

PROTOCOL NO. 10
of the Meeting of the National Council on TB and
HIV/AIDS

May 28, 2009 10:00
Kyiv, Ukraine 7, Grushevskogo Street, the Ministry of Health
Collegium Hall, the MOH

Chairman of the Meeting:

Knyazevych Vasyl Mykhailovych Minister of Health, First Vice Chairman of the National Council

Present:

Members of the National Council on TB and HIV/AIDS (hereinafter referred to as the National Council):

Zhovtiak Volodymyr Olegovych	Vice Chairman of the National Council, Chairman of the Coordination Council of the All-Ukrainian Network of People Living with HIV/AIDS
Lukasevych Ivan Ivanovych 5 votes (the votes had been delegated by Vasyunyk I.V., Khyazevych V.M., Feshchenko Iu.I., Polianskyi P.B.)	Chief Expert at the Administration of Humanitarian Policy of the Secretariat of the Cabinet of Ministers of Ukraine, Secretary of the Council
Borushek I.O.	Member of the Coordination Council of the All-Ukrainian Network of People Living with HIV/AIDS (by consent)
Bezpalko Svitlana (the vote was delegated by Matviychuk V.M.)	Deputy Director of the Department, Head of the Unit for Finances in Health of the Department of Finance for Health and Social Programs of the Ministry of Finance of Ukraine
Gorbasenko Igor Mykhailovych	Head of the International Organizations Coalition “Let’s Work Together to Stop TB!”, Chairman of the Board of the International Journalists’ Association “Health Without Boundaries” (by consent)
Lukyanova Nataliya Leonidivna 2 votes (a vote had been delegated by Drapushko P.M.)	Head of the State Social Service for Family, Children and Youth of the Ministry for Family, Youth and Sport

Levchenko Petro Yuriyovych	Head of the Department of the Chief Administration of Health and Emergency Medicine of the Cherkassy Regional Administration
Korzhov Vitaliy Ivanovych	A representative of the sector of TB-infected and TB-affected patients, Head of the Sector of TB-infected and TB-affected people of the Foundation “Public Movement “The Ukrainians against Tuberculosis” (by consent)
Bezpalko Svitlana Petrivna (the vote had been delegated by Matviychuk V.M.)	Deputy Head of the Department for Health and Social Program Finance of the Ministry of Finance of Ukraine
Roy Yuriy Vitaliyovych (the vote had been delegated by Kurdinovych O.V.)	Chief Expert of the Television and Radio Broadcast Department of the State Committee for Television and Radio Broadcast
Leslie Perry	Director of the Mission Office of Health and Social Transformation of the United States Agency for International Development (USAID)
Nagirnyak Andriy Yaroslavovych	A representative of the Ukrainian National Council of Churches and Religious Organizations (by consent)
Ani Shakarishvili (the vote had been delegated by Jeremy Hartley)	The Coordinator of the UN Joint Programme on HIV/AIDS in Ukraine
Shcherbynska Alla Mykhailivna 4 votes (the votes had been delegated by Kalashnyk N.G., Antonyak S.M., Reshetniak V.O.)	Director of the Ukrainian Center for AIDS Prevention and Control of the MOH
Pearlman Eliot, 2 votes (a vote was delegated by Ivankevych V.V.)	Chairman of the Board of IPO “International HIV/AIDS and Tuberculosis Institute”
Zabolotnyi Anatoliy Oleksandrovych	Director of the Foundation for “Development of Ukraine”
Yakymets Volodymyr Mykolayovych (the vote had been delegated by Khomenko V.P.)	First Deputy Director of the Healthcare and Aftercare Department of the Ministry of Internal Affairs of Ukraine
Legkov Vitaliy Anatoliyovych (the vote had been delegated	The Federation of Labour Unions of Ukraine

by Ukrayinets S.Ya.)

Agenda:

1. Results of the Development and Discussion of the Consolidated Proposal of Ukraine to the Global Fund to Fight AIDS, Tuberculosis and Malaria with the “Tuberculosis” Component for Round 9.

Speakers: **Eliot Pearlman**, Board Chairman of the International HIV/AIDS and Tuberculosis Institute, Facilitator of the Proposal of Ukraine to the Global Fund at Round 9.

