
Technical update: WHO humanitarian response in Ukraine and refugee-hosting countries

Member States Briefing 18 March 2026

Health Situation in Ukraine

WHO Strategic Objectives



Results of the attack on Kharkiv hospital, October 2025

- 1. Protect life through emergency and trauma care in frontline areas:** Deliver trauma interventions and emergency medical services to victims of air strikes in frontline and affected areas, strengthening the immediate health response and the resilience of health care systems. This ensures continuity of critical services in a volatile environment, supporting first aid for communities and essential emergency care capacity.
- 2. Sustain continuity of essential health services under conflict conditions:** Provide integrated primary health care and gender-sensitive services in conflict-affected areas, ensuring availability, accessibility, equity and responsiveness. This includes support for energy sufficiency in frontline facilities, particularly heating during winter.
- 3. Safeguard health for displaced and mobile populations:** Support the continued delivery of integrated primary health care services for vulnerable populations in transit and evacuation centres.
- 4. Facilitate medical evacuations:** Support the evacuation of wounded and sick people from frontline areas, in coordination with the Ministry of Health and local authorities, including through the EU Civil Protection Mechanism.

Situation at a glance

 **56,550 civilian casualties** recorded since February 2022, including **15,172 killed** and **41,378 injured** ([OHCHR](#), Feb 2026)

 **3.39 million** people internally displaced (IOM, Jan 2026)
5.4 million refugees registered in host countries ([UNHCR](#), Feb 2026)

 **2,908 attacks on health care** verified since February 2022, causing **237 deaths** and **949 injuries**. Attacks rose **19% year-on-year**, from 488 in 2024 to 580 in 2025 (WHO, [SSA](#))

 Structural damage affects **17%** of health facilities in the most impacted regions, compared to 1.5% elsewhere ([HeRAMS, 2025](#))

 **Over half** of electricity generation capacity lost as of January 2026. Severe power shortages during winter 2025–2026 left civilians with only **hours of electricity per day**, disrupting access to heating and water [Four Years Since The Full-scale Invasion Of Ukraine: Key Facts And Findings, Feb 2026](#)

 Poverty remains at **36.9%** in 2025. **62.3%** of the population report worsened financial conditions since February 2022. Household asset damage increased from 17.5% to **21.8%** between 2024 and 2025 [Monitoring Living Conditions in Ukraine: Fall 2025 Update](#)



Results of the attack on Kyiv ccardiology institute Sept. 2025



Public Health Situation



Non-communicable diseases have worsened, especially in conflict-affected regions, with deterioration in cardiovascular diseases and diabetes, with constrained access to diagnostics and treatment



Growing mental health crisis 10 million people at risk of or living with mental health conditions, with 72% of adults experienced mental health challenges over the past year



Rehabilitation needs for complex war-related trauma remain largely unmet, with limited access to specialized care



Among the highest burdens of HIV, TB, and maternal mortality in the European Region



Increase prevalence of communicable diseases including vaccine-preventable and food- and water-borne diseases. 139 outbreaks reported in 22 oblasts (Dec 2025); measles: 68 outbreaks, 397 cases



The risk of a CBRN emergency remains in particular for Zaporizhzhia Nuclear Power Plant



