

Emergency in Ukraine

External Situation Report #15, published 16 June 2022

Reporting period: 2–15 June 2022



7.3 million
REFUGEES



7.1 million
INTERNALLY
DISPLACED



10046
CIVILIAN
CASUALTIES



4481
CIVILIAN
DEATHS

Key updates

- According to [WHO's Surveillance System for Attacks on Health Care](#), there have been 295 attacks on health care, resulting in 59 injuries and 76 deaths, reported between 24 February and 15 June. Attacks on health care include those against health facilities, transport, personnel, patients, supplies and warehouses. These attacks deprive people of urgently needed care, endanger health-care providers, and undermine health systems.
- Efforts are ongoing to deliver medical supplies from the WHO supply and logistics base in Lviv to affected oblasts amidst fuel shortages, limited warehouse capacity, and security restrictions due to ongoing military operations. Delivery of life-saving supplies to hard-to-reach locations remains a foremost priority for WHO.
- One in four people in Ukraine is over 60, and the impact of the ongoing war on older people, including those with disabilities, has been substantial. Essential life-saving support, as well as necessary evacuation assistance, should be provided to those who have not been able or willing to leave their homes, including those living in care institutions. On 14 June WHO released a [joint statement](#) with the Office of the United Nations High Commissioner for Human Rights (OHCHR), United Nations Population Fund (UNFPA) and HelpAge International on working towards upholding the rights and safeguard the health and well-being of older people through improving and sustaining health and social care provisions.
- Between 13 March and 12 June Emergency Medical Teams (EMTs) in Ukraine responded to 4604 outpatient visits, of which 16% (736 outpatient visits) were infectious diseases and 14% (644 outpatient visits) were trauma. Among infectious diseases, the majority (640 outpatient visits) were acute respiratory infections.
- As of 14 June at least 641 patients (78% of the requests) have been evacuated for medical reasons from Poland, the Republic of Moldova, Slovakia and Ukraine via the EU Civil Protection Mechanism to 13 European countries (Belgium, Denmark, France, Germany, Ireland, Italy, Luxembourg, the Netherlands, Norway, Portugal, Romania, Spain and Sweden).
- Please note that the Ukraine situation report will be produced on a biweekly basis.

1. SITUATION UPDATE

Figure 1. Distribution of Internally Displaced Persons (IDPs) and refugees in Ukraine and in refugee-hosting countries as of 13 June 2022

