Technical update on WHO’s humanitarian response in the occupied Palestinian territory, Sudan and Ukraine
### People in Need of Humanitarian Assistance - Global Humanitarian Overview 2024

- **People in Need 2024 (in millions):**
  - 29
  - 292

### Events and Emergencies Global Overview

- **New Events:** 7
- **Ongoing Events:** 262*
- **Grades:***
  - **Grade 3:** 9
  - **Protracted 3:** 7
  - **Grade 2:** 13
  - **Protracted 2:** 11
  - **Grade 1:** 4
  - **Protracted 1:** 0

### Countries Affected by Humanitarian Crises
- **Total Graded Emergencies:** 44

*Map showing population in need of humanitarian assistance in the Global Humanitarian Overview 2024*
occupied Palestinian territory
Impact of the Conflict (As of 13 May 2024)

Casualties

<table>
<thead>
<tr>
<th>Region</th>
<th>Fatalities</th>
<th>Injuries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gaza Strip(^1)</td>
<td>35 173</td>
<td>79 061</td>
</tr>
<tr>
<td>West Bank and East Jerusalem(^2)</td>
<td>497</td>
<td>5 000</td>
</tr>
<tr>
<td>Total for oPt</td>
<td>35 670</td>
<td>84 061</td>
</tr>
</tbody>
</table>

Source: \(^1\)Gaza MOH, \(^2\)OCHA

Displacement

<table>
<thead>
<tr>
<th>Location</th>
<th>Total IDPs(^2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gaza Strip</td>
<td>1 700 000*</td>
</tr>
<tr>
<td>West Bank</td>
<td>3 009</td>
</tr>
</tbody>
</table>

* Over 350,000 displaced from Rafah since 8 May 2024
1,000,000 extremely vulnerable in Rafah, including 500,000 children

Attacks on health care

<table>
<thead>
<tr>
<th>Location</th>
<th>Total attacks</th>
<th>Total killed</th>
<th>Total injured</th>
<th># incidents impacting health facilities</th>
<th># incidents impacting medical transport</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gaza</td>
<td>443</td>
<td>723</td>
<td>924</td>
<td>379</td>
<td>84</td>
</tr>
<tr>
<td>West Bank</td>
<td>446</td>
<td>12</td>
<td>95</td>
<td>94</td>
<td>271</td>
</tr>
<tr>
<td>Total</td>
<td>889</td>
<td>735</td>
<td>1019</td>
<td>473</td>
<td>355</td>
</tr>
</tbody>
</table>

Over 350,000 displaced from Rafah since 8 May 2024
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Health System Capacities and Health Risks, including Impact of the Rafah Incursion and Evacuation Orders
(As of 13 May 2024)

**Impact of Rafah evacuation orders**

3 Hospitals impacted in Rafah, including 2 field hospitals

7 PHC impacted, including 4 in the North and 3 in Rafah

35 Medical Points impacted in Rafah, including 16 in the North and 19 in Rafah

316 Hospital Beds lost, including 220 in Al Najjar hospitals

**Impact on hospitals in Gaza**

![Hospital functionality status, Gaza strip as of 13 May 2024]

**Impact on health risks**

<table>
<thead>
<tr>
<th>Public health risk</th>
<th>Oct 2023</th>
<th>April 2024</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trauma and injury</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-communicable diseases (NCD)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternal and neo-natal health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acute respiratory infection (ARI) including COVID-19</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acute diarrheal illness (including acute watery diarrhoea (AWD), shigella and rotavirus)</td>
<td></td>
<td></td>
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<tr>
<td>Malnutrition</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cholera</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skin infections (including scabies)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender-Based Violence (GBV)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measles</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Typhoid</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acute Jaundice Syndrome (AJS) /Suspected hepatitis A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hepatitis E</td>
<td></td>
<td></td>
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<tr>
<td>Meningococcal disease</td>
<td></td>
<td></td>
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<tr>
<td>Polio (including acute flaccid paralysis (AFP))</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chicken Pox</td>
<td></td>
<td></td>
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<tr>
<td>Diphtheria</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mumps</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**WHO and Partners’ Operations – Gaza Strip (15 May 2024)**

### Status of planned aid missions to the North and the South of Gaza (Jan-Apr 2024)

<table>
<thead>
<tr>
<th></th>
<th>North</th>
<th>South</th>
</tr>
</thead>
<tbody>
<tr>
<td>Planned</td>
<td>94</td>
<td>185</td>
</tr>
<tr>
<td>Coordinated</td>
<td>34</td>
<td>147</td>
</tr>
</tbody>
</table>

**WHO Mission Update (3-20 Apr)**

<table>
<thead>
<tr>
<th>Missions planned (in the North and South)</th>
<th>16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missions facilitated (including partially facilitated)</td>
<td>10</td>
</tr>
<tr>
<td>Missions impeded (in. delays/unpassable roads)</td>
<td>4</td>
</tr>
<tr>
<td>Missions denied (including canceled)</td>
<td>2</td>
</tr>
</tbody>
</table>