Zabolotnyi Anatoliy Oleksandrovych, Director of Rinat Akhmetov’s Foundation for “Development of Ukraine”.

2. The Procedure for the Selection of Sub-recipients of the Grant of the Global Fund to Fight AIDS, Tuberculosis and Malaria with the “Tuberculosis” Component for Round 9.

Speaker: **Pidlisna Nataliya Borysivna**, Executive Director of the Coalition of HIV Service Organizations.

3. Approval of the Consolidated Proposal of Ukraine to the Global Fund to Fight AIDS, Tuberculosis and Malaria with the “Tuberculosis” Component for Round 9.

Speaker: **Eliot Pearlman**, Board Chairman of the International HIV/AIDS and Tuberculosis Institute, Facilitator of the Proposal of Ukraine to the Global Fund at Round 9.

4. Final Report on Comprehensive External Evaluation of National Response to AIDS in Ukraine.

Speaker: **Dr. Olavi Elo**, Leader of the Team for Comprehensive External Evaluation of National Response to AIDS in Ukraine.

5. Miscellaneous.

Discussed:

Knyazevych V. greeted the members of the National Council on TB and HIV/AIDS. He informed that Vice Prime Minister Ivan Vasiynuk could not be present at the meeting due to the business trip. Mr. Knyazevych V. read out the agenda and asked the present if they had any suggestions to change and add to the agenda.

Zhovtiak V. proposed to give a hearing to the report on the visit of the Coalition of HIV Service Organization to the Global Fund (hereinafter referred to as the GF) as Agenda Item 5.

Shakarishvili Ani requested to report on the development of the National Operational Plan (NOP) 2010-2013 as Agenda Item 5.

**The agenda is put to the vote.
Favoured unanimously.**

Knyazevych V. spoke about the participation of the Ukrainian delegation at the World Health Organization Sixty-Second World Health Assembly, at which two pressing issues were discussed – survival of the health system, ensuring public access to the health system during the economic crisis, and the threat of the swine influenza epidemic. He expressed hope to obtain the grant and called those present at the meeting for constructive work. He gave floor to Mr. E. Pearlman to report on the first agenda issue.

Pearlman E. greeted all those present at the meeting. He thanked all the organizations, international and Ukrainian experts that participated in the development of the Proposal.

Makovetska M. presented a brief review of the work performed during last few months. She reminded to the present that this Proposal is the Round 8 Proposal with the same objectives, yet it was substantially worked out and finalized. She proposed moving on the presentation of objectives and service delivery areas. She invited Bogdana Shcherbak-Verlan (the WHO) to speak on **Objective 1:** To improve tuberculosis diagnosis by optimizing the TB laboratory network in the civil and penitentiary facilities and service delivery area (SDA) “Improving Diagnosis”.

Shcherbak-Verlan B. informed that the working group worked within a month and International Expert Girts Shenders took part in its activities and made a considerable contribution. She reminded that one of the weaknesses of the Proposal of the previous year was a too large number of laboratories of all levels,

so the group developed a project for the gradual reduction in their number as coordinated with the Ministry of Health (hereinafter referred to as the MOH): level I laboratories will be reduced from 1837 to 653, Level II laboratories will be reduced from 109 to 86, Level III laboratories will be reduced from 47 to 28 (per 1 level III laboratory in every region and in the city of Sevastopol and 2 laboratories in Kyiv). Also, the functional duties of laboratories as outlined in Order No 50 issued in 2008 by the MOH will be reviewed, since Level II laboratories perform the functions of Level III laboratories. She reported that this component includes three objectives: Strengthening of the National Reference-Laboratory including the review of guidelines, laboratory workers training, procurement of additional equipment. Laboratory network strengthening includes development of training materials and conducting trainings on microscopy and bacteriology quality control, procurement of additional equipment, holding annual meetings of Level III laboratory heads, participation of national experts in international conferences. The support and launch of the Quality Control System includes the development of external quality control protocols and patterns, containers procurement and funding transportation for external quality control, carrying out the independent mission on evaluation of the laboratory network involving international experts.

Makovetska M. informed that in case comments or remarks arise, they should be sent at the facilitators' address, and they will be included in the work. She gave floor to Olena Radziewska to **Objective 2:** To improve access to high quality services for people that for whatever reason have limited access to TB Health services.