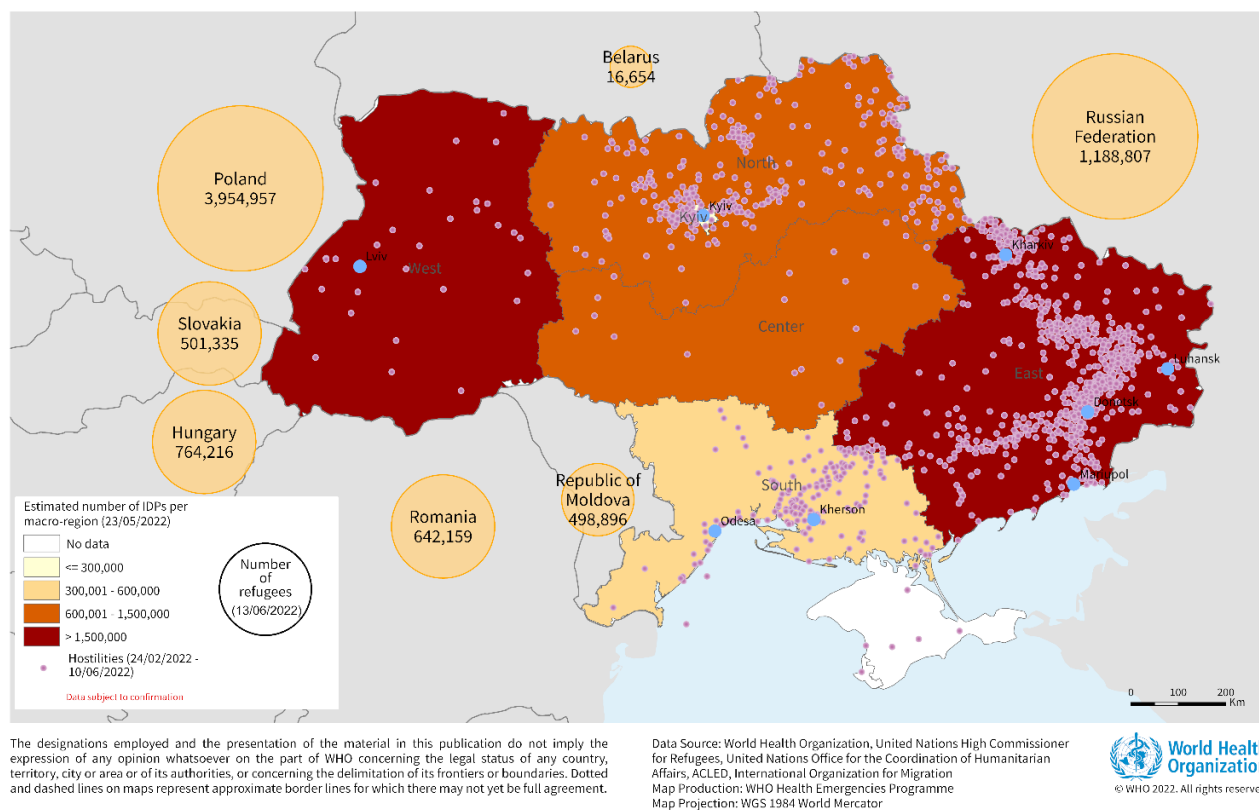


Table 1. Key humanitarian figures as of 13 June 2022

People affected	
Internally displaced persons	7.1 million
Refugees	7.3 million
Ukrainians entering Ukraine	2.4 million
Injuries among civilians	5565 (as of 15 June)
Deaths among civilians	4481 (as of 15 June)

1.1 Population displacement and refugees

According to government data compiled by the Office of the United Nations High Commissioner for Refugees (UNHCR), over 7.3 million refugees have left Ukraine for surrounding countries between 24 February and 13 June, with the highest proportion, 52%, in Poland, followed by 10% in Hungary. According to the International Organization for Migration (IOM), as of 14 June approximately 7.13 million people have been internally displaced. As the crisis evolves, displacement and mobility patterns continue to change, requiring scaled-up and integrated response interventions that address both emerging and existing needs.

1.2 Overall WHO response

WHO is supporting the health sector in Ukraine and in the refugee-hosting countries. WHO has mobilized experts and is working with partners, including the Global Outbreak Alert and Response Network (GOARN), EMTs, Health Cluster, and Standby Partners, to provide support with access to health services – primary health care (PHC), routine and COVID-19 vaccination, mental health and psychosocial support (MHPSS), trauma care, supply and logistics, prevention of and response to sexual exploitation and abuse, risk communication and community engagement (RCCE), and information management.

WHO continues to support the Ministry of Health (MoH) of Ukraine and the MoHs of the refugee-hosting countries to ensure safe medical evacuation of patients. Transportation of patients within Ukraine is ensured by the national emergency services, while transportation across the border to the European Union (EU) is managed by international EMTs and coordinated by the CADUS team, a German nongovernmental organization (NGO) providing EMT support. As of 14 June, at least 641 patients (78% of the requests) have been medically evacuated from Poland, the Republic of Moldova, Slovakia and Ukraine via the EU Civil Protection Mechanism to 13 European countries (Belgium, Denmark, France, Germany, Ireland, Italy, Luxembourg, the Netherlands, Norway, Portugal, Romania, Spain and Sweden).

