



General Information & Methodology

- Part of the wider Health Assessment in Ukraine, coordinated by the Health Cluster
- 1600 individual phone interviews
- Whole Donetsk and Luhansk GCA covered: 4 strata – Donetska Urban, Donetska Rural, Luhanska Urban, Luhanska Rural
- Questionnaire developed in cooperation with the Health Cluster to gather data that fills information gaps

*graphs may contain rounded numbers





Research questions

- How do residents of Luhansk and Donetsk GCA <u>perceive their health</u> <u>status and related risk factors?</u>
- How do residents of Luhansk and Donetsk GCA <u>view their access to</u> <u>health care?</u>
- How do residents of Luhansk and Donetsk GCA <u>percieve health services?</u>

HPA Timeline

February-March 2021 April 2021 May-June 2021







PREPARATION

DATA COLLECTION

DATA ANALYSIS







Key Findings

- 1. COVID-19 pandemic appears to have had an impact on people's attitude towards their own health and perceived level of access to healthcare
- 2. Lack of financial resources remain a barrier to respondents' access to healthcare
- 3. Lack of trust among the respondents towards the healthcare system and doctors is noticeably high



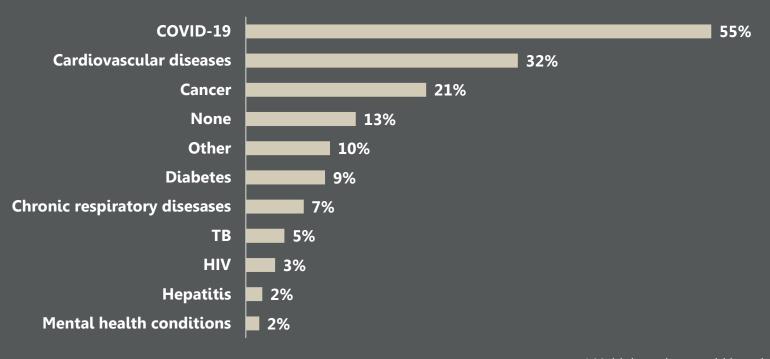
Selected Findings

1. Health Status Perceptions: concerns, changes, affecting factors





Health issues/diseases reported* as most serious for respondents at the time of interview or in the nearest future



* Multiple options could be selected





Health-related problems reported* as most relevant in respondents' area of residence

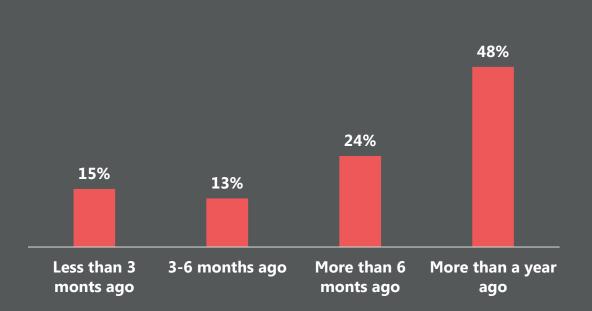
| | Overall | Donetska Rural | Donetska Urban | Luhanska Rural | Luhanska Urban |
|--|---------|-------------------|-------------------|-------------------|-------------------|
| Air pollution | 50% | 35% | 58% | 23% | 35% |
| Water pollution | 38% | 30% | 45% | 17% | 28% |
| Economic situation/living conditions | 32% | 31% | 34% | 31% | 37% |
| Infectious diseases (including COVID-19) | 32% | 34% | 35% | 28% | 31% |
| Social environment | 18% | 16% | 20% | 22% | 25% |
| Threats to physical safety (conflict related, road accidents, criminals) | 15% | 16% | 16% | 12% | 21% |
| Healthcare system not efficient | 14% | 15% | 13% | 15% | 13% |
| Don't know/refuse to answer | 7% | 13% | 4% | 16% | 5% |
| Work conditions | 5% | 3% | 5% | 4% | 7% |
| Weather | 5% | 9% | 4% | 11% | 6% |

