

WHO emergency appeal: Ukraine & refugee- receiving and hosting countries

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Lviv, Ukraine - WHO Regional Director for Europe Dr Hans Henri P. Kluge visits Ukraine on World
Health Day 2022.

WHO emergency appeal: Ukraine & refugee-receiving and hosting countries

AT A GLANCE

12.1 million people in need of health assistance in Ukraine

6 million people targeted in Ukraine

152 operational health partners in Ukraine

7.4 million refugees recorded across Europe

WHO PRIORITIES

Coordinate the health response, including Emergency Medical Teams (EMTs)

Strengthen health information management

Immediate emergency care

Provide essential medical supplies and Equipment

Continue essential healthcare for priority causes of illness and death

Prevent, detect and respond to infectious diseases

WHO FUNDING NEEDS

Ukraine

USD 100 million for March–December 2022

Refugee-receiving and hosting countries

USD 67.5 million for March–December 2022

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Current situation and impact on health

Ukraine

- Active fighting in proximity to large population centres leads to a high number of people in need of trauma/surgical care.
- A large number of health facilities are located in either conflict areas or in changed areas of control, which leaves the health system vulnerable to infrastructural damage and severe disruptions. Consequently, there is limited or no access to medicines, health facilities, or healthcare workers in some areas. Many health workers are either displaced or unable to work.
- WHO has confirmed 550 attacks on health care reported between 24 February and 29 September.
- 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 mortality.
- Ukraine also has one of the highest burdens of chronic infectious diseases in Europe, particularly HIV and tuberculosis.
- Shortages of medical supplies challenge access to essential health services. In contrast, the interruption of prevention, diagnostic and treatment services increase the risk of adverse disease outcomes and threatens treatment continuity.
- The need for continued mental health and psychosocial support services is very high.
- There is a risk of outbreaks of respiratory and diarrheal diseases. There continues to be a risk of COVID-19, and vaccination uptake remains low, particularly in vulnerable populations. This, along with disruption in testing and treatment, puts those most vulnerable at increased risk of severe illness and death.

WHO is operating a refugee health extension out of Krakow in Poland and is working alongside UNHCR, the European Centre for Disease Prevention and Control and UNICEF to streamline inter-agency and inter-country coordination.

- Given suboptimal routine vaccination coverage in children, the crisis and displacement exacerbate existing immunity gaps and increase the risk of vaccine-preventable disease outbreaks, particularly measles (Ukraine's latest outbreak of measles started in 2017 and peaked in 2019).
- The outbreak of circulating vaccine-derived poliovirus type 2 (cVDVP2) in Ukraine since September 2021 is an additional concern.

Refugee-receiving and hosting countries*

- As of 22 September 2022, 7,405,590 people have fled the violence in Ukraine. Poland has already welcomed over 1,391,344 refugees, Romania 80,498, Hungary 29,903, Republic of Moldova 91,772, Slovakia 94,530, Czech Republic 433,488 and Bulgaria 61,070.[†]
- Overcrowded conditions during transit and on arrival at transit sites or shelters with exacerbating factors such as poor access to water, sanitation and hygiene, and low vaccination status can increase the risk of spread of infectious diseases.
- The Regional Refugee Response Plan's (RRRP) health and nutrition response aims to ensure access to preventive, promotive, curative, palliative, and rehabilitative health services for refugees to prevent excess morbidity and mortality.
- The immediate health priorities include emergency medical care, providing access to essential healthcare services, medication, mental health, and psychosocial support, including for mothers and children, HIV and tuberculosis patients, and patients with NCDs.
- Addressing the increased transmission of COVID-19 and other seasonal respiratory infections and vaccine-preventable diseases like measles or the vaccine-derived poliovirus (VDPV) in refugee populations is also a priority.

WHO Response in focus – Ukraine[‡]

Saving lives is the priority of WHO's response in Ukraine. WHO works to ensure time-critical, lifesaving multisectoral assistance, non-discriminatory access to emergency and essential health services and priority prevention programmes, and laying the foundation for longer-term health systems recovery and strengthening.

WHO has established direct supply lines to almost all Ukrainian cities, with shipments in progress and more logistical lines being established with other UN agencies. As of 30 June 2022, **WHO has delivered 654 metric tonnes of medical supplies and equipment to Ukraine**. Of that, 432 metric tonnes reached their intended destinations and 222 metric tonnes were in transit towards them. Medical supplies delivered to the country cover a broad range of health needs from trauma/surgery supplies to primary healthcare medications, noncommunicable diseases medicines and rehabilitation equipment.