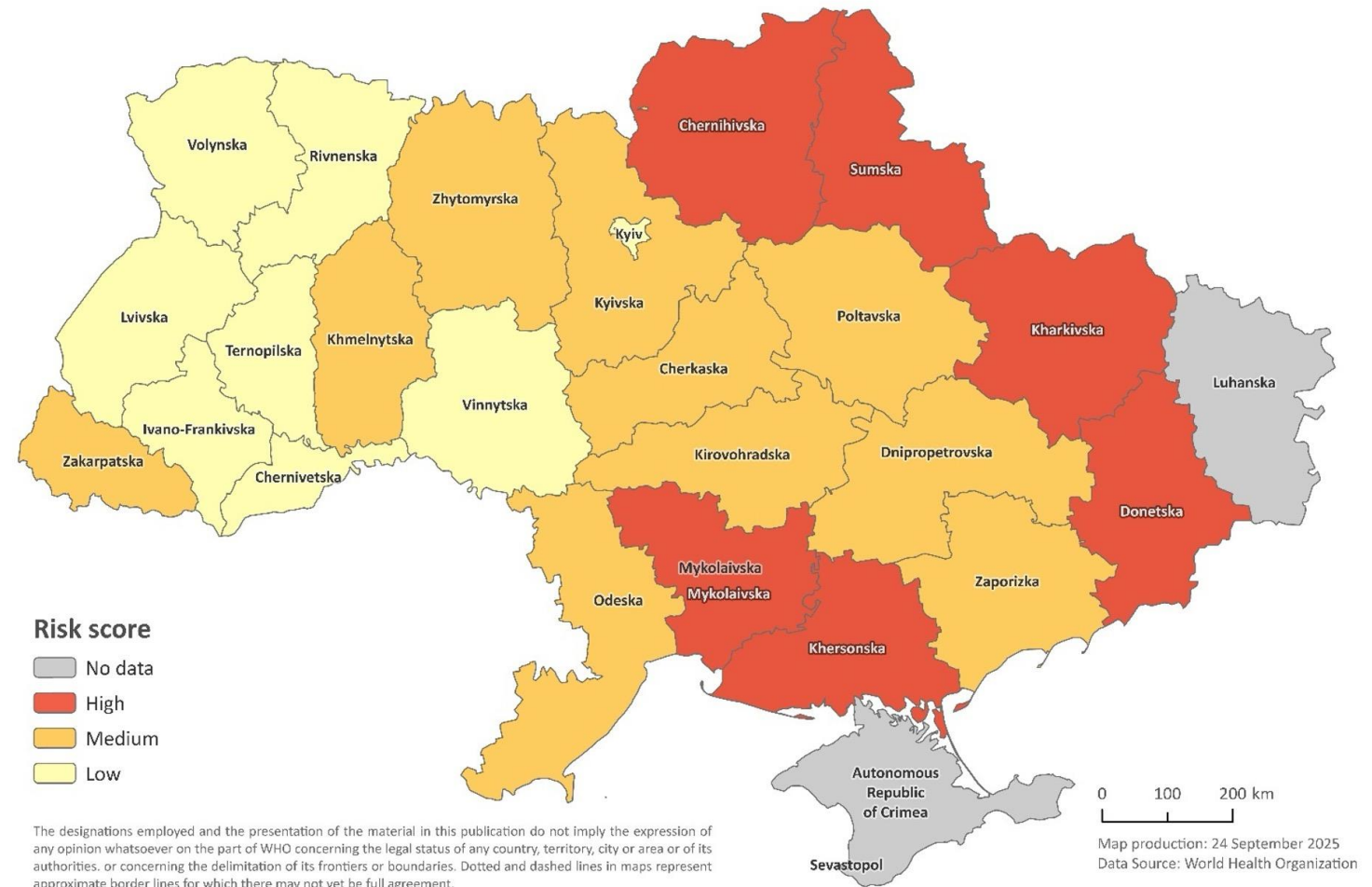
Health problem	National risk level			Front-line regions risk level*		
	Sep-Oct	Nov -Dec	Jan - Feb	Sep-Oct	Nov -Dec	Jan - Feb
Sexual and reproductive health						
Gender-based violence						
Conflict-Related Sexual Violence						
Child health						
Tetanus						
Diphtheria						
Hepatitis B						
Hepatitis C						
Measles						
Influenza, COVID-19, and other ARI epidemics in winter						
Cholera/Acute watery diarrhoea ³						
Hepatitis A						
HIV						
TB ⁴						
NCDs						
Technological and environmental health risks						
Conflict-attributable injuries						
Mental Health						

Source: [Ukraine: Public Health Situation Analysis \(PHSA\) - Ukraine](#)

Ukraine: 2025–2026 Winter Risk Assessment

Public health risk by oblast

- The regions most at risk of severe cold weather affecting public health in the winter of 2025/2026 are Sumy, Kharkiv, Chernihiv, Donetsk, Mykolaiv, and Zaporizhzhia.
- Although the regions in the northeast of Ukraine are most affected by temperatures of -10 degrees from October to March, when adjusted for vulnerability and coping capacity, frontline and other affected regions are at greater risk.



Key Operational Challenges

Access & Security

Very long frontline with limited or no access to some areas.
Ongoing attacks on civilian infrastructure.

Resource Constraints

Limited flexible funding, US funding suspension.
Re-prioritization of response activities.

Workforce

Displacement of trained health workforce.



