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Letter to the Editor

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Preventing Indirect Health Problems in Ukrainian Refugees: Establishing A Long-term Support System of Living Environment

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Currently, the invasion of Ukraine is a major global concern. A Japanese news broadcast showed a 5-year-old girl, who had been evacuated from Ukraine to Poland and was living in a shelter, lying limp with vomiting and diarrhea caused by infectious enteritis due to poor sanitation. Equally, an older adult with asthma was hospitalized due to the difficulties of living in a shelter. Refugees in Ukraine are in a humanitarian crisis and need global support for their resiliency.¹

After the Great East Japan Earthquake (GEJE), which occurred in March 2011 in Japan, approximately 120000 people were forced to live as evacuees for an extended period. Therefore, we are very grateful that 163 countries have pledged their support and 24 countries have organized support teams to enter the affected areas to provide continuous assistance to the evacuees of the GEJE to help them recover from the disaster. We noted that the evacuees of the GEJE living in small spaces suffered from elevated blood pressure due to the cold, or hypoglycemia due to malnutrition, both of which suggest the importance of maintaining the living environment in times of emergency.

Although war and disaster are different situations, as are refugees and evacuees, in this letter, we would like to suggest the type of living environmental support that should be provided to those suffering in critical circumstances from a medium- to long- term perspective. The mid- to long- term approach is used to prevent avoidable deaths by improving the living environment in evacuation shelters and managing refugees' health conditions.

After the GEJE, prolonged evacuation, physical, and mental stress, or exacerbation of a pre-existing medical condition led to avoidable deaths, thus posing a major health problem.³ Furthermore, a study of indirect health effects such as the increase of cardiovascular or infectious diseases in the 5 years after the GEJE indicated that the risk of death was greatest in the first month, possibly due to the vulnerability caused by the crises such as the loss of access to medical care, environmental change, and physical as well as mental stress.⁴ Vulnerable populations need support to improve their living conditions.

Most refugees are women and children, who may require supplies such as pediatric diapers, nursing supplies, and sanitary napkins. They are less likely to voice their needs, and thus their concerns and needs are often not heard or considered. UN Women reported that due to a lack of access to social services, women were forced to bear an increasing burden such as caring for children and older family members.⁵

Previous research suggests the importance of an initial public health support, which should aim at mitigating the indirect health effects of critical situations for residents, although invasion and disaster should not be equated. The global community should also provide as much support as possible to refugees from Ukraine. Medium- and long- term support for the physical and mental health of Ukrainian refugees should proceed concurrently with conflict resolution and refugee migrations.¹

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