Ukraine has tremendous resources and potential. Since gaining independence in 1991, the country has worked hard to rebuild and reinvent its health care system for the benefit of all its people.

PATH’s first foray into Ukraine was in 1994, helping the Ministry of Health to stop a diphtheria epidemic. More than two decades later, we are known in the country primarily for our capabilities and achievements in tuberculosis (TB) care and control. Our innovative approaches have resulted in dramatically improved TB case detection and treatment outcomes among key populations.

In all our work in Ukraine, we use a collaborative approach to build the capacity of local, oblast, and national health care experts and providers. Together, we strengthen the health care system—for sustainable results.
PATH has been providing technical assistance for Ukraine’s TB control efforts since 2001. In close collaboration with partners, we have implemented—and are currently expanding—the End TB strategy, recommended by the World Health Organization.

**Improving care for multidrug-resistant and extensively drug-resistant tuberculosis**

Ukraine suffers from high rates of multidrug-resistant tuberculosis (MDR-TB) and extensively drug-resistant tuberculosis (XDR-TB). To address these dangerous conditions, PATH leads the Challenge TB project in Ukraine. Funded by the US Agency for International Development, the project is improving MDR- and XDR-TB case outcomes through a patient-centered approach and introduction of innovations—for example, implementation of new TB drugs and shorter treatment regimens.

Through Challenge TB, we are improving TB service delivery at primary health care facilities to ensure proper outpatient case management, resulting in better treatment success and fewer hospitalizations. We are also improving infection control, resulting in fewer patient-to-provider transmissions.

For patients receiving outpatient care, our support strategies consider differences in local conditions and patient preferences, thus maximizing benefits and minimizing costs to both the patient and the health care system. By linking to other services, we foster a comprehensive approach and greater patient success.

**Crucial care for MDR-TB**

“It is so great to know that there are people who support us when we leave the hospital and stay with us... to help us overcome our problems and complete treatment. This is a very important and noble cause, and I am very grateful for this help.”

MDR-TB patient at homeless shelter in Mykolayivska Oblast, a PATH-supported region

Along with these enhancements, PATH is introducing new MDR- and XDR-TB drugs and drug regimens, strengthening laboratory diagnosis, and improving monitoring and evaluation.
We dedicate significant attention in our work to health system strengthening and human resource capacity-building. PATH’s expertise includes developing training curricula and implementing trainings of trainers and regular training courses for TB specialists, other infectious disease specialists, and family doctors.

In addition, PATH is assisting in the development of national and regional MDR- and XDR-TB policies and plans, participating in regional review meetings, developing guidelines on supervision, and conducting technical visits.

**Coordinating services for TB and HIV**

With funding from the US Centers for Disease Control and Prevention, PATH has been working since 2011 to improve the quality and accessibility of care for TB–HIV co-infection. By integrating diagnosis and treatment for both infections, the project is improving outcomes, reducing transmission, and saving lives.

Our multipronged strategy includes:

- Ensuring that people living with HIV/AIDS have access to effective TB diagnosis and treatment. Part of this work includes fostering collaboration and linkages between TB and HIV services and training health care providers to manage both diseases.
- Improving the quality of TB and HIV infection control in medical facilities and outpatient settings.
- Strengthening national- and oblast-level TB and HIV programs in surveillance and monitoring and evaluation.
- Enhancing reference laboratory services, including building the capacity of two oblast biosafety level 3 laboratories.
- Addressing policy barriers to effective services.
- Monitoring the quality of social services for vulnerable groups.

The project is expanding PATH’s role as the leading technical assistance partner in TB–HIV control in Ukraine.

**Innovation in treatment: Skype DOT**

TB–HIV patients in project-supported areas in Ukraine can select from several models of TB care. One is the traditional directly observed treatment (DOT)—with a twist: Skype. For patients with access to this technology, a trained nurse calls via Skype and, following a careful protocol, discusses the patient’s condition and observes the patient taking the proper medication. During pilot implementation of “Skype DOT,” there was not a single case of patient failure. This convenient approach garnered high satisfaction ratings among patients as well as health care providers. PATH plans to roll out the Skype DOT model to other areas.
Facing TB in detention centers

PATH has a long history of successful programming for at-risk groups. In the TB REACH project, we worked with the Ukrainian Detention System to ensure proper management of TB among prisoners and pretrial detainees—including early diagnosis with laboratory confirmation, early start on treatment, and support during the complete course of treatment.

During the project, TB case detection among detainees and prisoners increased tenfold, followed by initiation of appropriate treatment. Our approach is now being rolled out nationally.

PATH’s work has not only improved the capability of penitentiaries in Ukraine to detect and treat TB but also the attitude of providers in these settings, who have been empowered and inspired by our efforts.

OTHER AREAS OF CONCERN

Noncommunicable diseases (NCDs) such as cardiovascular disease are the leading cause of death in Ukraine. Recognizing the growing burden of NCDs in low- and middle-income countries worldwide, PATH established our NCD program in 2013. PATH in Ukraine is exploring opportunities to expand our reach in this important area.

From a health perspective, gender-based violence (GBV) is a significant factor. GBV influences the birth rate as well as the health and quality of life of women. Expectant mothers who have experienced violence in their lifetime face a higher risk of premature delivery. PATH has worked in GBV since the 1990s and is seeking to further this work in Ukraine.

THE WAY FORWARD

Innovation is a defining feature of PATH’s work in Ukraine. PATH is flexible and eager to explore new areas and make cutting-edge solutions available in routine care in the quickest, most thoughtful way possible. Our careful planning, technical expertise, dedication to quality, long-term approach, and commitment to overcoming barriers is what makes us different—and able to make a difference.

PATH in Ukraine will continue to focus on interventions that result in increased access to high-quality health services among vulnerable populations. As we integrate innovative strategies for these groups into the health system, we are strengthening care on multiple levels to ensure effective services for all.

Funders

Key funders of PATH’s work in Ukraine currently include the US Agency for International Development, US Centers for Disease Control and Prevention, and Stop TB Partnership.