

Under Russian bombardment, this Ukrainian children's hospital got an Australian lifeline

Sydney Morning Herald/The Age [David Crowe](#), February 1, 2026

Olga Pavliieva smiles when she talks about her son, Yehor, in the bare corridors of a Lviv hospital on a recent winter evening. The hallways of the paediatric ward are quiet in this city in western Ukraine. The nurses have paused their work, and most parents are with their children in their rooms as they settle down for the night.

Olga hugs Yehor, 13, and pats him on the heart. They have good news. The latest scan shows progress in treating a brain tumour that brought Yehor to this hospital weeks earlier. His head is wrapped in bandages, but he is grinning.



Olga Pavliieva and her son, Yehor, at the Lviv Clinical Centre for Children's Healthcare.
David Crowe

This hospital is distant from the front lines in eastern Ukraine, but it and its health workers are feeling the shocks from almost four years of Russian bombardment. Ukraine has suffered almost 600,000 casualties since the full-scale invasion on February 24, 2022, and the pressure on the health system has been extreme. Treating soldiers has been a priority.

Yehor, however, is just like a child in Australia who needs care. Fortunately, and thanks in part to Australian aid funding, there was a medical centre with the expertise and equipment to help.

Olga, who works in advertising in Zaporizhzhia, a city in eastern Ukraine, thought of leaving the country to seek help.

Millions of mothers and children have fled Ukraine, even though this has split families because most men are barred from leaving. [At least 5.9 million Ukrainians now live abroad](#), according to the United Nations.

For Olga, however, it was better to stay with her husband, their family, their work and their friends. The treatment in Lviv is free, and the cost of similar treatment in Germany is significant, but this was not the dominant factor in their desire to stay in Zaporizhzhia.

“It was not about the money,” she tells me. “Our home is there, and we want to stay there as long as it’s possible.”

When we are doing our jobs, we still have this kind of fear inside that the next missile could get to our hospital. But what to do? This may be our destiny, the destiny of every Ukrainian: to do the job they can do, and they have to do.

Mykhailo Lovha, paediatric neurosurgeon

Mykhailo Lovha, a paediatric neurosurgeon at the Lviv Clinical Centre of Children’s Healthcare, has worked for more than a decade to help children using some of the most advanced medicine. In a country at war, he could treat soldiers instead. But cancerous cells do not slow down during wartime. Children and their families need a civilian health system that can withstand missile attacks and blackouts.



“If a child is born in Ukraine during the war period, does it mean that we have to treat this child worse than others?” Lovha asks. “Why?” His answer is to continue his surgery as much as possible, as it was before the full-scale invasion. The Lviv Clinical Centre is the second-largest children’s hospital in Ukraine, so families head to the western city to get help.

Lviv is safer than Kyiv or the cities near the front, but it is not spared from attack. Air raid alerts are common at night, and its electricity infrastructure is a prime target. [Russia struck the Lviv district with a ballistic missile last month.](#) Hospitals are not necessarily refuges from the war: Russia hit the main children’s hospital in Kyiv in July 2024.

“There is no safe place now in Ukraine,” says Lovha. “We all know that Russians can attack any building.

“It means that when we are doing our jobs, we still have this kind of fear inside that the next missile could get to our hospital. But what to do? This may be our destiny, the destiny of every Ukrainian: to stay in their field, to do the job they can do, and they have to do.

“My job, especially during the war period, is to be here and help Ukrainian children.”



Paediatric neurosurgeon Mykhailo Lovha says his duty is to treat sick children regardless of the war raging in Ukraine’s east and overhead. David Crowe

Reforms to the Ukrainian health system began six years ago, but they stopped with the full-scale invasion. Now, every hospital has to survive as best it can. The Lviv Clinical Centre is funded by the government and supported by non-governmental organisations, including Tabletochki, a charity in Kyiv backed by foreign donors.

Tabletochki has helped 8000 children and families over more than 14 years and has financed training for more than 900 medical staff. It channels support to 28 children's hospitals, so they have medicine, equipment and infrastructure.

This includes \$275,000 from the **Ukraine Crisis Appeal**, an Australian charity, for the Tabletochki program, which supports Lovha in Lviv. The fund is supported by the **Australian Federation of Ukrainian Organisations** and has been running since Russian forces moved into eastern Ukraine and annexed Crimea in 2014. Its money helped buy the equipment needed for the operation on Yehor.

The first round of surgery for Yehor went well, and he and Olga returned home to Zaphorizhzhia. When he had more headaches, however, he came back to Lviv for more treatment.

“He had a typical complication that we call obstructive hydrocephalus,” says Lovha.

“We had to perform a second surgery with the endoscopic equipment that Tabletochki, together with the Ukraine Crisis Appeal, bought for us.

“With that endoscopic equipment, we created a very small hole in an additional place, which we call the floor of the third ventricle. And we've done a new MRI, and the new MRI shows there is no tumour.”

Lovha has a matter-of-fact way of describing incredibly complex surgery. The third ventricle is sometimes called a tiny aqueduct of the brain, and the operation requires a high-resolution camera and specialised equipment to use this pathway to remove a tumour.

This means Olga and Yehor are going home to the rest of the family in Zaporizhzhia.

Also on the ward are Olha Rauchuk and her 10-year-old son, Ostap. He was diagnosed with a malignant brain tumour known as a medulloblastoma, often described as one of the most common brain cancers among children. The tumour was removed in August 2024, but the treatment has continued. Ostap is on weekly chemotherapy.



Olha Rauchuk and her son Ostop, 10, who is receiving weekly chemotherapy for a brain tumour. David Crowe

Olha and Ostop are from Lutsk, north-east of Lviv, so they do not need to travel far across Ukraine to get to this hospital. Their journey is of a different kind, with a long period of treatment. Leaving the country for this medical care would place an immense strain on the family: Rauchuk, a trade manager, has a husband and a 12-year-old daughter in Lutsk.

They also smile when they tell me their story. Russia brings terror to Ukraine every night with its drones and missiles, but the mother and son are together despite the suffering of the war. And Ostop is getting the medical care he needs. Thanks, in part, to donors overseas.