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BAROMETER

PATIENT'S PERSPECTIVE

Study and evaluation of the dynamics of changes in the healthcare sector, as well as the state of medical facilities' provision and their ability to provide quality medical services under the impact of war

Second quarter

2024

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List of Abbreviations

- **PHC– Primary healthcare center**
- **FC (Family Clinic)– General practice-family medicine outpatient clinic**
- **SSMI – Specialized State Medical Institution**
- **NS/NR – not sure/no reply**

Methodology

Survey method: online survey using the digital platform **Kobo Toolbox** and in-person interviews using tablets near medical facilities.

Fieldwork dates: August 8-23, 2024.

Sample: 713 respondents in total.
Respondents were patients of healthcare institutions. The minimum age for participation was 18.

The following **types of institutions** were selected for the study:

1. Primary Healthcare Centers – 102 patients surveyed;
2. Family Clinics – 154 patients surveyed;
3. Specialized State Medical Institutions – 43 patients surveyed;
4. Regional Hospitals – 195 patients surveyed;
5. City Hospitals – 194 patients surveyed.

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SERVICE

Evaluation of the quality of services and changes in medical institutions

Overall, the majority (82%) of surveyed patients in medical institutions rated the quality of services received as good, with 38% rating it as very good. Respondents aged 30 to 39 most frequently rated the quality of services as good (90%), while the oldest patients aged 65 and older rated the quality as good significantly less often than other age groups—only 69% of those surveyed. Additionally, patients in regional hospitals notably rated the service as good more often (93%).

Table 1. Distribution of responses to the question "How would you overall rate the quality of services you received in this medical institution?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Very bad	0,8%	0,0%	0,0%	0,0%	2,8%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	2,4%	**0,5%**
Bad	1,7%	3,2%	6,5%	2,4%	0,0%	0,0%	4,2%	4,9%	4,7%	2,3%	0,0%	0,0%	**2,4%**
Average	11,8%	12,9%	9,7%	4,8%	13,9%	12,7%	18,8%	19,5%	9,3%	11,6%	7,0%	14,3%	**12,3%**
Good	43,7%	44,1%	29,0%	45,2%	44,4%	45,5%	50,0%	61,0%	27,9%	37,2%	46,5%	47,6%	**43,9%**
Very good	37,0%	38,7%	54,8%	45,2%	36,1%	40,0%	18,8%	14,6%	48,8%	44,2%	46,5%	33,3%	**37,6%**
BB/H3	5,0%	1,1%	0,0%	2,4%	2,8%	1,8%	8,3%	0,0%	9,3%	4,7%	0,0%	2,4%	**3,3%**

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It is also worth noting that the majority of respondents who had experience visiting this medical facility before the full-scale invasion did not notice any changes in either the quality of services or the transport infrastructure near the facility (67% regarding the quality of services and 84% regarding changes in infrastructure selected the option "No change").

Patients of Primary Healthcare Centers significantly more often than those from other types of institutions noted the absence of any changes (85% did not notice any changes in either the quality of services or the infrastructure). At the same time, patients from regional and city hospitals mentioned positive changes in these facilities somewhat more frequently after the full-scale invasion.

Table 2. Distribution of responses to the question "Has the transport infrastructure near the medical facility changed compared to the period before the full-scale invasion on February 24, 2022?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Significantly worsened	0,0%	2,6%	0,0%	0,0%	5,9%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	8,3%	**1,0%**
Somewhat worsened	4,8%	2,6%	0,0%	5,0%	5,9%	3,2%	3,6%	6,1%	0,0%	5,3%	12,5%	0,0%	**4,0%**
Did not change	85,5%	81,6%	75,0%	85,0%	88,2%	83,9%	82,1%	90,9%	85,7%	84,2%	87,5%	58,3%	**84,0%**
Somewhat improved	1,6%	5,3%	0,0%	0,0%	0,0%	6,5%	3,6%	0,0%	7,1%	5,3%	0,0%	0,0%	**3,0%**
Significantly improved	1,6%	0,0%	0,0%	0,0%	0,0%	0,0%	3,6%	0,0%	0,0%	0,0%	0,0%	8,3%	**1,0%**
NS/NR	6,5%	7,9%	25,0%	10,0%	0,0%	6,5%	7,1%	3,0%	7,1%	5,3%	0,0%	25,0%	**7,0%**

However, it is important to note that the number of respondents answering these questions near city and regional hospitals is low, which does not allow for sufficiently well-founded conclusions. As seen in Table 4, patients most rarely visited the studied regional and city hospitals before the full-scale invasion.

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Table 3. Distribution of responses to the question "Has the quality of medical services you received in this facility changed compared to the period before the full-scale invasion on February 24, 2022?"