The need for medical supplies remains very high in the eastern and southern oblasts where active fighting is ongoing, in the other oblasts impacted by the conflict and those hosting internally displaced persons (IDPs). The need includes supplies for trauma and emergency care and life-saving treatments for people with NCDs. Oxygen supplies, infrastructural support for hospitals (e.g. generators), and ambulances are also needed. WHO needs to acquire several armoured vehicles given the security situation and the need to transport WHO staff safely across the country despite active fighting and airstrikes in order to carry out priority health interventions with the government and

* Including Poland, Romania, Hungary, Republic of Moldova, Slovakia, Czech Republic and Bulgaria.

[†] Source: UNHCR and government websites.

[‡] Results of WHO response to the Ukraine crisis covering the period February-June 2022 are available in the WHO interim report published in July 2022: <https://www.who.int/publications/m/item/who-s-response-to-the-ukraine-crisis>

Critical supplies delivered by WHO as of 30 June 2022 covered nearly 12 000 surgeries and enough medicines and basic health care items that served over 1.5 million people

partners. WHO has organized bi-weekly training sessions for thousands of Ukrainian healthcare providers about handling mass casualties. Topics covered include hospital blood transfusions in conflict settings, traumatic limb injuries, emergency nursing care, and essential burn care.

With WHO responding from the first day of the escalation in the conflict, operations were able to scale up quickly due to the organisation's strong presence within Ukraine and preparedness to potential armed conflict since 2021. WHO is operating through nine hubs inside and outside of Ukraine: Kyiv, Lviv, Vynnytsa, Poltava, Odessa, Dnipro, Luhansk, Donetsk, Rzeszow (Poland). WHO also strengthened and built warehousing capacity in Kyiv, Lviv and Dnipro, while in Odesa, warehousing is being secured in September 2022. The temporary hub established in Poland to facilitate cross-border operations is due to be closed in October 2022.

WHO presence in Ukraine

WHO is coordinating more than 20 Emergency Medical Teams (EMTs), including those classified by WHO and other medical teams deployed to provide surge medical support to the affected countries and their vulnerable populations. These teams are operational on the ground in different capacities - from small specialized care teams to large teams with field hospitals, surgical and intensive care units.

To coordinate activities of surge medical workforce from nine different countries across the Globe, WHO has established and integrated 3 EMT Coordination Cells (EMTCCs) into the existing coordination structures of WHO response in Ukraine, Poland, and Moldova.

The EMTCC in Ukraine is integrated into the Trauma and rehabilitation working Group of the Health cluster and is supporting medical teams working with the affected populations through providing life-saving interventions, including trauma care (inpatient & outpatient), rehabilitation (including burns and spinal cord injury), mobile health interventions, patient transfer and medical evacuation, trainings, as well as the delivery of medicines, equipment, and supplies. They are also taking part in transferring patients from Ukraine to EU countries for specialized treatment. In addition, EMTs in Ukraine provide training to local healthcare professionals on topics, including but not limited to technological hazards, trauma care and mass casualty.