Results of the attack on IAC 14 Oct 2025

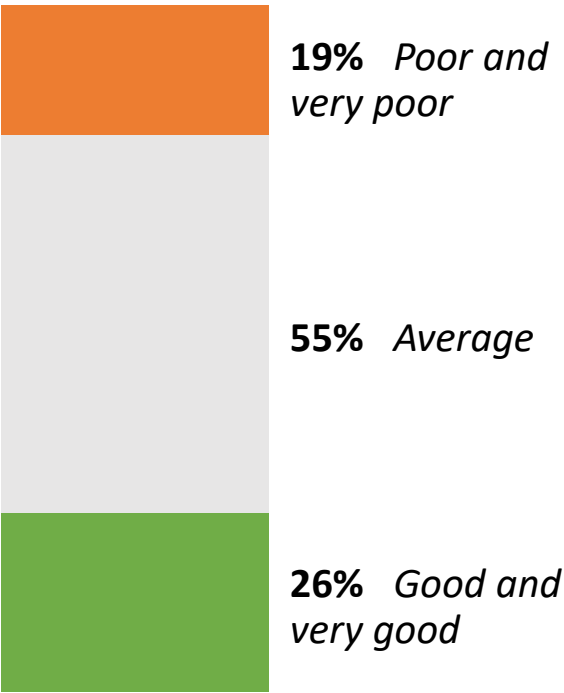


Health Tracker Survey Nov-Dec. 2025

Current health status

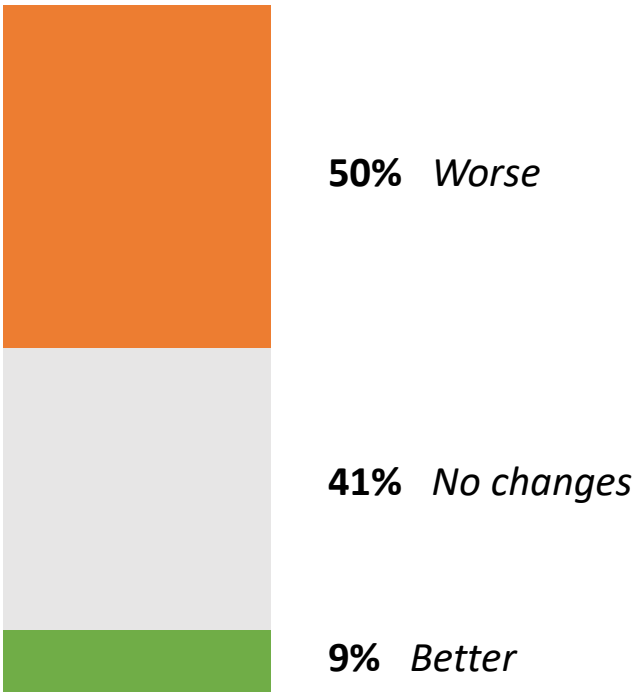
Health status

How do you assess your health status?



Health status changes

How would you assess your current health status compared to a year ago?



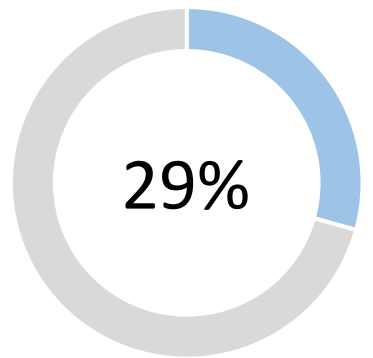
Which health problems have worsened compared to a year ago?

Problems with the musculoskeletal system (pain in the joints, back)	76%
Sleep disorders (insomnia, nightmares)	71%
Impaired vision or hearing	65%
Neurological disorders (headaches, migraines, seizures)	59%
Weakened immune system in general (often cases of infection diseases, etc.)	57%
Cardiovascular diseases	55%
Mental disorders (anxiety, depression, post-traumatic stress disorder)	54%
Dental problems	52%
Gastroenterological problems (stomach or intestinal disorders)	42%
Problems with the respiratory system (allergies, bronchitis, etc.)	34%
Chronic diseases (diabetes, asthma, etc.)	24%
Allergies	20%
Injuries or wounds	17%
Problems with sexual and reproductive health (fertility, sexual dysfunction etc.)	15%
Infectious diseases	9%

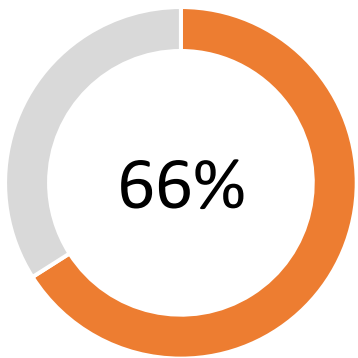
Health Tracker Survey Nov-Dec. 2025

Access to primary health care

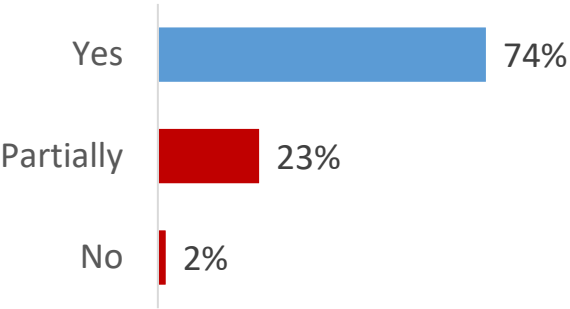
Needed PHC services



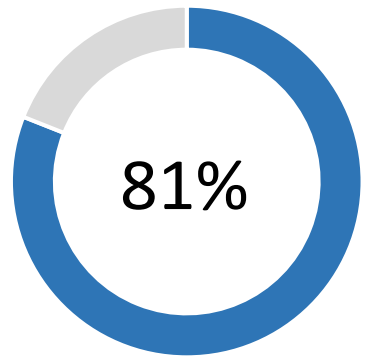
Faced problems accessing**



Were able to receive services**



Sought PHC services*



Problems encountered while accessing**

Cost of medicines	45%
Cost of treatment	27%
Time needed to access the services	22%
Cost of transport needed to access the services	18%
Lack of transport needed to access the services	17%
Services/health-care provider unavailable	12%
Security concerns	9%
Need for unofficial payments	8%
Refusal to provide health-care service/consultation	6%
Not having the documents required	4%
Other reasons	1%