### EMT Deployment Status

<table>
<thead>
<tr>
<th>EMT Deployment Status</th>
<th>Current Total</th>
<th>Operational EMT teams</th>
<th>Type 1 Fixed</th>
<th>Type 1+ inc beds</th>
<th>Type 2</th>
<th>Type 3</th>
<th>SCT Surgery</th>
<th>SCT EM/Referrals</th>
<th>SCT OB/GYN</th>
<th>IPD beds</th>
<th>OTs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operational EMT teams</td>
<td>18</td>
<td>5</td>
<td>5</td>
<td>0</td>
<td>6</td>
<td>0</td>
<td>9</td>
<td>1</td>
<td>3</td>
<td>496</td>
<td>10</td>
</tr>
<tr>
<td>Forward EMT teams</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>New EMT teams</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Phased out EMT teams</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
Challenges and Asks

Implement an immediate and sustained ceasefire.

Guaranteed safe, sustained and full operational space across Gaza and effective deconfliction. Ensure immediate, safe and unfettered humanitarian access and the provision of life-saving medical care throughout the Gaza Strip.

Adhere to international humanitarian law, including in particular, the prohibition against attacks against, and militarization of, health care.

Safeguard and restore the health system, including and restore the full functionality of hospitals, primary health care centres, laboratory facilities, the implementation of public health measures, comprehensive disease surveillance and outbreak response. Furthermore, allocate adequate resources for the recovery and reconstruction of health and other critical structures and infrastructures.

All actions needed to prevent famine and treat those already malnourished must be facilitated. The IPC report confirms what we, our UN partners and nongovernmental organizations (NGOs) have been witnessing and reporting for months. We must be able to find and treat all children and pregnant and lactating women safely over the entire period required for full recovery.

Ensure access to and provision of health care services without restriction to patients and health care workers throughout the occupied Palestinian territory. All conditions imposed on patients and companions requiring medical evacuation must be lifted.
Sudan Conflict - One Year

- Conflict since 15 April 2023 - WHO G3 (Sudan & neighbors) - IASC SW Scale-up
- 14.7 million in need of health assistance
- >8.5 million displaced - World’s worst displacement crisis, incl:
  - Central African Republic: 23,286 refugees and 6,158 refugee returnees
  - Chad: 588,825 refugees
  - Ethiopia: 44,343 refugees and 9,580 refugee returnees
  - South Sudan: 139,673 refugees and 518,348 refugee returnees

Public health stand-still
Attacks on healthcare, severe access restrictions
Health facilities not/partially functional, public health functions impaired
Unpaid health workers, shortages of medicines and medical supplies

Looming famine – lean season imminent
>35% in acute food insecurity (18 million in IPC3+)
Potential catastrophe (IPC5) in West Darfur, Khartoum, among displaced
13.6% acute malnutrition and 36.4% chronic malnutrition

Outbreaks wherever they can be detected (/18 states)
Cholera > 11,000 cases in 12 states – Malaria in 14 states
Dengue in 12 states - Measles/rubella in 12 states
Susp Pertussis in 5 states – Hepatitis E in Chad among refugees
Sudan Conflict – Health Operations

Collaborative surveillance and response
Development and negotiation on Early Warning Alert and Response and training (>500 surveillance officers) with Cluster partners
Establishment public health laboratory in Port Sudan
Vaccination campaigns (measles, OCV)
Water quality testing

Essential Healthcare Services and Supplies
>1200 metric tons of medical supplies to partner facilities
(incl 99 MT cross border into Sudan from Chad and South-Sudan)
>USD 14 million in medicines in stock and pipeline this includes IEHKs, RH Kits, PED-SAM Kits, Cholera Kits, Trauma Kits, Diagnostic Supplies, Hospital Equipment, Dialysis, etc.
Functionality mapping and monitoring of health services in accessible areas through HeRAMS
Support to hospitals, stabilization centres, mobile clinics and cholera treatment centers: 21 PHC, 11 hospitals
Capacity building SAM management, mental health, SGBV, case management

Health Partner Coordination – Health Cluster Lead Agency
34 Partners (incl 7 NGOs, 5 observers)
Supporting >500 health facilities in hard to reach areas
850 000 OPD consultations Q1-24
Cross-border support ongoing by partners, despite challenges
Co-chairing national cholera Task-Force with FMoH
Multisectoral famine prevention/response plan includes OCHA / interagency operational hubs in El Fasher, Geneina, Kadugli, Kosti, Ed Damazine, Kassala, Port Sudan
Challenges and Asks

Health system buckling under pressure of one year of conflict, especially in the hard-to-reach areas, with health facilities destroyed, looted or struggling with acute shortages of staff, medicines, vaccines, equipment and supplies:

(1) ACCESS AND CAPACITIES IN THE RIGHT PLACE - Making lifesaving healthcare accessible to the most vulnerable people is our first priority. We ask for unimpeded access to populations in need.

