



# Technical update on the impacts of the war in Ukraine on the health of the population and WHO's response in Ukraine and refugee hosting countries

WHO Member States Information Session Geneva, 4 May 2023, 12:30 – 14:00



### Situation Update





8.2 million
REFUGEES RECORDED
ACROSS EUROPE\*



12.5 million
RETURN BORDER CROSSINGS\*



23 375
CIVILIAN CASUALTIES\*\*\*\*



5.4 million
INTERNALLY DISPLACED\*\*



959
ATTACKS ON HEALTHCARE\*\*\*

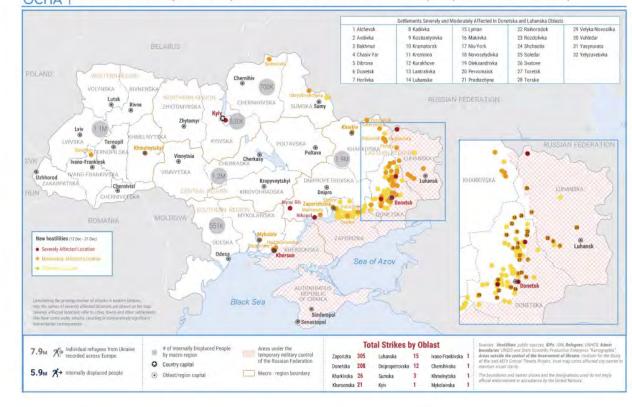


8 709 CIVILIAN DEATHS\*\*\*\*



### UKRAINE

Overview of the Population Displacement and Incidents with Civilian Impact (13 - 31 December 2022)



### OCHA, 10 February 2023

- The number of people in need of humanitarian aid increased from 3 million people at the start of 2022 to 17.7 million by December
- Humanitarian organizations reached nearly 16 million people with critical assistance in 2022, thanks to local NGOs & volunteers, the international community, private donors
  - \* UNHCR, 2 May 2023 \*\* IOM, 23 January 2023 \*\*\* WHO SSA, 4 May 2023 \*\*\*\* OHCHR, 1 May 2023

# Health risks & drivers of Morbidity & Mortality World Health Organization



Group	Health Risk	Risk (PHSA - Apr 2022)	Situation	Last update
Infectious diseases	COVID-19	High	Recent surge in cases. Low vaccination rate compared to regional average*	Apr-23
	Measles	High	High outbreak potential. Low vaccination coverage (74%). 2 cases of measles reported in Rivne Oblast (U5)*	Mar-23
	Tuberculosis	High	Increasing trend compared to previous months (+10%) and to previous year same period (+37%)*	Mar-23
	Mumps	Moderate	Recent outbreaks. Low vaccination rates*	Mar-23
	ARI	Moderate	Increasing trend compared to previous months (+7%). ARI represents the biggest share of all infections (ranging from 96% to 99%)*	Mar-23
Non-Communicable Diseases (NCDs)	CVD	High	Highest proportionate mortality**	2017
	Cancer	High	Second highest proportionate mortality**	2017
Mental Health	Mental Health	Very High	Prevalence of mental disorders estimated at 1/4 as compared to a global prevalence of 1/14. IOM estimation of 15M people in need of MHPSS***	Dec-22
Conflict related drivers of morbidity and mortality	Trauma	High	9% of the 20 448 consultations provided by EMTs are trauma-related (Cumulative)***	Apr-23
	CBRN	High	Some reported incidents, verification of the veracity remains challenging***	Apr-23

<sup>\*</sup> Regional PHSA updated monthly, no data available for Kherson, Volyn, Autonomous Repuliv of Crimea, Sevastopol city and Luhansk. R-PHSA reports on incidence and associated mortality for 45 infectious diseases & group of diseases \*\* Limitation to data availability \*\*\* Partial data available