Main reason for not receiving services***

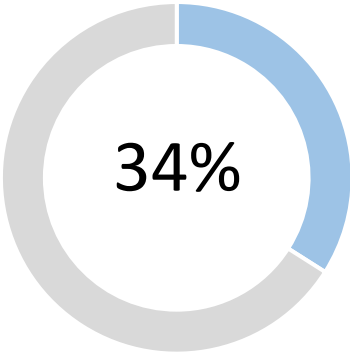
Cost of medicines	5%
Cost of treatment	5%
Time needed to access the services	11%
Cost of transport needed to access the services	
Lack of transport needed to access the services	
Services/health-care provider unavailable	5%
Security concerns	
Need for unofficial payments	
Refusal to provide health-care service/consultation	63%
Not having the documents required	5%
Other reasons	5%

* Among those who needed services
** Among those who sought services
*** Among those who were unable to receive services

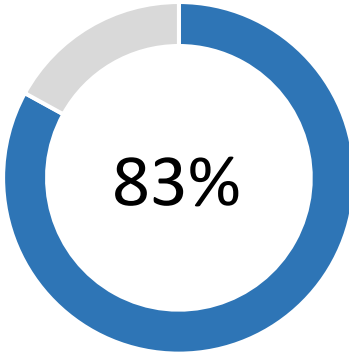
Health Tracker Survey Nov-Dec. 2025

Access to specialized health care

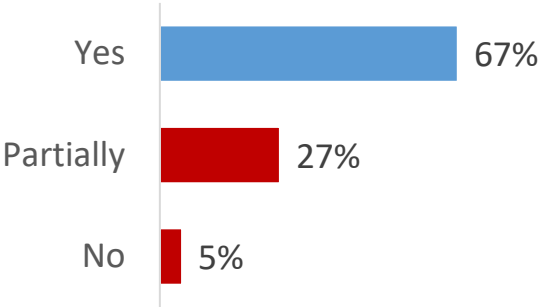
Needed specialized services



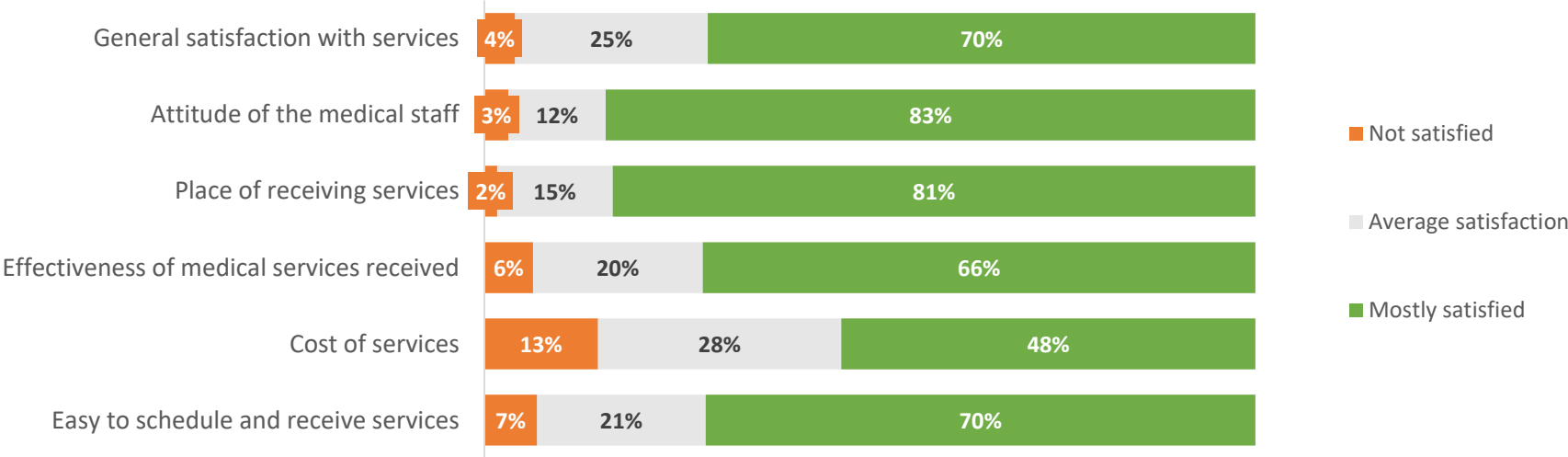
Sought specialized services*



Were able to receive services**



Satisfaction with the last case of specialized healthcare services***

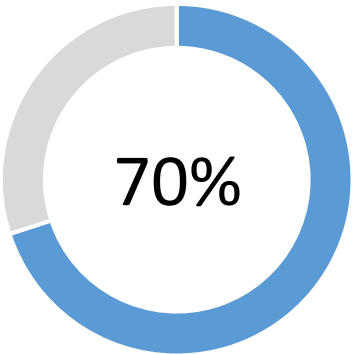


* Among those who needed services
** Among those who sought services
*** Among those who were able to receive services

