SEVENTY-SEVENTH WORLD HEALTH ASSEMBLY A77/13
Provisional agenda item 14.2 14 May 2024

Implementation of resolution WHA75.11 (2022)

Report by the Director-General

1. In May 2022, the Seventy-fifth World Health Assembly adopted resolution WHA75.11, in which a number of requests were made to the Secretariat. A report setting out the Secretariat's response was submitted to the Seventy-sixth World Health Assembly in May 2023.[1] Following consideration of that report, the Seventy-sixth Health Assembly adopted decision WHA76(8) (2023) requesting the WHO Director-General to report to the Seventy-seventh World Health Assembly in 2024, through the Executive Board at its 154th session, on the implementation of resolution WHA75.11 (2022). The present report sets out the Secretariat's response to that decision. An earlier version of this report was considered by the Executive Board at its 154th session.[2]

UPDATE ON PROGRESS IN IMPLEMENTATION[3]

Impacts on health

2. As at 29 February 2024, a total of 30 755 civilian casualties have been reported in Ukraine, comprising 10 675 deaths and 20 080 injuries,[4] although the actual toll is anticipated to be much higher. The number of internally displaced persons is estimated at 3.68 million[5] and a further 6.29 million refugees have been recorded globally.[6] As defined by the United Nations, 14.6 million people need humanitarian assistance in 2024[7]

3. Despite earlier restrictions, direct access to primary data on morbidity and mortality has significantly improved except in areas under the temporary military control of the Russian Federation. Analysis of 864 health facilities via the Health Resources and Services Availability Monitoring System (HeRAMS), showed that 88% of infrastructure damage was conflict-related, mainly in the north-east,

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[1] Document A76/12; see also the summary records of the Seventy-sixth World Health Assembly, third meeting (section 2), fourth meeting, fifth meeting and sixth meeting of Committee A.

[2] Document EB154/16; see also the summary records of the Executive Board at its 154th session, ninth meeting, section 2.

[3] Data as at February 2024 except where otherwise noted.

[4] Ukraine: protection of civilians in armed conflict February 2024 update. Geneva: United Nations Office of the High Commissioner for Human Rights; 7 March 2024 (https://ukraine.un.org/en/262581-protection-civilians-armed-conflict-%E2%80%94-february-2024, accessed 17 April 2024).

[5] International Organization for Migration displacement tracking matrix (https://dtm.iom.int/ukraine, as at December 2023, accessed 17 April 2024).

[6] Operational Data Portal – Ukraine Refugee Situation. Geneva: United Nations High Commissioner for Refugees; 2024 (https://data.unhcr.org/en/situations/ukraine, as at 14 March 2024, accessed 17 April 2024).

[7] See https://www.unocha.org/publications/report/ukraine/ukraine-humanitarian-needs-and-response-plan-2024-december-2023-enuk (accessed 17 April 2024).

east, south-east and south. Regions like Kharkivska, Kyivska and Mykolaivska reported more instances of partial damage than others, while Kharkivska also had significant numbers of fully damaged facilities, as did Donetska.[1] In terms of staffing and financial strains, the National Health Service of Ukraine recorded a health care workforce outflow of approximately 14% (equivalent to 89 000 medical professionals) in 2022 compared to 2021.[2] The war has resulted in approximately US$1.4 billion in damage to Ukraine's health sector, with primary health care centres and hospitals having the largest share of the damage.[3]

4. HeRAMS data show that sexual and reproductive health and maternal and newborn care services are available in 89% of facilities. However, barriers to accessing these services exist and include lack of medical supplies and financial and human resources, followed by lack of medical equipment and training for the medical personnel.[1] Unavailability of sexual and reproductive health services was more prevalent in Khersonska, Sumska, Ivano-Frankivska, Lvivska, Rivnenska and Zhytomyrska oblasts, closer to the front line.[4] The highest percentages of unavailability and partial availability of maternal and newborn care services were reported in Donetsk (33%) and Kherson (51%) regions.

