



## UKRAINE TUBERCULOSIS ROADMAP OVERVIEW, FISCAL YEAR 2023

This is an overview of the USAID/Ukraine FY 2023 Tuberculosis (TB) Roadmap, implemented with the FY 2022 budget.

In 2021, the estimated TB incidence in Ukraine was 31,000, and an estimated 5,600 people died from TB. Ukraine notified 18,307 incident TB cases, and 97.37 percent of total notified bacteriologically confirmed individuals with TB were tested for rifampicin resistance. A total of 5,221 individuals were diagnosed with drug-resistant TB and started on treatment.

In 2019, Ukraine adopted a State Strategy for HIV/AIDS, TB, and Viral Hepatitis which runs through 2030. In this strategy, TB incidence and mortality reduction is a key goal. To achieve this goal, the Government of Ukraine plans to improve the system of organization and provision of TB care, ensure effective detection of new cases and prevention of resistant forms of tuberculosis, and improve the quality and effectiveness of TB treatment. Implementation of the State Strategy is based on three-year action plans. Final approval of the 2021-2023 action plan by the Cabinet of Ministers was pending until the end of 2021 and returned to the Ministry of Health (MOH) for revisions in January 2022.

The [State Strategy for Development of Anti-tuberculosis Care for Population](#) was also adopted in 2019. The goal of this strategy is to develop, by 2023, a new model of prevention, early diagnostics, and provision of medical care for people with TB that meets the needs of the population in medical and public health services. This strategy focuses on the implementation of approaches in the provision of anti-tuberculosis care, effective anti-tuberculosis preventive measures and improvement of TB detection, diagnostics and treatment of TB, optimization of laboratory networks, building capacity of human resources, improvement of information systems, and implementation of a new financing model.

To respond to the challenges caused by the Russian invasion, USAID is providing support to the MOH and stakeholders for health sector recovery planning, including development of a national sector-level Health Recovery Plan, as well as a TB/HIV Recovery Plan led by the Center for Public Health. The TB/HIV plan, currently under development, describes the steps to restore and maintain the full range of HIV and TB cascade services. Restoration of the HIV and TB services is envisioned to require actions along three key lines of effort:

1. Response to immediate health needs;
2. Restoration or establishment of a package of essential HIV and TB services; and
3. Restoration of the public health system itself.

The proposed FY 2022 USAID TB budget for Ukraine is \$9 million. With this level of funding, USAID will support the following technical areas:



## REACH

### *TB diagnosis*

Despite the disruptions, USAID supports scaling up and prioritizing the use of molecular tests for TB diagnosis. USAID will continue to support the programmatic use of extremely drug-resistant (XDR-TB) cartridges for molecular tests in all regions of Ukraine. With FY 2022 funds, USAID will also continue to build the capacity of the National Reference Laboratory to implement whole genome sequencing. Finally, USAID will continue to provide technical assistance to the National TB Control Program (NTP) to improve the quality of TB diagnosis.

Considering low detection rates among children under five years old, USAID will continue efforts to scale-up detection among children by expanding stool testing using molecular tests in new regions added after the full invasion and occupation of the South and East of Ukraine. In FY 2023, USAID will bring innovative diagnostics solutions that include portable and mobile diagnostic devices, such as portable X-ray machines and computer-aided detection (CAD) based on artificial intelligence software (AI). This approach will reduce diagnosis time and drop-out, thus enabling TB diagnosis and treatment services in areas with a shortage of expertise.

### *Engaging all care providers*

As health reform rolled out to primary healthcare in 2018 and secondary and specialized levels of healthcare starting in 2020, the Government of Ukraine created the necessary legal environment for decentralization of TB detection by establishing a TB service package for primary health care under the state-guaranteed package, the Program of Medical Guarantees. The TB package implies that primary health care doctors will play a bigger role in active case finding. However, a lack of knowledge on modern TB diagnostics methods and active case finding remains a barrier to operationalizing these roles. To help build the capacity of these doctors in case finding and management of TB cases and complementing broader USAID work on healthcare reform including TB, USAID introduced a series of training sessions targeting primary providers.

USAID will continue building on broader USAID health reform engagement at the national level to integrate TB while working with doctors and nurses who are implementing new diagnostic approaches by conducting virtual training and mentoring sessions. On-the-job training will be conducted in regions where the military situation allows. Additionally, USAID will continue supporting active case finding (ACF) services in community settings. To address low detection among children, USAID will strengthen collaboration with the pediatric hospitals to ensure TB diagnosis algorithms are followed.



### *Community TB care delivery*

USAID continued to improve the capacity of non-government organizations to provide counseling and contact investigation in community settings through training and mentorship. USAID continued to support the OnImpact digital platform to encourage people to use a self-screening tool and guide them to the closest available facility for TB diagnostics.

USAID also supported gender mainstreaming into the national TB policy framework by rendering support that scrutinized national regulations on TB control through the prism of a gender-balanced approach. USAID supported the facilitation of joint activities with the Government Commissioner on Gender Equity Policy and Inter-factional Association Parliamentary platform for combating TB and supported civil society initiatives to introduce gender-friendly amendments to national TB policy. USAID will continue supporting local non-government organizations to deliver an essential psychosocial care package for individuals with drug-resistant TB (DR-TB) and engage intensively in active case finding through X-ray screening, screening of risk groups using questionnaires, and other activities.

