

Participation: Networks and CSOs are invited to decision-making processes at various levels of the TB & HIV responses. There are representatives of people affected by TB on the National Council to Fight TB and HIV/AIDS in Cabinet. TB program includes indicator for number of regions where CSOs collaborate with TB clinics to improve access to vulnerable groups.

Remedies and Accountability: Free State legal aid is not provided by law except for people with low income. But people with TB lack information about this and their rights. Also, key populations are deterred from legal services by stigmatizing lawyers. PWID do not seek legal services or remedies for fear of law enforcement.

Source: HHR: Health and Human Rights Journal: Building the Evidence for a Rights-Based, People-Centered, Gender-Transformative Tuberculosis Response: An Analysis of the Stop TB Partnership Community, Rights, and Gender Tuberculosis Assessment

Community Engagement and Representation

Active National Stop TB Partnership

- Yes

National Network of People Affected by TB

- TB People Ukraine

TB Network represented on CCM

- Yes

High-Level Engagement with Parliamentarians

- Yes

Celebrities Engagement in TB response

- Yes

Challenge Facility for Civil Society Round 10

- Alliance for Public Health
- TBpeople Ukraine

CFCS Round 10 Regional Level Partners

- TB Europe Coalition (TBEC)
- Center for Health Policies and Studies

Global Network:

- TB People
- TB Women



Community Rights and Gender



- CRG Assessment Complete



- Costed CRG Action Plan



- TB Stigma Assessment Conducted



- TB Stigma Elimination Plan Available



- In progress

- Community-led Monitoring Mechanism in place



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CFCS Round 10 Grantees

Alliance for Public Health

- **Global Fund Principal Recipient**
- Project Location: National Level, Poltavaska, Zhytomyrska, Cherkaska, Chernihivska, Zaporizka, Odeska, Khersonska, Rivenska oblasts
- Timeline: January 2022 - January 2023
- Objectives
 - To integrate gender sensitivity into national TB statistics
 - To integrate CRG approaches into to the national TB response
 - To build awareness on human rights issues related to TB among TB stakeholders, including and people affected by TB
 - To ensure the involvement of TB key populations in TB planning processes and ensure the provision of human-centered services.
 - To participate and engage in TB advocacy and accountability initiatives at national, regional, and global levels.

CFCS Round 10 Grantees

TBPeople Ukraine

- **Global Fund Grant: No**
- Project Location: National level
- Timeline: January 2022 - January 2023
- Objectives
 - To advance, scale-up and integrate OnelImpact community-led monitoring in the TB response in Ukraine.
 - To develop, test, and monitor a community support model that systematically responds to the expressed and comprehensive needs of people affected by TB in Ukraine.
 - To participate and engage in TB advocacy and accountability initiatives at national, regional, and global levels.

Questions? Contact us.

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