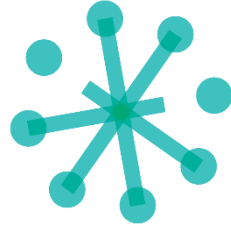




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The Willingness of Older People with HIV to Live and Clinicians to Work When a "Normal Life" Is Stopped

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Presentation Overview:



Background

Methods

Results

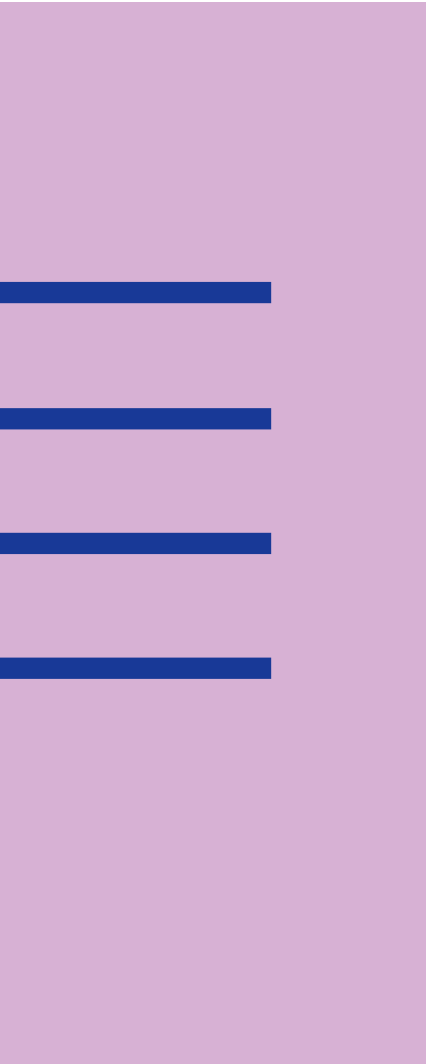
Conclusions

Thank you note






Background:



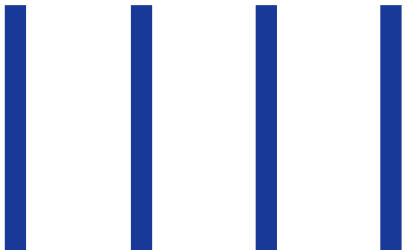
To understand how older people with HIV (OPWH, defined as ≥ 50 years) cope during the war with daily life challenges and HIV and non-HIV care, we explored experiences of both OPWH and clinicians living in Kyiv, Ukraine.



Methods:



Qualitative phone interviews conducted in March-April 2022 with five OPWH and five HIV clinicians in Kyiv were audio-recorded, transcribed verbatim, and analysed for themes.



Results:

Four key themes captured how participants viewed the immediate response to crisis:

- 1.** Unlike many younger patients, most OPWH from Kyiv did not evacuate. Reasons included impaired mobility, fear of the unknown, lack of financial and other resources needed for evacuation, emotional attachment to home, caregiving responsibilities, and/or wishing to stay close to their trusted HIV and other healthcare providers.
- 2.** Reluctant HIV status disclosure to receive help with accessing ART during the war (to relatives and/or clinician “strangers” when OPWH evacuated).

Results:

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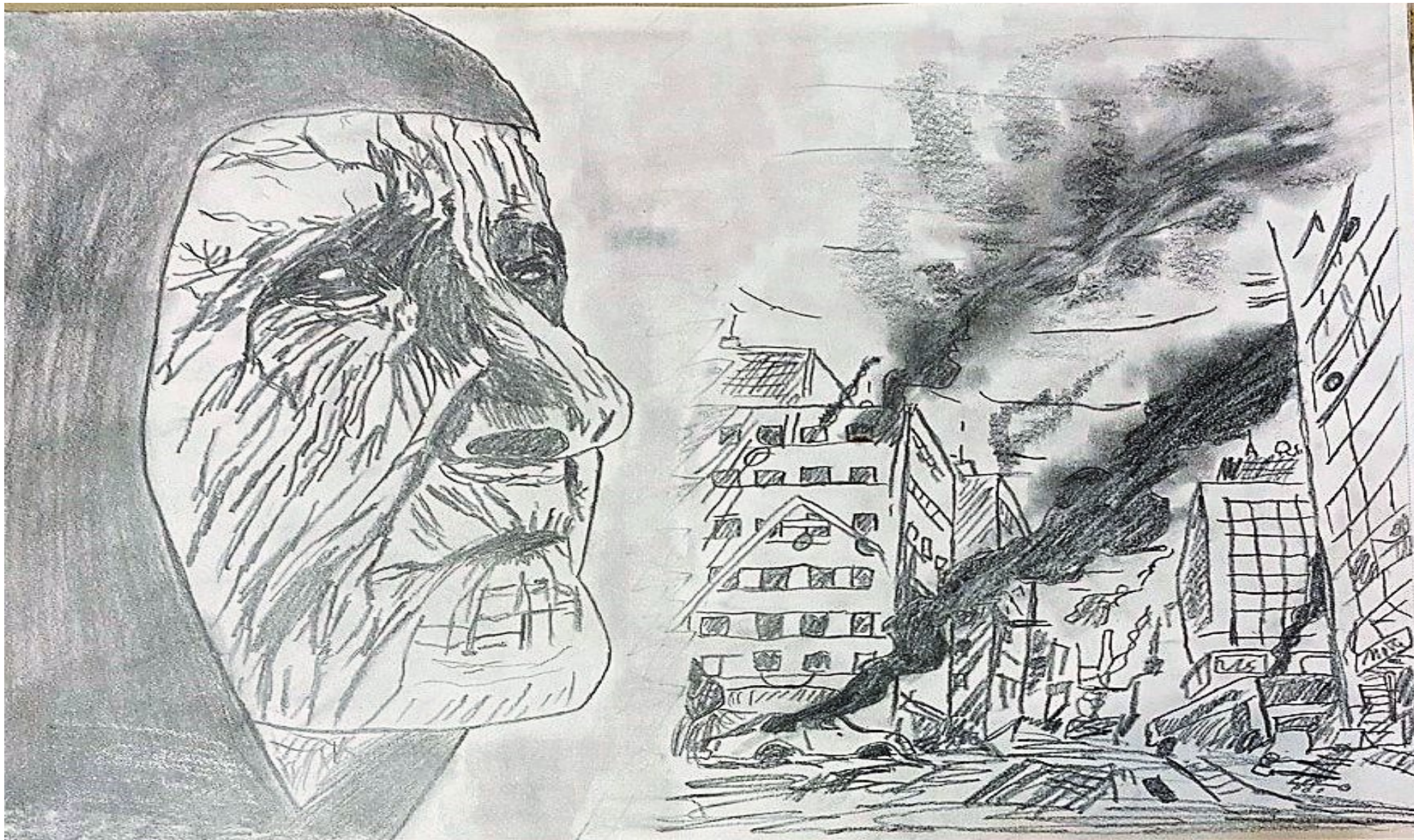
3. The war disrupted “normalcy” but produced overwhelming solidarity and mutual support. HIV care continued through ingenuity and sacrifice by clinicians. While clinics lost half of the frontline personnel who evacuated, remaining clinicians worked intensively to accommodate all patients and performed additional tasks, including custodial, to assist internally displaced patients, and provide psychosocial posttrauma counseling.

4. Clinical directors’ decisions since war began, despite imperfect information and unknown outcomes, saved continuity of workflow through financial support and psychological help to personnel survive war risks. Work was therapeutic for staff, helping them manage uncertainty and high stress.

Conclusions:

- HIV and addiction clinicians have been systematically overlooked in humanitarian crises research. To the best of our knowledge, we have been the only team to ask Ukrainian clinicians about their experiences during the war.
- OPWH and clinicians in KYIV need urgent social support lest compulsory altruism and coping at the expense of greater personal sacrifice becomes “*new normal*”.
- As Ukrainian society rebuilds after the war, one option may include introducing training for medical staff on how to personally cope with fear, stress, and anger, to initially stabilize their own mental health condition, before providing assistance to another.





“Elderly people and the war in Ukraine”

<https://uiphp.org.ua/en/public-health/events-and-announcements/item/375-congratulations-to-the-winners-and-participants-of-the-children-s-drawing-contest-on-the-theme-elderly-people-and-the-war-in-ukraine>

Thank you for your attention

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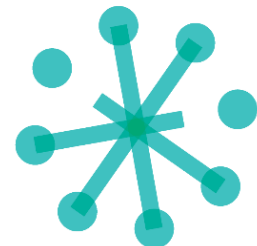
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