Impact of the COVID-19 Pandemic on Addiction, Substance Use, and Harm Reduction for Vulnerable Populations in Ukraine

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Title: Impact of the COVID-19 Pandemic on Addiction, Substance Use, and Harm Reduction for Vulnerable Populations in Ukraine

Abstract: Evolving since the Russian annexation of Autonomous Republic Crimea and occupation of parts of Donetsk and Luhansk regions, Ukraine have been facing escalating security and health care challenges. The six-year war in East Ukraine has influenced the rise of substance and alcohol uses and its addictions among the veterans, internally displaced persons, and civilian survivors, which was already problematic for the general Ukrainian population prior to the conflict. This commentary highlights the urgent need for further funding and research on substance and alcohol addiction with these vulnerable populations affected by the ongoing conflict in Ukraine amid the current COVID-19 pandemic.

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Background

The recent conflict in Ukraine has resulted with over 13,000 deaths, and of which, over 3,000 were civilians lost largely to artillery attacks and mines. As of June 2020, an estimated 1,447,129 Ukrainian citizens were internally displaced or became migrants as a result of the war [1]. Many of them struggle with substance use disorders and have a growing need for social support programs through addiction research and health intervention [2]. Compounding these challenges with the recent pandemic of COVID-19, Ukraine is positioned with urgent gaps in addiction and substance use research while also stretched thinly to build capacity and implement health interventions to meet the population’s need. Are people from fragile states and conflict zones more susceptible to co-morbidity with substance abuse and addiction during COVID-19 pandemic? This commentary identifies priorities and capacity needs in Ukraine for harm reduction of substance uses related to the conflict in Ukraine during the current pandemic.

Lockdown and rise of COVID-19 cases – implications for substance uses and mental health

Conflicts and wars are known to contribute to a higher burden of behavioural health issues among individuals across all generations who experience trauma as well as among those living in or near to conflict zones. [3, 4]. Post-traumatic stress disorder is mostly recognized as the mental health burden measured after conflicts and wars; however, during conflicts and wars, there is also significant disability from common mental health problems such as depression, anxiety, and substance misuse. As of 2020, the conflict in Ukraine shifts to the emerging issues with COVID-19 response in conjunction to growing concerns for the adoption of maladaptive coping strategies among the public. These coping strategies can lead to increased substance use disorders and behaviour health issues among the internally displaced persons. Substance use as coping mechanism to identify comorbidity among forced migrant populations has been increasing documented in the scientific literature [5]. Recent studies have further documented the impact of the COVID-19 pandemic on the global opioid epidemic, alcohol use disorders, substance abuse and
What will the compounded effect of COVID-19 pandemic and the conflict in Ukraine do to these vulnerable populations? 

First, the cases of COVID-19 in Ukraine have been steadily increasing since the first official case registered on March 2020. As of June 2020, there were 24,823 laboratory-confirmed cases of COVID-19 in Ukraine, according to the Center for Public Health of Ministry of Health of Ukraine (Center for Public Health) [8]. Of which, 735 were fatal and 10,440 patients recovered. Still the demands of medical resources are low compared to other countries; only 292 people, including one child and 26 health workers, required mechanical ventilators. Since March, hospitalizations have peaked to 7,596 people, including 295 children and 902 health workers with majority of COVID-19 cases being seen as outpatient treatment. Currently, data from the temporarily occupied territories of the Autonomous Republic of Crimea, the city of Sevastopol, Donetsk and Luhansk regions are “missing” according to the Center for Public Health [8]. This begets a bigger issue when understanding and implementing possible solutions aimed at substance uses to help vulnerable populations in these conflict-affected areas.

Second, the infrastructure in Ukraine to support and assist vulnerable populations with substance use disorders is growing, but not rapidly enough to keep pace with the needs caused by the spread of the novel coronavirus. In 2017, the Cabinet of Ministers of Ukraine initiated an order to the Concept for the Development of Mental Health Care in Ukraine (Concept for Development) with a commitment up to 2030 [9]. This Concept for Development was to highlight the behaviour health problems in Ukraine and guide the government to create the ‘Action Plan’, which are specific ways to address these problems. For example, the provision of care allowed to support persons with mental disorders and issues related to substance use were deemed to be separate areas of focus for the Action Plan [9]. However, the Action Plan is still in the process of development and approval.