Standby Partnerships

Standby Partners have strengthened WHO's capacity for this response by confirming 18 positions to be deployed for operations in Ukraine and in the refugee-hosting countries. Most of these deployments are scheduled for six months. So far, 13 experts have been deployed and five are currently under recruitment. Roles deployed so far through Standby Partners include: MHPSS – one expert, RCCE – two experts, Preventing and Responding to Sexual Exploitation, Abuse and Harassment (PRSEAH) – four experts, Geographic Information System (GIS) – one expert, Information Management – two experts, and Health Cluster coordination – two experts. These positions are supported through Partners, including the Norwegian Refugee Council (NORCAP) – five deployments, UK-Med – two deployments, Dutch Surge Support – one deployment, the Canadian International Civilian Response Corps (CANADEM) – three deployments, and iMMAP – two deployments. The five positions under recruitment are to support operations in Poland (Partner Coordination, Information Management, MHPSS, and Gender-Based Violence) and Romania (Sexual and Reproductive Health Expert).

Funding

- WHO issued an [updated appeal](#) detailing its resource needs for Ukraine and countries receiving and hosting refugees for March–August for Ukraine and March–December for other countries. As of 15 June, WHO has received US\$ 72.8 million (49%) against its appeal for US\$ 147.5 million.
- WHO would like to thank [donors](#) who are supporting its response in Ukraine and countries receiving and hosting refugees, including: Canada, European Civil Protection and Humanitarian Aid Operations (ECHO), European Commission – Directorate-General for Neighbourhood and Enlargement Negotiations (DG NEAR), Ireland, Japan/Asia Europe Foundation, the King Salman Humanitarian Aid & Relief Centre (KSRelief), Norway, Novo Nordisk Foundation, Switzerland, the UN Central Emergency Response Fund (CERF) and the Ukraine Humanitarian Fund (UHF), the United States Bureau of Population, Refugees, and Migration and Bureau of Humanitarian Assistance for their timely contributions.
- During the first weeks of the response, WHO released US\$ 10.2 million from its [Contingency Fund for Emergencies](#) to kick-start activities. These funds have been fully absorbed.

More information on funding can be found [here](#).

2. HEALTH PRIORITIES AND WHO ACTIONS IN UKRAINE TO DATE

2.1 Access to health care in Ukraine

Ukraine's health system is facing multiple challenges. Access to health care is severely impacted due to security concerns, restricted mobility, broken supply chains and mass displacement. Health care continues to come under attack (which includes attacks against health facilities, transport, personnel, patients, supplies and warehouses), with a total of 295 attacks¹ on health care, resulting in 59 injuries and 76 deaths, reported between 24 February and 15 June.² Further attacks are being verified. These attacks deprive people of urgently needed care, endanger health-care providers, and undermine health systems.

Through engagement with the MoH, national health authorities, partners and donors, WHO has been able to provide populations with life-saving supplies, equipment and medicines. However, reaching some of the hardest-hit areas, where health systems have been severely disrupted, remains a challenge.

2.2 Priority public health concerns

Current health priorities are listed below (more details on each of these public health concerns can be found in the previously published [situation reports](#)).

Conflict-related trauma and injuries	Civilian casualties continue to rise, largely due to the use of explosive weapons. Disruption of health-care facilities and closure of many pharmacies in Ukraine has limited access to trauma care.
Maternal and newborn health	While only limited data are available on the current situation of maternal and newborn health, access to antenatal, intrapartum and postnatal care have been disrupted due to the ongoing conflict.
Management of chronic diseases and noncommunicable diseases (NCDs)	Provision of care for cancer patients continues in Ukraine, despite disruptions in health-care services.
Risk of emergence and spread of infectious diseases	<p>The risk of disease outbreaks, such as cholera, measles, diphtheria or COVID-19, has been exacerbated due to lack of access to water, sanitation and hygiene, crowded conditions in bomb shelters and collective centres, and suboptimal coverage for routine and COVID-19 immunizations.</p> <p>Between 26 May and 15 June no new cases and deaths were reported. This could be due to reporting challenges resulting from the ongoing conflict.</p> <p>Between 23 February and 12 June, the overall number of beds available and beds occupied by patients with COVID-19 decreased by 49% and 95%, respectively, reflecting potential challenges in accessing hospitals, limited data reporting, and a potential decrease in actual hospitalizations. The most notable decrease was reported in the Luhansk oblast (100%), followed by the Vinnytsya (88%) and Chernivtsi (84%) oblasts.</p>
Protection issues: risk of human trafficking and escalated risk of sexual and gender-based violence (SGBV)	People fleeing Ukraine, particularly women and girls, continue to face challenges and vulnerability risks as they seek safety in neighbouring countries. Prevention and protection from gender-based violence, trafficking, sexual exploitation and abuse remain key concerns.