Radziewska O. commented that Objective 2 has two components. The first component relates to the increase of access to basis services (DOTS), the second one relates to the scale up of other services for TB patients. She stressed that in TB treatment supplies of relevant drugs is very important, however no less important are implementation of management and case management. Case management is patient care and supervision from the date of case detection till the stage when treatment is continued in an outpatient setting. The entire treatment course should be constantly observed by healthcare and social workers. She underscored that increase of access to quality-assured health care and quality-assured DOTS means support in case management for patients during the active treatment stage, assisting in case management during treatment continuation stage, stimulating support through outreach activities among public, planned work and coordination.

Ms. Radziewskaya moved on to the next component, which is MDR-TB control. She informed about the achievements in MDR-TB case management, in particular, about the approval of new charts for MDR-TB adopted in 2009 according to the international standards. The following weaknesses were indicated among the main ones: not all the first and second line antituberculosis drugs comply with the international quality standards, lack of professional workforce for quality-assured TB case management, and unsatisfactory infection control at all levels. She

stressed that in order to ensure better management of MDR-TB cases it is necessary to improve MDR-TB protocols, hold trainings for regional specialists, provide assistance to healthcare workers of district levels and primary health care network in MDR-TB cases management, improve the national register, provide technical assistance to equipping MDR-TB departments in each region, provide social and awareness-raising support for patients and their families, to improve clinical management. Ms Radzievska underscored a very weak component relating to the development of the infection control strategy for TB service facilities and primary health care network. In order to improve this component, it is necessary to ensure support for activities of working groups on infection control, develop infection control programs, arrange trainings in infection control, provide technical assistance to procure equipment for infection control and of personal protection equipment.

Kurpita V. commented that the MDR-TB situation is quite complicated, since second line pharmaceuticals, which might be used, are not registered in Ukraine. He proposed to note in the Proposal that Ukraine as a member of the WTO may take advantage of the so-called forced licensing of pharmaceuticals as they will not be commercially important. Pharmaceutical companies will not be interested in licensing this type of pharmaceutical products, so this issue should be tackled this way.

Radzievska O. thanked for the comment and informed that the opportunity of taking all possible measures for licensing of second line pharmaceuticals is written in the Proposal on the assumption the grant will be obtained.

Makovetska M. invited Mr. Gundo Weiler to present the SDA “HSS Workforce”.

Weiler G. informed that working groups were established to work out the Proposal of the previous year, one of which was responsible for the Workforce component. He noted that weaknesses identified were workforce reduction, lack of systematic planning and ways to improve the situation, few trainings for healthcare workers. Based on the information available, it was proposed to have a few areas.

Primarily a systematic approach to planning human resource development should be elaborated. Another problem is bad working conditions and bad payment. The second area relates to pre- and post-graduate education of TB specialists. The third area is to develop a common mechanism for coordination in the TB area, especially, as far as TB centers are concerned.

Makovetska M. spoke on TB control sub-objectives. This component comprises strengthening of the collaboration mechanism at national, regional and local levels, reducing the burden of TB for people living with HIV/AIDS, reducing the burden for HIV patients affected with TB. She invited Victoria Bondar to speak on the final component “Advocacy, Communication and Social Mobilization”.

Bondar V. reported that the work on this component continued quite long, a lot of meetings, workshops were held, and the final changes were made by international experts the day before this meeting. She pointed out a few challenges related to this matter: which are lack of strategic planning and coordination of ACSM activities; insufficient involvement of the public sector to address TB-related issues; lack of political commitment, especially at the regional level; insufficient awareness of public about TB; stigma and discrimination by health and social service deliverers at governmental authorities against people affected with TB.

Speaking about Objective 4 “To increase access to TB diagnosis, treatment and care through awareness raising, mobilization of political support and reduction of stigma” it was suggested to develop and coordinate the ACSM Strategy, including, in particular, establishing a task force for the Strategy development, to conduct TB-related knowledge, attitude, and practice surveys, to conduct SWOT analyses in 5 regions, to implement the ACSM Strategy. Social mobilization in the public sector is planned to include building of the capacity of NGOs in ACSM and development of programs for community leaders mobilization and support.

