PUBLIC HEALTH ISSUES IN UKRAINE

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PUBLIC HEALTH CONFERENCE
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OUTLINE

• Ukraine health crisis
• Exploring pathways to Equity in Health Reform: the Case Study of Ukraine
  • Effectiveness of Public Health System (Programmes/Policies) in Combating Severe Population Health Crisis in Ukraine
• Lviv School of Public Health
A ‘POPULATION HEALTH CRISIS’

• Political and economic transitions affect health & the health care system
• As a middle-income country, there are unique distinctions:
  - Internationally recognized population health crisis
  - High demographic decline
  - Life expectancy 9 years < EU citizens;
  - >10 yr gap between men and women
  - Weak health care system
  - Ineffective health reform
  - Inadequate education/training for health professionals, policy actors and decision makers
HUMANITARIAN CRISIS

Military conflict in the East of Ukraine resulted in:

• 1.5 mln internally displaced individuals
• 8,000 casualties, mostly civilians
• People left without safe drinking water or access to health care facilities
• Inability to treat patients with chronic and infectious diseases
• Crisis in blood safety and administering opioid substitution and TB treatment
• Post-traumatic stress disorder
David Stern’s documentary “The Death of Ukraine”:

- Fertility rates below the population replacement rate
- Outmigration of younger generation
- High male mortality rates

Lack of recognition and appropriate government strategy
EXPLORING PATHWAYS TO EQUITY IN HEALTH REFORM: A CASE STUDY OF UKRAINE

International Team:

• T. Andreeva, Kyiv-Mohyla U, Ukraine
• W. Cockerham, U of Alabama at Birmingham
• A. Vorobyova, SFU
• N. Salnykova, UBC/Kyiv-Mohyla U
• S. Rouhani, U of Ottawa

Funder: Canadian Institutes of Health Research

• WHO –Ukraine
• Ministry of Health Ukraine
GOALS

1) To conduct an in-depth mixed methods analysis of the differential effects and experiences of the health crisis

2) To generate evidence that will inform the development of strategies to reduce inequitable health outcomes
COMMUNITY CONSULTATIONS

To further explore systemic and structural mechanisms, pathways, and risk factors perpetuating health inequities

• Conducted in Summer 2012
• 21 community consultations with over 800 citizens
• 11 representative regions of Ukraine’s demographics and geography: Autonomous Republic of Crimea, Cherkasy, Dnipropetrovsk, Donetsk, Kherson, Kyiv, Lviv, Sumy, Zaporizhia, Vinnytsia, and Zhytomyr
METHODOLOGY

• The consultations targeted consumers, health service providers, and local government representatives, held in an equal mix of rural and urban settings

• Advertisement by invitation and public advertisement (facilitated by local NGOs), and targeted diverse populations especially people from marginalized and vulnerable groups

• Each forum was attended by 35-50 persons of diverse ages and occupations

• 2/3 participants were female
COMMUNITY CONSULTATIONS
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BARRIERS IN ACCESSING HEALTHCARE

- Financial
- Unprofessional doctors
- Lack of trust in doctors
- Lack of medication and equipment in medical facilities
- Corruption in medical facilities
- Expensive and poor quality medication
How would you describe the health of people in your community?

- **Overall evaluation:**
  - Unsatisfactory, poor
  - Tendency of general decline

- **Regional differences:**

  Residents of the more industrial regions (Donetsk and Dnipropetrovsk) gave a “worse than in other regions” evaluation of their health.
QUALITY OF LIFE: DETERMINANTS

- Environment
- Political Instability
- Economic Hardship
- Geography: Rural/Urban divide
QUALITY OF LIFE

“Are there reasons to smile? People are so unsure about what will happen tomorrow that they have no reasons to smile. And this instability, uncertainty affects our health” (participant from Dzankoj)

“... there are too many people who are depressed because of the general situation in the country, especially elderly people, they have no faith in tomorrow, no confidence in how they will live tomorrow” (participant from Sumy)