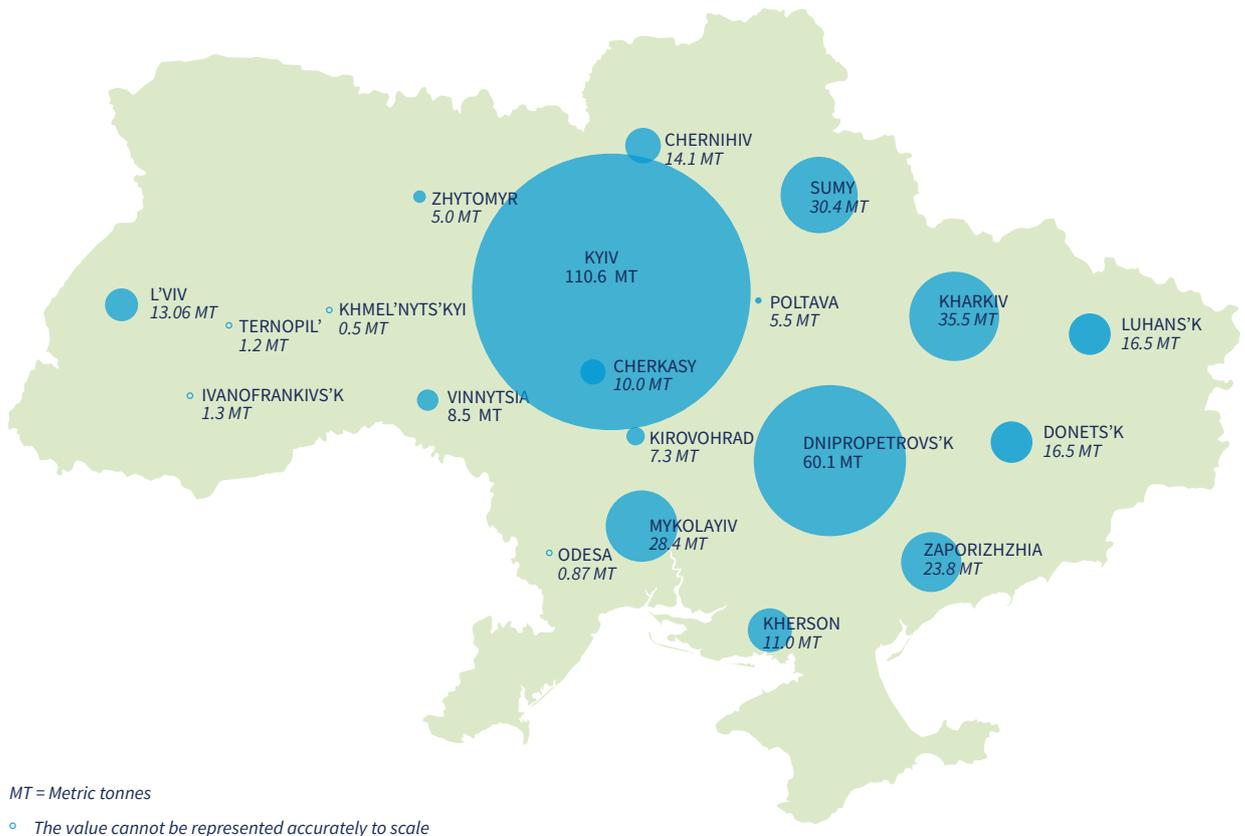
EMTs are operational in Ukraine in the 10 oblasts including Lviv, Mykolaiv, Khmelnytskyi, Donetsk, Dnipropetrovsk, Poltava, Kyiv, Kharkiv and Sumy.

Three health hubs have been established in western Ukraine by the Ministry of Health to support medical evacuations and ensure safe medical evacuation of patients, including those with cancer, for treatment outside Ukraine. WHO supports the Ministry of Health for medical evacuations from Ukraine through to other countries, including coordinating Emergency Medical Teams (EMT). WHO plays an essential coordination role as part of the response as the health cluster lead in Ukraine and convenes 152 international and local partners with health-related activities in 24 oblasts.



654 metric tonnes of medical supplies and equipment delivered by WHO and that have reached their intended destinations or are in transit towards them as of 30 June 2022

