

# THE ROLE OF ACCESS TO PSYCHOSOCIAL SUPPORT SERVICES AT OPIOID AGONIST TREATMENT SITES IN REACHING THE 95-95-95 HIV CASCADE IN PEOPLE WHO INJECT DRUGS IN UKRAINE: COUNTRY-LEVEL DATA



**Authors:**  
Meteliuk A.<sup>1,2</sup>, Fomenko T.<sup>1</sup>, Savchenko K.<sup>1</sup>, Islam Z.<sup>1</sup>

<sup>1</sup> – International Charitable Foundation ‘Alliance for Public Health’, Kyiv, Ukraine  
<sup>2</sup> – Borys Grinchenko Kyiv University, Kyiv, Ukraine

## Background:

Opioid agonist therapies (OAT), an effective means to prevent HIV transmission among people who inject drugs (PWID), have been available in Ukraine since 2004. About half of OAT sites provide psychosocial support services (PSS) – case management, linkage to HIV care, targeted counseling, etc. The aim of this study was to assess the role of access to PSS at OAT sites in reaching the 95-95-95 HIV cascade in PWID in Ukraine.

## Methods:

For this study, data from the national registry of OAT patients (N=20,063 as of February 2023) managed by Alliance for Public Health (Kyiv, Ukraine) were analyzed. These data are quarterly collected from all 214 OAT sites countrywide. For the cascade, HIV-positive OAT patients (n=6,136) were stratified into two categories: those with PSS available at their OAT site (n=2,716) and those without access to PSS at their OAT site (n=3,420) for comparison.

## Results:

Most HIV-positive OAT patients in Ukraine are male (85.6%), and the mean age is 40.3 years old. The mean length of injecting before OAT is 17.2 years and the mean length on OAT is 4.2 years. All HIV-positive OAT clients are aware of their HIV status. The proportion of HIV-positive clients receiving ART was slightly higher at OAT sites with access to PSS compared to those without (97.4 vs. 95.2%, p=0.012); however, the distribution of viral suppression among those receiving ART across the strata were 83.4 and 67.2% for ‘with access to PSS’ vs. ‘no access to PSS’ respectively (p<0.001).

## Conclusions:

This analysis clearly demonstrates much better progress towards the 95-95-95 HIV cascade goals among those PWID who have access to PSS at their OAT sites compared to those without such access especially in terms of viral suppression. Thus, further efforts are needed to expand PWID’s access to PSS services within the OAT program as well as deeper analysis to explore the role of PSS in reaching viral suppression among PWID in Ukraine.

**Table 1. Demographic, drug treatment, and HIV treatment characteristics among opioid agonist treatment (OAT) patients in Ukraine (N=17,043)**

Characteristics	Access to psychosocial support services at OAT site	
	Yes (n=5,550)	No (n=11,493)
<b>Mean value</b>		
Age at the time of data collection (years)	36.6	37.9
Length of injection before OAT initiation (years)	21.7	14.1
Duration on OAT (years)	4.3	6.6
OAT drug dosing (mg)		
Methadone	112.2	104.3
Buprenorphine	10.0	10.0
Duration on ART (years)	8.2	7.5
<b>Percentage (n, %)</b>		
Gender		
Male	4473 (80.6)	10079 (87.7)
Female	1077 (19.4)	1414 (12.3)
OAT drug		
Buprenorphine	4962 (89.4)	9631 (83.8)
Methadone	588 (10.6)	1862 (16.2)
Form of OAT receipt		
Daily at OAT site	820 (14.8)	3574 (31.1)
Take-home dosing	4199 (75.7)	6540 (56.9)
By prescription at pharmacy	77 (1.4)	207 (1.8)
At home (hospice care)	454 (8.2)	1172 (10.2)
HIV-positive status		
Yes	2403 (43.3)	3599 (31.3)
No	3147 (57.7)	7894 (68.7)

**HIV Cascade of care among OAT patients (N=17,043) as of January 1, 2023**

