Emergency in Ukraine



European Region

External Situation Report #17, published 14 July 2022 Reporting period: 30 June–13 July 2022





6.3 million
INTERNALLY
DISPLACED



11 544
CIVILIAN
CASUALTIES



5024CIVILIAN
DEATHS

Key updates

- According to WHO's Surveillance System for Attacks on Health Care, there have been 382 attacks on health care, resulting in 64 injuries and 82 deaths, reported between 24 February and 13 July. 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.
- The WHO Strategic Response Plan for June to December 2022 was published on 4 July 2022. It is an overarching framework built on the Ukraine Flash Appeal 2022 to guide priorities and work in support of government authorities who are leading the readiness, response and early recovery activities. It will be implemented in collaboration with partners providing life-saving support both inside and outside Ukraine.
- A team of WHO experts was on a mission from 1 to 8 July to provide technical support to Ukraine on environmental health issues, including water-related preparedness and response measures, with a focus on responding to a potential cholera outbreak. The team met with key national and international partners, including representatives from the United Nations Children's Fund (UNICEF), the United States Centers for Disease Control and Prevention (CDC), the Ministry of Health (MoH) of Ukraine, the Kyiv oblast Center for Disease Control and Prevention, the State Service of Ukraine on Food Safety and Consumer Protection, and the Ukrainian Association of Water and Sewer Utilities. The mission was organized by WHO, with financial support from the WHO Foundation.

1. SITUATION UPDATE

Figure 1. Distribution of Internally Displaced Persons (IDPs) and refugees in Ukraine and in refugee-hosting countries as of 5 July 2022

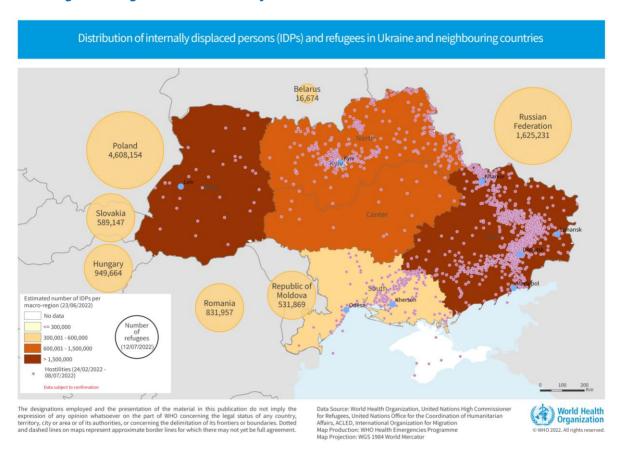


Table 1. Key humanitarian figures as of 12 July 2022

People affected	
Internally displaced persons	6.3 million (as of 23 June)
Refugees	9.2 million
People entering Ukraine	3.5 million
Injuries among civilians	6520 (as of 11 July)
Deaths among civilians	5024 (as of 11 July)

1.1 Population displacement and refugees

As the crisis evolves, displacement and mobility patterns continue to change. This requires a response that addresses both emerging and existing needs.

According to government data compiled by the Office of the United Nations High Commissioner for Refugees (UNHCR), 9.2 million refugees have left Ukraine for surrounding countries between 24 February and 12 July. Just over half have entered Poland (51%), while significant proportions have entered the Russian Federation (17%), Hungary (10%), Romania (9%), Slovakia (6%) and the Republic of Moldova (6%).

As of 23 June an estimated 6.3 million people remain internally displaced within Ukraine, representing 14% of the general population. Twenty-three per cent of Ukrainians have been unable to access medication due to the conflict.

1.2 Overall WHO response

The role of WHO is to coordinate the response to health emergencies, promote health and well-being, prevent disease and expand access to health care.

In support of the health sectors in Ukraine and refugee-hosting countries, WHO is working with key stakeholders, including:

- Global Outbreak Alert and Response Network (GOARN) to provide support for infectious disease outbreaks;
- Emergency Medical Teams (EMTs) to deliver health-care services;
- Health Cluster Partners to coordinate humanitarian health activities;
- Standby Partners to deploy emergency health-care personnel; and
- the governments of Ukraine and of refugee-hosting countries to provide support to improve access to health care and to ensure safe medical evacuation (medevac) of patients.

