

## AIHA Project Helps Ukraine Implement Effective Measures to Prevent Vertical Transmission of HIV

Skyrocketing rates of new HIV infections among women in their reproductive years is an ominous predictor of increased cases of HIV/AIDS among infants and children in Ukraine, Alla Scherbinskaya, head of the Ukrainian National AIDS Center (UNAC), told participants at a pediatric AIDS strategy meeting held in the nation's capital of Kiev on February 28.

"Ukraine is in dire need of effective methods of preventing pediatric HIV cases," Scherbinskaya said, explaining that women of childbearing age account for almost 42 percent of the nation's reported cases of HIV infection. "Our country is currently home to more than 10,000 children born to HIV-positive mothers and that number keeps growing. Integration of prevention services at all levels of care is the only effective solution to the problem and only the collective efforts of national and international stakeholders can bring us one step closer to our goal," she asserted.

The one-day event, which was hosted by the American International Health Alliance (AIHA), provided an opportunity to showcase the progress made during the first year of its USAID-funded project for the prevention of mother-to-child transmission (PMTCT) of HIV.

Together with the Ministry of Health, oblast health administrations and implementing partners in eight target oblasts, international donor organizations, and Ukrainian nongovernmental organizations (NGOs), AIHA is working to meet USAID's goals of providing comprehensive PMTCT services to 90 percent of all affected women in eight high-burden oblasts by 2008, as well as decreasing vertical transmission of HIV in the targeted oblasts over the course of the 30-month project.

Initially, the PMTCT project was launched in four oblasts—Cherkassy, Dnipropetrovsk, Kiev, and Nikolayev. Project Director Natalia Nizova explains how it was done: "As a result of baseline assessments and discussions with local stakeholders about how to improve PMTCT programs in target oblasts, we selected maternity houses as major PMTCT sites and allied them with



Tatiana Tarasova, head of UNICEF's PMTCT project; Alina Yurova, of USAID/Ukraine; and SUAEC trainers Natalie Moiseeva, Svetlana Shevchenko, and Yevgeniya Stepanuk listen to presentations on AIHA's PMTCT project in Ukraine. (Photo:Vira Illiash)

women's consultations, AIDS centers, and NGOs that serve HIV patients." The latter, she noted, are valuable partners because they can provide counseling and support services to HIV-positive mothers and their children, as well as assure early referral to comprehensive prenatal and post-delivery services.

Within a year, Nizova said, AIHA has laid a strong administrative foundation for project development in the pilot regions. Oblast health administrations passed orders about PMTCT project implementation and each oblast created a task force and developed PMTCT work plans endorsed by local health authorities. Policymakers from each region, along with core teams of specialists from each site, were trained in WHO protocols and guidelines as well as related national recommendations. They also participated in clinical skills-building training sessions hosted at the Southern Ukraine AIDS Education Center (SUAEC), a PMTCT center of excellence established by AIHA and its partners at the Odessa Oblast Clinical Hospital.

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—Alla Scherbinskaya,  
Head of the Ukrainian National  
AIDS Center.

To facilitate effective evaluation of quality improvement in PMTCT services at the pilot sites in the coming years, AIHA gathered baseline data on HIV-positive women and their infants delivered at the sites before project inception. AIHA also purchased necessary equipment and set up a PMTCT database at the AIDS Centers in the respective oblasts, providing related on-site training to its managers. The database system will help ensure continuous PMTCT data collection and analysis by tracking related procedures and interventions administered to HIV-positive pregnant women and their children throughout all levels of care.

During the meeting, pilot site representatives presented updates on HIV/AIDS prevalence and efforts to treat HIV-positive women in their regions. Most named similar factors that had contributed to improvements in outreach programs for this population during the previous year. Cooperation with NGOs had significantly increased awareness among HIV-positive pregnant women of how vertical transmission can be prevented. In turn, this made them more willing to undergo preventive therapy and seek appropriate prenatal care. Two other marked changes that were initiated thanks to AIHA's PMTCT project are the fact HIV-positive women who deliver at the replication sites are no longer kept in isolated wards and women with unknown HIV status receive timely antiretroviral prophylaxis during delivery.

According to the speakers, the project also helped identify a number of new problems. For example, a questionnaire administered by one Nikolayev NGO to HIV-positive pregnant women demonstrated that while 86 percent of these women were given antiretroviral drugs, 59 percent of that number did not adhere to the regimen. "This showed us that we need to pay much more attention to adherence and related issues," Nizova commented. And, because many of these women are injection drug users, she also stressed the importance of incorporating substance abuse clinics into the PMTCT programs.

According to results presented in the National Report on Declaration of Commitment on HIV/AIDS Implementation Interim Report: 01.2004 -12. 2005, only 14 percent of the young women questioned know all routes of HIV transmission. Explaining that the World Health Organization (WHO) recommended in 2005 that this figure should be roughly 95 percent, Nizova stated, "This demonstrates the vital necessity to educate our youth about HIV/AIDS prevention issues."



Representatives of PMTCT project replication sites join Tamara Irkina, of JSI/Ukraine; Olga Kovalenko, a specialist at the Ukrainian Ministry of Health's Department for Maternal and Child Healthcare; and Alla Scherbinskaya, head of the UNAC, at the February meeting in Kiev. (Photo: Vira Illiash)

Switching the discussion to clinical issues, Nizova expressed concern about the difficulty of broaching the subject of surgical delivery with HIV-positive women during labor. "Contrary to WHO recommendations, the Ukrainian Ministry of Health recommendations do not support Caesarean sections as a method of preventing vertical transmission," she said. Nevertheless, the procedure is highly effective, she noted, as evidenced by a recent study conducted at Odessa Oblast Clinical Hospital. "A cohort of more than 200 HIV-positive women delivered by C-section and the vertical transmission rate in

this group was close to 4 percent," she pointed out.

The speakers who reported on PMTCT project developments in their regions also emphasized some of the challenges they face, such as test system availability, irregular supply of antiretrovirals for post exposure prevention at maternity hospitals, and unstable supply of nevirapine for newborns as well as fact that the drug is packaged in dosages suitable for adults, not infants or children. Other challenges include limited access to PCR (polymerase chain reaction) tests for early diagnosis of HIV status of children born to HIV-positive mothers and

effective antenatal care, which can better ensure the timely initiation of antiretroviral therapy for women and their children.

"While AIHA can train qualified PMTCT specialists, other international organizations who attended the meeting, such as WHO, UNICEF, PATH, POLICY, Holt Int., and John Snow International can offer complementary programs and resources to satisfy needs of this population in Ukraine," Nizova said. At the same time, she acknowledged that Ukraine's pediatric HIV/AIDS problem cannot be solved by the efforts of international organizations alone. "Strong involvement of state organizations and the Ministry of Health in revising national legislation is needed to achieve desirable results," she stressed, noting that in the meantime

AIHA will be doing everything possible to ensure the steady progress of the PMTCT project, which has already entered phase two of the implementation process by launching the program in four other Ukrainian oblasts: Chernigov, Kherson, Odessa, and the Crimea. "The assessment visits were conducted, consensus with oblast stakeholders was created, the pilot sites and NGOs identified, and the PMTCT policymakers were trained at SUAEC," she reported.

At the conclusion of the meeting, all those present agreed to build a strong alliance in support of the project's goal of decreasing the rate of vertical transmission and reaching more women in need of PMTCT services. "This meeting provided an impetus for the advancement of the PMTCT project," Scherbinskaya concluded. "Our HIV problem will not be solved overnight and we are thankful to AIHA and other international organizations for supporting us in this critical moment."