## CURE

### *Drug-susceptible TB (DS-TB) treatment*

Due to the development of active hostilities, especially in the eastern and southern oblasts of the country, the issue of ensuring individuals' continuous access to TB drugs became critical. USAID will continue supporting transportation systems for both laboratory samples and TB drugs. To better align national legal framework and practices with international guidelines, USAID continues to support adoption of national policies and provide assistance to revise and update regional documents, accordingly, helping to ensure continuity of TB services and government stewardship of the NTP during wartime.

### *Multidrug-resistant TB (MDR-TB) treatment*

With the beginning of full-scale invasion and damaging infrastructure of medical facilities, including TB drug storage locations, as well as disruption of the supply chain, the provision of MDR-TB treatment became significantly more challenging. In response to requests from the Government of Ukraine (GoU) and facilities, USAID improved conditions in some TB facilities that ensured the safety of individuals with TB during air strikes and enabled them to continue their in-patient treatment—even while sheltering in basements when necessary. USAID will continue to address the emergency needs of TB facilities impacted by the invasion.

Better access to new TB drugs and short treatment regimens remains one of the strategic objectives of the NTP. To support this objective, USAID will, with FY 2022 funds, continue to



scale-up innovative and people-centered approaches to TB treatment (such as modified shorter all oral-treatment regimens mSTR, BPaL, and ZeNix). In line with this, USAID will continue to improve the quality of treatment safety monitoring through capacity building and standard operating procedure (SOP) development. To ensure quality of care and to speed up treatment initiation through the triage approach, USAID will also continue clinical mentoring. To better align the national legal framework and practices with international guidelines, USAID will support adoption of the national policies and provide technical assistance to revise and update regional documents accordingly.

## PREVENT

### *Prevention*

Contact investigation among children and adults remains a priority. USAID will continue to support the rollout of active case finding and contact investigation in new regions by engaging primary healthcare staff and expanding the involvement of NGOs. USAID will continue supporting activities aimed at improvement of screening for latent TB infection (TBI) among staff of TB facilities and pilot the introduction of new TB preventive treatment (TPT) regimens.

USAID will expand to new regions with comprehensive support on TBI management, including countrywide expansion of QuantiFERON (QFT) testing based on successful experience in 12 regions. This support will include training, supervision, and mentoring meetings for regional specialists. USAID will support the practical introduction of the new national TB screening standard, including TPT for DR-TB contacts with confirmed TB infection, and the development/adoption of SOPs, algorithms, and mentoring on TPT prescription based on QFT-Gold test results. Additionally, USAID will pilot the involvement of family doctors in TBI management.

## SUSTAINABLE SYSTEMS

### *Commitment and sustainability*

USAID's Statement of Partnership was signed with the Ministry of Health in March 2021. In line with that, USAID closely monitored its implementation and strengthened collaboration with the MOH on TB related policy issues. Despite the ongoing war and related challenges caused by the hostilities, the TB team at the Center for Public Health remains committed to working collaboratively with USAID to develop strategies and implementation plans. Supporting the GoU to ensure continuity of essential health services has been a hallmark of USAID/Ukraine's war response to date, and our support to adapt and sustain TB services in the context of the crisis is a key part of this work.



USAID will continue supporting the development, revision, and implementation of the GoU's recovery plan to restore HIV, TB, and Substitutional Methadone Therapy (SMT) services. Many other international development partners and governments, as well as non-government entities and individuals, plan to support the GoU's wide recovery agenda while ensuring that domestic and international investments in recovery are aligned with the Ukraine Recovery Plan. USAID TB investments have also been complemented by other USG health development and humanitarian assistance provided to Ukraine to help support the continuity of systems and services.

### *Capacity and functioning systems*

USAID will continue providing technical assistance to expand access to high-quality TB medicines and pharmaceutical services through continuous analysis of TB medicines procurement, advocacy among suppliers for supporting the registration of critically needed therapeutics and creating a legal environment enabling procurement of quality-assured TB medicines via Ukraine's newly established Central Procurement Agency. USAID will continue to support quantification, costing, and forecasting of TB medicines and lab commodities to alert stakeholders of anticipated stock-outs that would necessitate the procurement of additional supplies to cover gaps and management of the emergency stocks as needed. USAID will also support restoration of the multifunctional transportation system for samples and drug transportation in the regions, based on the infrastructural availability, in response to the war. To ensure continuity of treatment, USAID may also need to be prepared to devote or redirect funding toward commodity procurement for the TB program, as needed, to complement.

### *Research*

USAID has focused on supporting the introduction of a new treatment regimen within operational research settings. USAID will continue implementing operational research at the treatment sites in the regions with a high prevalence of XDR-TB and the health infrastructure capable of supporting the implementation.

USAID will continue supporting implementation of operational research to sustain momentum with the introduction and scale-up of Bedaquiline, Pretomanid, and Linezolid (BPaL). Despite the war, USAID launched operational research to scale up the BPaL treatment regimen in regional TB facilities. In addition, USAID will also provide technical assistance to maintain national implementation of the BPaL and support the introduction of routine treatment with the BPaL regimen in healthcare facilities.