How Covid-19 Pandemic Has Tempered Ukrainians to Effectively Conduct Sociological Health Research in the Context of War and Any Future Crises

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Presentation Overview:

Background

Methods

Results

Conclusions

Thank you note

Background:

- Our research focused on studying how individuals in Ukraine who are over 50 years old and living with HIV (OPWH) cope with crises.

- To adapt to the *"new reality",* we developed new instruments and explored the experiences of both patients and clinicians in Kyiv.

- Our goal was to better understand how these individuals manage daily life challenges, as well as HIV and non-HIV care, during times of war.

Methods:

During the Covid-19 pandemic (April-May 2021), we conducted 22 qualitative phone interviews with 11 pairs of OPWH and their caregivers.
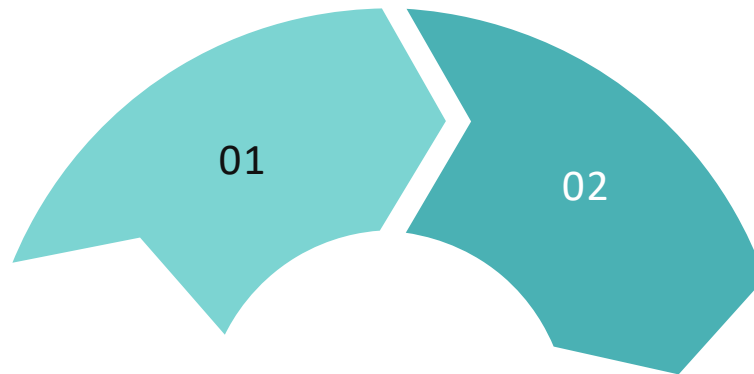
Subsequently, during the war (March-April 2022), we conducted 10 qualitative phone interviews with 5 OPWH and 5 HIV clinicians in Kyiv.

Our team critically reflected on fieldwork experiences to identify key lessons learned that may apply to researching future crises.

Results:

Lesson 1

Remote data collection (by phone, Zoom, Viber) and remote payment of participant compensation developed for Covid-19 became applicable and important during the war when many Ukrainians were forced to move to other regions of Ukraine or overseas.

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Lesson 2

Resilience to stress of the total population has increased in the last 2 years - the pandemic tempered! Like at the beginning of the pandemic, when the war began and "normal life" stopped, people's readiness to work was remarkable

Results:

Lesson 3

Our research team quickly responded to crisis realities, rethinking the mechanisms and research tools, which did not stop the workflow.

Lesson 4

During the data collection - interviewing remotely, there was an exchange of psychological support between the interviewer and the respondent. Each party stated this.
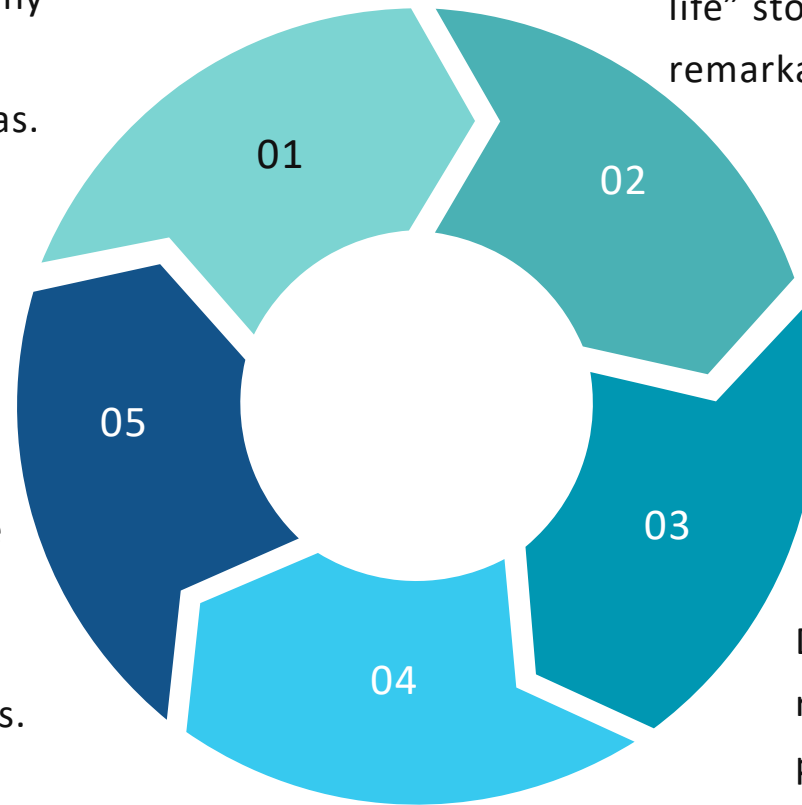
Lesson 5

From the beginning of the pandemic to date, it was important to continue research, as the consistent workflow provided financial support for both researchers and research participants.

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Conclusions:

- A crisis is a disruption, but all social institutions and actors immediately start to adapt to it, and research methods need to follow suit.

- Continuing research during crises produces essential knowledge for managing future crises and provides timely support, buffering staff from great personal cost becoming an indefinite 'new normal'.

- OPWH could be hired as peer navigators, tapping into their desire to help others.

- Medical staff can be trained in coping with fear, and stress, to primarily stabilize their own condition and then provide assistance to another.

- Crises shine a light on who should define research ethics and risks to human subjects, and how much input and authority research participants themselves should have about if and how safe it is for them to take part in a study.

"Elderly people and coronavirus"

https://uiphp.org.ua/en/public-health/events-and-announcements/item/291-congratulations-to-the-winners-and-participants-of-the-children-s-drawing-contest-elderly-people-and-coronavirus

Thank you for your attention

Contact details:

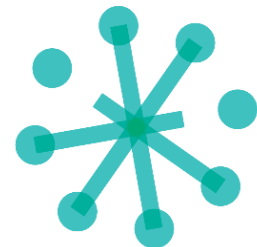- **Iryna Zaviriukha**

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