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**MARKETING ASPECTS ESTABLISHING
A REGULAR INTERACTION WITH THE FAMILY DOCTOR
AND RECEIVING MEDICAL SERVICES
IN THE CONDITIONS OF WAR**

**МАРКЕТИНГОВІ АСПЕКТИ НАЛАГОДЖЕННЯ
РЕГУЛЯРНОЇ ВЗАЄМОДІЇ З СІМЕЙНИМ ЛІКАРЕМ
Й ОТРИМАННЯ МЕДИЧНИХ ПОСЛУГ
В УМОВАХ ВІЙНИ**

In the health care system, an important factor is the interaction of patients with doctors, which, accordingly, helps to achieve high results and treatment efficiency. During the period of the full-scale invasion of the Russian Federation into Ukraine (from February 24, 2022), the problem of the impact of stressful situations on the health of patients, as a result of which the body is not able to cope with many ailments on its own, became relevant.

Staying of patients in constant contact with a family doctor is an important and necessary prerequisite for undergoing regular scheduled examinations in polyclinics and monitoring the health of patients, primarily for the purpose of detecting various types of diseases at the initial stage.

In this study, a marketing assessment of a patient survey was carried out regarding the contact and interaction of the population with a family doctor in the conditions of a full-scale invasion of Ukraine (Table 1).

Among the respondents who took part in the survey, more than half (59.8%) answered that they were constantly in contact with the doctor and had constant contact with him. This, of course, was an important positive factor that gave patients the opportunity to receive consultations in "real time" mode or online mode for every necessary need, including being at a great distance from the doctor.

The answers of a third of the respondents (28.1%), who answered that they did not try to contact the family doctor during this entire period, turned out to be interesting. Accordingly, this category of respondents either did not have an urgent need for consultation with a family doctor, or did not have direct contact, as they were at a considerable distance from the doctor.

Marketing assessment of respondents regarding contact and interaction with a family doctor, which was conducted in 2023

(one answer, percentage among those who made a declaration with a family doctor)	Percentage of responses
Yes, had all this time	59,8
They did not try to contact the family doctor during all this time	28,1
No, a new declaration was made with the doctor after February 24, 2022	4,2
No, the doctor is in the Armed Forces/abroad/in another region, and there is no other	2,9
No, it is impossible to call, and there are no contacts	2,7
Difficult to answer	2,2

Source: [1]

At the same time, in the conditions of a full-scale military invasion, a new trend, which was previously manifested infrequently or to a lesser extent, is observed – patients signing a declaration with a new doctor (4.2% of respondents). This category of respondents primarily includes internally displaced persons who, after February 24, 2022, were far from their own home and needed medical assistance and consultations from a family doctor from time to time.

There were two more categories of respondents in an almost equal proportion (about 3%): the first are those in which the family doctor was either abroad, or was mobilized for service in the Armed Forces, or was in another region (2.9%), the second – these are those who said that they cannot call their family doctor when they need medical help, and they do not have other contacts to restore contact with him (2.7%).

Thus, the conducted survey on the communication of patients with family doctors testified that in the conditions of martial law in Ukraine, the possibilities of contacts for obtaining full-fledged consultations and the necessary medical assistance have become significantly more difficult.

It is also worth paying attention and carrying out a marketing assessment of the results of the survey regarding ways for patients to receive full-fledged medical care in Ukraine (Table 2).

According to the results of the survey, we observe that the majority of Ukrainians received medical services in health care institutions after February 24, 2022, that is, each patient had different opportunities to communicate with a family doctor.

Among the respondents, about 43 percent answered that their communication and receiving medical services took place at a personal appointment with a family doctor, where, accordingly, the doctor and the patient were able to obtain a certain level of interaction.

Table 2

An assessment of how respondents were able to receive medical care in Ukraine after a full-scale military invasion (February 24, 2022)

(choose all the answer options that suit you)	Percentage of responses
At a personal reception	42,5
They did not receive it, as there was no need for medical assistance	41,8
By phone or using other means of telecommunication	18,3
In a hospital	10,6
They did not receive due to the lack of free medical care and the lack of funds for paid medical services	2,2
They did not receive medical care due to inaccessibility	1,8
Other	1,0
It is difficult to answer, they did not answer	0,9

Source: [1]

Part of the respondents (more than 18 percent) answered that they received medical care from a doctor by phone or other means of telecommunication.

More than 10 percent of respondents answered that they received medical services in health care facilities while staying in a hospital, that is, directly staying in a hospital 24 hours a day.

The answers of almost 4 percent of respondents are interesting, some of them indicated that they could not get access to medical care due to the sensitivity of financial resources, and another percentage of respondents did not have the opportunity to receive medical services due to their inaccessibility. This is primarily due to the relocation of internally displaced persons to other regions of Ukraine, which in many cases made it impossible to maintain a relationship with a family doctor.

Thus, we see that even in the conditions of war, the majority of the population still receives the medical services it needs, namely both at a personal appointment with a doctor and, if necessary, staying in a hospital in many health care institutions, which requires stay with the family doctor in constant contact and constant referral regarding the further treatment of patients at other doctors of the secondary and tertiary level.

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