Community-led humanitarian and HIV/TB interventions in the emergency response to the war in Ukraine

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Background

Community-led organizations in Ukraine play a significant role in the country's response to HIV and TB through provision of prevention services, linkages to ARV and opioid substitution treatment, and persistent efforts to remove human rights barriers such as stigma and discrimination that impede communities' access to services. Russia's February 24th invasion of Ukraine dramatically changed the operating environment for these organizations as conflict disrupted normal operations in large parts of the country and sent millions of Ukrainians fleeing for their lives.

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Description

Community-led organizations quickly adapted their operations to these new conditions. Embracing a "first-save-lives" approach, they used their deep connections in communities to evacuate members of key and vulnerable populations in areas of active combat to safety; organized temporary shelter and nutritional support; facilitated access to emergency medical services; and linked them to HIV, TB and drug treatment services in their new locations. These efforts were closely coordinated with and supported by the government, donors and other partners. As a result, key and vulnerable populations have been able to continue to receive HIV and TB services with limited disruptions despite the devastating impact of the conflict.

Lessons

Our preliminary analysis suggests that a number of key factors facilitated these community-led organizations' ability to respond rapidly. First, these groups generally tend to have light, horizontal organizational structures allowing them to quickly adapt to ever changing local circumstances. Their embeddedness in communities allows them to quickly pick up on changing needs. Second, the COVID-19 pandemic gave community-led organizations ample practice in adaptability as it forced numerous and substantial change to their operations. It also resulted in innovations such as simplified procedures for ART and substitution treatment, development of security protocols, and psychological interventions that have proven highly relevant during the conflict. Finally, the Global Fund, the main funder of community-led programs, quickly facilitated the reprogramming of activities allowing organizations to meet the evolving needs of their communities.

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Conclusions

Ukraine's experience may hold broader lessons for challenging operating environments. Community organizations can be an important resource in adapting the response to HIV and TB during armed conflicts and other major disruptive events.