^{*} Multiple options could be selected

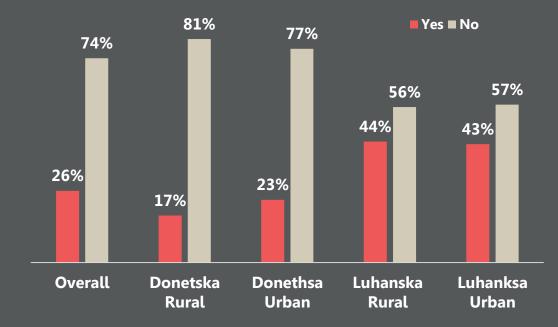




Reported period for the most recent medical check-up



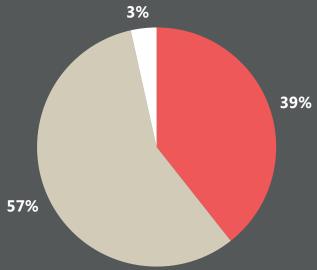
Among those, who reported having medical check-up more than a year ago, proportion of respondents who reported that the delay was related to the COVID-19 pandemic





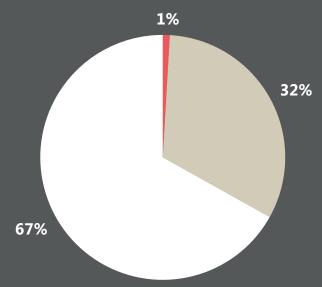


Proportion of respondents reporting frequency of seeing primary doctors compared to pre-COVID-19 pandemic time



- **■** Less than before Covid-19 pandemic
- **■** Same
- More than before Covid-19 pandemic

Proportion of respondents reporting being cautious about their health compared to pre-COVID-19 pandemic time



- **■** Less than before Covid-19 pandemic
- Same
- More than before Covid-19 pandemic





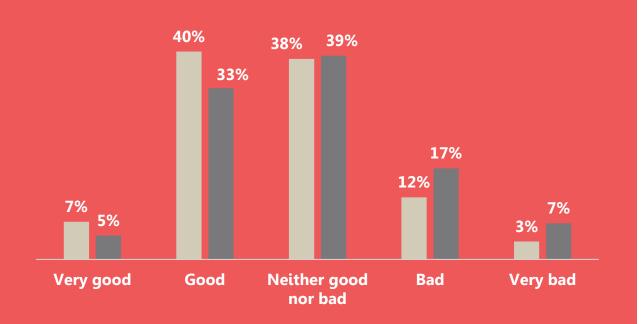


Selected Findings

2. Access to Healthcare Perceptions: availability, proximity, affordability and trust

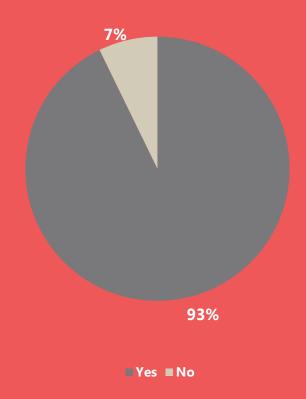


Reported level of access to healthcare at the time of interview and before the COVID-19 pandemic



■ Before Covid-19 **■** Now

Proportion of respondents who reported having a family doctor





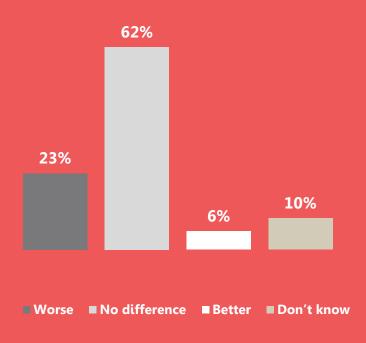


Reported time needed, on average, to make an appointment with a doctor of preference, in the last 12 months before interview