	Sex		Age group					Institution type					Загалом
	Women	Men	18-29	30-39	40-49	50-65	65+	pic	FC (FMS)	SSMI	Обласна лікарня	Міська лікарня	
Significantly worsened	1,6%	2,6%	0,0%	0,0%	0,0%	0,0%	7,1%	3,0%	3,6%	0,0%	0,0%	0,0%	**2,0%**
Somewhat worsened	4,8%	10,5%	25,0%	0,0%	5,9%	3,2%	14,3%	12,1%	7,1%	0,0%	12,5%	0,0%	**7,0%**
Did not change	69,4%	63,2%	50,0%	80,0%	76,5%	77,4%	42,9%	78,8%	64,3%	68,4%	62,5%	41,7%	**67,0%**
Somewhat improved	12,9%	18,4%	0,0%	10,0%	17,6%	16,1%	17,9%	3,0%	14,3%	21,1%	25,0%	33,3%	**15,0%**
Significantly improved	6,5%	2,6%	25,0%	5,0%	0,0%	3,2%	7,1%	0,0%	3,6%	10,5%	0,0%	16,7%	**5,0%**
IDK/HTR	4,8%	2,6%	0,0%	5,0%	0,0%	0,0%	10,7%	3,0%	7,1%	0,0%	0,0%	8,3%	**4,0%**

The explanation for why this number of respondents is insufficient lies in how people visit medical facilities—while people typically visit Primary Healthcare Centers (PHC) relatively regularly, they visit hospitals much less often. Moreover, the connection to the place of residence is less evident in the case of hospitals.

Table 4. Distribution of responses to the question "Did you have experience visiting this medical facility before the full-scale invasion on February 24, 2022?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Yes	52,1%	40,9%	12,9%	47,6%	47,2%	56,4%	58,3%	80,5%	65,1%	44,2%	18,6%	28,6%	**47,2%**
No	47,9%	59,1%	87,1%	52,4%	52,8%	43,6%	41,7%	19,5%	34,9%	55,8%	81,4%	71,4%	**52,8%**

It is also worth noting that the youngest age group—18-29 years—visited the selected medical facilities much less frequently before the full-scale invasion. The reason for these differences may lie in the greater mobility of young people, as well as the fact that they tend to seek medical facilities much less often, resulting in them not choosing a preferred institution.

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SERVICE

Evaluation of the quality of services and changes in medical institutions of Kyiv

Respondents rate the professionalism of medical staff in regional hospitals and specialized institutions the highest (in specialized institutions, 84% of respondents rate the level of professionalism as high, while in regional hospitals, the figure is 91%). The professionalism of staff in Primary Healthcare Centers (PHC) is rated the lowest (34% of respondents consider the level of professionalism and competence to be high), and it is significantly more often rated as average (59%). In other types of institutions, around 77% of respondents note a high level of professionalism among specialists, which is close to the overall average for the sample.

Respondents aged 40-49 and over 65 rate the competence of staff the lowest compared to other age groups.

Table 5. Distribution of responses to the question "How would you overall rate the level of professionalism and competence of the medical staff in the medical institution?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Extremely low	1,7%	0,0%	0,0%	0,0%	0,0%	0,0%	4,2%	2,4%	0,0%	2,3%	0,0%	0,0%	**0,9%**
Somewhat low	1,7%	2,2%	0,0%	0,0%	5,6%	0,0%	4,2%	2,4%	4,7%	0,0%	0,0%	2,4%	**1,9%**
Average	18,5%	15,1%	9,7%	14,3%	22,2%	16,4%	20,8%	34,1%	14,0%	11,6%	9,3%	16,7%	**17,0%**
Somewhat high	35,3%	41,9%	32,3%	40,5%	33,3%	43,6%	37,5%	48,8%	37,2%	32,6%	32,6%	40,5%	**38,2%**
Very high	39,5%	38,7%	54,8%	45,2%	33,3%	38,2%	29,2%	9,8%	39,5%	51,2%	58,1%	35,7%	**39,2%**
NS/NR	3,4%	2,2%	3,2%	0,0%	5,6%	1,8%	4,2%	2,4%	4,7%	2,3%	0,0%	4,8%	**2,8%**

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Regarding the provision of necessary medical equipment for delivering quality medical services, no respondent noted that the facility was entirely lacking in essential medical equipment. Most respondents indicated that the facilities were adequately equipped, though 18% found it difficult to answer this question.

Such a percentage of missing responses does not allow for sufficiently well-founded discussions about the differences between facilities and groups of respondents.

Table 6. Distribution of responses to the question "In your opinion, how well is this medical facility equipped with the necessary medical equipment to provide quality medical services?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Partially unprovided	10,1%	10,8%	6,5%	14,3%	19,4%	3,6%	10,4%	12,2%	16,3%	7,0%	11,6%	4,8%	**10,4%**
Partially equipped	44,5%	30,1%	32,3%	50,0%	41,7%	38,2%	29,2%	46,3%	44,2%	25,6%	51,2%	23,8%	**38,2%**
Fully equipped	34,5%	31,1%	48,4%	26,2%	25,0%	41,8%	25,0%	24,4%	9,3%	55,8%	27,9%	47,6%	**33,0%**
NS/NR	10,9%	28,0%	12,9%	9,5%	13,9%	16,4%	35,4%	17,1%	30,2%	11,6%	9,3%	23,8%	**18,4%**

A similar statement is true regarding the lack of medical equipment in facilities. Twelve percent of respondents do not know how to assess the sufficiency of staff for providing quality medical services.