Funding

- WHO's updated appeal (May 2022) details its resource needs for Ukraine and refugee-hosting countries. It estimates that between March and August 2022, US\$ 80 million is required for the health response in Ukraine. To meet the health needs in refugee-hosting countries between March and December 2022, it estimates that US\$ 67.5 million will be required.
- As of 13 July WHO has received US\$ 93.7 million (63.5%) against its total appeal from 17 donors.
- 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), Germany, Ireland, Japan/Asia Europe Foundation, the King Salman Humanitarian Aid & Relief Centre (KSRelief), Kuwait, 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, WHO Foundation, and the Socialist Republic of Viet Nam, for their timely contributions.

2. HEALTH PRIORITIES AND WHO ACTIONS IN UKRAINE TO DATE

2.1 Access to health care in Ukraine

Access to health care is severely impacted due to security concerns, restricted mobility, broken supply chains and mass displacement. Between 24 February and 13 July, 382 attacks on health care¹ were reported², resulting in 64 injuries and 82 deaths, with five new attacks reported in the past two weeks. These attacks deprive people of urgently needed care, endanger health-care providers, and undermine health systems.

The conflict has disrupted supply lines, limiting the movement of medicines and consumables between and across institutions, cities and regions. Cargo movement by air has stopped, many roads are blocked, trains and train stations are damaged, and as movement on roads continues to be risky, the supplies of goods have been delayed.

Through engagement with the MoH of Ukraine, 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.

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).

2.2 Priority public health concerns

More detail on each of the priorities listed below can be found in previously published situation reports, the Public Health Situation Analysis and the Strategic Response Plan.

Conflict-related trauma and injuries	Emergency medical services, surgical departments and intensive care units have been overwhelmed with trauma patients. Access to health care has been limited, and essential health services have been disrupted or are collapsing.
Maternal and newborn health	According to the United Nations Population Fund (UNFPA), damage to and destruction of medical facilities as well as a shortage of service providers and critical supplies have severely compromised the delivery of essential health services, including access to maternal care for the estimated 265 000 women who were pregnant when the conflict erupted.
Management of chronic diseases and noncommunicable diseases (NCDs)	Noncommunicable diseases (NCDs) are the leading cause of morbidity and mortality in Ukraine, with the five major NCDs – cardiovascular disease, diabetes, cancer, chronic respiratory disease, and mental health conditions – accounting for 84% of all deaths. Disruptions in treatment for chronic cardiovascular and respiratory diseases increase morbidity and, most likely, mortality. About 120 000 people are living with type 1 diabetes and need to receive regular doses of life-saving medicines to survive. Among the key challenges identified were difficulties in controlling diabetes, lack of a continuous supply of medicines for chronic disease, and lack of compatibility of medicines for returnees to Ukraine due to differences in licensing and registration between the European Union and Ukraine.
Risk of emergence and spread of infectious diseases	Shortages of medicines and medical supplies, challenging access to essential health services, and the interruption of prevention, diagnostic and treatment services pose a high risk for adverse outcomes for people living with both HIV and TB. There is insufficient information about access to treatment for communicable diseases, including HIV and tuberculosis (TB), in cross-line areas, as well as on the availability of facilities and personnel equipped to provide the necessary services. It is reported that while 92% of HIV facilities nationwide continue to provide treatment, only 9% of HIV treatment sites are operational in the Luhansk oblast. While WHO has not suspended the supply of antiretroviral and TB drugs to the Donetsk and Luhansk oblasts, escalating hostilities have made deliveries extremely challenging. Ukraine has the second-highest burden of HIV/AIDS in Europe, with an estimated prevalence of 1% among Ukrainians between the ages of 15 and 49 years. It is assessed that about 59 000 people receiving antiretroviral therapy reside in areas affected by the conflict. Ukraine has the fifth-highest number of confirmed cases of extensively drug-resistant TB globally. The conflict has weakened TB surveillance capacity and interrupted continuous treatment regimens. Overcrowded conditions in shelters, population displacement, infrastructure damage as well as exacerbating factors, such as lack of adequate water, sanitation and hygiene, nutritional stress and exposure to cold weather during winter, could increase the risk of respiratory and diarrhoeal diseases. Between 23 February and 10 July the overall number of beds available and beds occupied by patients with COVID-19 decreased by 51% and 96%, respectively, reflecting potential challenges in accessing hospitals, limited data reporting, and a potential decrease in actual hospitalizations. The most notable decrease in the number of available beds was reported in the Luhansk oblast (100%), followed by the Vinnytsya (88%) and Chernivtsi (85%) oblasts. An average