5. In October 2023, 36% of all households reported having a member with a chronic condition. Of those, 69% reported problems accessing health care. Most households (54%) that sought care indicated the cost of medicines as their greatest challenge.[5]

6. A periodically updated risk assessment for radio-nuclear emergencies has been in place since the beginning of the war. As of February 2024, the overall national risk is assessed as moderate at the national level, stemming mostly from accidental events due to collateral damage to nuclear power plants located in the proximity of active military combat. Updates on the situation at all the nuclear power plants are regularly provided by the International Atomic Energy Agency.[6] WHO is a member of the Inter-Agency Committee on Radiological and Nuclear Emergencies led by the International Atomic Energy Agency globally to act in a coordinated manner in case of emergency.[7]

7. The incidence of hepatitis A has quadrupled, with 1050 cases registered in 2023, up from 281 in 2022. Between 16 October 2023 and 1 January 2024, Vinnytsia reported 427 cases of hepatitis A. The outbreak was contained as of 7 December 2023, and since then, there has been a decrease in both hospitalized and new cases in the region.[8] In 2023, a fivefold increase in measles cases from 2022 was reported in Ukraine, from 11 in 2022 to 65 in 2023, alongside an outbreak in Odeska oblast in

[1] HeRAMS. Ukraine Status Update Report, May–October 2023: A comprehensive mapping of the operational status of the health system (https://www.who.int/publications/m/item/herams-ukraine-status-update-report-may-to-october-2023-en, accessed 17 October 2024).

[2] Healthcare at War. Ukrainian Healthcare Center; April 2023 (https://uhc.org.ua/en/2023/04/26/healthcare-at-war-eng/, accessed 17 April 2024).

[3] Ukraine Third Rapid Damage and Needs Assessment (RDNA3): February 2022–December 2023. Washington DC: World Bank Group; February 2024 (https://documents.worldbank.org/en/publication/documents-reports/documentdetail/099021324115085807/p1801741bea12c012189ca16d95d8c2556a, accessed 17 April 2024).

[4] UNFPA Regional Response to Ukraine Emergency: Situation Report #20, 1 July–31 August 2023 (https://www.unfpa.org/sites/default/files/resource-pdf/SitRep%2320_Sept_2023_Ukraine.pdf, accessed 17 April 2024).

[5] Health needs assessment of the adult population in Ukraine: survey report, April 2023. Copenhagen: WHO Regional Office for Europe; 2023 (https://iris.who.int/bitstream/handle/10665/372141/WHO-EURO-2023-6904-46670-70096-eng.pdf?sequence=1, accessed 17 April 2024).

[6] See https://www.iaea.org/nuclear-safety-security-and-safeguards-in-ukraine (accessed 17 April 2024).

[7] See https://www.iaea.org/topics/international-arrangements (accessed 17 April 2024).

[8] Center for Public Health of the Ministry of Health of Ukraine data.

January 2024.[1] Despite efforts that improved the coverage rates for various vaccines, including the measles containing vaccine dose 1 and dose 2, the levels of coverage did not reach the desired 95% target, leaving a significant portion of the child population at risk. Some regions, such as Kyiv City and several western oblasts, show higher vaccination rates, whereas others, particularly in the east, lagged behind, with up to 10 oblasts not reaching the 80% coverage threshold for critical vaccines.[2] However, the measles outbreak is controlled, indicating the effectiveness of the measures implemented to manage this specific public health challenge. According to information provided by the Russian Federation on 26 January 2024, no signal of infectious disease has been reported in the territories under the temporary military control of the Russian Federation.

WHO support to the humanitarian and emergency health response

8. In Ukraine, WHO continued to coordinate the health cluster. In 2023, 113 health cluster partners reported supporting 1364 health facilities, reaching 7.6 million people in 4231 towns and villages across 24 oblasts.[3] In 2024, the Ukraine humanitarian response has shifted to areas in the eastern, northern and southern oblasts bordering the front line where needs are highest, while targeting 3.8 million people with collective health and humanitarian interventions. In January and February 2024, 70 partners reported reaching 689 258 people and supporting 477 health facilities in 901 towns and villages. The health cluster supports partners with the distribution of supplies via the health requests planning and response platform, which processed 868 requests in 2023.