# Main findings from Health Needs Assessments World Health Organization



Health Needs Assessment	Date	Main Findings
WHO Representative Health Needs Assessment	R1: Feb-Sep 2022 R2: Dec-2022 R3: Apr-2023 (ongoing)	More than half who sought care faced at least one barrier, highest share among those seeking NCD care (75%) Access to health care increased in R2 for NCD; child health and trauma services, 20% did not seek care when needed Barriers to accessing health care: Cost of medicine (47%), Cost of treatment (27%), Time (25%), transport (17%) 20% of IDPs had no access to GP, compared to 5% among non-displaced
Needs assessment: access to healthcare and services - Premise	R1: Apr-May 2022 R2: Jul-Aug 2022 R3: Oct-2023	Barriers with accessing PHC: Main reason for R1 was security (36%) followed by unavailability of services (26%). Main reason for R3 was cost (55%) followed by security (12%). Regional differences based on type of area (government and non-government controlled, active combat, Kyiv and Rest of country)  Serious barriers to health services: Decreasing trend (33% down to 16%)
Winter health rapid risk assessment	Dec 2022	Displacement, physical proximity and lack of access to health care increasing risks of exacerbation and complications of chronic diseases  Reduced availability of services due to lack of heating and electricity  Additional health risks related to unsafe indoor heating practices  Cold related injuries, worsening of mental health conditions, SGBV and SEA
Kherson Household Needs Assessment	Dec 2022	Perceived health status: increased perceived good health status (50%) with government control vs (34%) Access to health services: 47% reported improved access Barriers of access: cost (25%), security (25%), unavailability of needed services (21%), poor quality (11%)
Kharkiv Household Needs Assessment	Jan-Feb 2023	Perceived health status: increased perceived good health status (54%) with government control vs. (48%). Access to health services: 53% reported improved access Barriers of access: security (50%), insufficient staff (22%), unavailability of needed services (17%), Cost (11%)
HeRAMS	Feb 2023	94% of facilities <b>fully functional</b> , in Donetska <b>29% non-functional</b> and <b>35% partially</b> functioning Barriers to functionality: <b>insecurity</b> and <b>structural damage</b> – in Donetska 51% <b>partial damage</b> , 8% <b>destroyed</b> 30% of facilities in Donetska and 40% in Sumska <b>do not have skilled care</b> during childbirth, no emergency obstetric care Less than 1% <b>disruption to NCD care</b> , but <b>cancer diagnostics disrupted</b> in most oblasts (17% available in Zaporiska to 40% in Chernihivska and Sumska
Rolling CBRN risk assessment	Continuous	Chemical accident risk level: risk of occurrence moderate Radio-nuclear accident risk level: overall risk moderate, high risk of occurrence in Zaporizhzhia







# WHO Response

Pillar 1: Access to emergency and essential health services

Pillar 1: Prevention and response to disease outbreaks

Pillar 3: Health information and surveillance

Pillar 4: Coordination

### Access to Health Services

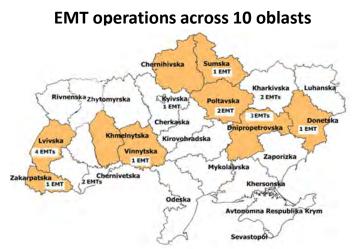
 35 international and national EMTs established and operational

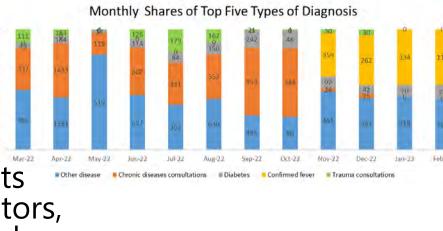
 Capacity building of 30 national EMTs

 27 mobile health units supported, 78% of consultations NCD related

• >7 000 assistive products distributed to trauma hospitals for up to 4,000patients

• 59 ambulances, 64 generators, 3 PSA oxygen generators, 23 mobile tents for EMS, 176 BPAP ventilators, 39 defibrillators distributed







# Training of Health Care Workers

- 11000 HCWs trained on various topics: trauma and mass casualties management, chemical exposure, epidemiology and laboratory diagnostics
- 212 health care workers trained on the management of GBV survivors
- 1254 people reached by 14 prehospital EMS trainings for CBRN events
- 726 EMS first responders from 11 oblasts trained in chemical protection, decontamination and treatment
- 72 EMS personnel trained on ITLS
- 1000 HCWs trained on NCD protocol
- 30 community mental health teams formed and trained
- 248 trainers from 23 oblasts trained on Self-Help Plus
- 300 HCWs from 60 institutions trained on IPC
- 23 HCWs trained on PCR, biosafety and biosecurity