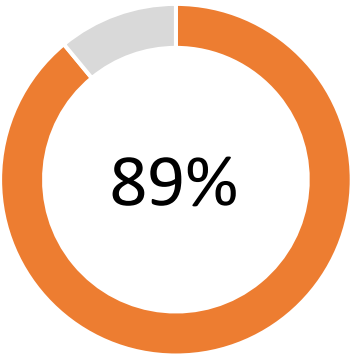
Health Tracker Survey Nov-Dec. 2025

Access to medicines

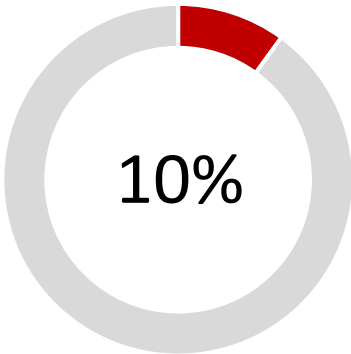
NEEDED any medicines for
the last 3 months



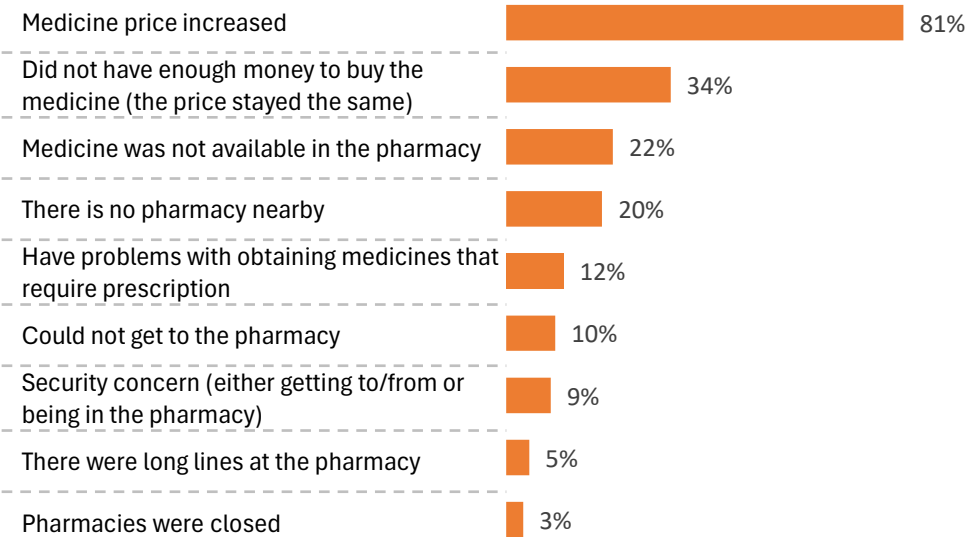
Reported at least one PROBLEM
in obtaining medication*



Had cases where COULD NOT
GET the necessary medicine*



Problems in obtaining medication**



WHO's Response

In 2025, **USD 24.69M** in essential medicines, medical equipment and supplies **delivered to health facilities across all oblasts.**

41 Interagency convoys with direct WHO participation (~80% participation rate)

40 WHO bilateral frontline missions conducted in areas ≤ 30 km from the frontline

231 WHO emergency health modules delivered

12,445 Over-the-Counter (OTC) medical kits delivered

~100,000 people reached with medical supplies and support

WHO Deliveries to Hard-to-Reach Areas



WHO's Response Modular Units (prefabs)

