

Tackling noncommunicable diseases in Ukraine

WHO country office in Ukraine



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Introduction

The main public health challenge in Ukraine is reducing noncommunicable diseases (NCDs): heart disease, stroke, cancer, diabetes and chronic respiratory disease. NCDs are estimated to account for 86% of the country's annual deaths. In recent years, as Ukraine copes with an ongoing humanitarian crisis, the human and financial resources and infrastructure to address NCDs have been under particular strain.

In 2015, the Ministry of Health of Ukraine and the WHO country office launched the first phase of a project on NCD prevention and health promotion (2015–2019) in seven pilot regions chosen in collaboration with the Ministry of Health. The project aims to improve the well-being of the population and reduce NCD-related mortality and morbidity, with a special focus on cardiovascular disease (CVD).

In brief – what has the project achieved?

The project has contributed to a wide range of measures critical to combatting NCDs, from policy design to communication, and from training of primary health-care providers to school health programmes. This was achieved in collaboration with key stakeholders from governmental institutions at central and oblast level, and representatives of civil society. Policies have been developed that help decrease tobacco and alcohol use, reduce sodium and trans- and saturated fat content in food, and increase public spaces for physical exercise and activity.

The project has four objectives, three of which have been supported financially by the Swiss Agency for Development and Cooperation.



Objective I.

Strengthening leadership,
governance, policy and
intersectoral action and
partnerships

The aim is to support the Ministry of Health and regional authorities as they lead the health-care system and steer intersectoral efforts to prevent and control NCDs.

Working together

The WHO country office works closely with the Ministry of Health on analysis, policy formulation and implementation. Other partners reflect the project's inclusive approach. The Inter-fractional Parliament Group on NCDs brings together 23 members of parliament to work on developing and implementing comprehensive national policies, initiatives and activities on NCDs. The Tobacco Control Working Group includes representatives of WHO, the Ministry of Health, the Life Advocacy Centre nongovernmental organization (NGO), and medical universities providing pre- and postgraduate education.

Other partners include the Public Health Centre of the Ministry of Health, regional state administrations and health departments in the seven pilot regions, the Ukrainian Professional Association of Dieticians, and the Centre for Public Health Advocacy NGO.

Results

- Ukraine's **national NCD action plan** has been adapted in light of the United Nations Sustainable Development Goals. It now includes not only key risk factors for NCDs, but also road safety, environmental health and school health. The plan has been approved by governmental bodies and the Cabinet of Ministers of Ukraine.
- **Food-based dietary guidelines** (healthy diet for adults) were developed and have been adopted by the Ministry of Health. Food-based dietary guidelines for pregnant women were also formulated and have been presented to the ministry for review and discussion. The ministry is working on regulating food products provided for or sold to children in schools, and support has been given to advocacy through regional consultations.
- Legislation banning industrial **trans-fatty acids** in foodstuffs has been drafted. Following public discussion, the legislation is being reviewed after questions from the industry; the final version is awaited.
- Two laws that implement the **WHO Framework Convention on Tobacco Control** have been drafted. These introduce amendments to current legislation on, for example, regulating e-cigarettes, banning flavoured cigarettes, using new and bigger pictorial warnings on cigarette packs, prohibiting cigarette displays at point of sale, strengthening smoke-free legislation, increasing fines for smoke-free violations and introducing tobacco industry reporting to the ministry on tobacco products' ingredients. The Health-care Committee of the Parliament recommended the laws for their first reading, but Parliament has blocked them following ongoing lobbying from the tobacco industry and hostile media reactions.
- The project has developed **a draft national strategy on reduction of harmful alcohol consumption**, which is to be discussed further with the ministry and partners. An advocacy campaign to support legislation on time limits for the sale of alcohol is being carried out.

Objective 2.

