



SUMMARY

In this publication, the authors aimed to analyze the barriers in access to HIV and tuberculosis (TB) treatment services, which refugees are facing in the host countries and describe the ways to address such barriers. From the very beginning, the project was planned and implemented with the engagement of community.

The study was a combination of a desk review with data collection and analysis using qualitative methods. The desk review included analysis of the specific approaches used to arrange health care for refugees in six host countries, which had been selected taking into account the differences in their health systems. In total, there were 68 interviews conducted both directly with service recipients — refugees from Ukraine in need of HIV and TB treatment services — and with health experts who helped to arrange health services remotely from Ukraine and those specialists who worked on providing social and medical support in the countries receiving Ukrainian refugees.

The interviews were dedicated to the mechanisms of service provision, patient pathways as well as the experience and prospects of transnational cooperation in improving access to HIV and TB counseling, treatment, and prevention. In addition to identifying the range of key actors engaged in the provision of services to refugees, this publication describes the best practices helping to create the conditions for HIV and TB prevention as well as uninterrupted access to ART and TB care.

Our study shows that refugees have access to HIV and TB treatment as well as testing and counseling in all the focus countries. The EU countries are implementing the temporary protection policy adopted by the European Commission, while Moldova and Georgia have approved special regulations granting free access to ART, TB treatment, counseling and testing to Ukrainian refugees. At the same time, the study allowed identifying a number of barriers associated with the lack of information and the language barrier as well as bureaucratic norms and regulatory restrictions in the host countries. There are certain differences in the lists of medicines and treatment regimens, in the way the systems to prevent infection diseases operate, and in the delivery of OST in Ukraine and in the host countries, which may affect the access and the adherence to treatment. The report separately focuses on the need to address stigma, the importance of regular psychological support, as well as the development of gender-sensitive approaches as the vast majority of war refugees are women, who bear an enormous burden of caring for their children and older relatives.

The report presents the examples of effective projects aimed at improving access to services and treatment involving formal and informal agents as well as government and civil society organizations that demonstrate the solidarity and openness of the host countries to refugees from Ukraine. This research study may contribute to preparing recommendations and defining the best practices in rolling out programs to provide treatment of socially significant diseases to refugees in the host countries.