

Tuberculosis and the War in Ukraine: The Impact of Hostilities on People and Communities Affected by Tuberculosis

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Before the start of full-scale Russian aggression in 2022, Ukraine had made significant progress in the fight against tuberculosis (TB). The recently reformed TB service provided essential services aimed at effective treatment and support for TB patients. The next step in the reform was planned to be the public procurement of social services for TB patients, but the war put these efforts at risk, causing a medical and humanitarian crisis. The Ministry of Health of Ukraine, the Public Health Center of the Ministry of Health of Ukraine, the National Health Service of Ukraine, and representatives of the public sector had to face new challenges: interruption of treatment for most patients and the possible collapse of the medical system. This article examines how the phthisiatric service stabilized operations during the war and the role civil society played.

TB Prevention and Treatment Services Before the War

Before the war, Ukraine had a developed system of TB prevention and treatment. People with TB could count on timely medical assistance at their place of residence, which included the following components:

The Right to Choose a Medical Institution for Treatment

Patients had the right to choose a medical institution from a list of institutions contracted by the National Health Service, which improved the availability and efficiency of treatment. This choice helped create more comfortable conditions for patients, enhancing their motivation and access to necessary medical services.

Availability of Outpatient Treatment

Outpatient treatment for TB was available throughout Ukraine, allowing patients to receive treatment without a long hospital stay. This reduced the burden on hospitals and improved the quality of life for people with TB, especially those with family or work responsibilities.

Social Support

Social support services, including psychological support, help with living arrangements, and counseling, were provided to all

TB patients. This support helped patients overcome difficulties related to treatment and contributed to their social inclusion.

Availability of Legal Services as Needed

Legal support for TB patients was provided by public organizations and state centers of free assistance, helping solve various issues, including protecting patients' rights and advising on legal aspects of access to medical services.

Political Commitment and Standardization of Services

Ukraine had political commitments to combat TB, reflected in its legislation. Standards for TB services ensured a unified approach to diagnosis, treatment, and prevention, crucial for maintaining quality and efficiency in healthcare.

The Impact of War on the TB Situation

The war caused large-scale destruction of medical facilities, evacuation of medical personnel, and population migration. This created significant obstacles to TB treatment, such as:

Migration and Loss of Documents by Patients

Internal and external migration, loss of housing, and documents have been major barriers to TB treatment. Many people were forced to move, making access to healthcare difficult, and loss of documents complicated patient identification, leading to treatment interruptions.

Decreasing Quality of Services

The quality of outpatient treatment deteriorated, especially in frontline areas where medical facilities were often under shelling. Medical personnel evacuations reduced the number of specialists available. Patients in frontline areas often could not reach medical facilities due to the danger or lack of transport infrastructure.

Deterioration of the Material Condition of the Population

The war worsened the material condition of many people, especially those already in poverty. Job and income losses reduced

the ability to cover medical and transportation costs, increasing reliance on international aid projects.

Growing Stigma and Discrimination

War and migration increased stigma and discrimination against TB patients, who often faced mistrust and prejudice. This made social integration and access to services difficult, particularly for internally displaced persons.

Declining Political Interest in TB

War priorities led to a decline in political interest in TB control. Focus shifted to military and security issues, sidelining health concerns and hindering new legislative initiatives and standard implementations for TB treatment.

Improving the Provision of TB Services During the War

Despite the war, efforts by the Ukrainian army, international donors, and partners, along with the public sector, TB community, and state institutions, have helped control the situation and continue reforms. Key actions included:

Setting Forwarding Algorithms

Referral algorithms were adjusted to ensure continuity of medical and social services, including coordination between institutions, organizations, and volunteers for delivering medicines and food to affected areas and evacuating patients from dangerous zones.

Continuation of Work Despite Difficult Conditions

Medical workers, social workers, and volunteers continued their duties under extreme conditions, often risking their lives.

Despite resource shortages, shelling, and constant stress, they demonstrated professionalism and dedication.

Accumulation and Application of New Experience

New challenges, such as destroyed hospitals and large-scale migration, required quick organization of field hospitals and mobile medical aid teams. Psychological support for both patients and medical personnel became crucial.

Search for Humanitarian Resources

The need for humanitarian resources, including medicine, food, hygiene products, clothing, and financial assistance, increased. Special attention was given to vulnerable groups like children, the elderly, and disabled persons. Humanitarian organizations and volunteers actively worked to distribute these resources.

Advocacy Despite the War

Advocacy work, led by the patient organization TBPeopleUkraine with NGO support, continued. Providing paralegal assistance, protecting citizens' rights, and supporting people who lost documents or faced discrimination were key activities. Lawyers also documented war crimes for international courts.

Conclusion

Russia's military aggression created new challenges for TB control, complicating the plan to end TB by 2030. However, through the joint efforts of medical workers, volunteers, humanitarian organizations, and human rights defenders, continuity of medical services and support for TB patients have been maintained. Despite difficult conditions, Ukraine's healthcare system continues to function and adapt, demonstrating resilience and dedication.