“....all illnesses are starting because of stress – this is our problem because we have no assurance in the days to come, we have no certainty, and we are constantly worried about our lives. All these negative emotions make us sick” (participant from village of Okhrimivka)
KEY FINDINGS SUMMARY

• Interactions of age, region, urban/rural location, ethnicity, SES, gender

• Structural effects of economic crisis, political instability and corruption

• Citizens understand and want to take action on social determinants of health

• Not much faith in government reform or system changes

• Special concern about the health of children and future prospects of youth
FEASIBILITY STUDY “EFFECTIVENESS OF PUBLIC HEALTH SYSTEM (PROGRAMMES/POLICIES) IN COMBATING SEVERE POPULATION HEALTH CRISIS IN UKRAINE”

Principal research question: To what extent is it possible (and practically feasible) to evaluate Ukraine’s national and local public health programmes/policies, and how should this be done

• Implementation: University of Kent and Kyiv Economic Institute at the Kyiv School of Economics

• Funding: MRC/Wellcome Trust/UKAid International Health System Initiative
RESEARCH TEAM

- Centre for Health Services Studies at University of Kent and Kyiv Economic Institute at the Kyiv School of Economics (Stephen Peckham, Olena Nizalova, Erica Gadsby, researchers Natalia Shapoval, Vadym Bizyaev, Kateryna Russkh, Oleksandra Betliy, Anna Kvit, Tatiana Andreeva, Anastasiya Salnykova)

- Centre for Public Policy & Health (Durham University) – WHO Collaborating Centre on Complex Health Systems Research, Knowledge and Action (David Hunter)

- Simon Fraser University, School of Public Policy (Olena Hankivsky)
FULL SCALE STUDY “EFFECTIVENESS OF PUBLIC HEALTH SYSTEM IN SEVERE POPULATION HEALTH CRISIS”

It will address:

• Effectiveness of the past PH programmes and policies overall, and particularly in addressing rural/urban, female/male health inequalities

• What are the main factors of success/failure of the programs and policies in Ukraine

• What are the critical features of design and implementation of new PH programmes/policies to be accepted by population and stakeholders
The UCU Senate approved the one-year graduate program of public health
RATIONALE:

- Health crisis
- Health care reforms
- Lack of qualified public health professionals (recent polio outbreak)
POLIO OUTBREAK

• 2 instances of children contracting vaccine-derived polio in Zakarpattia oblast

• Immunization rates are only 14.1% for infants and 49% for children over 1 year

• First cases of polio in Europe since 2010

• Shortages of vaccines in Ukraine due to financial crisis and unclear procurement schemes

• Politics and conflicting information involved in a public health issue
VACCINATION SUMMIT

• Kyiv, December 2, 2015 – vaccination summit “Public Policy of Vaccination in Ukraine: Analysis of the Problem and Ways to Improve”

• Participants: Ministry of Health, WHO-Ukraine, UNICEF, Ministry of Education, NGOs

• Topics discussed: procurement of vaccines, changes to the immunization calendar, informing the population, ethical and legal issues

• The need to develop a State Strategy of Vaccination for Ukraine
“Political leaders [in the post-soviet countries] are often not cognizant of the importance of social determinants of health when considering policy and are often reluctant to use a Health in All Policies approach.” (WHO-Europe expert Rechel, 2014)
RATIONALE

Policy developments:

• EU-Ukraine Association Agreement: Chapter 22 public health reforms
• Policy framework for Europe Health 2020
• National Health System Reform Strategy for Ukraine 2015-2020
• Establishment of the Center for Public Health at the Ministry of Health of Ukraine (September 2015)

*Implementation of these will require public health professionals*
Public health prioritizes health of a population as a whole
Prevention of disease and injury, addressing health inequities (specific focus on marginalized and vulnerable groups)