Protection issues: risk of human trafficking and escalated risk of sexual and gender-based violence (SGBV)	Crises and emergencies greatly exacerbate all forms of SGBV, including sexual exploitation and abuse (SEA). At least two out of three women in Ukraine had experienced some form of gender-based violence (GBV) before the conflict. The security context and displacement have resulted in a sharp increase in the risk of multiple forms of violence, including SEA and trafficking of persons. The proliferation of agencies and non-vetted volunteers and voluntary organizations further increases the risk of SEA and all forms of sexual misconduct. Several interagency networks, led by UNHCR, have been activated in refugee-hosting countries, and risk assessments are under way, with one already completed in Romania. According to the April 2022 rapid assessment in Romania, more than 90% of refugees are women and children, who are at heightened risk of exploitation. Many are being hosted by families and community volunteers. There are concerns due to the lack of a process for vetting volunteers, and although many local organizations have highly skilled and qualified volunteers, unfamiliarity with international humanitarian safeguarding standards could pose additional risk.
Mental health and psychosocial support (MHPSS)	The affected population is considered at high risk for adverse mental health outcomes and there is an urgent need for continued mental health and psychosocial support services. Health-care workers face challenges of working over capacity due to understaffing, and are at increased risk of psychological distress, burnout and mental health issues. This comes against a backdrop of already responding to the COVID-19 pandemic, which has overstretched systems.
Food security and nutrition	The conflict is affecting food security within and outside Ukraine. In June the World Food Programme (WFP) served 2.6 million beneficiaries, which included providing nutrition support by distributing fortified cereals, bread and general food. Food distribution has mostly focused on the eastern part of Ukraine, where the conflict is the most intense. The remaining beneficiaries were people who moved to different areas within Ukraine.

2.3 WHO and partner actions in Ukraine to date

Leadership and coordination

- The WHO Strategic Response Plan for June to December 2022 was published on 4 July 2022. It is an overarching framework built on the Ukraine Flash Appeal 2022 to guide priorities and work in support of government authorities who are leading the readiness, response and early recovery activities. It will be implemented in collaboration with partners providing life-saving support both inside and outside Ukraine.
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- A WHO expert led a mission to Odesa to assess the establishment of a hub, with mission members addressing matters related to public health and Health Cluster coordination with Partners. The expert was joined by the Deputy Minister of Health and the Chief State Sanitary Doctor of Ukraine to observe the training on chemical hazards.

Medical evacuation of patients (medevac)

 A total of 764 patients who were in need of medical evacuation, corresponding to 74% of the requests received by the European Commission, have been evacuated from Poland, Republic of Moldova, Slovakia, and Ukraine for medical treatment in 17 other European countries via the European Union Civil Protection Mechanism.

- Among current requests, a further 13% are in transit. These evacuations are mainly due to chronic conditions and sustained traumatic injuries.
- Transportation of patients within Ukraine is conducted by the national emergency services, while transportation across the border to other countries within the European Union (EU) is managed by international EMTs and coordinated by the CADUS team, a German nongovernmental organization (NGO) that provides EMT support

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 NCDs, including diabetes and cancer, is a top priority.