Another infrastructure entity for support in Ukraine is the State Institution "Center for Mental Health and Monitoring of Drugs and Alcohol of the Ministry of Health of Ukraine" (Center for...
Mental Health). The Center for Mental Health has its main functions in the field of mental health and monitoring the situation of narcotic drugs and alcohol misuse disorders. The Center for Mental Health was established in 2006 as the Center for Monitoring of Drugs and Alcohol, and it has largely been considered to be a specialized institution for forensic psychiatric examinations of the Ministry of Health of Ukraine [10]. One of the positive implementations of the Center for Mental Health has been the implementation of new approaches to the statistical analysis on psychiatric care in Ukraine, specifically the creation of a database of psychiatric care facilities. As seen in Figure 1, the Center for Mental Health has mapped all facilities and its networks in Ukraine where people with substance use disorders could seek social service and healthcare.

**Network of facilities providing psychiatric care to people with substance use disorders (Ukraine, 2018)**

The map lists 535 community-owned medical facilities providing psychiatric care to people with SUD in 2018.

*Figure 1. Network of facilities providing psychiatric care to people with substance use disorders in Ukraine.*

*Map: Oleksii Sukhovii. Source: Center for Mental Health and Monitoring of Drugs and Alcohol MoH of Ukraine (https://www.datawrapper.de/7YicfV/)
Furthermore, the Center for Public Health is a healthcare and state institution in Ukraine, established in 2015. The responsibilities of the Center for Public Health include maintaining and strengthening the health of the Ukrainian citizens, social and hygienic monitoring of diseases, epidemiological surveillance and biological safety, group and population prevention of diseases, epidemic control and strategic management in the field of public health. One of the activities provided by the Center for Public Health that can continue to help vulnerable populations in conflict areas is the opioid maintenance (substitute) therapy, which was created to counteract the spread of diseases caused by HIV. Figure 2 is the map documenting individuals receiving opioid maintenance therapy throughout Ukraine.

**Opioid maintenance therapy in Ukraine, as of Jan 1, 2020**

12,411 persons receiving opioid maintenance therapy

Figure 2. Map of persons receiving opioid maintenance therapy in Ukraine.

Map: Oleksii Sukhovii Source: Center for Public Health MoH of Ukraine (https://www.datawrapper.de/_/109ME/).
Supporting these government institutions in Ukraine could lead to short-term and long-term successes in improving harm reduction and against the COVID-19 pandemic. The Center for Public Health and the Center for Mental Health have both grew over the years in infrastructure at government level but also have continued to help vulnerable populations to gain better access to facilities and treatment. As the novel coronavirus spreads in Ukraine, building capacity and training support at these government institutions will be key in developing local expertise and sustaining vital efforts to improve the health of the entire nation.

**Building capacity and training support**

Efforts have been made in Ukraine by governmental, public, private, non-governmental and international organizations to improve the situation for Ukrainians who have been affected by the conflict. International support and aid have been increasing since 2014. Numerous activities—provided by World Health Organization (WHO), United Nations Children’s Fund (UNICEF), European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), United Nations Office on Drugs and Crime (UNODC), European Union Action Against Drugs and Organised Crime (EU-ACT), North Atlantic Treaty Organization (NATO), World Bank, United States Agency for International Development (USAID), Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH (GIZ) and many others—contribute to the improvement of mental health services, in particular for people with mental disorders due to the use of psychoactive substances. What may be undermeasured and left unexamined however, is the toll of substance and alcohol uses and addictions that may have been triggered by the COVID-19 pandemic and conflict among the veterans, internally displaced peoples, and civilian survivors. In addition, the significant influence of other previous traumatic events of 20th century in Ukraine should not be forgotten, including the man-made famine (Holodomor) of 1932 which killed 4 million Ukrainians, World War II (over 8 million Ukrainian casualties), and the traumatic stress of 75 years of communist rule.
Conclusion

Understanding the compounded effect caused by the East Ukraine Conflict and COVID-19 pandemic on substance addiction in Ukraine, especially among the forced migrants and veterans, is essential. The current impact of the pandemic is causing reductions in support programs and interventions that were previously in place during the conflict. Past and current research suggest a need to empower and implement coping strategies and integrate substance use prevention and treatment services offered to veterans, internally displaced peoples, and civilian survivors as part of the crisis response efforts. Efforts to develop and evaluate interventions to treat substance use and reduce related harm are critical. Further funding and research on substance and alcohol addiction from the conflict in Ukraine and the COVID-19 pandemic should be prioritized.
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