Strengthening the prevention of NCDs in clinical and community settings

The aim is to strengthen prevention, early detection, and the management and care of NCDs at primary health-care level, with a focus on CVDs. The two main priorities were to train primary care professionals and launch a national smoking-cessation service. These have been achieved and are now well established.

Working together

WHO's main partners include the Ministry of Health, the Public Health Centre of the Ministry of Health, Bogomolets National Medical University, the National Medical Academy of Postgraduate Education, regional health departments and medical universities and colleges in the seven pilot regions, professional associations, and regional coordinators and trainers.

Results

I really liked the format of the course, and so did my colleagues. I have been using the material in practical ways, identifying risk factors and prioritising prevention. I decided to take up running. Sometimes I laugh at myself, but I am keeping it up, and I feel great. Some of my patients are following my example!

**Galyna Yurova, nurse,
Primary Healthcare Clinic #5, Vinnytsya City.**

Training health-care professionals – doctors, feldshers and nurses

The aim was to deliver training courses on the integrated management of hypertension and diabetes, with an emphasis on NCD prevention, for primary health-care staff in the seven pilot regions. This was central to the project.

The three-day course was taken by 24 teachers from postgraduate medical institutions, with two days on basic training and one on modern adult learning approaches for clinicians. The course also included the importance of evaluating CVD risks using the total CVD risk assessment technique to detect risk factors even before the patient has symptoms.

The project built a network of 52 regional trainers who facilitated cascade training in their own regions. The two-day training course has now been delivered to around 10 000 primary health-care professionals, reaching 50% of all such professionals in the pilot regions. It is making a difference not only to their work but also to their own lifestyles.

Training firsts for Ukraine

This is the first time that training courses of this nature have been held in Ukraine. Training doctors, nurses and feldshers together to understand how to work better as a team and how to empower mid-level providers to work better with patients, using training teams composed of a doctor and a nurse, and including training on how to address behavioural risk factors (featuring motivational interviews and integrating public health approaches into primary health care) were also firsts for the country.

The courses will contribute significantly to improving health-care providers' capacity to deal more effectively with NCDs using evidence-based approaches, which are very important in the ongoing primary health-care reform process.

A comprehensive evaluation of changes in clinical practice and relationships among providers and between providers and patients will be made from October 2018 to March 2019.

National smoking-cessation service

The first national smoking-cessation service was launched in June 2017. It consists of a toll-free quitline number (0-800-50-55-60), a website (www.stopsmoking.org.ua) and brief interventions based on WHO guidelines and delivered by primary health-care providers. Ten thousand and five people have visited the website and about 700 clients have received consultations by phone. Information materials on smoking cessation were approved by the Ministry of Health and distributed in the seven WHO pilot regions. Ultimately, the service will be delegated to the Public Health Centre.

Objective 3.

Reduction of risk behaviours that influence NCD mortality and morbidity

Reducing risk behaviours through communication

More than ever before, what people read, watch and hear in the mass media and online influences what they believe and how they behave in terms of NCD risk factors. The aim of the project is to support the Ministry of Health and other national, regional and local governmental and nongovernmental partners in communicating effectively to reduce exposure to NCD risk factors.

Working together

Work on communication has involved many partners, including three ministries (health, youth and sports, and education and science). The Public Health Centre of the Ministry of Health was a key ally, as were the regional health departments in the seven pilot regions, NGOs, regional state administrations and the United Kingdom National Social Marketing Centre.

Results

- A **national NCD communication strategy** that includes draft action plans was formulated.
- A **qualitative study on alcohol consumption**, adopting a social marketing approach, was carried out. Its findings will serve as a base for designing the key messages of a communication campaign aimed at reducing harmful alcohol consumption.
- Twenty-eight journalists from seven pilot regions participated in the WHO-organized workshop, **“Media in NCDs: prevention and health promotion in Ukraine”**, focusing on how best to convey information about NCDs and the relationship between key behavioural risk factors and social determinants of health.
- Thirteen WHO-approved **health promotion and health education products** were selected, translated into Ukrainian and shared with the regions.
- **Online media storage** was created to bring information tools on NCDs (including bulletins, fact sheets, position papers, posters and infographics) into one place, making them readily available for use. This facility will enable the regions to share materials from their own successful health promotion campaigns, whether in words, images or video, and access those of others.
- A WHO **social advertisement video on drink-driving** was adapted to the Ukrainian context and broadcast through media channels in the seven regions.