¹ Attacks on health care include those against health facilities, transport, personnel, patients, supplies and warehouses.

² [Surveillance System for Attacks on Health Care \(SSA\)](#).

Mental health and psychosocial support (MHPSS)	Psychosocial support is much needed, particularly in view of a likely increase in negative coping mechanisms, including abuse and self-harm. The MoH of Ukraine estimated that 15 million people might require psychological support and treatment due to war-related trauma and stress. Of the 15 million, 3-4 million people potentially require medication-assisted treatment. Concerns have been raised about the long-term mental health impact of the war in Ukraine.
Technological hazards and health risks	<p>Potential nuclear hazards</p> <p>There are both operational and decommissioned nuclear facilities in Ukraine. In addition, numerous radioactive sources are used in industry and in health-care facilities. According to the International Atomic Energy Agency's analysis, the current nuclear safety situation appears under control. However, the ongoing armed conflict puts nuclear installations at risk of accidental or deliberate damage and jeopardizes the security of radioactive sources.</p> <p>WHO has developed technical guidance and public communication materials on this subject. Training programmes focusing on first response to radiation emergencies are also being developed in collaboration with national partners in Ukraine.</p> <p>Potential chemical hazards</p> <p>The Governor of the Luhansk oblast reported that the nitric acid tank at a chemical plant was shelled. Nitric acid fumes can irritate the respiratory tract and cause bronchitis, lower respiratory tract infections and pulmonary oedema.</p>
Food security and nutrition	The conflict is affecting food security within and outside Ukraine. According to World Food Programme, one in three households in Ukraine is now food-insecure, with an estimated 600 000 people in need of nutrition support in Ukraine between March and August 2022.

2.3 WHO and partner actions in Ukraine to date

Leadership and coordination

- At the request of the MoH, WHO has prepared a video explaining how to obtain data on vaccinations for IDPs and people who have left the country as a result of the ongoing conflict. For more information, click [here](#).
- One in four people in Ukraine is over 60, and the impact of the ongoing war on older people, including those with disabilities, has been substantial. Essential life-saving support, as well as necessary evacuation assistance, should be provided to those who have not been able or willing to leave their homes, including those living in care institutions. On 14 June WHO released a [joint statement](#) with OHCHR, UNFPA and HelpAge International on working towards upholding the rights and safeguard the health and well-being of older people through improving and sustaining health and social care provisions.

Health information and operations

The health sector response continues to prioritize saving lives and protecting mental health. Actions focus on ensuring access to emergency health care and priority essential health services for wounded people and others affected by the armed conflict, COVID-19, poliomyelitis, and other health threats – including technological, industrial, and chemical, biological, radiological, and nuclear hazards. Continuity of treatment and care for people with noncommunicable diseases – including diabetes and cancer – is a top priority.

- As many countries worldwide report cases of monkeypox, as of 15 June, no cases of monkeypox have been detected in Ukraine. WHO continues to provide situation updates and various guidance documents, including clinical management, RCCE, laboratory testing, surveillance etc. For more information, please see the [Disease Outbreak News published on 10 June on the Multi-country monkeypox outbreak](#).
- WHO provided guidance to the MoH on setting up a procurement structure in Ukraine. The structure will allow access to specialized sexual and reproductive health medicine and equipment in Ukraine. WHO published a guidance document "Principles to guide health system recovery and transformation in Ukraine".