## Medical supplies



Last Updated 28-Mar-23

### Estimated Impact of Basic Healthcare and Trauma Kits

Click here for impact by Oblast

The below data represents estimations of patients reached with the trauma kits, the IEHK (basic health care - Interagency Emergency Health Kits), the NCDK (Non-communicable Disease Kit), and the Cholera Kits

#### ETA

/28/2022 3/16/2023

\$5,178,086

\$ spent on trauma kits

Estimate # of interventions for trauma and emergency surgery enabled with TESK supplied

43,050



Trauma and Emergency Surgery Kit (TESK) 2019

WHO trauma and emergency surgery kit (TESK) aims to provide materials and drugs to meet the needs of 50 patients requiring surgical care in emergency situations, assuming an average of two operations per patient.

\$1,964,552

5 spent on IEHK

Estimate # of catchement population covered for basic care by the IEHK supplied

1,896,000



Interagency Emergency Health Kit (IEHK) 2017

The Interagency Emergency Health Kit (IEHK) basic module is to cover the primary health care needs of a catchment population of 1000 people.

#### **Shipment Status to Ukraine**

Delivered

\$3,489,153 \$ spent on NCDK

Estimate # of catchement popoulation covered for NCD health needs by the NCDK supplied

3,740,000

#### **NCDK 2016**

Each kill serves 10 000 pages for 3 months





Non communicable diseases kit (NCDK) 2016

An NCD kit is a pre-packed set of essential medicines and medical devices to meet priority NCD health needs of 10 000 people for three months in emergencies, when medical facilities and regular supply has been disrupted.

#### \$75,919

S spent on Pneumonia kit

Estimate # of cases covered with Pneumonia kits supplied

12,400



The new Pneumonia kit is designed to provide sufficient child-size antibiotics to treat pneumonia, targeting children under 5 years of age. It is intended for For 100 cases among which 60 cases of children ≥ 5 years old and 40 cases of children < 5 years old and adults.

#### \$165,148

S spent on Cholera

Estimated # of cases covered with the Cholera Kits supplied

# of RDTs provided to detect Cholera in potential patients

2,000

150,000



The revised cholera kits 2020 are designed to help prepare for a potential cholera outbreak and to support the first month of the initial response. Each treatment kit is designed for 100 patients.

These numbers should be considered as estimates for the potential impact of the kits delivered to the Ukraine. Calculations and assumptions have been applied based on the number of applicable modules purchased for each of the types of kits. Please note that these numbers are derived from the number of kits delivered to Ukraine, and in the "Kit Impact by Oblast" page onward to Oblasts, not distributed to facilities, as that data is not available for wide consumption.

# Pillar 2: Prevention & response to disease outbreaks

- Vaccination procedures for IDPs developed by WHO and UPHC
- Active outreach to IDPs, including for vaccination
- Distribution of laboratory equipment and testing supplies for COVID-19 and other infectious diseases diagnostics in 26 public health laboratories
- Risk communication campaigns on vaccination, signs and symptoms of vaccine preventable diseases reaching over 500 000 people
- Cholera preparedness support