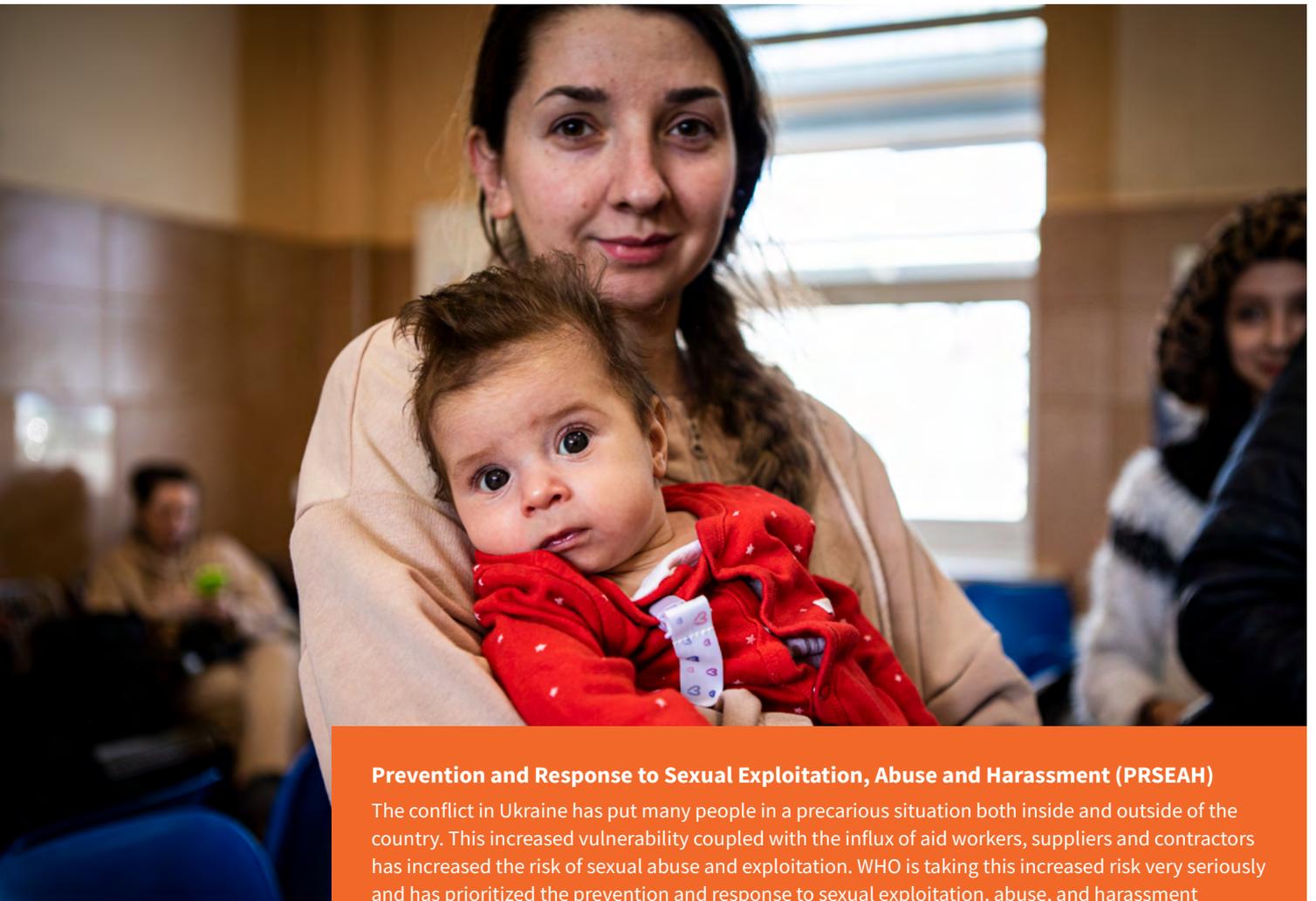
WHO has delivered trauma and emergency medical supplies to the following oblasts (districts): Kyiv, Cherkasy, Dnipropetrovsk, Zhytomyr, Chernihiv, Sumy, Kharkiv, Poltava, Luhansk, Donetsk, Kherson, Odesa, and Zaporizhzhia. WHO continues to call for safe passage to deliver life-saving supplies, medicines, and humanitarian assistance.



Initially the primary response hub in March and April, the Lviv office has now been reduced, with operations and staff shifted further east to Kyiv, Dnipro and Odesa. As of September 2022, WHO operations in Ukraine scaled up to approximately 200 personnel, from around 120 in February. Leadership is primarily based in Kyiv, with the Grade 3 Conflict Incident Management and team based in Dnipro. WHO response continues to evolve to the changing health needs, with hubs reviewed regularly to ensure access and support where needed, especially regarding the newly accessible areas.

To assess the health needs in Ukraine, WHO has launched a **household health needs assessment** together with Premise, a crowdsourcing organization. Results from the first round of the household needs assessment, using crowdsourcing data, were widely distributed within WHO, MoH and health cluster partners to inform response priorities. The result was also used to synthesise several needs assessments done by health cluster partners.

WHO also supports the public health center (UPHC) and regional centers for disease control (RCDC) to **enhance their surveillance system to detect timely outbreaks**. To supplement the indicator-based surveillance, WHO hired part-time epidemiologists and introduced open-source surveillance on disease outbreaks, chemical and environmental hazards, IDP movement and other public health threats. A time series analysis of surveillance data, identifying trends and prioritising diseases/conditions was conducted, that analysed pre-war monthly e-Health data, both inpatient and outpatient, to estimate the potential impact of service interruption on priority service packages. Analysis of pre-war e-Health data and corresponding needs informed the specific objectives of the WHO response, projected the impact of service interruptions, and prioritized support to hospitals and health facilities accordingly.



