

Closing HepHIV2026 Dublin Conference

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Best Poster Award HepHIV 2026 Dublin

The best poster is awarded with conference registration, travel and accommodation for the next EuroTEST event



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PO4/08 Women and HIV PrEP in Ukraine: Expanding Access Beyond Traditional Key Populations

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HepHIV 2026 2-3 NOVEMBER·DUBLIN

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WOMEN AND HIV PREP IN UKRAINE: EXPANDING ACCESS BEYOND TRADITIONAL KEY POPULATIONS

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OBJECTIVES

To describe national trends in HIV pre-exposure prophylaxis (PrEP) uptake among women in Ukraine between 2023 and 2025 and to characterize PrEP utilization by age, pregnancy and breastfeeding status, and HIV exposure categories.

METHODS

A retrospective descriptive analysis of routine national PrEP programme data collected between 2023 and 2025 was conducted.

The national PrEP programme is coordinated by the Public Health Center of the Ministry of Health of Ukraine and implemented through approximately 300 healthcare facilities providing HIV services nationwide.

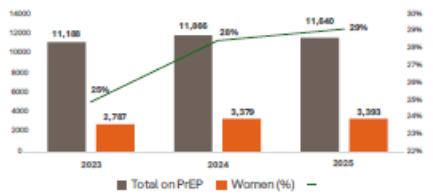
All individuals initiating PrEP received daily oral tenofovir disoproxil fumarate/emtricitabine (TDF/FTC) according to the national standard regimen.

Programme monitoring data were analysed to assess trends in PrEP uptake among women, age distribution, pregnancy and breastfeeding status, and HIV exposure categories.

RESULTS

- The total number of PrEP users in Ukraine remained stable during 2023–2025 (11,188–11,640 annually). During the same period, the number of women receiving PrEP increased from 2,787 to 3,393, and their proportion among all PrEP users rose from 25% to 29%.
- In 2025, most women receiving PrEP were aged 25–49 years (2,484), followed by women aged ≥50 years (707), indicating increasing PrEP uptake beyond younger age groups. PrEP was also provided to pregnant women (n=8) and breastfeeding women (n=12), demonstrating implementation of HIV prevention across different reproductive stages.
- The largest subgroup of women receiving PrEP consisted of women in serodiscordant partnerships (n=1,785), followed by women reporting heterosexual HIV exposure (n=848). Female sex workers (n=339), women who inject drugs (n=376) and transgender women (n=38) represented smaller but important groups reached through the national programme.

Share of women among PrEP users, Ukraine (2023-2025)



Age distribution of women receiving PrEP, Ukraine 2025



CONCLUSIONS

National programme data demonstrate increasing uptake of PrEP among women in Ukraine despite stable overall programme coverage. The growing proportion of women receiving PrEP, including women outside traditionally targeted populations and across different reproductive stages, highlights progress towards more inclusive HIV prevention. Continued expansion of women-centred PrEP services and differentiated service delivery models will be essential to improve equitable access and sustain HIV prevention in humanitarian settings.



HepHIV 2026 Call to Action

DRAFT

Dublin | 2–3 November 2026

DRAFT HepHIV 2026 Conference Call to Action

HepHIV 2026 by EuroTEST 2-3 NOVEMBER·DUBLIN

We, the participants of the HepHIV 2026 conference, call on all governments, civil society organisations, health care providers and other local and European stakeholders to work together toward the 2030 Sustainable Development Goals for HIV, viral hepatitis, sexually transmitted infections (STIs) and tuberculosis (TB) and beyond by implementing the following actions:

Explore and leverage the **opportunities** to keep testing and linkage to care for HIV, viral hepatitis, TB and STIs on the agenda in a continued challenging political and financial environment

Including:

Opportunity 1 : Testing in emergency departments

- Help close the testing gap by implementing innovative approaches such as opt-out testing in emergency departments
- Simplify consent procedures to support the normalisation of testing for BBV in health care settings - opt-out testing is incompatible with the requirement of written consent and is widely accepted in antenatal care and should be extended
- Attempt to unify consent requirements for BBV testing throughout Europe
- Embed community organisations in care pathways and support services, and as fundamental partners in making the case for, and driving the acceptance of ED opt-out testing - peer support is an important part of post diagnosis support as no one expects walking out of the ED with a BBV diagnosis
- Ensure political and programmatic leadership at hospital level, develop support frameworks, and foster partnership from ED staff, including laboratory services, to ensure it reflects the realities of everyday practice

Opportunity 2 – Intensify integration

- Avoid single disease siloes to facilitate achievement of all SDG targets
- Use existing ressources more effectively by integrating testing services across diseases in both community and healthcare settings (evidence of cost-effectiveness compared to only testing for ie HIV)
- *The time of doing only one thing is gone – we have to make every opportunity*
- Make stigma interventions an integral part of testing programmes and linkage to care support services
- Explore new testing settings (e.g. pharmacies, libraries, language schools and other trusted institutions) and approaches (e.g. network-based testing and integration in other health services) to reach underserved populations

Opportunity 3 – Reaching migrants and other underserved populations

- Acknowledge that migrant populations are disproportionately affected by HIV, viral hepatitis, TB and STIs and often have cross-cutting vulnerabilities
- Design your services acknowledging that *"people aren't necessarily hard to reach, sometimes it is our services that are difficult to access"* and remembering that *"trust is a social determinant of health"*
- Intensify efforts to design cultural competent prevention, testing and care services for migrant populations
- Strenghten and empower community-led services and peer-to-peer support

Opportunity 4 – Cancer prevention agenda

- Leverage infectious disease prevention, testing and early linkage to care to achieve cancer prevention goals
- Use the potential of vaccination services (HBV and HPV) to integrate testing for other infectious disease
- Collaborate across infectious diseases and non-communicable diseases stakeholders to improve health outcomes
- Increase the understanding of the synergies between the diseases and changes in epidemic patterns (when and in which way prevention and testing services should be scaled up or down)

Opportunity 5 – Focus on Eastern Europe and Central Asia

- Strengthen European collaboration, recognising that *pathogens don't respect borders* and targets will not be reached and sustained in isolation
- Build partnerships and ensure the development of knowledge transfer frameworks to transfer lessons learned and promote best practices
- Ensure sustainability of political support and national funding

Opportunity 6 – Learn from failures

- Document, present, discuss and learn from failures
- Aknowledge limitations and understand implications of the project and programme results for future planning
- Use failed experiences to improve prospective interventions

Opportunity 7 – Collaboration

We are here for the same cause – the current political and financial environment in Europe and globally is not on our side, which makes working in partnerships more important than ever

A reminder:
EuroTEST is a network, not an organisation
We can support providing evidence and bringing stakeholders together

We take note of the many good ideas of doing country meetings and joint policy statements

Process

1

The DRAFT Call for Action will be shared with all conference participants and partners for review and comments

2

Then submitted for publication in a journal

Next EuroTEST events?

EuroTEST
Working together for integrated testing and earlier care
Addressing Hepatitis, HIV, STIs and TB

HepHIV 2026 by EuroTEST
2-3 NOVEMBER · DUBLIN

Upcoming EuroTEST events will be aligned with EU-presidencies

23-30 NOVEMBER EUROPEAN TESTING WEEK www.testingweek.eu 2026

Shield
Co-funded by the European Union

2027

First half

Lithuania

Second half

Greece

2028

First half

Italy

Second half

Latvia

2029

First half

Luxembourg

Second half

Netherlands

HepHIV 2026
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2-3 NOVEMBER·DUBLIN

Help us shape what comes next – share your ideas

HepHIV: format and content

EuroTEST: focus moving forward

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Thank you

and safe travels

200 participants from **26** countries

Stay in touch: **eurotest.rigshospitalet@regionh.dk**