Respondents who visited regional and city hospitals were much less likely to refuse to answer, and the majority believe that these hospitals are adequately staffed to provide quality services (64% in regional hospitals and 71% in city hospitals). Respondents also indicated that Primary Healthcare Centers (PHC) and Family Clinics (FC) are the least sufficiently staffed (12.2% and 16.3%, respectively).

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Table 7. Distribution of responses to the question "In your opinion, how sufficient is the medical staff in this medical facility to provide quality medical services?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Not enough at all	3,4%	4,3%	0,0%	4,8%	8,3%	1,8%	4,2%	4,9%	0,0%	2,3%	4,7%	7,1%	**3,8%**
Somewhat insufficient	22,6%	16,1%	12,9%	21,4%	30,6%	18,2%	16,7%	14,6%	27,9%	9,3%	30,2%	16,7%	**19,8%**
Somewhat sufficient	33,6%	31,2%	29,0%	31,0%	33,3%	40,0%	27,1%	41,5%	27,9%	27,9%	41,9%	23,8%	**32,5%**
Fully sufficient	30,3%	34,4%	48,4%	35,7%	19,4%	32,7%	27,1%	17,1%	23,3%	48,8%	23,3%	47,6%	**32,1%**
NS/NR	10,1%	14,0%	9,7%	7,1%	8,3%	7,3%	25,0%	22,0%	20,9%	11,6%	0,0%	4,8%	**11,8%**

Regarding the availability of psychological assistance, two-thirds of respondents are unaware of such an option at this facility. The least informed were patients from Primary Healthcare Centers (PHC) (88%), while the highest percentage of those who were aware and had received assistance were patients from regional hospitals (42%). There are no significant differences among age groups under 65, but patients over 65 are noticeably less likely to have heard about the provision of psychological assistance in these facilities.

Table 8. Distribution of responses to the question "Are you aware of the options for receiving psychological assistance at this medical facility?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
I personally received psychological assistance at this medical facility.	6,7%	7,6%	6,5%	4,8%	5,6%	14,5%	2,1%	0,0%	0,0%	14,0%	16,3%	4,8%	**7,0%**
I personally have not received psychological assistance, but I am aware of the possibility of receiving such help.	15,1%	16,1%	19,4%	14,3%	22,2%	12,7%	12,5%	4,9%	11,6%	23,3%	25,6%	11,9%	**15,6%**
I am hearing for the first time about the possibility of receiving psychological assistance.	66,4%	67,7%	64,5%	64,3%	63,9%	61,8%	79,2%	87,8%	65,1%	51,2%	58,1%	73,8%	**67,0%**
NS/NR	11,8%	8,6%	9,7%	16,7%	8,3%	10,9%	6,3%	7,3%	23,3%	11,6%	0,0%	9,5%	**10,4%**

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SAFETY

Warning System

More than half (52%) of respondents reported that there is a warning system for air alarms in the facilities.

The situation with notifications is worst in Family Clinics (FC), with only 14% of respondents aware of the existence of such a system. The situation is noticeably better in city hospitals, where 76% of visitors know about it. The situation is also fairly good in PHC centers and specialized institutions (63% and 67%, respectively).

Table 9. Distribution of responses to the question "Is there an internal alert system for air alarms in this medical facility?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Yes	51,3%	52,7%	48,4%	57,1%	33,3%	63,6%	50,0%	63,4%	14,0%	67,4%	39,5%	76,2%	**51,9%**
No	8,4%	17,2%	12,9%	14,3%	22,2%	9,1%	6,3%	0,0%	7,0%	4,7%	41,9%	7,1%	**12,3%**
I don't know about the existence of such a system	40,3%	30,1%	38,7%	28,6%	44,4%	27,3%	43,8%	36*,6%	79,1%	27,9%	18,6%	16,7%	**35,8%**

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In most cases, the alert system is automatic (a system that automatically notifies about an alarm without human involvement), with the exception of regional hospitals where the system is most often manual (for example, a siren or bell; a system activated manually by the medical facility staff).

Table 10. Distribution of responses to the question "What kind of alert system for the start of air raid alarms is in place at the facility?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Automated alert system	65,6%	53,1%	73,3%	62,6%	58,4%	57,2%	54,2%	76,9%	33,3%	79,3%	23,5%	53,1%	**60,0%**
Manual alert system	13,1%	20,4%	13,3%	16,7%	33,3%	17,1%	8,3%	0,0%	33,3%	6,9%	52,9%	15,6%	**16,4%**
Other	3,3%	2,0%	0,0%	4,2%	0,0%	5,7%	0,0%	0,0%	0,0%	0,0%	5,9%	6,3%	**2,7%**
NS/NR	18,0%	24,5%	13,3%	16,7%	8,3%	20,0%	37,5%	23,1%	33,3%	13,8%	17,6%	25,0%	**20,9%**

Respondents who indicated that the facilities do not have an alert system most frequently noted that patients learn about alarms from their own means (such as mobile applications like Tryvoga, Kyiv Digital).

