

## UKRAINE TUBERCULOSIS ROADMAP OVERVIEW, FISCAL YEAR 2021

This is an overview of the USAID/Ukraine FY 2021 Tuberculosis (TB) Roadmap, implemented with FY 2020 budget. It was developed in consultation with the National TB Program (NTP) and with the participation of national and international partners involved in TB prevention and care in the country.

Among the high multidrug-resistant TB (MDR-TB) burden countries, Ukraine is ranked eighth.<sup>1</sup> In 2019, the TB incidence in Ukraine was 77 cases per 100,000.<sup>2</sup> Furthermore, in 2019, 25,379 TB cases were diagnosed and notified to the NTP, of which three percent were children.<sup>3</sup> The estimated proportion of MDR-TB and rifampicin-resistant TB (RR-TB) cases among new and previously treated TB cases was 27 percent and 43 percent, respectively.<sup>4</sup> Additionally, the treatment success rate (TSR) for MDR/RR-TB patients and extensively drug-resistant TB (XDR-TB) patients who started treatment in 2017 was 51 percent and 34 percent, respectively.<sup>5</sup>

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. In order to achieve this, the Government of Ukraine will need to improve the system of organization and provision of TB care; ensure effective detection of new cases and prevention of progression of existing cases to drug-resistant TB (DR-TB); and improve the quality and effectiveness of TB treatment. Additionally, the NTP, within the Center for Public Health (CPH) in the Ministry of Health (MOH), also implements the State Strategy for the Development of Anti-TB Care for Population (adopted in 2019). The goal of this strategy is to develop and implement a new model of TB prevention, early diagnosis, and provision of care that effectively meets patients' needs. This TB-specific strategy will focus on: the implementation of approaches in the provision of TB care; effective TB preventive measures; and in improving TB detection, diagnostics, and treatment; optimization of laboratory networks; building capacity of human resources; improving information systems; and implementation of a new financing model.

The proposed FY 2020 USAID TB budget for Ukraine is about \$7.5 million. With this level of funding, USAID will support the following technical areas:

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<sup>1</sup> World Health Organization. *Global Tuberculosis Report, 2019*.

<sup>2</sup> World Health Organization. *Global Tuberculosis Report, 2020*.

<sup>3</sup> Ibid.

<sup>4</sup> Ibid.

<sup>5</sup> Ibid.

## REACH

### *TB diagnosis*

Ukraine's strategy in TB diagnostics for the next three years is prioritizing the use of rapid, molecular diagnostics and providing laboratory networks with the necessary equipment and supplies to perform diagnostics for all forms of TB. USAID has significantly improved the diagnosis of DR-TB cases by: revising the national molecular diagnostic strategy to use line probe assay (LPA) technology to assist in internal laboratory quality control; installing and training users of the Xpert® MTB/RIF (GeneXpert) alert system; and embedding maintenance practices for the automated BD BACTEC™ MGIT™ system (liquid culture testing).

Moving forward, USAID will scale-up access to rapid, high-quality diagnostics for all people with presumptive TB by building the capacity of laboratory networks and helping to speed-up the implementation of new diagnostic approaches through mentoring visits, on-the-job training, and online training. More specifically, technical assistance (TA) will be provided to the NTP to help optimize the use of GeneXpert instruments, implement new algorithms for case detection among children, maximize use of LPAs, and introduce whole genome sequencing.

### *Engaging all care providers*

Developing a method by which to engage nongovernmental organizations (NGOs) in the provision of systematic screening and active case finding (ACF) efforts is a priority for the NTP. USAID has supported, and continues to support, the integration of comprehensive TB diagnostics and case management into routine primary healthcare. With technical support, training, and monitoring, the FAST strategy (Find cases Actively, Separate safely, and Treat effectively) will be piloted.

Moving forward, USAID will assess the existing facility-based TB case-finding algorithms and persisting barriers to case finding. Based on the results of these assessments, USAID will develop targeted case-finding interventions that can be integrated into the existing TB care package of services provided at primary healthcare facilities to increase TB case detection. Additionally, new approaches to reach targeted populations will also be implemented. For example, the OneImpact digital platform will be introduced to encourage people to use a self-screening tool and, when necessary, guide them to the closest available facility for TB diagnostics.

### *Community TB care delivery*

USAID pioneered a system of ACF and contact investigation among close contacts of all TB cases to ensure timely diagnosis and treatment initiation for potentially missed TB cases, including children. Based on the results of this pilot, an ACF algorithm was developed for national adoption and transferred to the NTP. In response to the continued demand for capacity building on ACF, USAID developed training courses for use by the

NTP and TB training hubs. Because of this capacity building, QuantiFERON®-TB tests and GeneXperts are currently used in targeted oblasts to improve TB case detection among close contacts.