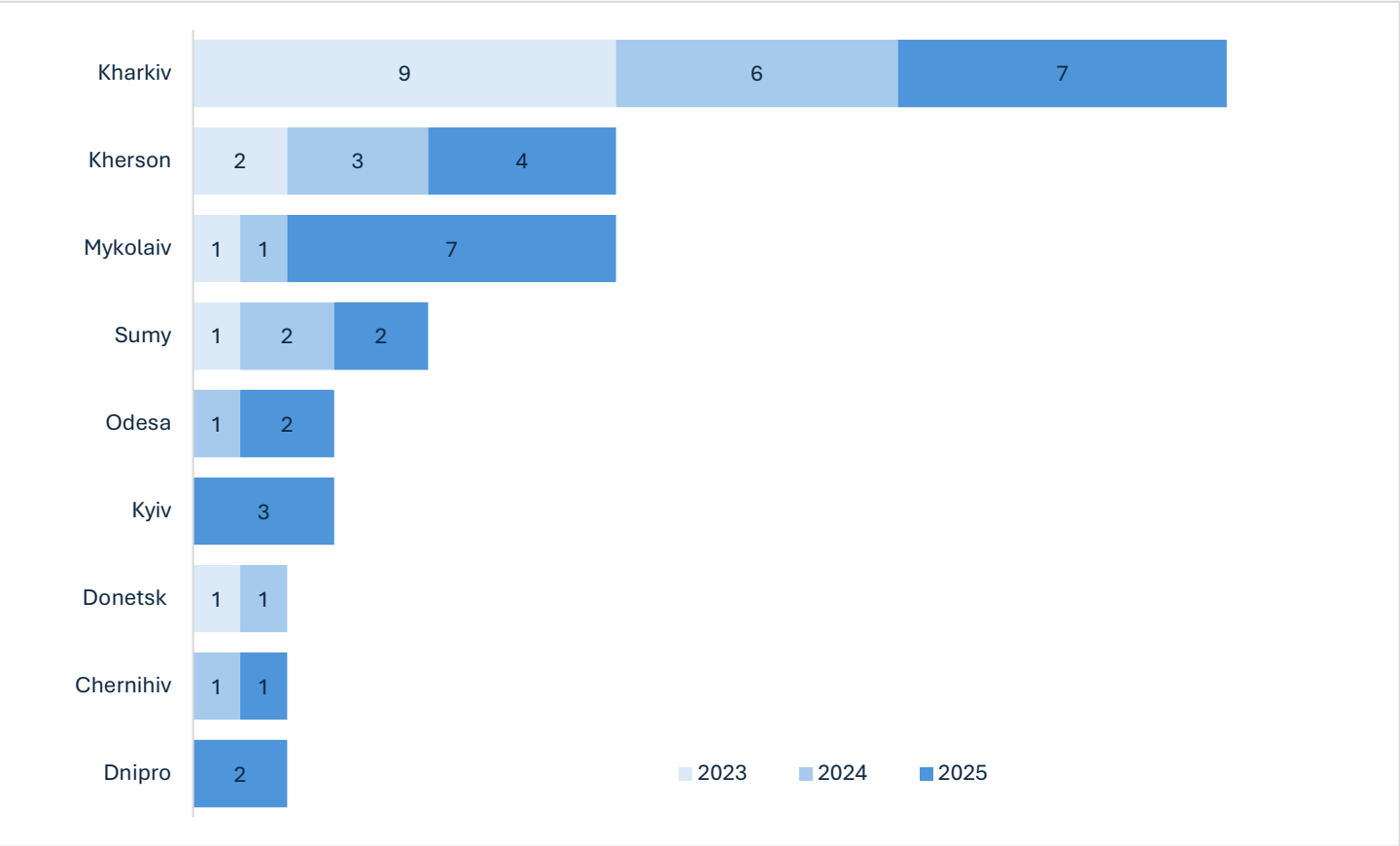
59
Installed

8
Solar panels projects

~264K
Population covered

\$7.7M
Cost of prefab projects, \$

\$207K
Cost of solar panels, \$



- Total of **59** installations
 - 3 relocated
 - 9 Oblasts covered



WHO's Response Heating Units

29

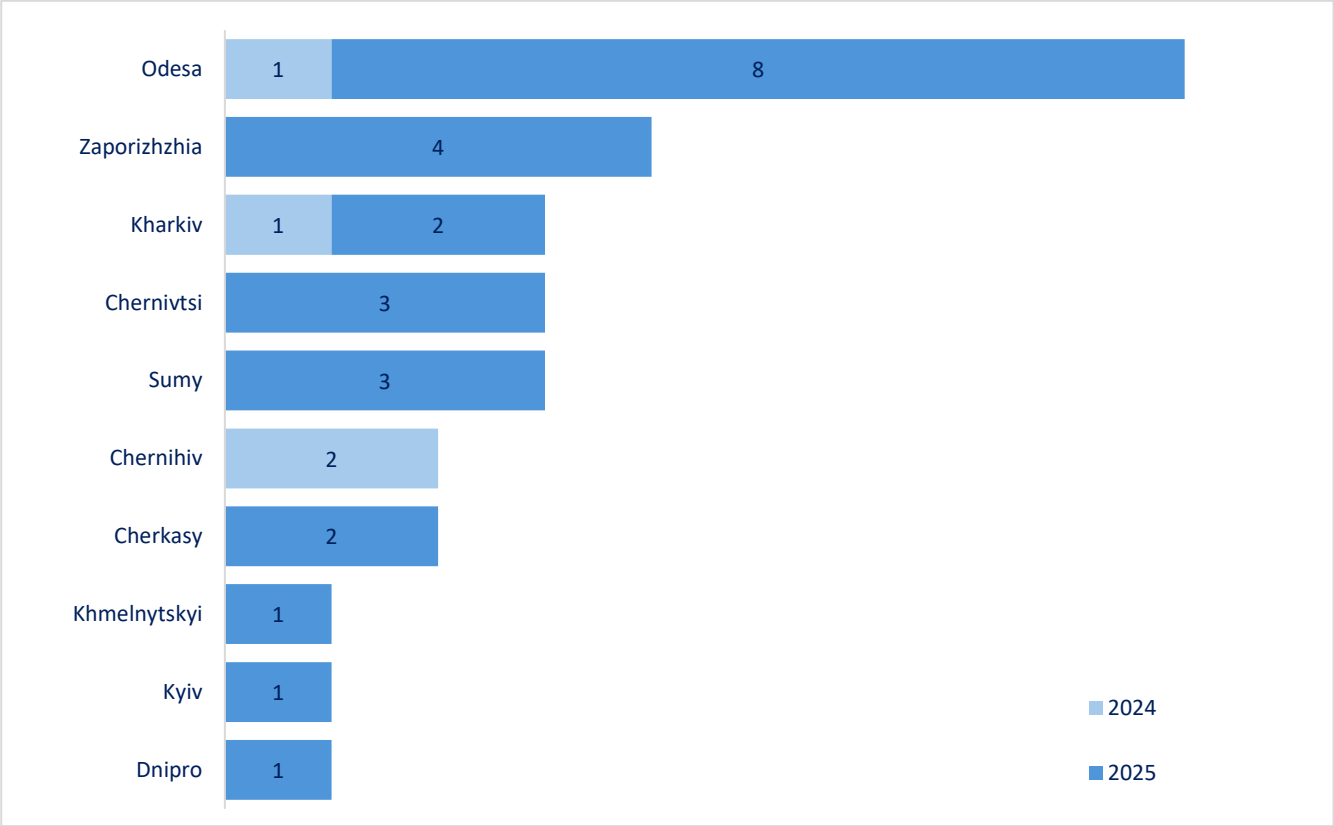
of heating units projects