Table 11. Distribution of responses to the question "How are you informed about the beginning of an air alarm?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Staff informs patients	60,0%	37,4%	50,1%	50,0%	25,0%	80,0%	33,3%	0,0%	66,7%	100,0%	44,4%	0,0%	**46,2%**
There is no internal alert system, and patients are not informed.	0,0%	6,3%	0,0%	0,0%	12,5%	0,0%	0,0%	0,0%	0,0%	0,0%	5,6%	0,0%	**3,8%**
Patients find out about the alarm themselves.	40,0%	56,3%	50,0%	50,0%	62,5%	20,0%	66,7%	0,0%	33,3%	0,0%	50,0%	100,0 %	**50,0%**

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SAFETY

Availability and Condition of Shelters

55% of patients indicated that shelters are available in the facilities. People were least aware of the presence of shelters in family outpatient clinics, which may be explained by the fact that they often do not have a separate building and, being structural units of the primary healthcare center (PHC), are not provided with separate shelters. The situation in PHC is also worse than in other facilities, with only 42% stating that they have a shelter.

Table 12. Distribution of responses to the question "Is there a shelter or specially equipped room for protecting people during air raid alerts in this medical facility?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Yes	49,6%	61,3%	58,1%	61,9%	52,8%	60,0%	41,7%	41,5%	30,2%	67,4%	69,8%	64,3%	**54,7%**
No	10,9%	8,6%	3,2%	9,5%	2,8%	10,9%	18,8%	26,8%	9,3%	7,0%	0,0%	7,1%	**9,9%**
NS/NR	39,5%	30,1%	38,7%	28,6%	44,4%	29,1%	39,6%	31*,7%	60,5%	25,6%	30,2%	28,6%	**35,4%**

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Women visited shelters twice as often as men (37% versus 18%). Additionally, young people aged 18-29 and those aged 50-65 were significantly more likely to go to a safe place, with 40% from each group. The only group that went to shelters more often than not were patients of regional hospitals.

Table 13. Distribution of responses to the question "Did you visit a shelter or a specially equipped protective room in this medical institution?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Yes, I visited	37,3%	17,5%	38,9%	15,4%	21,1%	39,4%	20,0%	11,8%	15,4%	34,5%	53,3%	7,4%	**27,6%**
No, I did not visit	62,7%	82,5%	61,1%	84,6%	78,9%	60,6%	80,0%	88,2%	84,6%	65,5%	46,7%	92,6%	**72,4%**

Among those who went to the shelters, most reported a satisfactory or good condition of the shelters.

Table 14. Distribution of responses to the question "How would you assess the overall condition of the shelter or specially equipped room in this medical institution?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Very poor condition	4,5%	0,0%	14,3%	0,0%	0,0%	0,0%	0,0%	50,0%	0,0%	0,0%	0,0%	0,0%	**3,1%**
Bad condition	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	**0,0%**
Satisfactory condition	13,6%	30,0%	0,0%	0,0%	25,0%	30,8%	25,0%	50,0%	50,0%	0,0%	25,0%	0,0%	**18,8%**
Good condition	54,5%	70,0%	57,1%	50,0%	25,0%	69,2%	75,0%	0,0%	50,0%	70,0%	56,3%	100,0%	**59,4%**
Very good condition	27,3%	0,0%	28,6%	50,0%	50,0%	0,0%	0,0%	0,0%	0,0%	30,0%	18,8%	0,0%	**18,8%**

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MENTAL AND PHYSICAL HEALTH

Attitude Towards Physical Health

Respondents were asked to assess their agreement with two statements about health: “Stress or negative emotions can negatively affect a person's physical health” and “Physical health should be cared for regularly and consistently.”

Only 6 respondents disagreed with the first statement, accounting for about 3% of the total. The absolute majority of respondents fully agreed with the statement (89%).

Table 15. Distribution of responses to the question “Do you agree with the following statement: ‘Stress or negative emotions can negatively affect a person's physical health?’”