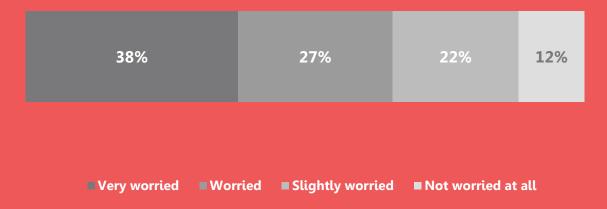
Reported change of this time compared to pre-COVID-19 pandemic



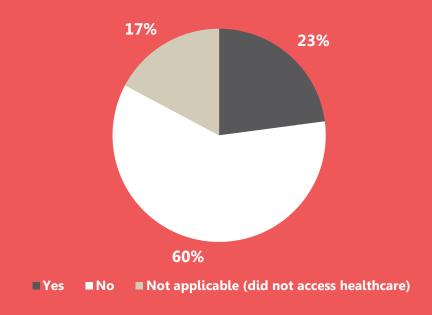




Proportion of respondents reporting being worried about not being able to afford health services when they are needed



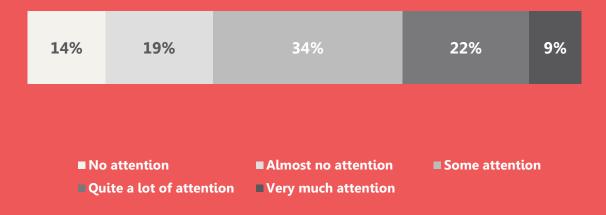
Proportion of respondents reporting not taking laboratory tests because of their costs, in the past 12 months before interview



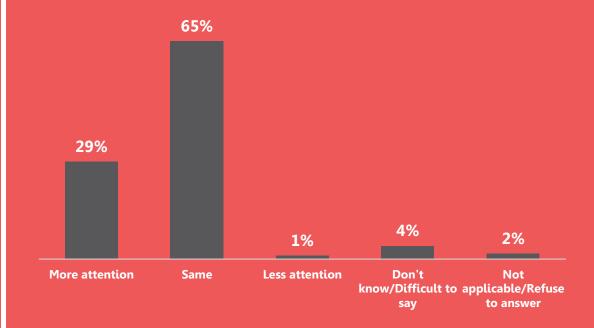




Reported amount of attention paid by respondents to states like low mood, anxiety, stress, sleeping problems while assessing their general health status



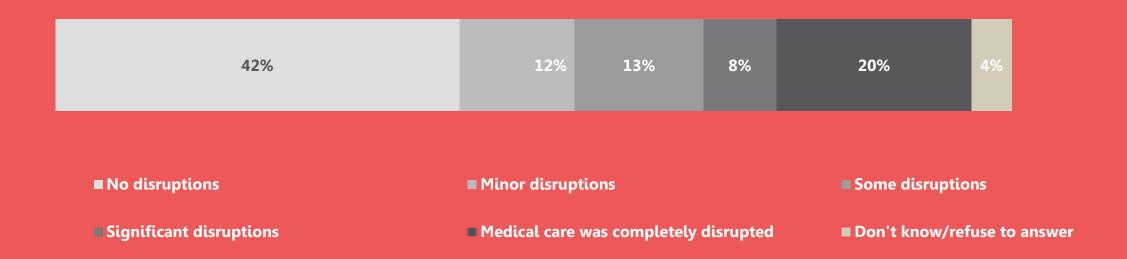
Reported change of such attention compared to pre-COVID-19 pandemic







Reported level of disruptions in access to medical care in the past year before the interview, among respondent household members with a chronic illness



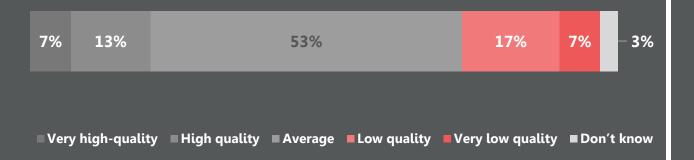


Selected Findings

3. Health Services Perceptions: concept of quality, quality of services and staff



Reported perceived level of quality of healthcare available to respondents



Reported factors* considered by respondents as the most important for defining "high-quality healthcare" in general

