



EXPERIENCES FROM THE FIELD

UNIVERSAL HEALTH COVERAGE: THE CASE OF UKRAINE

The focus on universal health coverage is relevant not only to limited-resource countries, but also to those affected by conflict, which erodes national health systems. A prime example is Ukraine, where the ongoing war has made continuity of care, especially for noncommunicable diseases, increasingly difficult. While CUAMM's long-term focus is on Africa, we are also addressing this health crisis at Europe's doorstep.

TEXT BY / ANDREA ATZORI / DOCTORS WITH AFRICA CUAMM

THE IMPACT OF CONFLICT AND WAR ON HEALTH SYSTEMS

Universal health coverage (UHC) is a global goal promoted by the World Health Organization (WHO), aiming to ensure that all individuals can access essential health services without facing financial hardship. In conflict zones, where access to care is severely disrupted, achieving this goal becomes even more challenging. Ukraine, embroiled in a brutal conflict since 2022, is a prime example. The country's healthcare system has come under immense strain, with millions of people experiencing reduced or interrupted access to essential services, including the management of NCDs.

In conflict settings such as the ongoing war in Ukraine, implementing UHC presents enormous challenges, with attacks on health infrastructure, the destruction of hospitals and clinics, and the shortage of medical resources exacerbating already critical situations. Forced to work under extremely difficult conditions and often to flee their place of work to avoid danger, health personnel in conflict zones become overwhelmed; this too severely limits a health system's capacity to meet its population's needs.

A COUNTRY IN (A HEALTH) CRISIS

Before the conflict began, Ukraine had introduced health reforms to improve access to services and the management of noncommunicable diseases (NCDs). However, the war has reversed much of this progress, and the WHO estimates that some 15 million people in the country are now in need of healthcare. The situation is particularly dire for patients with NCDs such as diabetes, hypertension, asthma and cardiovascular disease, which necessitate regular check-ups, medication and monitoring. As healthcare systems grapple with the chaos of conflict, their care is frequently overlooked as resources are shifted to address more

immediate crises, like treating the wounded or controlling epidemics. Such discontinuity of care and disruptions in the supply of essential medicines put these patients' lives at significant risk. Doctors with Africa CUAMM, which has extensive experience in addressing health crises in vulnerable contexts, has shown that it is possible to develop care models that address both immediate and long-term needs. Part of our work involves close cooperation with local governments and international agencies to help rebuild health systems. In Ukraine, our focus is on restoring essential drug supply chains and enabling access to diagnostic and monitoring services, both key components in the effective management of NCDs.

THE DOMINO EFFECT OF DISRUPTED CARE

The war in Ukraine has disrupted the supply of essential drugs for the treatment of NCDs such as diabetes and hypertension. Many patients have been forced to rely on suboptimal therapies, often dependent on donated medicines. Cancer treatments have also been significantly affected, with direct consequences for patient survival. Reduced access to diagnostic and monitoring services has created a "domino effect", whereby the dearth of preventive care leads to a rise in severe cases requiring advanced treatments, which are often unavailable, which leads in turn to higher mortality.

Addressing chronic diseases in conflict settings like Ukraine demands an integrated, multi-level approach involving the strengthening of hospitals and health centers as well as the empowerment of communities and families to manage chronic conditions both during and in the aftermath of crises. Achieving UHC in such settings is a daunting challenge; but much depends on a country's ability to utilize emergency resources to reinstate routine healthcare programs as quickly as possible, thus ensuring continuity of care for all – especially those with NCDs.