How?
PUBLIC HEALTH

• Evidence-based research
• Health promotion
• Promote health in all policies
• Information for public & professionals
• Preparation for natural disasters, epidemics
• Understanding social determinants of health
PUBLIC HEALTH SCHOOLS IN THE POST-SOVIET COUNTRIES

• Kyiv-Mohyla School of Public Health Management (Kyiv, Ukraine)
• International School of Public Health (Tbilisi, Georgia)
• The Arkhanglesk International School of Public Health (Arkhangelsk, Russia)
• Faculty of Physical Activity and Public Health (Kaunas, Lithuania)
• Kazakhstan Ministry of Health School of Public Health (Almaty, Kazakhstan)
• School of Public Health (Kishineu, Moldova)
WHY A LVIV-BASED SCHOOL OF PUBLIC HEALTH?

• Situated at a private autonomous institution

• Regional centre for the Western Ukraine, in close proximity to potential European partners/collaborators

• Build on the new BA program in Sociology with a focus on public health

• Established research initiatives on mental health and bioethics
ACCREDITATION

• The program will aim to be accredited by the Agency for Accreditation of Public Health Education in the European Region (APHEA) which is the accreditation body of the Association of Schools of Public Health in the European Region (ASPHER)

• This will ensure credibility and potential recruitment of students from other countries; it will facilitate ease of faculty and student exchanges
1 YEAR MODULE-BASED PROGRAM

• Modelled after London School of Hygiene and Tropical Medicine curriculum

• Modules on development and evaluation of conceptual models, evidence and methods of analysis, and on effective interventions

• Supervised research project which focuses on a public health question of priority in Ukraine

• Allows for greater flexibility for students who can only take one year off work or who seek intense time limited education

• Target BA graduates of any degree, practising health and policy professionals
1st TERM COURSES:

- Issues in Public Health
- Basic Epidemiology
- Basic Statistics
- Health Economics
- Principles of Social Research
- Health Policy, Process, and Power
2^{ND} AND 3^{RD} TERM COURSES

• Health Promotion Approaches and Methods
• Ethics, Public Health, and Human Rights
• Health Systems
• Conflict and Health
• Drug, Alcohol, and Tobacco
• Design and Evaluation of Mental Health Programs
POTENTIAL RESEARCH CLUSTERS:

• Mental Health
• Healthy Aging
• Social Determinants of Health
• Rural Health
• Telehealth
• Environmental Health
POTENTIAL INTERNATIONAL PARTNERS:

- London School of Hygiene and Tropical Medicine (UK)
- Swiss Tropical and Public Health Institute (Switzerland)
- Catholic University of Portugal (Portugal)
- Kent University (UK)
- Simon Fraser University (Vancouver, Canada)
- University of Illinois (Chicago, the USA)
- Canadian Centre on Disability Studies (Winnipeg, Canada)
POTENTIAL FUNDING SOURCES:

• Erasmus +
• HORIZON 2020 and European Research Council
• Medical Research Council (the UK)
• The Wellcome Trust (UK)
• Various Foundations: (e.g. Bill & Melinda Gates, Open Society Foundation)
• Corporate Funding of Research Clusters and Research Chairs
• Private fundraising efforts in Ukrainian diaspora
NEXT STEPS:

• Development of the national advisory group, national and international educational and research partners

• Identify all national & local partners, their roles and responsibilities – coordinate local health-related efforts in Lviv region

• Develop curriculum with identified faculty (in Lviv and internationally for initial team teaching and capacity building)
NEXT STEPS:

• Finalize research priorities and clusters
• Develop budget, seek and secure funding
• Public lecture of Professor Ricardo Baptista (Catholic University of Portugal)
• Seeking accreditation with APHEA
• Recruitment of students (for September 2016 or January 2017)
Public lecture at the home of Canadian Ambassador Hon. Roman Waschuk

Kyiv, Ukraine
October 13, 2015
Launch of the LSPH fundraising campaign
Vancouver, BC
November 15, 2015