(2) FUNDING - We need sufficient funding to address the dire situation the population of Sudan is currently facing. WHO requires US$ 86 million to support emergency response in Sudan, and still faces a funding gap in US$ 59 million.

(3) STOP ATTACKS ON HEALTHCARE – We call for the safety of healthcare staff and the protection of health facilities.
Current Situation and Impact on Health

32,100 civilian casualties including children and women, comprising 10,946 deaths and 21,154 injured, as of 1 May 2024.

1,773 attacks on healthcare, resulting in 136 deaths and 311 injuries, 700 damaged health facilities serving approximately 500k people.

100 attacks on healthcare in 2024 (14 May 2024).

Estimated 3.7 million internally displaced persons (IDPs) and 6.4 million global refugees from Ukraine.

79% of refugees are women and children, 76% want to return with main barriers being safety/security and access to services in Ukraine.

An estimated 9.6 million people in Ukraine with mental health risks, 3.9 million with moderate to severe symptoms.

Gender-based violence (GBV): 26% of ever-partnered women aged 18-74 years experienced intimate partner physical and/or sexual violence at least once in their lifetime since age 15 prior to February 2022.

High risk of infectious diseases and outbreaks of vaccine-preventable diseases and food and water-borne diseases such as Hepatitis A, measles...)

Significant disruption of water availability in health care facilities in Dnipropetrovsk, Kherson and Mykolaiv oblasts following the Nova Kakhovka dam destruction in June.

The risk of a CBRN emergency has significantly increased due to potential collateral damage near active military combat zones such as Zaporizhzhia Nuclear Power Plant.

January 2023 vs January 2024 for 10 most affected oblasts
# WHO Response

## MHPSS
- 22 partners trained over 5,700 primary healthcare workers.
- 516 trainers trained using the Self-Help Plus course and 32 community mental health teams supported to deliver over 107,000 consultations to 3,618 individuals with severe mental disorders.

## CRN risks
- Established an RN expert unit for CBRN material supply and monitoring. Conducted 45 chemical response and 20 radiation preparedness trainings, enhancing skills of over 2,643 clinicians and responders.

## Infrastructure & ambulances
- Donated 115 ambulances and established 15 fully-equipped prefabricated modular structures for primary healthcare serving a population of 73,000.

## Capacity building
- Trained 2453 workers in NCD, mass casualty management, trauma care and critical patient management.
- Training of trainers in GBV and Advanced Life support.

## Medical Evacuations
- Provided technical assistance to MOH, supporting 3,785 medical evacuations, including 2,800 facilitated through the EU Medevac system and an additional return of approximately 300 via the same system.

## Health Cluster
- 196 partners of which 105 active.
- 0.87 M (23%) people reached health services for the period Jan – March 2024.
- Priority services: MHPSS, Trauma/Rehab, SRH, Access to medicines.

## CRN risks
- Participated in 106 interagency convoys reaching 200,000 people and distributed supplies worth US$ 109 million.

43 MHUs operational in six oblasts, and 76 PHC doctors completing 735 field visits, which led to 22,393 consultations.
WHO Response in Refugee-hosting Countries

WHO Impact to improve access to health services in refugee-hosting countries

• Conducted **Behavioural and Cultural Insights studies**, Multi-Sector Needs Assessments with UNHCR, and other **assessments to understand health needs and access barriers** among refugees and to inform WHO response.

• Supported **10 333 mental health and psychosocial support consultations** in Bulgaria, Czechia, Poland, and Romania. In Slovakia, WHO supported the **institutionalization of the MHPSS Technical Working Group** into a permanent committee of the National Commission for Mental Health.

• 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.

• In the Republic of Moldova, WHO supported the Government in a review of the **national health benefits package and expansion to enable free access for refugees** to a comprehensive package of essential health services and medicines for both inpatient and outpatient services.
Challenges and Asks

• **We should not forget the ongoing conflict in Ukraine** as the situation is deteriorating and the number of casualties increasing.

• As the frontline moves, **more and more people find themselves in areas not accessible by humanitarian aid.** Humanitarian corridors are needed. We call on all parties to allow safe and unhindered humanitarian access, in particular in areas close to the front line and those under the temporary military control of the Russian Federation, to meet people’s health needs.

• The energy capacity of hospitals continues to dramatically deteriorate, impacting health support and water supply. **Urgent support is needed to increase hospitals energy autonomy** and avoid potential outbreaks and negative impact on treatment of NCDs.

• **The conflict must stop.** We call on all parties to protect health care, stop all forms of attacks, and support the full resumption of essential health services.
Thank you