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
I fully disagree	1,7%	1,1%	0,0%	4,8%	0,0%	0,0%	2,1%	0,0%	0,0%	2,3%	0,0%	4,8%	**1,4%**
I partially disagree	0,8%	2,2%	3,2%	0,0%	0,0%	1,8%	2,1%	2,4%	0,0%	0,0%	0,0%	4,8%	**1,4%**
I both agree and disagree	1,7%	0,0%	3,2%	0,0%	0,0%	1,8%	0,0%	0,0%	2,3%	2,3%	0,0%	0,0%	**0,9%**
I partially agree	4,2%	6,5%	3,2%	2,4%	0,0%	7,3%	10,4%	12,2%	2,3%	2,3%	0,0%	9,5%	**5,2%**
I fully agree	90,8%	87,1%	90,3%	88,1%	100,0%	85,5%	85,4%	82,9%	95,3%	93,0%	100,0%	73,8%	**89,2%**
IDK/HTR	0,8%	3,2%	0,0%	4,8%	0,0%	3,6%	0,0%	2,4%	0,0%	0,0%	0,0%	7,1%	**1,9%**

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The second statement received even more approval: no respondent was able to disagree with it, and 96% fully agreed.

Table 16. Distribution of responses to the question: "Do you agree with the following statement: 'Physical health needs to be taken care of regularly and consistently?'"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
I fully disagree	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	**0,0%**
I partially disagree	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	0,0%	**0,0%**
I both agree and disagree	0,8%	0,0%	3,2%	0,0%	0,0%	0,0%	0,0%	2,4%	0,0%	0,0%	0,0%	0,0%	**0,5%**
I partially agree	1,7%	2,2%	0,0%	4,8%	0,0%	1,8%	2,1%	4,9%	0,0%	2,3%	0,0%	2,4%	**1,9%**
I fully agree	95,8%	95,7%	96,8%	95,2%	100,0%	96,4%	91,7%	90,2%	95,3%	97,7%	100,0%	95,2%	**95,8%**
NS/NR	1,7%	2,2%	0,0%	0,0%	0,0%	1,8%	6,3%	2,4%	4,7%	0,0%	0,0%	2,4%	**1,9%**

Mental health

Only 11% of respondents sought psychological help after the start of the full-scale invasion. This was significantly more common among young people aged 18-29 (19%).

86% of respondents had never sought help. This was notably reported by individuals over 65 years old – 98%.

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Table 17. Distribution of responses to the question: "Since the start of the full-scale invasion (February 24, 2022), have you sought psychological help?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Yes, I have sought help	11,8%	9,7%	19,4%	11,9%	8,3%	14,5%	2,1%	7,3%	4,7%	18,6%	16,3%	7,1%	**10,8%**
No, I have not sought help, but I have in the past	3,4%	1,1%	3,2%	2,4%	2,8%	3,6%	0,0%	4,9%	2,3%	4,7%	0,0%	0,0%	**2,4%**
No, I have never sought help	84,9%	88,2%	77,4%	83,3%	88,9%	81,8%	97,9%	87,8%	93,0%	74,4%	83,7%	92,9%	**86,3%**
NS/NR	0,0%	1,1%	0,0%	2,4%	0,0%	0,0%	0,0%	0,0%	0,0%	2,3%	0,0%	0,0%	**0,5%**

Among those who sought help after the start of the full-scale invasion, the majority of respondents received it within the last 3 months (74%).

The number of respondents seeking help was too small for significant analysis.

Table 18. Distribution of responses to the question: "When was the last time you sought psychological help?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Within the last month	50,0%	44,4%	50,0%	40,0%	66,7%	50,0%	0,0%	33,3%	100,0%	37,5%	42,9%	66,7%	**47,8%**
1-3 months ago	21,4%	33,3%	16,7%	20,0%	33,3%	37,5%	0,0%	0,0%	0,0%	25,0%	42,9%	33,3%	**26,1%**
3-12 months ago	21,4%	0,0%	16,7%	40,0%	0,0%	0,0%	0,0%	66,7%	0,0%	12,5%	0,0%	0,0%	**13,0%**
1-3 years ago	7,1%	22,2%	16,7%	0,0%	0,0%	12,5%	100,0%	0,0%	0,0%	25,0%	14,3%	0,0%	**13,0%**

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The majority of respondents reject the possibility of seeking help in the future – 59%. This is significantly more common among men (68% compared to 53% of women) and among the oldest age group – those over 65 years old – at 83%.

Table 19. Distribution of responses to the question: "Do you plan to seek psychological help in the future?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Yes	16,0%	3,2%	12,9%	14,3%	8,3%	16,4%	0,0%	14,6%	11,6%	9,3%	7,0%	9,5%	**10,4%**
I do not rule out such a possibility	29,4%	23,7%	41,9%	26,2%	25,0%	29,1%	16,7%	14,6%	37,2%	41,9%	9,3%	31*,0%	**26,9%**
No	52,9%	67,7%	45,2%	54,8%	63,9%	47,3%	83,3%	70,7%	44,2%	46,5%	81,4%	54,8%	**59,4%**
IDK/HTR	1,7%	5,4%	0,0%	4,8%	2,8%	7,3%	0,0%	0,0%	7,0%	2,3%	2,3%	4,8%	**3,3%**

Respondents assessed their mental health on a scale from 0 to 10. 18% rated it a perfect 10, indicating no mental health problems. This option was chosen most frequently. More than half of the respondents (55%) rated their mental state as good (choosing between 7 and 10).