### **Highlights**



### 25 000

doses of tetanus antitoxin to severely affected regions



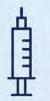
# Cold chain equipment

including refrigerators, and cold boxes supplied



# 49 000 vaccinations

delivered, including for COVID-19, diphtheria, measles and polio



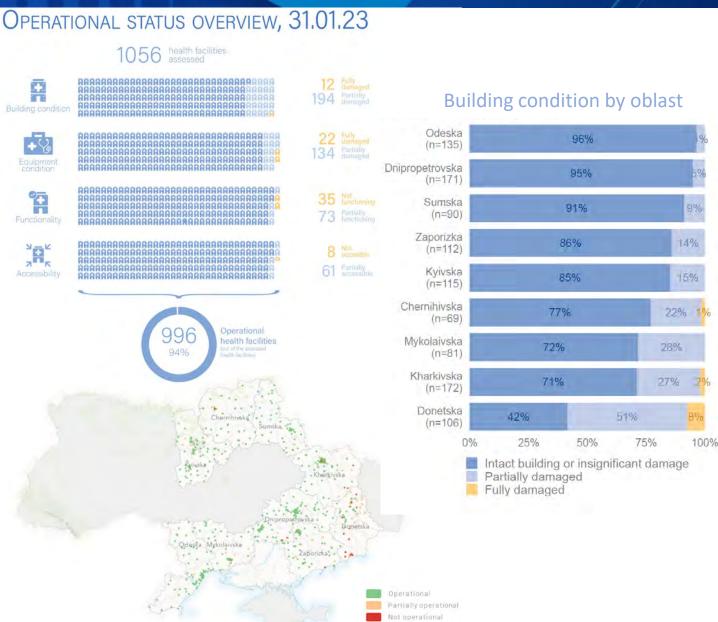
### 300 000 IDPs

Provided information on benefits of vaccination

### Pillar 3: Health information

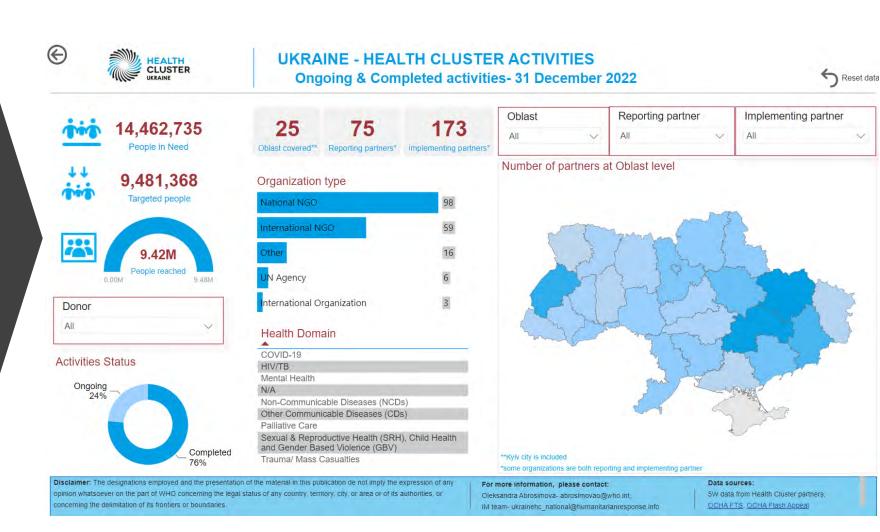


- Monthly regional public health situation analysis – focus on 45 infectious diseases/ group of diseases
- Multiple needs assessments crowd sourcing, population representational sampling
- Analysis of e-Health data prewar escalation
- Implementation of WHO's Surveillance System for Attacks on Health Care
- Health Resources and Services Availability Mapping







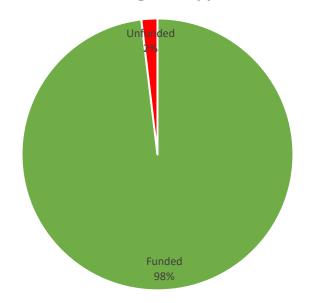


### Mobilisation of resources

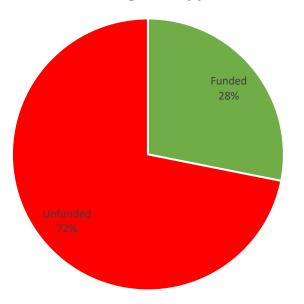


- WHO released USD 9.9 million from its Contingency Fund for Emergencies between 24 February and 9 March 2022
- WHO received USD 98.1 million (98%) against its total appeal of USD 100 million in 2022 for Ukraine
- In January 2023, WHO launched its new appeal with a total requirement of USD 160 million for Ukraine USD 45 million to date has been received

2022 resources mobilized against appeal of USD 100 million



2023 resources mobilized against appeal of USD 160 million



# Prevention and response to sexual exploitation, abuse and harrassment



- Enhancement of accountability, leadership, capacity building
- Measure enforcement internally, with health partners and collaborators
- Trust building in reporting system
- Mainstreaming in operations
- Screening against UN Clear Check database and background checks
- Dedicated support at Headquarters, EURO and Ukraine, roving support at EURO and country-based support cross-sectoral with MHPSS and GBV thematic areas in refugee receiving countries
- 962 people trained: 109 WHO personnel, 144 members of health cluster partners, 15 members of implementing partners and 231 members of the Inter-Agency Partners