In order to mobilize political commitment at national and regional levels, activities were developed to have influence upon the government to address the most pressing issues, including, in particular, issues of financing, protection of patients’ rights, ensuring access to quality-assured TB services (public hearings, briefings, round tables, grants for NGOs). Besides, it is planned to carry out TB awareness raising activities among public and activities to reduce stigma and discrimination to increase access to services.

Legkov V. noted that provision for workers who are occupationally exposed to TB was not reflected in this component, as it was determined under the Strategy approved by the National Council.

Bondar V. replied that this issue is not foreground in the Round 9 Proposal.

Kupryashkina-McGill S. noted that there was no sense to focus on this issue as part of ACSM, since support for healthcare workers who are exposed to TB is ensured in other separate components. She stressed that it’s impossible to cover all pressing issues within the GF grant, and this issue is of less priority than others identified in the Proposal.

Knyazevych V. agreed with the comment about no opportunity to cover this problem within the Proposal for Round 9. He noted that the Government allocates funds for prophylaxis and treatment of occupationally exposed workers.

Makovetska M. invited international expert Jaap Veen, who put all efforts to the process of writing the Proposal, to speak.

Jaap Veen thanked everyone who participated in working groups. He noted that a great deal of inconsistencies were noted, which were successfully corrected. He stressed the fact that the Proposal should both reflect the Ukraine's vision what needs to be done and comply with the GF requirements. He reported that experts succeeded in writing a good and balanced Proposal and expressed hope that Ukraine will obtain the Global Fund Grant.

Zabolotnyi A. thanked all those who worked on the Proposal development, namely international and Ukrainian experts, the MOH, the State Department for Enforcement of Sentences, non-governmental organizations, facilitators for the Proposal and many others. Thanks to all these people and organizations a solid strategic Proposal was written with well-put focuses and objectives. He reported that 5 sub-recipients had been already identified, and the sub-recipient for the ACSM component will be identified after a transparent competitive tender that will be held if Ukraine obtains the Grant of Round 9 for the Tuberculosis components, as it was recommended by the Technical Review Panel and resolution of the National Council.

Makovetska M. proposed voting on signing the Proposal and Annex C which will be sent to the GF as a supportive document to the Ukraine's Proposal.

Knyazevych V. put approval of the Proposal of Ukraine with the Tuberculosis component to Round 9 called by the Global Fund to the vote.

In favour - unanimously

Against – no votes

Conflict of interest: three persons declared a conflict of interest and did not participate in the voting.

Knyazevych V. proposed moving on to issue “The Procedure of Selection of Sub-recipients of the GF grant with the “Tuberculosis” Component”. He delegated chairing the meeting to Valeriy Bidnyi.

Pidlisna N. reported that the Coalition makes a decision to hold a competitive tender to select the sub-recipient for the ACSM component and will do its best to prove it is able to stand as a sub-recipient for this component.

Gorbasenko I. spoke with the notice that he supports a transparent competitive tender for the selection of the sub-recipient for the ACSM component within the framework of the GFATM grant. In addition he informed that he withdraws his personal opinion expressed by him on this issue at the last meeting of the National Council.

Bidnyi V. put approval of 5 proposed sub-recipients and arranging a competitive tender to identify the sub-recipient for the ACSM component to the vote.

In favour - unanimously

Against – no votes,

Abstained - 1

Conflict of interest: Four persons declared conflict of interest as they represent the organizations that are nominated sub-recipients for other components, therefore they refrain from participation in the voting.

Bidnyi V. proposed to move on to item “Comprehensive External Evaluation of National Response to AIDS”.

Elo O. reported that the evaluation was initiated by the National Council, the UNAIDS Ukraine assumed the responsibility to facilitate the process. Among major evaluation findings, he noted a positive aspect that the national response to AIDS in Ukraine is actually on the right way. Most key components are present, and a certain progress was made in the development of AIDS programs. The evaluation also indicated that the Global Fund grants made a considerable contribution to the national response to AIDS through effective mobilization of the civil society and community-based system strengthening. At the same implementing agencies closely collaborated with state healthcare facilities to improve service delivery.