Younger individuals also tended to view themselves as mentally healthy more frequently—the percentage of those scoring 7 or higher decreases with increasing age.

On average, respondents rated their mental health at 6.44 on the 0 to 10 scale.

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Table 20. Distribution of responses to the question: "Please rate your mental health on a scale from 0 to 10, where 0 means 'I have many problems with my mental health' and 10 means 'I have no problems with my mental health at all.'"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
0	5,0%	3,2%	0,0%	9,5%	11,1%	0,0%	2,1%	4,9%	2,3%	0,0%	9,3%	4,8%	**4,2%**
1	2,5%	3,2%	0,0%	2,4%	5,6%	3,6%	2,1%	4,9%	0,0%	7,0%	2,3%	0,0%	**2,8%**
2	1,7%	5,4%	0,0%	2,4%	2,8%	5,5%	4,2%	4,9%	0,0%	4,7%	2,3%	4,8%	**3,3%**
3	7,6%	5,4%	3,2%	2,4%	8,3%	7,3%	10,4%	7,3%	7,0%	7,0%	4,7%	7,1%	**6,6%**
4	6,7%	3,2%	3,2%	0,0%	0,0%	9,1%	10,4%	12,2%	4,7%	7,0%	0,0%	2,4%	**5,2%**
5	19,3%	8,6%	3,2%	11,9%	13,9%	18,2%	20,8%	19,5%	14,0%	11,6%	14,0%	14,3%	**14,6%**
6	9,2%	6,5%	3,2%	4,8%	13,9%	12,7%	4,2%	9,8%	7,0%	9,3%	9,3%	4,8%	**8,0%**
7	16,0%	10,8%	35,5%	14,3%	8,3%	10,9%	6,3%	4,9%	23,3%	16,3%	14,0%	9,5%	**13,7%**
8	12,6%	17,2%	16,1%	14,3%	11,1%	18,2%	12,5%	9,8%	18,6%	9,3%	18,6%	16,7%	**14,6%**
9	6,7%	11,8%	12,9%	14,3%	13,9%	1,8%	6,3%	9,8%	11,6%	14,0%	2,3%	7,1%	**9,0%**
10	12,6%	24,7%	22,6%	23,8%	11,1%	12,7%	20,8%	12,2%	11,6%	14,0%	23,3%	28,6%	**17,9%**



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MENTAL AND PHYSICAL HEALTH

Physical health

For 60% of patients, the frequency of seeking medical help has not changed compared to the period before February 24, 2022.

There is a noticeable trend of increasing frequency of visits with the respondents' age, which can be explained accordingly.

Table 21. Distribution of responses to the question: "As of today, compared to the period before the start of the full-scale invasion (before February 24, 2022), have you sought medical help more often or less often?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Much more often	6,7%	9,7%	9,7%	4,8%	8,3%	7,3%	10,4%	4,9%	9,3%	11,6%	2,3%	11,9%	**8,0%**
Somewhat more often	26,9%	24,7%	9,7%	26,2%	27,8%	29,1%	31,3%	22,0%	18,6%	20,9%	46,5%	21,4%	**25,9%**
No change, just like before	58,8%	61,3%	74,2%	64,3%	58,3%	56,4%	52,1%	70,7%	62,8%	65,1%	46,5%	54,8%	**59,9%**
Somewhat less often	5,0%	3,2%	6,5%	2,4%	2,8%	5,5%	4,2%	2,4%	7,0%	2,3%	4,7%	4,8%	**4,2%**
Much less often	1,7%	1,1%	0,0%	2,4%	0,0%	1,8%	2,1%	0,0%	0,0%	0,0%	0,0%	7,1%	**1,4%**
I have not sought medical help	0,8%	0,0%	0,0%	0,0%	2,8%	0,0%	0,0%	0,0%	2,3%	0,0%	0,0%	0,0%	**0,5%**

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Nearly half (47%) of patients underwent a complete diagnostic check within the last year, and a larger portion of them (58%) did so within the last 3 months, which may indicate that respondents are attentive to their physical health.

Patients aged 18 to 29 were noticeably more likely to check their health status over the past year.

Table 22. Distribution of responses to the question: "When was the last time you underwent a complete health diagnostic?"