## **Situation Update**

- Over 8 million refugees across Europe, 5 million on Temporary Protection Directive, over 20 million border crossings (April 25, 2023, UNHCR)
- UNHCR Regional Intention Report (February 2023) – majority want to return (81%) – main impediment is safety and security and then access to services including health
- Impact on health systems additional health services
- Main barriers to access heath care language/culture, administrative and financial (National and WHO surveys and assessments)
- Keep return voluntary ensure access to services
- Sustainable solutions and prepare as future is unknown



### **Health Impact**

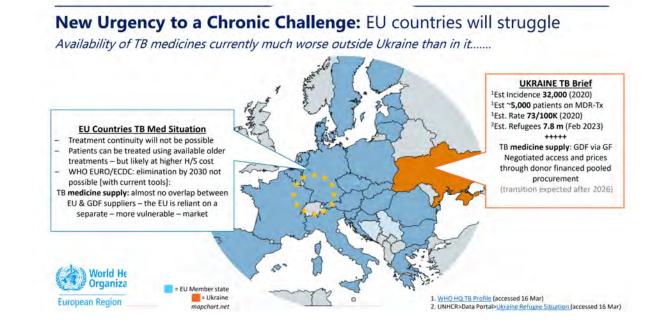
- Majority are women and children (86% UNHCR 2023)
- Morbidity and mortality more consistent disaggregated data needed
- Majority of consultations (refugee health centers)— acute conditions, mental health and continuity of care for NCDs and maternal, newborn and child health
- Access to health care: Hungary, Moldova, Poland, Romania, and Slovakia (UNHCR October 2022- February 2023) 25% had barriers to health care – wait time, language, affordability, 33% cited health care as one of their top three urgent needs, Belarus (UNHCR July-end-September 2022) cited 18%
- The most common cause of morbidity and mortality in Ukraine is non-communicable diseases (NCDs) accounting for 84% of all mortality (Ukraine 2020)
- **Higher maternal, infant and child mortality** in Ukraine than the refugee receiving countries (Ukraine 2020)
- Mental health protracted crisis can exacerbate distress situations and need for mental health and psychosocial (MHPSS), 166K consultations were provided (UNHCR 2022)