26

of hospitals supported with installed heating units

9,9 M

Cost of the projects (USD)



- Total of **29** installations:
 - **10 Oblasts** covered



WHO's Response Water Units

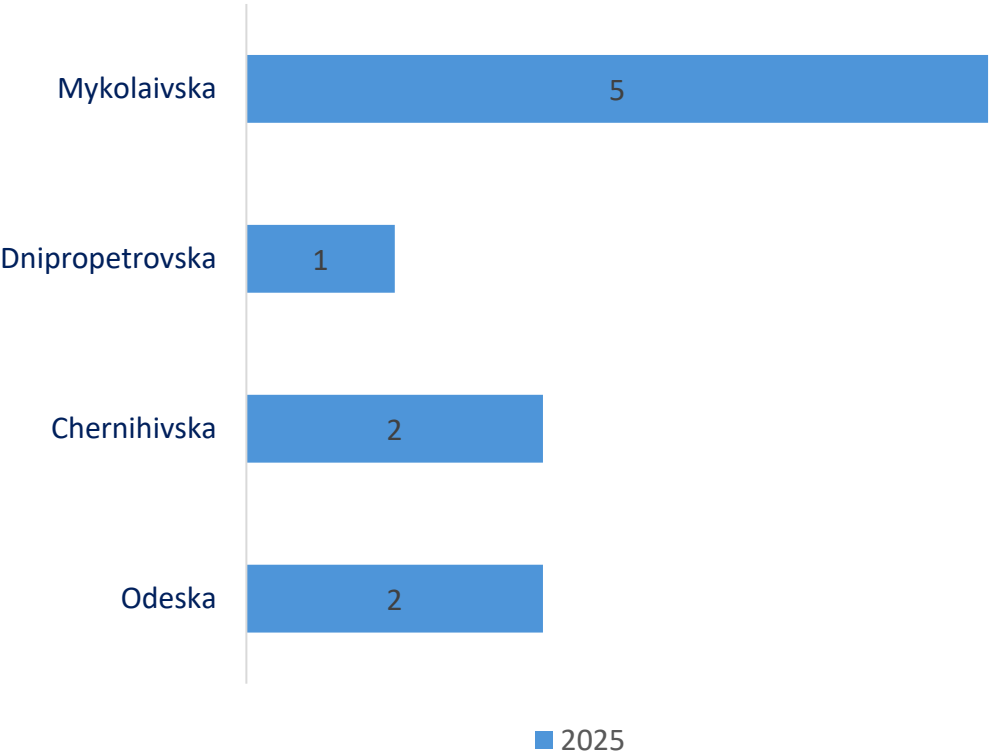
5
oblasts covered

15
of water system projects

15
of functional water systems

686K
Cost of the projects (USD)