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
Within the last month	9,2%	16,1%	19,4%	11,9%	2,8%	14,5%	12,5%	12,2%	4,7%	7,0%	11,6%	26,2%	**12,3%**
1-3 months ago	14,3%	16,1%	9,7%	9,5%	13,9%	21,8%	16,7%	9,8%	4,7%	16,3%	27,9%	16,7%	**15,1%**
3-6 months ago	10,9%	9,7%	22,6%	2,4%	11,1%	9,1%	10,4%	9,8%	9,3%	18,6%	11,6%	2,4%	**10,4%**
6-12 moths ago	13,4%	4,3%	12,9%	4,8%	8,3%	7,3%	14,6%	14,6%	14,0%	4,7%	14,0%	0,0%	**9,4%**
1-2 years ago	7,6%	4,3%	9,7%	9,5%	5,6%	5,5%	2,1%	12,2%	2,3%	4,7%	2,3%	9,5%	**6,1%**
2-3 years ago	8,4%	4,3%	3,2%	7,1%	8,3%	7,3%	6,3%	4,9%	7,0%	7,0%	7,0%	7,1%	**6,6%**
More than 3 years ago	18,5%	18,3%	9,7%	16,7%	30,6%	12,7%	22,9%	17,1%	39,5%	11,6%	9,3%	14,3%	**18,4%**
I have never undergone a complete diagnostic check	16,0%	21,5%	12,9%	33,3%	16,7%	20,0%	8,3%	12,2%	18,6%	27,9%	11,6%	21,4%	**18,4%**
NS/NR	1,7%	5,4%	0,0%	4,8%	2,8%	1,8%	6,3%	7,3%	0,0%	2,3%	4,7%	2,4%	**3,3%**

In contrast to mental health, respondents rated their physical health lower on average – 5.65 on a scale from 0 to 10, which only slightly exceeds the average score on the scale.

Young people aged 18 to 29 rated their health the best (77% of them rated their health between 7 and 10). Patients in hospitals and PHC also rated their physical condition noticeably worse.

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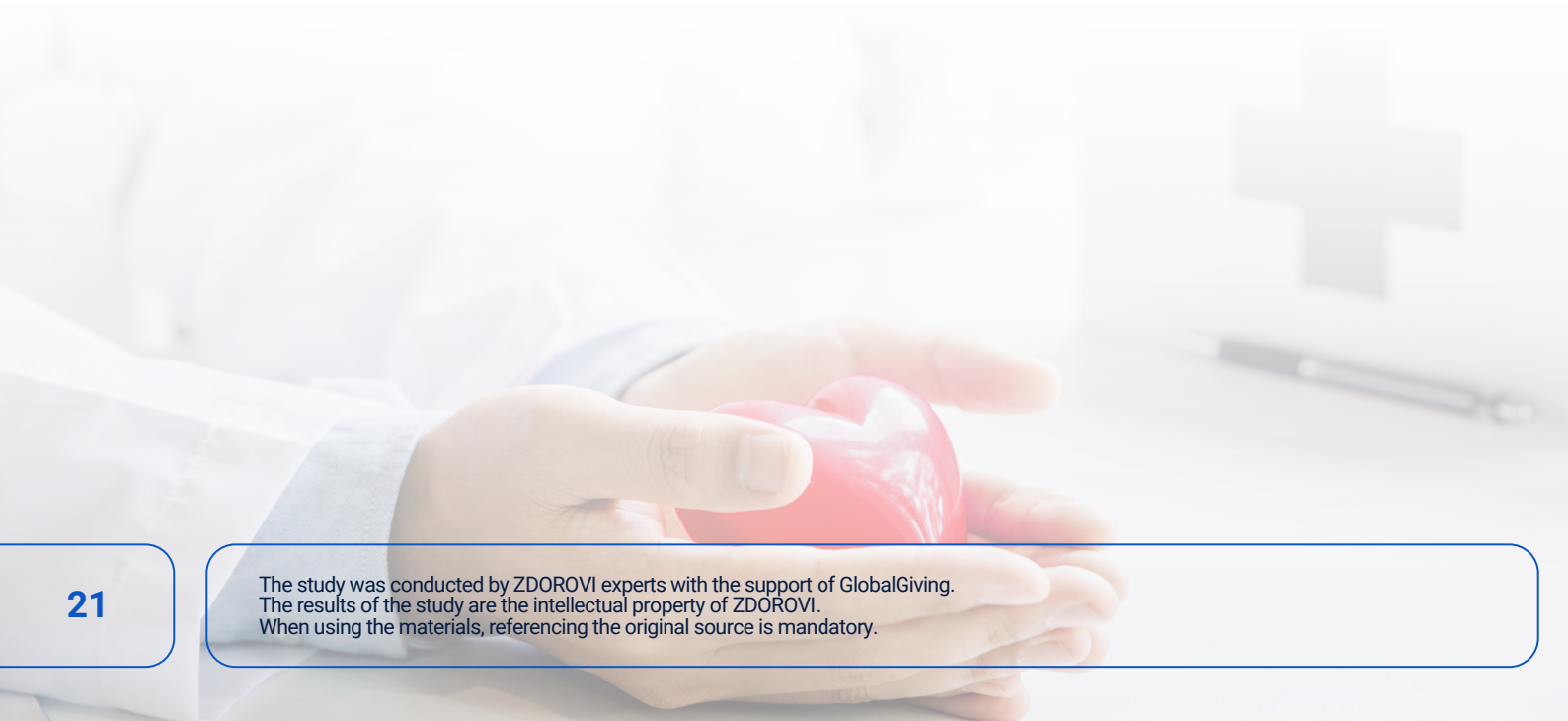
Table 23. Please rate your physical health on a scale from 0 to 10, where 0 means "I have many problems with my physical health" and 10 means "I have no problems with my physical health at all."