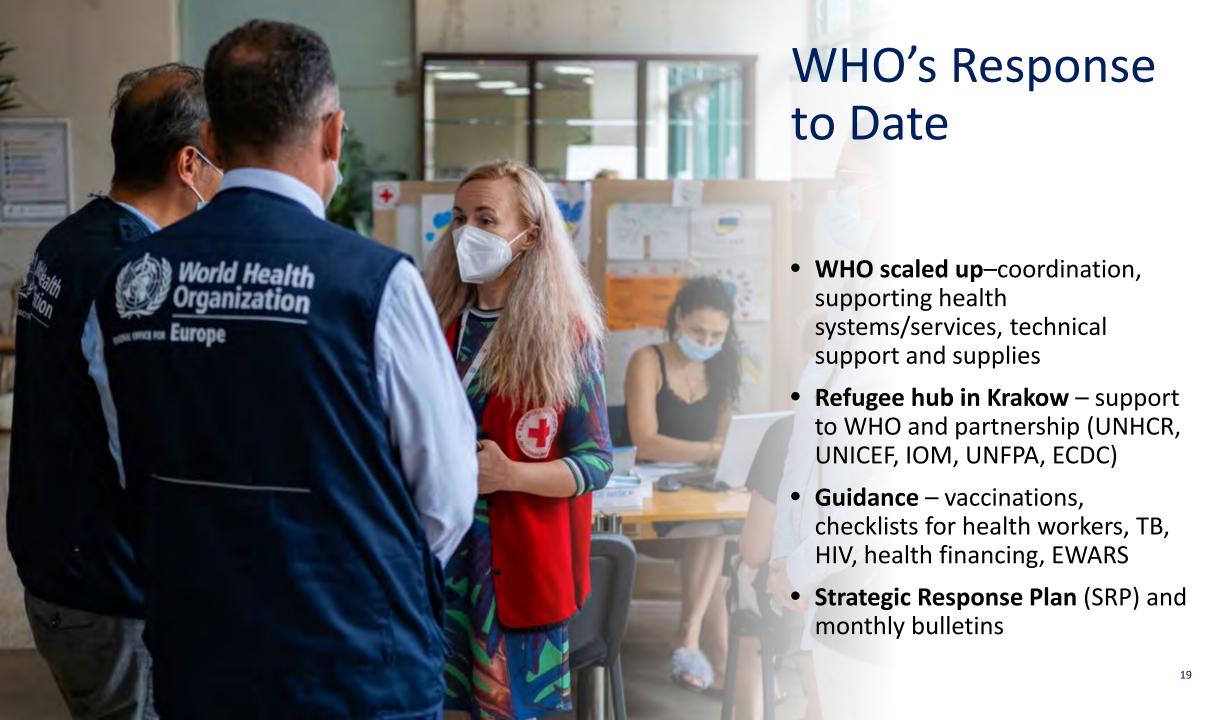


### Communicable diseases: HIV, Tuberculosis, VPD



- Risk of spread of communicable diseases population movement, multiple displacements, living conditions, disruption of vaccination, prevention, testing and care
- HIV and TB
  - prior to the war, highest HIV prevalence in the region, PLHIV - 3529 in 12 countries (WHO/ECDC July 2022)
  - risks of treatment disruption, drug-resistance, transmission
  - continuity screening, diagnosis, prevention, treatment, care
  - tool to estimate burden of TB and HIV for resource planning
  - European TB Test Finder
  - electronic transfer of HIV information
  - WHO pre-qualified drugs, EU has different criteria, local solutions needed
- Vaccine preventable diseases lower vaccination coverage for MCV, polio, DPT3 in Ukraine, coverage gaps in receiving countries (\*WHO April 2022)
  - identify and close immunity gaps
  - estimate additional vaccine supply needs
  - outbreak detection and response





# 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 evidencebased 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.

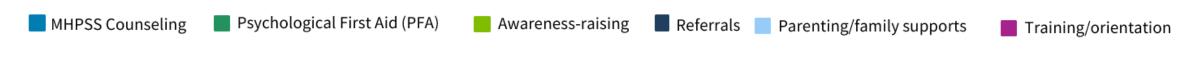


### **Key activities Objectives 1-4**

- Interagency coordination as well as for MHPSS
- **Policy guidance** integrate refugees into national health strategies
- **Financial support** to NGOs to cover medical costs/medications
- **Refugee health clinics** interdisciplinary health and other services
- **Technical support**, guidance, training (mental health, vaccinations, TB, HIV, NCDs, MCM, SRH/GBV)
- Over 400,000 supported to access health care and close to 900, 000 reached with risk communications materials, Health Booklet (Poland)
- Health assessments/surveys— Behavioral Insights, Health System Assessments and Multi-sector needs assessments (MSNA) for evidence-based decision making
- Emergency Medical Team Coordination Cell (EMTCC)
- Medevac and repatriation MoH Ukraine and Poland, DG SANTE and DG ECHO— technical support, staff, translation, Medevac Hub/Rzeszow- 2158 completed to date (war injuries and critically ill)
- Prevention and response to sexual exploitation, abuse and harassment (PRSEAH)- deployed staff, dialogue with the key stakeholders, GBV guidance, training

### **MHPSS Services Delivered**

Ukraine-Refugee-Receiving Countries 2022 (Hungary, Romania, Slovakia, Moldova)









# 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.

**European Region** 

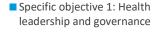


# Key activities Objectives 5-6

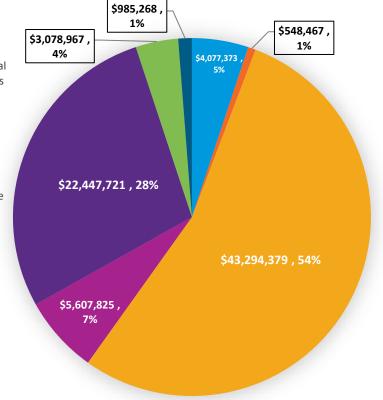
- Procured and delivered more than US\$16.8
   million worth of medical equipment and
   supplies -meet the expanded health needs,
   continue treatment with the same regimens as
   in Ukraine (TB, HIV)
- Cultural mediators as part of health workforce
- 4,000 health workers trained to provide health services to refugees (as of February 2023)
- Developed an online course on the national health system for UKR HCW and a call centre on how to obtain temporary medical licenses (Poland)
- Integration of Ukrainian refugee health care staff at dedicated refugee health centers (Slovakia)