© WHO / Uka Borregaard
Response to the Ukraine refugee
crisis – Rzeszow train station,
Poland – March 2022

Prevention and Response to Sexual Exploitation, Abuse and Harassment (PRSEAH)

The conflict in Ukraine has put many people in a precarious situation both inside and outside of the country. This increased vulnerability coupled with the influx of aid workers, suppliers and contractors has increased the risk of sexual abuse and exploitation. WHO is taking this increased risk very seriously and has prioritized the prevention and response to sexual exploitation, abuse, and harassment (PRSEAH) and mainstreamed it as part of its activities in Ukraine and neighbouring countries.

- WHO has deployed one PRSEAH Specialist in Poland for three months. Currently recruitment is underway for one roving PRSEAH Specialist to be based in Copenhagen and for supporting refugee-hosting countries. Recruitment for PRSEAH Specialists for WHO's Poland RHE office based in Krakow, at HQ in Geneva, in Moldova and in Slovakia are also underway. A second specialist is also under recruitment for Ukraine.
- WHO embedded PSEAH in its operations in Ukraine and six refugees receiving countries (Poland, Moldova, Romania, Slovakia, Hungary, and Czech Republic). Technical and coordination support is extended to ensure integration of the PSEAH portfolio in its programmes as well as prioritization of its mandate for zero tolerance on SEA - Sexual Exploitation and Abuse. The PSEAH team are also supporting 13 inter-agency mechanisms. This includes in-country PSEA networks/ taskforces, various in-country and regional level sub-clusters/working groups (i.e. Protection, GBV, Gender) in Ukraine and in six other refugee receiving countries.
- WHO is focusing on prevention and response by enhancing general safeguarding measures as well reporting/response mechanisms with various partners. At both in-country and inter-agency level in Ukraine and refugee-hosting countries, priority actions were identified including PRSEAH risks assessments, mapping services and service providers, capacity building of partners, and strengthening Community-Based Complaint Mechanisms (CBCM). WHO is also contributing to enhancing capacity in Mental Health and Psychosocial Support (MHPSS), GBV (Gender-based Violence), Clinical Management of Rape (CMR), and Sexual and Reproductive Health (SRH).
- For response, WHO supports various inter-agency working groups for Ukraine and refugee-hosting countries both in-country and at regional levels in their ongoing efforts on strengthening referral pathways and support services for survivors of sexual exploitation and abuse. WHO is also working closely with existing inter-agency mechanisms to prioritize victim assistance via identifying gaps and advocacy for adequate assistance. WHO maintains strong collaborations also with other portfolios such as GBV, SRH, and MHPSS to ensure holistic approach in victim assistance.

WHO's response result framework in Ukraine

The primary objective of the WHO response in Ukraine is to **minimize mortality and morbidity for all Ukrainian people affected by the current humanitarian emergency in Ukraine**, wherever they are. WHO works to ensure time-critical, life-saving multi-sectoral assistance, non-discriminatory access to emergency and essential health services and priority prevention programmes, and laying the foundation for longer-term health systems recovery and strengthening.

Specific objective 1: Access to emergency and critical medical care is strengthened

Assist the Emergency Medical Services (EMS) in delivering emergency medical care to the conflict-affected population, including wounded/trauma-affected individuals and those with severe COVID-19 and NCDs, prioritizing vulnerable groups, e.g. people with disabilities, older persons and children.

Specific objective 2: Infectious diseases are prevented and responded to

Reduce infectious disease transmission and hospitalization by supporting the healthcare system, including immunization activities and supporting the COVID-19 national response.

Specific objective 3: Emergency health information and surveillance for evidence-based decision making in health are reinforced

Health information system produces regular, timely and accurate data on health status, threats, health resources, service availability and health system performance.

Specific objective 4: Effective coordination of humanitarian interventions in the health sector is ensured

Strengthen health sector coordination to address the needs of vulnerable people, provide improved access to quality healthcare services and allow for adequate preparation and response capacities for ongoing and new emergencies.

WHO would like to acknowledge and thank all contributors who have supported its emergency response in Ukraine and neighbouring countries to date.