- In the week of 6 June, WHO, in collaboration with the National Health Service of Ukraine (NHSU), organized a two-day meeting on strategic planning for health-care financing in Ukraine during the war. The event provided an opportunity to review the NHSU's strategy on the regions' current needs for health financing and to discuss adapting the electronic health-care system, monitoring systems, the package of medical guarantees, contracting as well as determining the cost of primary care services and the sustainability of the health-care financing system in Ukraine.
- In the week of 6 June WHO supported the Ukraine Public Health Center (UPHC) in assessing laboratory needs (UPHC and national needs) for measles and rubella testing.
- WHO extended support through field missions to the Zakarpattia, Ternopil, Chernivtsi and Volyn oblasts to prepare for vaccination of IDPs at designated sites starting at the beginning of June.
- On 2 June WHO conducted a two-day basic chemical preparedness and response training for first responders from the Donetsk and Luhansk regions. The training was attended by 22 participants.
- WHO is setting up a hub in Vinnytsya to strengthen Emergency Medical Services (EMS) support in Vinnytsya and the neighbouring oblasts. The hub will also keep a contingency stock of prepositioned emergency medical supplies and support the provision of EMS in the oblast's rural areas, where a significant number of IDPs have settled.
- Between 15 and 30 May, with support from WHO, a total of 1027 vaccinations were performed in 21 IDP locations in the Rivne region. These vaccinations included 351 doses of the COVID-19 vaccine, 292 doses of the diphtheria vaccine and 141 doses of the measles, mumps and rubella vaccine.
- Based on the [WHO curriculum for training health-care providers "Caring for women subjected to violence" \(revised edition, 2021\)](#), the WHO Country Office developed a two-day training package for PHC providers and aims to launch this intervention in July in cooperation with the MoH, the [Ukrainian Foundation for Public Health](#) and PHC experts through the network of the PHC community – the [Academy of Family Medicine of Ukraine](#). The training objectives include:
 - creating the understanding of SGBV as a public health problem
 - addressing biases against SGBV survivors among PHC professionals
 - strengthening the knowledge and skills with respect to identifying survivors of SGBV and providing first-line support
 - providing information on national legislation and guidelines on treatment options for SGBV survivors and on referral networks.

Supplies and logistics

- As of 13 June, WHO has delivered 615 metric tonnes of medical supplies to Ukraine, comprising trauma and emergency surgery supplies (TESKs), interagency emergency medical supplies (IEHKs), blood transfusion materials, essential medicines, and other critical supplies, including body bags, ambulances, power generators, refrigerators and other equipment. Of the 615 metric tonnes of medical supplies, 257 metric tonnes have been delivered to beneficiaries in 24 oblasts across Ukraine, including 500 oxygen concentrators (16.5 metric tonnes) delivered to Kyiv.
- As part of overall preparedness measures to prevent, detect and respond to cholera, WHO has prepositioned 5000 rapid diagnostic tests in Ukraine.
- In the past week the Cherkasy, Chernihiv, Chernivtsi, Dnipropetrovsk, Donetsk, Ivano-Frankivsk, Kharkiv, Kherson, Khmelnytsky, Kirovohrad, Kyiv, Luhansk, Lviv, Mykolayiv, Odesa, Poltava, Rivne, Sumy, Ternopil, Vinnytsya, Volyn, Zakarpattia, Zaporizhzhya and Zhytomyr oblasts received 14.3 metric tonnes of medical supplies (valued at US\$ 420 872).
- Fifty kits of six assistive technology products (AT6), comprising elbow crutches, axilla crutches, walking frames, walking sticks, wheelchairs for hospital transportation, and toilet/bath chairs, were delivered to hospitals in eastern Ukraine (Kharkiv, Zaporizhzhya, Mykolayiv, Dnipropetrovsk and Poltava oblasts) to support acute trauma care. The delivery of the AT6 kits was approved by the MoH of Ukraine and synchronized with the delivery of external fixators (frames used in surgeries to stabilize broken bones).

The kits were accompanied with Ukrainian-language instructions for prescribing, fitting, and training on the use of the supplied assistive products.