- From 27 to 30 June representatives from WHO and the CDC trained 24 national- and regional-level epidemiologists in Ukraine on unique aspects of conducting traditional field epidemiology in emergency conditions, as well as additional epidemiological methods and information management services used in responding to health emergencies. The trainings were conducted with financial support from the World Bank in Ukraine.
- The WHO Representative to Ukraine attended the international Ukraine Recovery Conference held on 4–5 July in Lugano, Switzerland. The WHO delegation participated in the social recovery session, highlighting the importance of the health system in any recovery plans. WHO shared a technical document on the "Principles to guide health system recovery and transformation in Ukraine," published on 30 June.
- The WHO Country Office in Ukraine worked with the GTFCC team to translate the GTFCC Cholera application into Ukrainian. The beta version of the Ukrainian-language app has been tested and will soon be available on the Apple Store and Google Play.
 - The mobile app was developed to provide clear guidance and up-to-date information for early detection, monitoring and efficient response to cholera outbreaks. The app is addressed to public health professionals from all sectors working in cholera control, and designed to be used offline to accommodate those working in remote areas.

Supplies and logistics

- The Dnipropetrovsk, Kharkiv, Mykolayiv, Lviv, and Kyiv oblasts received medical supplies and equipment with a total value of US\$ 404 933 and a total weight of more than 21 tonnes.
- The process of interconnecting WHO's distribution plans with the MoH's MedData system for facilitating the handover of medical supplies has been initiated.
- Efforts are ongoing to coordinate transportation and other activities related to logistics support with local warehouses.
- Eleven procurement procedures exceeding US\$ 10.8 million have been initiated and the distribution plans for generators supplied have been approved.
- Goods with a total value of US\$ 1 049 311 and a total weight exceeding 42.6 metric tonnes reached Ukraine and were distributed across 24 oblasts.
- WHO continues the provision of support to Médecins Sans Frontières (MSF) for the importation of controlled medicine kits for various beneficiaries around Ukraine.
- WHO provided support to the finance team in finalizing the Ukraine conflict workplan that has been established to concentrate all awards related to the support of the Ukrainian health system since 24 February 2022.
- WHO supported CDC/IRR (International Reagent Resources) in importing reagents for the Ukrainian Public Health Centre.

• WHO is working with the MoH of Ukraine to distribute WHO health supplies to regions. WHO is continuing to support procurement processes for therapeutics, lab equipment, steam sterilizers and decontamination kits.

Risk communication and community engagement (RCCE) and external communications

- The Health information section for the vBezpetsi chatbot on Telegram and Viber was developed and launched. It provides automated health information in response to user questions.
- Message testing on access to mental health services in Ukraine has begun.
- In partnership with Facebook, WHO has launched a campaign to promote messages on cholera prevention and treatment.
- From 4 to 10 July WHO published 13 Twitter posts and five Facebook posts, which received a total of 32 696 and 13 809 impressions, respectively, covering various topics for displaced people in Ukraine, including health attacks, news about WHO support for Ukraine, and WHO's new publication titled "Building a stroke agenda for Ukraine".

Operational partnerships

Emergency Medical Teams

EMT Coordination Cell (CC) Ukraine.

- In the past two weeks, three mass casualty trainings were conducted in Ukraine for Emergency Medical Services (EMS) and Trauma in the Chernihiv region for over 100 health-care providers.
- The EMT CC is currently coordinating 27 EMTs from nine organizations operating across 13 oblasts in Ukraine. Their priority activities continue to be trauma care (inpatient and outpatient), rehabilitation (including burns and spinal cord injuries), mobile health, patient transfer and medevac, and trainings.
- As of 12 July several trainings using mixed modalities, virtual 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.
- From 13 March to 12 July, 5495 consultations were provided across 11 oblasts. Among outpatient visits, 11% were for respiratory infections, and 683 consultations for trauma injuries were provided.
- A national EMT Awareness Workshop is planned for early September in Ukraine.

GOARN

From 2 March to 12 July the GOARN institutions/network provided technical support, deploying seven experts to Denmark (2), Poland (2), Romania (1), Slovakia (1), Ukraine (1, remote) and six experts are scheduled to be deployed soon to Poland (1), Ukraine (3), Denmark (1), Czechia (1). So far 11 experts have completed their deployment – Poland (3), Denmark (2), the Republic of Moldova (1), Czechia (3), Slovakia (1) and Romania (1).

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