LINK: <https://www.who.int/emergencies/situations/ukraine-emergency/funding>

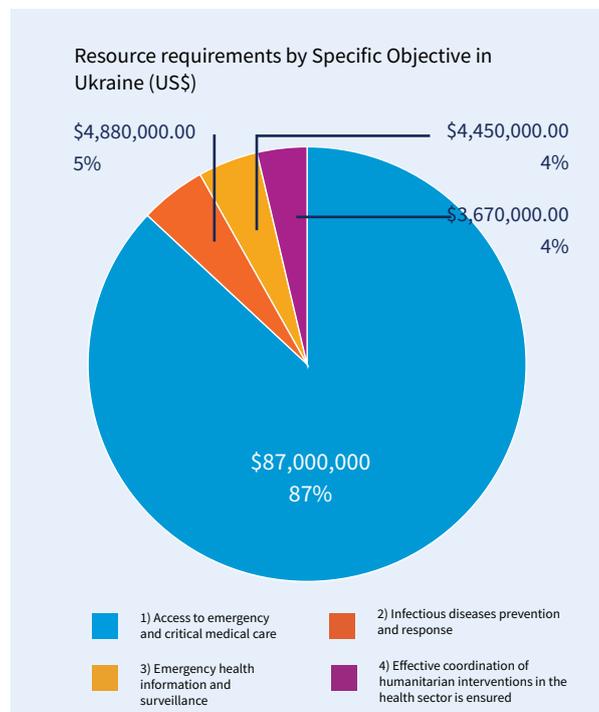


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WHO Europe Regional Director Dr Hans Kluge visited refugee centres established in southeastern Poland, meeting with officials and responders, and discussing the issue with media.



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WHO health supplies are stocked in the warehouse outside Lviv, Ukraine



WHO Funding Needs - Ukraine[§]

Specific objective 1: Access to emergency and critical medical care is strengthened

Coordination of Emergency Medical Teams (EMTs) and support transportation of priority patients.	\$3,800,000.00
Support access to health services, including quality primary healthcare, through mobile teams and fixed health facilities.	\$9,600,000.00
Supply of medicines, medical supplies, equipment and training.	\$69,700,000.00
Provision of mental and psychological support to populations (including IDPs and refugees) and building capacity of frontline healthcare workers in managing stress-related conditions.	\$1,600,000.00
Training and assessments to support the Emergency Medical Services (EMS) in delivering emergency medical care.	\$2,300,000.00

Specific objective 2: Infectious diseases are prevented and responded to

Support the health sector's effective response to disease outbreaks.	\$1,500,000.00
COVID-19 outbreak preparedness, response and recovery.	\$3,000,000.00
Advocacy communication and social mobilization for health to reduce risks, prevent disease, promote health, and navigate and utilize health services.	\$380,000.00

Specific objective 3: Emergency health information and surveillance for evidence-based decision making in health are reinforced

National surveillance systems are supported to detect and monitor outbreaks.	\$2,200,000.00
Strengthen information and intelligence by conducting health needs assessments, health impact assessments and monitoring drivers of morbidity/mortality	\$2,100,000.00
Mapping of health facilities by type of service packages	\$150,000.00

Specific objective 4: Effective coordination of humanitarian interventions in the health sector is ensured

Health cluster/sector coordinator and key capacities activated, with regular updates provided to partners on needs, constraints, and partner capacities.	\$300,000.00
Coordination systems are established and maintained with government and health partners at the national and regional levels to identify needs and priorities.	\$70,000.00
Prevention and Response to Sexual Exploitation, Abuse and Harassment (PRSEAH)	\$300,000.00
Operational costs	\$ 3,000,000.00

\$100,000,000.00

[§] Ukraine flash appeal: <https://ukraine.un.org/en/193988-ukraine-flash-appeal-march-december-2022>



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Luba is a 82 year old Ukrainian refugee. She came with her daughter and her young grandchildren. She told a WHO representative that she needs medication for high blood pressure. The trip to the Ukrainian border took three days. She had to walk across the border crossing and then a bus in Poland took her and her family to the reception centre in Dorohusk. Her son and his wife have remained in Ukraine. She told WHO that she has no family and friend in Poland so she does not know where they will go now.

WHO Response in focus – Refugee-receiving and hosting countries**

WHO has a strong country presence in all refugee-receiving and hosting countries. It has deployed additional expertise and opened field operations tailored to the refugee needs. WHO has ensured coordination with the authorities, supported the strengthening of health systems, provided technical support to countries, and brought together the expertise of different UN agencies and partners.

WHO is operating a **refugee health extension** out of Krakow in Poland. WHO is working alongside UNHCR, the European Centre for Disease Prevention and Control (ECDC) and UNICEF to streamline inter-agency and inter-country coordination within and among participating agencies for the Ukrainian refugee health response through strategies, guidance and systems strengthening.