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...IOUS CRUS OF THE COGNAC
... LIGHT GOLDEN IN COLOUR,
... AND FRESH FRUITS.
... A ROBUST CHARACTER
... IN A COCKTAIL.
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40% VOL.



For the first time, we have been working really closely with all participants in the educational process. Using the School Health Index, we have identified the school's strengths and weaknesses and the pupils with chronic health problems so that we can reconsider their special needs. We also added dance and rhythm classes to the curriculum to enhance the students' physical activity. Together with the parents' committee and the city council, we have even used our new resource mobilization skills, and re-equipped the school's gym!

Svetlana Yakimov, director of Ivano-Frankivsk secondary school I-III degree No. 25, 55, Ivano-Frankivsk city

Reducing risk behaviours through schools

Reaching children and young people is important so schools are a key partner for the project – Chmeris Yevgeniya Victorivna, Deputy Principal of Specialized School No. 53, Kyiv noted “Thanks to this project, we are taking physical activity and nutrition in our school more seriously. We pay more attention to healthy eating and have updated the school menu. We want to expand partnership with other local institutions, and we have begun to involve volunteers.”

Working together

Partners include the ministries of health and of education and science, regional health and education authorities, the Women's Health and Family Planning Charitable Foundation NGO, and the Children's Fund through Education NGO.

Results

- The concept of the **school medical service** has been developed, adapting the European framework for quality standards in school health services and competences for school health professionals, including the responsibilities of school nurses. Comprehensive programmes have been developed and implemented in secondary schools within an interagency framework that focuses resources on effective school health.
- Twenty-two pilot schools were selected from the seven pilot regions to develop their own school health policy to promote **safe learning environments**. Training courses on preventing NCDs and how to mobilize resources for school teams were designed, strengthening teams' capacity to implement school improvement plans.
- The secondary school curriculum addresses **skills-based health education** through a focus on “The basics of health”. This subject has been revised and NCD topics have been included in an updated curriculum for pupils in grades 5–9.
- To promote **school-based health services**, a training course on NCDs was developed and field tested for school nurses and family doctors/paediatricians working in schools. The medical personnel of the pilot schools were also trained.
- Six awareness-raising publications on **NCD risk factors** were prepared for parents and school students, promoting ways to prevent or reduce them.
- A **healthy eating plate poster** was developed for schools, with a set of materials disseminated by regional education departments and schools.

Policy Dialogue for Better Health Governance

The Swiss Agency for Development and Cooperation also funds a joint Ministry of Health and WHO initiative, Policy Dialogue for Better Health Governance, which constitutes a series of dialogues, consultations and workshops with a wider remit. These aim to develop and implement evidence-informed national health policies and strategies to make progress towards universal health coverage in Ukraine, and to provide technical support to reform its health systems. Some relate to NCDs, such as the development of a concept paper and action plan on reforming the mental health system, and an assessment of state programme on affordable medicines, involving reimbursement of medicines for NCDs through the primary health-care service.

The overall goal of the Policy Dialogue project is to improve health status, financial protection, well-being, equitable access and satisfaction with health services among the Ukrainian population, especially in the most vulnerable groups. In addition, the project provides a viable instrument through which Ukraine can attain Sustainable Development Goal 3, which aims to “ensure healthy lives and promote well-being for all at all ages”, by bridging research and policy development, promoting a multisectoral response to address the burden of disease in Ukraine, supporting crosscountry collaboration to narrow health gaps and maintaining sustainable health development.

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