- WHO has delivered sufficient TESKs to treat approximately 11 952 people, and IEHKs to treat an estimated 1.7 million people for three months.
- Efforts are ongoing to deliver medical supplies from the WHO supply and logistics base in Lviv to affected oblasts amidst fuel shortages, limited warehouse capacity, and security restrictions due to ongoing military operations. Delivery of life-saving supplies to hard-to-reach locations remains a foremost priority for WHO.
- Guidelines on donations of urgently needed supplies to support the emergency response in Ukraine and neighbouring countries are available on WHO's website: [Medical supply donations for Ukraine](#). WHO continues to engage with governments, private organizations, and biomedical and shipping companies to secure medical supply donations.

Risk communication and community engagement (RCCE) and external communications

- RCCE materials on cholera prevention and treatment have been developed.
- Message testing is being launched to measure the effectiveness of differently designed messages on access to mental health, as part of a randomized control trial.
- From 21 May to 4 June field visits were carried out to the Kyiv, Dnipropetrovsk and Zaporizhzhya oblasts for community listening sessions. The key findings were as follows:
 - Health needs are not yet prioritized in the regions. People seek health information and services mostly in case of urgent need and for chronic conditions. There is high demand for information on MHPSS and Psychological First Aid (PFA).
 - A considerable amount of information on health protection and accessing health services is available, but it remains scattered.
 - A one-stop shop information resource for IDPs on the health services offered in the area and ways of accessing them is not always available.
- After the visit, materials on MHPSS and PFA were shared with local civil society organizations (CSOs) and health workers. Materials for IDPs on accessing health services in Zaporizhzhya are being developed in partnership with the local health department.



Discussing community health needs with a doctor at a primary health care centre in Lubianka (Bucha district, Kyiv region). © Margaret Harris

Operational partnerships

EMTs

- Currently there are six operating EMTs and five additional teams supporting specialized care activities in Ukraine.
- In the past week (6–12 June), four international EMTs collaborated and conducted the transfer of 14 patients, of which eight were supported as part of the MoH's international medical evacuation pathway across the Polish border to the Rzeszów airport by CADUS, Global Response Management, Samaritan's Purse and the International Rescue Team.
- As of 14 June, several trainings using mixed modalities (virtual and/or face-to-face) have been conducted on topics such as advanced trauma life support (for adults and children), basic emergency medicine and trauma, surgical management of penetrating trauma, and tactical emergency casualty care.
- Between 13 March and 12 June EMTs in Ukraine responded to 4604 outpatient visits, of which 16% (736 outpatient visits) were infectious diseases and 14% (644 outpatient visits) were trauma. Among infectious diseases, 87% (640) were acute respiratory infections.

GOARN

- From 2 March to 14 June the GOARN institutions/network have been providing technical support. Currently, to address requests for support received from the countries, 10 experts are deployed (two in Denmark, two in Poland, two in Romania, two in Slovakia, one in Czechia, and one in Ukraine remotely) and five experts are scheduled to be deployed soon (two in Poland, one in Ukraine, one in Denmark, and one in Czechia). So far six experts have completed their deployment (two in Poland, one in Denmark, one in the Republic of Moldova, and two in Czechia).

Regional WHO-UN-RCM Coordination Platform for Emergencies

- On 2 June the first meeting of the Regional WHO-UN-Red Cross Movement Emergency Coordination Platform took place. It focused on the crisis in Ukraine and refugee-hosting countries. Representatives from 10 UN agencies and partner organizations were present, as well as members of the Issue-Based Coalition for Health (IBC-Health) and members of the WHO Regional Office for Europe's Incident Management Support Team. As a result of this meeting, partnerships in the Refugee Health Extension were expanded and strategic discussions are under way regarding the collection of data for action and how the UN and stakeholders can work more synergistically with governments.
- The next meeting, tentatively scheduled for 23 June, will continue the discussion on the war in Ukraine and on the refugee-receiving countries.

Health Cluster

WHO plays an essential coordination role in the response as the lead agency of Health Cluster Ukraine. As of 8 June, Health Cluster Ukraine has 136 international and local Partners, with planned, ongoing and/or completed health-related activities in 24 oblasts. The Health Cluster team continues to support the review of new projects submitted to the [Ukraine Humanitarian Fund](#) (UHF).

Additional information is available on Health Cluster Ukraine's [website](#). Health Cluster Partners have reached

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