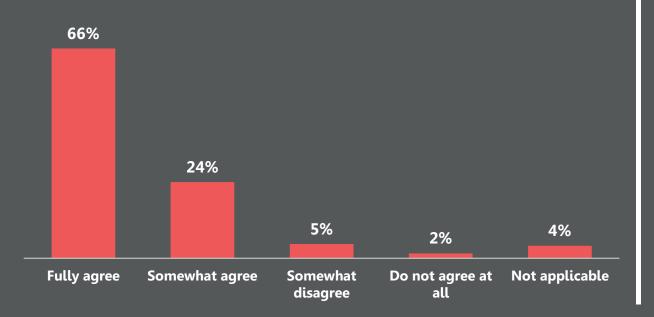


*Multiple options could be selected

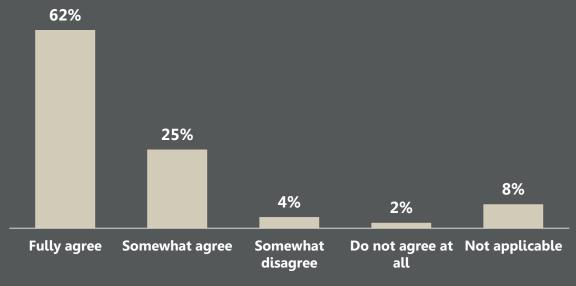




Proportion of respondents who agreed that the doctors were respectful towards them



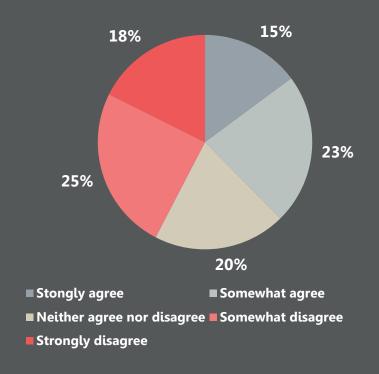
Proportion of respondents who agreed that the nurses and assistant nurses were respectful towards them



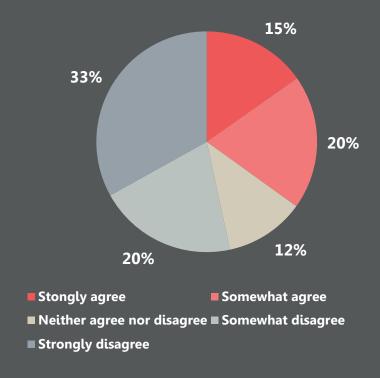




% of respondents reporting feeling safe when being treated by a doctor whom they do not know or about whom they do not have any recommendations from family or friends



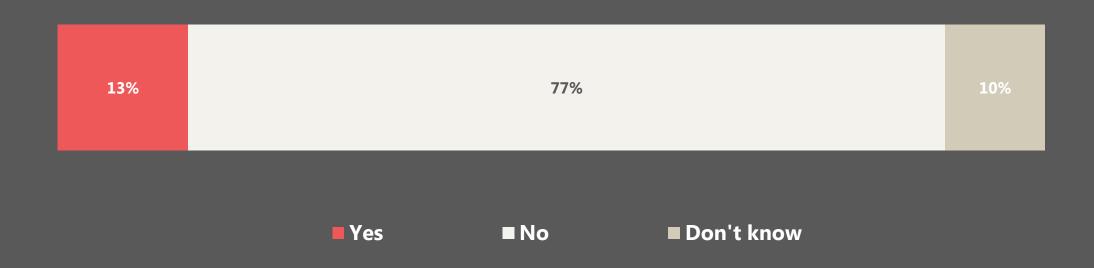
% of respondents reporting feeling a necessity to personally pay doctors/medical staff to be treated in an appropriate way (beside official fees)







% of respondents reporting having experienced a situation when they were asked to pay for medical services or medicine that is supposed to be for free, in the past 12 months before the interview





Published assessment outputs

REACH Resource Centre (accessible via this <u>link</u>):

- Dataset
- Factsheet
- Presentation