Prevention of and response to sexual exploitation, abuse and harassment

9. As at February 2024, over 800 candidates deployed for the Ukraine emergency response had been cleared through the United Nations Clear Check database. To date, 1458 people in Ukraine have participated in virtual and/or face-to-face training and awareness-raising sessions on the prevention of and response to sexual exploitation, abuse and harassment. In refugee-receiving countries, 1292 health partners have received training on the subject and other related matters such as handling reports of sexual exploitation, abuse and harassment. WHO continues to participate in inter-agency network meetings and related working groups on the prevention of sexual exploitation, abuse and harassment.

Support to the health sector

10. In 2023 WHO has reached an estimated 7.2 million people in Ukraine with different health interventions, including direct delivery of medical supplies and equipment and technical support through training sessions, technical guidelines and coordination of health partners.

11. WHO has supported the Ministry of Health of Ukraine to build the capacity of health care workers on topics including the management of mental health, trauma and rehabilitation, mass casualties, chemical exposure, infectious diseases, and outbreak detection and control. The phase-out of most international emergency medical teams took place in early 2023, with national preparedness and surge capacities being strengthened. This included the activation of 10 out of 21 type 1 mobile disaster response teams. Additionally, a disaster response roster was established to facilitate the deployment of

[1] Center for Public Health of the Ministry of Health of Ukraine. See https://phc.org.ua/news/v-odesi-spalakh-koru-zakhvoryuvannya-viyavili-u-dvokh-ditey-z-odniei-rodini-yaka-povernulas-z# (in Ukrainian) (accessed 30 April 2024).

[2] Center for Public Health of the Ministry of Health of Ukraine vaccination coverage. See https://phc.org.ua/kontrol-zakhvoryuvan/imunizaciya/okhoplennya-scheplennyami (in Ukrainian) (accessed 30 April 2024).

[3] See https://response.reliefweb.int/ukraine/health (accessed 17 April 2024).

health care staff, comprising 405 members. WHO continues to coordinate with these international emergency medical teams, focusing on enhancing trauma care and training. In 2023, 3979 health care staff participated in comprehensive training sessions. WHO and local partners established and deployed noncommunicable disease and mobile health units in Ukraine that provided more than 22 000 noncommunicable disease consultations, with 43 mobile health units and 113 primary health care doctors and nurses, from April to December 2023 in six oblasts. The health care services mainly addressed noncommunicable diseases, mental health, infectious diseases and immunization, along with palliative care and support for gender-based violence survivors, emergency conditions and injuries. WHO has also set up 15 modular units to serve as primary health care facilities in five oblasts covering a population of 73 000 people.

12. WHO equipped 40 health care facilities with assistive technologies according to Ministry of Health requirements to support the provision of assistive products. WHO also supported the transformation of a rehabilitation centre in Rivne into a national centre for spinal cord injuries and traumatic brain injury care.

13. Throughout 2023, WHO provided support to 843 settings/shelters for internally displaced populations across six oblasts, covering 637 435 internally displaced people with vaccinations, consultations and health awareness activities. In Rivne oblast, outreach campaigns aimed at elderly people in remote rural areas led to increases in vaccination coverage against coronavirus disease (COVID-19) and diphtheria. Similarly, in Lviv oblast, efforts in 41 territorial communities resulted in increases in vaccination coverage against COVID-19 among the elderly population and against diphtheria.

14. WHO continues to strengthen the management of potential chemical, biological, radiological and nuclear events with the Ministry of Health of Ukraine. WHO has conducted 45 basic training sessions on chemical preparedness and response, reaching more than 2243 clinicians, and 20 training sessions on radiation preparedness of hospitals, reaching more than 400 clinicians.

15. WHO supported the Ministry of Health of Ukraine to review and identify gaps to update the current legal framework for the prevention of and response to gender-based violence. This update encompasses refining service delivery for survivors, updating health-related protocols for medical examinations, establishing comprehensive health care service provision criteria and formulating documentation procedures for all survivors of gender-based violence, covering both domestic and war-related incidents.