However, Mr. Elo noted that the HIV epidemic continues to grow in Ukraine. The latest data show that number of new HIV cases and deaths from AIDS topped record levels in 2007. Many ongoing programs and activities were well planned, and some of them are implemented according to the international standards. Yet, they lack quality, coverage, and opportunities to have a substantial impact on the epidemic. Especially in prevention, scale-up of programs for most-at-risk groups is not rapid enough to prevent new infection cases. Effective prevention programs that target injecting drug users, sex workers, prisoners, men who have sex with men and their sex partners are the key ones to combat the spread of the epidemic. These programs should be fully scaled up in next years, otherwise the epidemic may grow to such rates which have never been faced by any other European country.

Mr. Elo noted that a number of structural constraints exist in the national response; even as the National AIDS program is reinforced the national response remains piecemeal despite the exemplary leadership of the President of Ukraine. The coordination remains inconsistent. Despite considerable increase in the state budget allocations, the Cabinet of Ministers still needs to mobilize all the capacities of central and local authorities to respond the HIV/AIDS epidemic. The key areas, such as, for instance, supervision of the implementation of the Global Fund grants and development of the national monitoring and evaluation system, need also include the Government’s leadership and total commitment of the National Council. He summed up, if prompt actions are not taken to overcome the

constraints at national, regional levels and in communities, even the best workplans and programs will not have the expected outcome.

Bidnyi V. thanked for Dr. O. Elo's professional, detailed and helpful report. He said that this report will be noted and taken into consideration in future HIV/AIDS control activities. He proposed approving the Report on the National Response to AIDS.

Favoured unanimously.

Bidnyi V. gave floor to Volodymyr Kurpita to present the report on the All-Ukrainian Network of People Living with HIV on the GF project implementation with the focus on assistance to HIV/AIDS prevention, treatment and care for the most vulnerable groups of the Ukrainian population based on the results of the project implementation as of April 01, 2009.

Kurpita V. reported that the principal objective of the project is to reduce the HIV contracting and HIV/AIDS incidence and mortality rates in Ukraine through activities that target the most vulnerable groups. The principal objectives of this project are to scale-up comprehensive care and treatment for PLWH and ensure equal access to services for IDUs and other vulnerable groups, to increase access to comprehensive counseling services to promote adherence, provide psychological support and care for PLWHA, to create a favorable environment for long-term and effective response to HIV/AIDS in Ukraine, and to ensure monitoring and evaluation of the project implementation. Mr Kurpita V. presented the Network-of-PLWH-supported projects, a schedule of substitution maintenance therapy launch, major accomplishments by objectives, fulfillment of principal indicators. He noted that despite considerable success, certain problems still exist. Such problems are the financial crisis and insufficient financing of the HIV/AIDS control program, shiftless implementation of substitution maintenance therapy programs, decentralization of healthcare services for the HIV-infected, lack of financing for social services for HIV-infected people, no mechanism of contracting out social services and services of NGOs, a flawed monitoring and evaluation system.

Bidnyi V. gave floor to Ani Shakarishvili to present the progress in the development of the National Operational Plan (NOP) for 2010-2013.

Shakarishvili A. congratulated all those connected with the development of the Round 9 Proposal to the Global Fund with the approval of the Proposal by the NC and wished successful review of the Proposal and obtaining the grant. She outlined 3 stages of activities within the framework of the National Operational Plant 2010-2013, which are preparation, strategic planning as part of the NOP development,

reaching a consensus and development of the NOP, and finalization, approval and distribution of the NOP.

Bidnyi V. thanked the members of the National Council and all the present for their participation at the meeting and for their productive work.

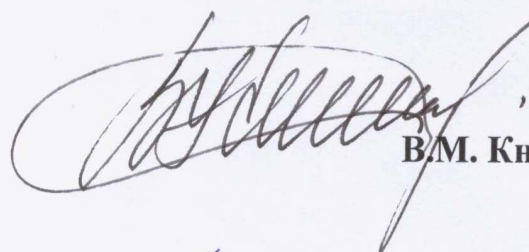
**Minister of Health of Ukraine,
Vice-Chair of National Council on
TB and HIV-infection/AIDS**

V.M. Knyazevych

**Secretary of the National Council
on TB and HIV-infection /AIDS**

I.I. Lukasevych

**Міністр охорони здоров'я
України, перший заступник
голови Національної ради з
питань протидії туберкульозу та
ВІЛ-інфекції/СНІДу**



В.М. Князевич

**Секретар Національної ради з
питань протидії туберкульозу та
ВІЛ-інфекції/СНІДу**



І.І. Лукасевич