** Results of WHO response to the Ukraine crisis covering the period February-June 2022 are available in the WHO interim report published in July 2022: <https://www.who.int/publications/m/item/who-s-response-to-the-ukraine-crisis>

As of end September 2022, 107.3 MT of medical supplies have been mobilized to refugee-hosting countries, including medicines, medical equipment, diagnostics, and personal protective equipment. Of these at least 84.48 MT have already reached their intended destinations. WHO will continue to provide priority medical products, vaccines, and technologies to refugee populations in need in close cooperation with health authorities.

Emergency Medical Teams Coordination Cells (EMTCCs)

operate Poland and Moldova. In Moldova WHO CO team together with the EMTCC, is coordinating six EMTs who are providing services that contribute to the work of the existing health system. EMT reporting systems also support monitoring for potential outbreaks. In Poland, the EMT Coordination Cell (CC) leads health partners and ensures the quality of services and cohesion with the national response (Minimum Data Set Management).

EMTCC Poland is bringing together national and international medical teams active in the various refugee centers in the country.

Particular attention goes to the cross border transport by ambulance through the national EMS and international EMT. This is a crucial part of the medical evacuation (Medevac) and Repatriation cycle for the war wounded patients. Together with the Medevac Hub in Rzeszow, it ensures an efficient evacuation process. With a permanent presence of WHO EMTCC in the hub, through guidance and exchange of best practices and quality insurance a high level of quality services by the participating EMT's is reached. Coordination by EMTCC with local and international actors is key for the success of this process in support of the Ministries of Health of Ukraine and Poland.

WHO's response result framework in refugee-receiving and hosting countries

In refugee-receiving and hosting countries, WHO is adopting a **health systems approach to the refugee response**, providing support to national authorities to ensure that healthcare systems can cater to refugees' needs while maintaining the level and quality of services to host communities. WHO is operating under the interagency response as part of the Regional Refugee Response Plan (RRRP) to meet the following objectives:

Specific objective 1: Health leadership and governance mechanisms are streamlined and reinforced

Support national authorities in refugee-receiving and hosting countries through interagency coordination (notably national and international NGOs and community-based organisations, WHO, UNHCR, UNICEF and ECDC), including through the provision of policy guidance and technical support to continually assess and address emerging health needs of Ukrainian refugee populations.

Specific objective 2: Financial barriers for accessing healthcare are removed

Support health authorities to design policies for eliminating financial barriers to accessing health services, including medicines and medical products.

Specific objective 3: Access to primary and emergency health services is strengthened

Facilitate the systematic access to primary and emergency care by refugees, provide technical support to facilitate medical evacuations, coordinate EMTs to manage referrals from Ukraine and provide mental health and psychosocial support services.

Specific objective 4: Emergency health information and surveillance for evidence-based decision making in health are reinforced

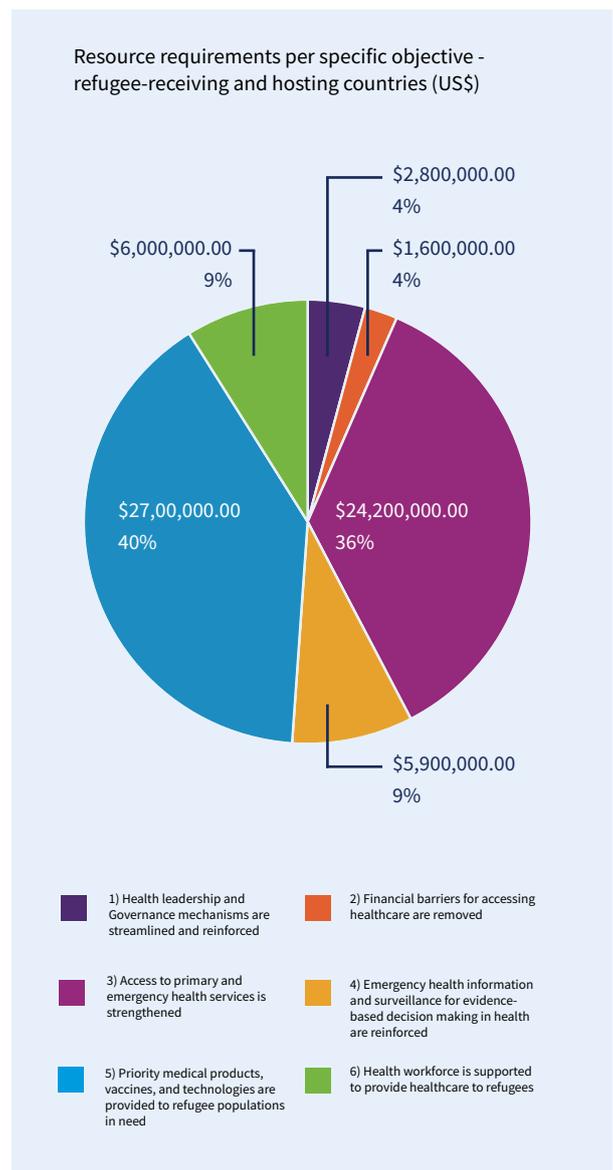
Conduct relevant health assessments, monitor access and utilization of health services and barriers and work alongside national health systems to set up early warning mechanisms and strengthen surveillance systems.