	Sex		Age group					Institution type					Overall
	Women	Men	18-29	30-39	40-49	50-65	65+	PHC	FC (FMS)	SSMI	Regional hospital	City hospital	
0	6,7%	8,6%	0,0%	7,1%	11,1%	7,3%	10,4%	2,4%	0,0%	9,3%	7,0%	19,0%	**7,5%**
1	2,5%	3,2%	0,0%	0,0%	0,0%	3,6%	8,3%	4,9%	2,3%	2,3%	4,7%	0,0%	**2,8%**
2	0,8%	2,2%	0,0%	0,0%	2,8%	1,8%	2,1%	0,0%	0,0%	0,0%	4,7%	2,4%	**1,4%**
3	9,2%	5,4%	0,0%	2,4%	5,6%	9,1%	16,7%	19,5%	4,7%	0,0%	9,3%	4,8%	**7,5%**
4	6,7%	2,2%	3,2%	2,4%	11,1%	1,8%	6,3%	7,3%	4,7%	0,0%	7,0%	4,8%	**4,7%**
5	24,4%	26,9%	16,1%	16,7%	30,6%	34,5%	25,0%	31*,7%	18,6%	18,6%	30,2%	28,6%	**25,5%**
6	10,9%	10,8%	3,2%	9,5%	8,3%	16,4%	12,5%	9,8%	18,6%	16,3%	4,7%	4,8%	**10,8%**
7	11,8%	15,1%	19,4%	19,0%	11,1%	14,5%	4,2%	7,3%	11,6%	16,3%	16,3%	14,3%	**13,2%**
8	10,9%	16,1%	12,9%	33,3%	8,3%	7,3%	6,3%	7,3%	20,9%	20,9%	7,0%	9,5%	**13,2%**
9	4,2%	5,4%	16,1%	2,4%	5,6%	1,8%	2,1%	2,4%	9,3%	4,7%	4,7%	2,4%	**4,7%**
10	11,8%	4,3%	29,0%	7,1%	5,6%	1,8%	6,3%	7,3%	9,3%	11,6%	4,7%	9,5%	**8,5%**



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CONCLUSION

As a result of the conducted research, the following conclusions can be drawn:

- Overall, respondents rated the quality of services provided in medical institutions highly. The youngest group of respondents (18-29 years) gave the highest ratings.
- Patients rated the quality of services in hospitals quite highly, especially in regional ones. Additionally, hospital patients most frequently noted improvements over the last 2.5 years during the war regarding the quality of service compared to visitors of other institutions.
- Respondents rated the quality of services received in primary healthcare centers (PHCs) significantly lower than in hospitals, and they also rated the competence and professionalism of the staff lower.
- Most surveyed patients (52%) reported the presence of an alert system for air raids in medical institutions. This was noted least often in family outpatient clinics, which may be explained by their lack of separate facilities and dedicated alert systems.
- Most of those who visited shelters in institutions rated their condition as good (78%).
- Respondents paid noticeably more attention to physical health compared to mental health: only 11% sought psychological help since the start of the full-scale invasion, while 60% of respondents underwent a complete diagnostic check of their physical health during this time. Furthermore, 59% of respondents rejected the possibility of seeking psychological help in the future.
- This may be a result of the stigma surrounding psychological issues and help that exists in society, or it could be due to respondents' reluctance to share information about it in the survey.
- Additionally, the characteristics of the sample may play a role – respondents who participated in the survey were patients of medical institutions and focused more on issues related to physical health than mental health.

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About ZDOROVI

ZDOROVI, as providers of change in the healthcare sector, have gathered a team of healthcare professionals who, from the very first days of the full-scale invasion by the Russian Federation, redirected their efforts to assist those affected by military actions as a manifestation of their civic stance, leaving their main areas of activity behind.

ZDOROVI was founded in July 2013 as an organization that creates educational and research projects in the healthcare field, closely linked to reforms. **ZDOROVI** has implemented innovative projects in collaboration with UNICEF, USAID, GIZ, Deloitte, and the EBRD, commissioned by Ukrainian government institutions: the Ministry of Health of Ukraine, the Ministry of Digital Transformation of Ukraine, and the National Health Service of Ukraine (NHSC).

However, starting from February 24, 2022, the **ZDOROVI** team restructured itself to create an effective system for providing humanitarian medical assistance across Ukraine. **ZDOROVI** has directed its efforts to support the victims of war and continues to implement global educational projects, mental health support initiatives, and projects aimed at reforming the healthcare system.

Today, **ZDOROVI** is one of the leaders in providing medical humanitarian assistance and a driver of behavioral change in the healthcare sector in Ukraine.

For more information about our activities, you can visit the foundation's website: https: www.zdorovi.help

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