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## Russia invades Ukraine again: how can the health community respond?

Join others in calling for an immediate end to the fighting

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On the morning of 24 February 2022, Russian forces invaded Ukraine. As politicians across the world debate political, economic, and potentially military responses, the health consequences to consider are numerous and severe.

Most evident are the casualties from the conflict. These will grow as fighting continues, but on 1 March the United Nations human rights office confirmed 136 civilian deaths, including 13 children, and 400 civilian injuries, including 26 children. The true number is probably much higher. Russian military deaths are thought to number several thousand. It could get a lot worse. In the face of continued armed resistance from Ukrainians and fuel, weapon, and logistics shortages, fears are growing that President Putin could reduce Ukrainian cities to rubble. Those who view this as inconceivable should remember the devastation and bloodshed brought by Putin's forces in 2000 in Grozny, the capital of Chechnya.

## Threats to public health

As in all conflicts, there are also major threats to public health. Beyond the traditional ones—such as water and food supplies, threatened by Russian attacks on vital infrastructure—these events are unfolding while Ukraine is still in the middle of the covid pandemic, with almost 25 000 new cases each day<sup>3</sup> and less than 40% of the population vaccinated. Ukraine has also had to deal with a polio outbreak that started in October 2021, in a population with very low immunisation rates. A catch-up immunisation campaign had started on 1 February but is likely to be derailed by the fighting. And this invasion is of course only the latest exacerbation of tensions that date back to 2014, with Russia's annexation of Crimea. Conflict between Ukrainians and Russian backed separatists in the eastern region of Donbas had already resulted in over 1.5 million internally displaced people and a high burden of untreated post-traumatic stress disorder, depression, and anxiety.4

It is estimated that the current crisis could displace a further seven million Ukrainians.<sup>5</sup> Some will have been injured or have health problems requiring continuing medication. They all need shelter and security. The EU will allow Ukrainians to stay for up to three years without having to apply for asylum. Here in the UK, the government is allowing in only close family members of British nationals or Ukrainians with settled status.

The wider international ramifications also cannot be ignored. To take just one example, Ukraine has been described as Europe's breadbasket, but that seriously underplays its importance to global food supplies. Ukraine is the world's second biggest exporter of

grain. It provides much of the grain used in countries that are themselves in the middle of crises. <sup>6</sup> Lebanon, where storage capacity has yet to recover from a major explosion in Beirut port, receives 80% of its grain from Ukraine. Yemen, where bread prices have risen sharply in the past year, is also highly dependent on Ukrainian grain. The events in Ukraine can only exacerbate the suffering in these countries.

## What we can do

So what can we, as health professionals, do, beyond individual acts such as contributing to humanitarian organisations working in Ukraine and neighbouring countries?

Firstly, we must join others, including our fellow Russian scientists and health professionals, <sup>78</sup> to call for an immediate end to the fighting. This call must go beyond the usual vague exhortations that everyone should lay down their arms. We must distinguish right from wrong. There was no justification for the Russian action, and Ukraine is entitled under article 51 of the United Nations Charter to defend itself. Russian forces must stop all hostilities and withdraw before causing further death and injury.

Secondly, as European countries embark on recovery from the pandemic, they will face additional calls on the public purse. The end of the cold war brought a financial dividend as defence budgets were cut. However, it is now clear that in many cases this went too far, and, as in Germany, spending is likely to rise substantially. We cannot call for more money to prevent threats from microorganisms but criticise spending to protect against actions by hostile states.

Thirdly, we need to add our voices to calls for stronger global governance. Although the Russian invasion is a clear breach of international law, the reality is that there is no way to hold the Russian government, as a permanent member of the UN Security Council, to account. <sup>10</sup> Russia has not agreed to the jurisdiction of the International Criminal Court. But neither has the United States. The world must make clear that adherence to international law is not optional.

Finally, and closer to home, the invasion of Ukraine is only Russia's most recent attempt to influence politics in another country. The British government has never published the unredacted parliamentary report on Russian interference in British politics. <sup>11</sup> It is implausible that this is entirely unrelated to London's status as a global centre for money laundering. The corruption that often generates these funds deprives many health systems of money they need, causing untold death, disease, and misery. <sup>12</sup> We must demand that the UK cleans up this stain on its national reputation.

The invasion of Ukraine is a public health catastrophe, not just for those caught up in the fighting, but for countless others far beyond Ukraine's borders. Taken with the lessons of the covid-19 pandemic, <sup>13</sup> it should drive us to demand a safer and healthier world.

Competing interests: We have read and understood BMJ policy on declaration of interests and declare the following: MM has worked in Ukraine, Russia, and Belarus for over 30 years and has many friends in all three countries. AM has family, friends, and colleagues in Ukraine.

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