### Needs Analysis: Refugee Response Plan (RRP) 2023

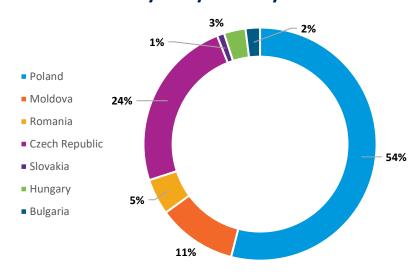
### **RRP Needs Analysis by Strategic Objective**



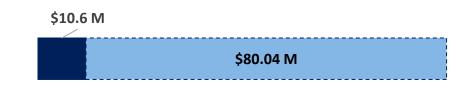
- Specific objective 2: Financial barriers to healthcare access
- Specific objective 3: Access to primary and emergency health care services
- Specific objective 4: Emergency health information and surveillance
- Specific objective 5: Priority medical products, vaccines, and technologies
- Specific objective 6: Health workforce
- Cross-cutting priorities: PSEAH and RCCE



### **RRP Needs Analysis by Country**



### **RRP Overall Funding Needs**



- YTD allocated resources against Ukraine crisis response appeal 2023
- Total Funding Need







# **Sub-National Member State consultation April 18-19, 2023 – Bratislava, Slovakia**

- Request from MS from the WHA 75 exchange best practices and share experiences across countries- Hosted by Slovakia and the WHO, MS's that requested the consultation (Poland, Romania, Republic of Moldova, Czech Republic, Hungary) EU DG-ECHO and ECDC, WHO, UN and NGOs
- **Temporary Protection Directive -** essential for access to health care need to plan for longer term financing including national health insurance
- **Government policies** critical to allocate resources for health care access
- **Collaboration** government, EU, UN, NGOs, communities
- **Need precise data** to provide effective health services and access to health care lack of comprehensive data systems
- Temporary integration of Ukrainian health workforce to fill gaps in already strained health system
- **Stronger linkage with Ukraine** health care barriers, cross border health data
- Not prepared for these types of crises -crisis management and resource allocation
- **Continued support** learnings and best practices to inform future actions
- Whole of society response as the crisis continues and the future is unknown
- Way forward consolidated report, follow up key technical areas and recommendations



### Ukraine – Situation Overview

- An estimated 5.4 million persons internally displaced within Ukraine (<u>IOM</u>, 2023).
- 959 attacks on health care (101 deaths and 136 injured verified by WHOs global SSA)
- Unprecedented displacement continues (UNHCR, as of 25 April):
  - 8.1M refugees from Ukraine registered across Europe,
  - 5.0M under EU TPD or similar protection schemes,



### Continuing risks to health in Ukraine and refugeereceiving countries

- Further escalation (anticipated during spring or summer)
- Continued destruction of critical infrastructure (electricity, water, heat)
- Attacks on health infrastructure and services
- Further displacement and population movements
- No humanitarian access to areas not under the control of the Government of Ukraine
- Continued risk of communicable diseases, COVID-19, other respiratory-, water-borne-, and vaccine preventable diseases
- Massive mental health and psychosocial support needs in Ukraine and refugee receiving countries
- Barriers to access to care in Ukraine and refugee receiving countries
- Potential risk of **chemical** and **radio-nuclear incidents**

# 3-Level Review Mission Main Outcomes

- Ukraine response to remain a grade 3 acute emergency, as per WHOs Emergency Response Framework (ERF)

   to be re-visited in a follow-up mission autumn 2023;
- 2. Contingency planning for **further escalation** (spring/summer) and related health consequences and displacement;
- 3. Agile and **dynamic approach to re-position operational hubs and sub-offices** considering rapidly changing security context and health needs focus on staff safety and duty of care;
- Update Public Health Situation Analysis (PHSA);
- 5. Expand **line-item procurement** vis-à-vis standard kit delivery to better target specific supply and pharmaceutical gaps;
- 6. High level UN-wide efforts to ensure humanitarian access to all affected areas and communities;
- 7. Continue prioritization and streamline prevention of sexual exploitation, abuse and harassment (PRSEAH) across operations.



