

In 2018 LHSI has developed referral algorithms between local social services and health care units in 11 projects sights in Donbass region to ensure TB detection among IDPs. As per October 1, 2018 37 487 IDPs were screened with TB questionnaire by the social workers. Over the project implementation a set of challenges have been revealed, preventing IDPs from reaching health care units to seek assistance in TB detection, including:

- lack of specialized TB clinics due to main referral hospitals left in NGCA
- no/poor communication between health care units at GCA and NGCA
- loss of medical staff fleeing the conflict zone
- lack of referral between social and medical staff
- absence of services centered at patients needs
- the need to reside in GCA in order to be taken on treatment,
- low health prioritization, poor TB awareness
- stigma and discrimination of IDPs at the place of new residence
- IDPs reside in urban settings, which complicate targeted TB detection intervention
- poverty of IDPs residing at the NGCA and near LoC, violence
- the 59% of IDPs residing at the NGCA and near LoC are of older age, 64% women
- elderly IDPs spend 55% income for medicines



Labor and Health Social initiatives (LHSI) is a non-for-profit non-government organization implementing public health projects addressing human rights barriers for most at risk population in Ukraine for more than 15 years. Since 2014 LHSI is focused at IDP assistance providing support in resilience building and improving access to social and medical services for families affected by the conflict. Over 2017 LHSI successfully advocated for inclusion of IDPs as new at-risk group into the GFATM proposal with proper support from the Public Health Centre under the Ministry of Health of Ukraine. Since 2018 LHSI has been implementing a GFATM funded project introducing TB screening among 50 000 IDPs approaching municipal social services in Donetsk, Luhanska and Kharkivska oblasts of Ukraine.

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## TB challenges in humanitarian settings: military conflict in East Ukraine



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Ukraine is the largest country entirely located in Europe bordering with Poland, Slovakia, Hungary, Romania, Moldova, Russia, and Belarus. Since April 2014 Ukraine has become a protracted conflict emergency, an increasingly violent armed conflict is still acute until now – in its fifth year - in the Eastern part of the country. These events have prompted large-scale population movements as local civilian populations have sought to escape conflict and the breakdown in basic services. Acc to UNHCR report at least 9,900 people killed and 23,246 injured and more than 2 million displaced (including 1,6M internally displaced persons) as a result of this conflict.



Donetsk and Luhansk oblast were among the biggest economically developed regions in Ukraine together having a total area of 53 200 sq km making up about 10% of Ukraine's territory, a bit more than the Netherlands area. Many areas have been urbanized with high population density. After 2014 Luhansk and Donetsk oblasts capitals remained at non-government controlled area (NGCA) territories leaving more than 6,5 million people inhabiting Luhansk and Donetsk oblasts without proper access to highly qualified health care services, including TB facilities concentrated in the oblast capitals.

Prior to the conflict, both oblasts had some of the highest incidence and prevalence rates of both MDR-TB and HIV/AIDS in Ukraine and Europe. In 2013, there were 3694 patients diagnosed with TB in Donetsk Oblast which is 84,7 TB incidence per 100 ths and 2032 in Luhanska Oblast with 90,2 per 100 ths. During the acute phase of conflict, treatment was interrupted and key TB hospitals remain in NGCA, while some patients moved to other regions of Ukraine. It is hard to estimate how many patients were lost as epid monitoring reports data only for GCA (population estimated at 2 million in DonObt and 0.7 million for LuhObt in 2016). In 2017, there were 1409 TB cases reported, TB incidence 72,4 per 100 ths in DonObt, 453 new TB cases in LuhObt, which is 64,3 TB incidence.

TB incidence, Donetsk oblast 2013-2017

3694	2971	1354	1413	1409
2013	2014	2015	2016	2017

TB incidence, Luhanska oblast 2013-2017

2032	298	387	466	453
2013	2014	2015	2016	2017

As per beginning of 2018 there were 45 IDPs detected with TB in Donetsk and Luhanska oblasts making up for 0,79 TB incidence per 10 thousands IDPs in Donetsk and 0,24 TB incidence per 10 thousands IDPs in Luhanska oblast revealing a big TB detection gap in this population group resulting from limited access to health care services. To provide the access to health care Ukrainian government were to rebuild the health care system by establishing the 3d level TB facilities in the GCA in both conflict affected oblasts. The process of equipping the facilities and laboratories is still ongoing, partially the need is covered from GFATM three-year grant Ukraine have got in 2018.



While the donors' support is focused at infrastructure investment to restore the health system capacity to meet the needs of local population and IDPs, the civil society sector was also hardly affected: key NGOs working in the regions were to relocate to GCA and the huge number of clients served before the conflict remained unattended at the NGCA. The community workers were not prepared to provide services to highly mobile population. Acc to UNHCR about 1 million people cross LoC every month to get cash and buy food, medications etc at GCA. Due to the poor living conditions and limited access to health care services the war affected population is vulnerable to TB. Local health care officials do not have a unified strategy how to address highly mobile population with regards to the high burden of tuberculosis in the region, leaving a huge number of people residing near the LoC and at NGCA without proper medical care, thus increasing the risks of TB burden in the region.