16. Over 6.4 million refugees from Ukraine have applied for asylum, temporary protection or similar national protection schemes.[1] Reported cases of barriers to access health care exist in many countries. From January to December 2023, WHO supported 345 483 people in accessing health care services and 19 240 people were trained in providing health services to refugees and host populations.

17. WHO and the Ministry of Health of the Republic of Moldova pioneered a holistic intervention to improve access to quality and safe emergency, trauma and critical care for refugees and host populations. The initiative designed and rolled out 29 simulation-based trainings benefiting over 600 health care workers and hospital managers. In Poland, WHO supported 12 121 people in accessing services for tuberculosis, HIV and sexually transmitted infections and reached 69 052 people with healthy behaviour messaging on disease prevention, vaccination, chronic disease management and access to health care. Also, in 2023 WHO cultural mediators in Romania delivered over 4000 psychological support sessions

[1] See https://data.unhcr.org/en/situations/ukraine (as at 14 March 2024; accessed 17 April 2024).

to Ukrainian beneficiaries and provided guidance to nearly 1500 refugees on navigating the health system. WHO supported the establishment of a career support centre in Czechia to assist the integration of international health care professionals including Ukrainian refugees, to date having reached 860 health workers.

18. As at 1 March 2024, 3785 medical evacuations had been coordinated by the Ministry of Health of Ukraine with WHO support.[1] Over 2800 of these have been supported through the European Union medical evacuation system[2] and others through several bilateral mechanisms.[1]

Procurement of essential medicines and supplies

19. Since 24 February 2022 WHO has procured medicines, medical equipment and supplies valued at over US$ 125 million, with supplies worth over US$ 101 million delivered to health facilities, while US$ 24 million are either in stock or in the delivery pipeline.[3] The WHO logistics team extends substantial support to health cluster partners, providing both supplies and technical assistance. From January 2023 to February 2024, WHO participated in 103 inter-agency convoys. From February 2022 to February 2024, WHO delivered supplies and equipment to refugee-hosting countries, including Czechia, Hungary, Poland, Republic of Moldova and Romania, with a total value of over US$ 24.6 million.

Monitoring attacks on health care

20. As at 29 February 2024, a total of 1626 attacks on health care had been verified through the WHO surveillance system for attacks on health care, directly resulting in 266 reported injuries and 121 deaths. Some 1415 incidents affected health facilities while 374 impacted health supplies.[4]

Addressing mental health and psychosocial needs

21. As at February 2024, 22 partners had joined the Mental Health Gap Action Programme in Ukraine and provided training to more than 5700 primary health care workers. More than 77 000 primary health care workers also completed online training on the management of mental health conditions in primary health care settings. Between June 2022 and February 2024, WHO trained 516 trainers from the front-line sectors and services throughout Ukraine based on the Self-Help Plus course. Furthermore, 32 community mental health teams, supported by WHO, have delivered over 107 000 consultations to 3618 individuals with severe mental health disorders during the period from February 2022 to February 2024.

22. In 2023, mental health and psychosocial support was provided for 10 333 consultations in Bulgaria, Czechia, Poland and Romania.

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[1] Ministry of Health of Ukraine data.

[2] European Response Coordination Centre data.

[3] Trauma supplies worth US$ 5.5 million for up to 38 158 surgeries, noncommunicable disease medicines worth US$ 4.1 million, for a catchment population of 1.38 million people, and interagency emergency health kits worth US$1.8 million, for a catchment population of 840 000 people.

[4] Surveillance system for attacks on health care. Geneva: World Health Organization; 2022 (https://extranet.who.int/ssa/Index.aspx, accessed 17 April 2024).

Resource allocation

23. Staffing across the response has been scaled up including through standby partners and the Global Outbreak Alert and Response Network. A total of 196 deployments have been made for the Ukraine response.

24. WHO launched an appeal of US$ 114 million for the funding needs in 2024, including US$ 75 million for the health emergency response in Ukraine and US$ 39 million for the response in refugee-receiving countries. As at 29 February 2024, a total of US$ 15.3 million had been received. WHO will continue to work with its partners to secure financial resources for future medium- and longer-term needs, including for recovery and rebuilding.

ACTION BY THE HEALTH ASSEMBLY

25. The Health Assembly is invited to note the report.

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