Specific objective 5: Priority medical products, vaccines, and technologies are provided to refugee populations in need

Provide priority health supplies and medicines, including personal protective equipment, rapid diagnostic testing kits, vaccines, HIV and tuberculosis treatments, etc.

Specific objective 6: Health workforce is supported to provide healthcare to refugees

Provide technical support for national health workforce planning and provide training, guidance and tools to health workers to provide health services for refugees.



WHO Funding Needs - Refugee-receiving and hosting countries[§]

Specific objective 1: Health leadership and Governance mechanisms are streamlined and reinforced

In support of national authorities, conduct interagency coordination of health actors, including thematic working groups, as appropriate.	\$1,000,000.00
Provide policy guidance and technical support to assess and address emerging health needs of Ukrainian refugee populations and understand priority health service needs.	\$800,000.00
Coordination with partner agencies to support countries through the Refugee Health Extension (RHE) for a more effective and efficient response leveraging the comparative advantages of each partner.	\$1,000,000.00

Specific objective 2: Financial barriers to accessing healthcare are removed

Support governments on policies for eliminating financial barriers to accessing health services, including medicines and medical products.	\$1,000,000.00
Conduct surveys and assessments on access to healthcare.	\$600,000.00

Specific objective 3: Access to primary and emergency health services is strengthened

Provide information to refugees on healthcare services and entitlements of their host country.	\$2,000,000.00
Facilitate systematic access to healthcare, emergency treatment, referral, and continuity of essential health services: primary healthcare; sexual and reproductive, maternal, neonatal and child health (RMNCH) and gender-based violence through linking them to national programmes.	\$4,000,000.00
Provide technical support to assess receiving hubs in countries for patient medical evacuation and coordinate emergency medical teams (EMTs) to manage the referrals coming from Ukraine in coordination with DG ECHO and EU countries.	\$2,200,000.00
Provide access to priority prevention programmes, including vaccination (e.g. measles, polio, COVID-19) through health messaging around vaccination, risk communication and community engagement, policy on improving vaccination amongst refugee population and the provision of vaccinations.	\$5,000,000.00
Provide mental health and psychosocial support services, including psychological first aid, referral pathways, and capacity building of existing health workers and volunteers.	\$11,000,000.00

Specific objective 4: Emergency health information and surveillance for evidence-based decision making in health are reinforced

Conduct needs assessments and health situation and risk analyses.	\$300,000.00
Monitor and evaluate access and utilization of health services and barriers, especially among vulnerable populations, ensuring meaningful access to healthcare.	\$1,000,000.00
Work alongside national health systems to set up early warning mechanisms to strengthen surveillance systems.	\$4,600,000.00

Specific objective 5: Priority medical products, vaccines, and technologies are provided to refugee populations in need

Provide necessary health supplies and medicines, including personal protective equipment, rapid diagnostic testing kits, vaccines, HIV and tuberculosis treatments, etc.	\$27,000,000.00
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Specific objective 6: Health workforce is supported to provide healthcare to refugees

Provide technical support for national planning to continue services in anticipation of phasing out of volunteer-led responses.	\$2,000,000.00
Provide training, guidance and tools for health workers to provide health services for refugees.	\$2,000,000.00
Provide technical support and training needed to better utilize the Ukrainian health workforce to provide health services for the refugees.	\$1,500,000.00
Prevention and Response to Sexual Exploitation, Abuse and Harassment (PRSEAH)	\$500,000.00

\$67,500,000.00

[§] Under the Ukraine Regional Refugee Response Plan (RRRP)

<https://reliefweb.int/report/poland/ukraine-situation-regional-refugee-response-plan-march-december-2022>