Moving forward, USAID will continue to pilot and introduce new approaches to reach targeted populations and improve ACF. More specifically, activities will include:

- Scale-up of the OneImpact digital platform, implemented by an NGO that represents the community of people affected by TB, to encourage persons to use a self-screening tool and, when necessary, guide them to the closest available facility for TB diagnostics;
- Use of innovative multidisciplinary ACF action teams consisting of primary healthcare and TB providers, epidemiologists, infectious disease doctors, and NGO staff to implement ACF in two targeted regions; and
- Introduction of cascade methods for ACF monitoring to quantify the results of ACF for selected indexed TB cases and identify the size of a key population in a particular area, to effectively diagnose and initiate TB patients on treatment.

## CURE

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

Improving the provision of TB treatment and increasing the TSR is another priority for the NTP. To do this, the scale-up and full roll-out of patient-centered treatment models with a focus on effective ambulatory care models, including psychosocial support, will be needed. USAID has worked to strengthen the patient-centered, ambulatory care model for individuals with DR-TB and MDR-TB. As a result, there was great improvement in the TSR. Capitalizing and further building on this success, moving forward, USAID will help scale-up this patient-centered ambulatory care model and expand patient-centered approaches within medical and psychosocial services. By implementing this approach, adherence to treatment will be increased, which will prevent the development of DR-TB.

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

Continuing to improve the successful treatment of individuals with MDR-TB is an important priority for the NTP. To do this, the Government of Ukraine will need to ensure access to new TB drugs and novel shorter treatment regimens through the implementation of operational research and the procurement of those new drugs. USAID helped to develop and pilot a patient-centered care model for persons with DR-TB that enabled treatment closer to home, which greatly improved MDR-TB treatment outcomes. The development of clinical guidelines, on-the-job training and supervision, and an improved registry system also helped to improve the management of adverse drug events. Moving forward, USAID will continue supporting the scale-up of patient-centered ambulatory care models, including the provision of comprehensive psychosocial support services.

## **PREVENT**

### *Prevention*

Ukraine's strategy for prevention of TB cases focuses on: screening for active TB disease and infection (TBI); provision of TB preventive treatment (TPT) to key populations; systematic screening of active TB for all contacts; increasing general awareness about TB; and implementing novel approaches to infection prevention and control in healthcare facilities. USAID developed and piloted a contact investigation algorithm in targeted oblasts of Ukraine. As a result, TB case detection among close contacts of TB patients increased. USAID has also provided essential support at the national and oblast levels to develop and implement annual facility and oblast infection prevention and control plans, with focused attention on primary healthcare facilities and procurement of the essential supplies necessary for implementation.

Moving forward, USAID will help the NTP develop a TB prevention strategy and continue to scale-up ACF. In infection control, USAID will help develop and revise facility-based plans, develop a method for monitoring compliance with these plans, and improve screenings for TBI among staff at TB facilities.

## **SELF-RELIANCE**

### *Commitment and sustainability*

On November 27, 2019, the Cabinet of Ministers of Ukraine approved the State Strategy for HIV/AIDS, TB and Viral Hepatitis until 2030 and the State Strategy for Development of Anti-Tuberculosis Care for Population. These key strategic documents demonstrate the Government of Ukraine's continued commitment to improving and scaling-up TB control in Ukraine. USAID is similarly committed to helping the Government of Ukraine achieve its TB goals and is actively working with the MOH to finalize a Partnership Statement that will document and delineate these commitments. To further support Ukraine's journey to self-reliance and ownership of TB control activities, USAID will continue to share best practices and demonstrate how existing gaps in funding can be addressed through more efficient allocation of domestic resources while also working with local health authorities to prioritize and identify additional local funding to transition activities implemented by USAID.

### *Capacity and functioning systems*

To strengthen the supporting systems needed for effective TB care and prevention, Ukraine is focused on reorganizing TB facilities, implementing new mechanisms to finance TB interventions, strengthening the TB workforce, and ensuring equal rights to TB patients by helping address and reduce stigma and discrimination. USAID has significantly strengthened the capacity of TB and primary healthcare providers at the oblast level in DR-TB case management through training, on-the-job mentoring, and study tours. These capacity-building interventions enabled relevant health personnel to

increase their effectiveness in leading and managing TB programming efforts and case management; instilling the importance of innovation; and improving overall TB planning, mobilization, and development.

Moving forward, USAID will continue capacity building activities through training, counseling, supervision, and monitoring. Additionally, USAID will work to improve the capacity of the NTP to collaborate with the Central Procurement Agency to effectively plan, manage, and coordinate procurement of essential TB drugs. USAID will also provide TA and help build monitoring and evaluation (M&E) capacity at the NTP level through an embedded advisor.