8,91M
Population indirectly covered



WHO's Response Outreach healthcare units

6
Oblasts covered

13
Raions covered

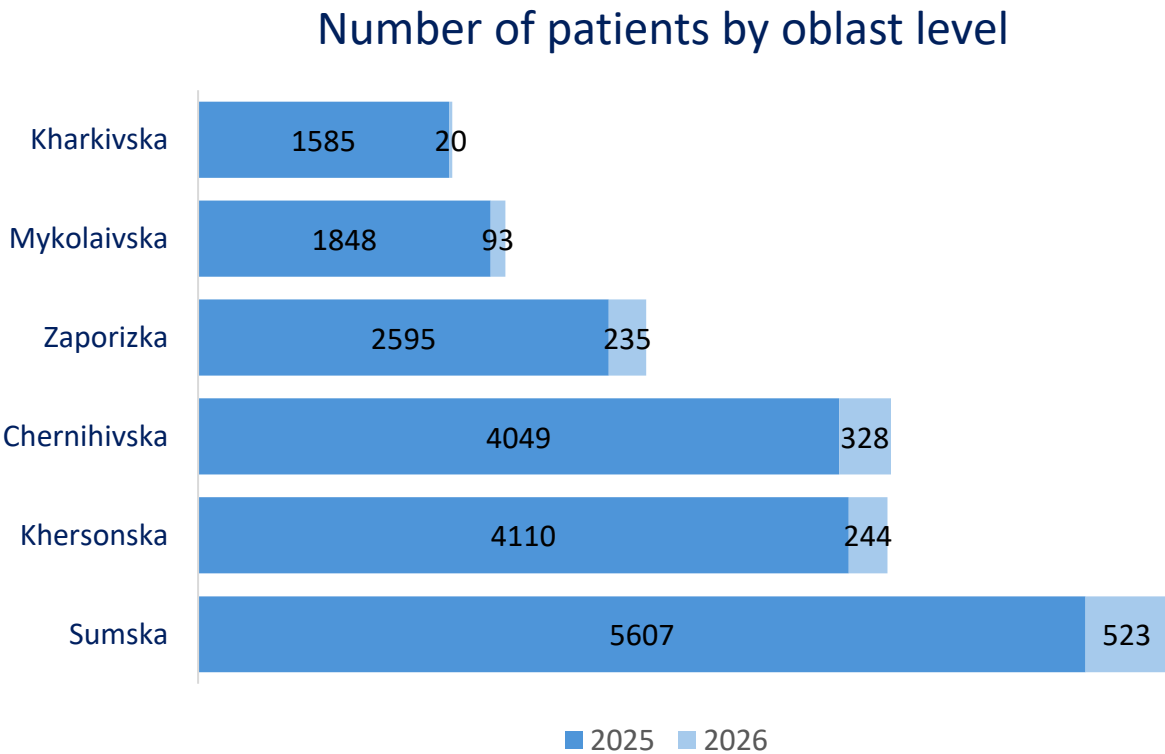
27
Hromadas covered

155
Settlements covered

725
Field visits conducted

19,824
On-site consultations conducted

725 outreach visits conducted in 155 hard-to-reach locations across 6 oblasts, providing 19,824 consultations



WHO's Response

Health Cluster Coordination in 2025

- Coordinated **212 health partners** (151 reporting) delivering emergency health services to **2.3 million people** and supporting **1,819 health facilities**, with a focus on frontline areas and vulnerable populations.
- Health partners supported **21,680 evacuees**, provided assistance to **2,857 people** after air strikes, supplied medicines for **11,238 individuals**, enabled **31,571 people** to access care through **USD 3.59M** in cash assistance, and reached **45,458 people** through the Winter Health Response.

Medical Evacuations

- Since April 2022, **6,412 war-affected Ukrainians** received free medical treatment and rehabilitation abroad through the EU, WHO and partner governments
- In **2025**, **1,240 patients** were evacuated, including **795 through the EU Civil Protection Mechanism**, and received care in hospitals across **participating Member States and partner countries**



Recovery and Reforms

- **System Strengthening**
- 2026 Budget framework for 30M+ citizens medical guarantees
- 200 immunization trainers, 79 MHPSS organizations, 5 rehab hospitals operational
- National reconstruction framework aligned with reform priorities



Recovery and Reforms

- **Service Delivery & Access**

- Updated PHC model with optimized referral pathways
- 2025–2030 Affordable Medicines roadmap
- HPV roll-out, new immunization schedule,
- Digital cold-chain monitoring

- **Reform Integration**

- Rehabilitation, nursing and mental health integrated into university curricula and piloted in 18 universities with 31 specialists trained for community expansion.
- Data-Driven policy development



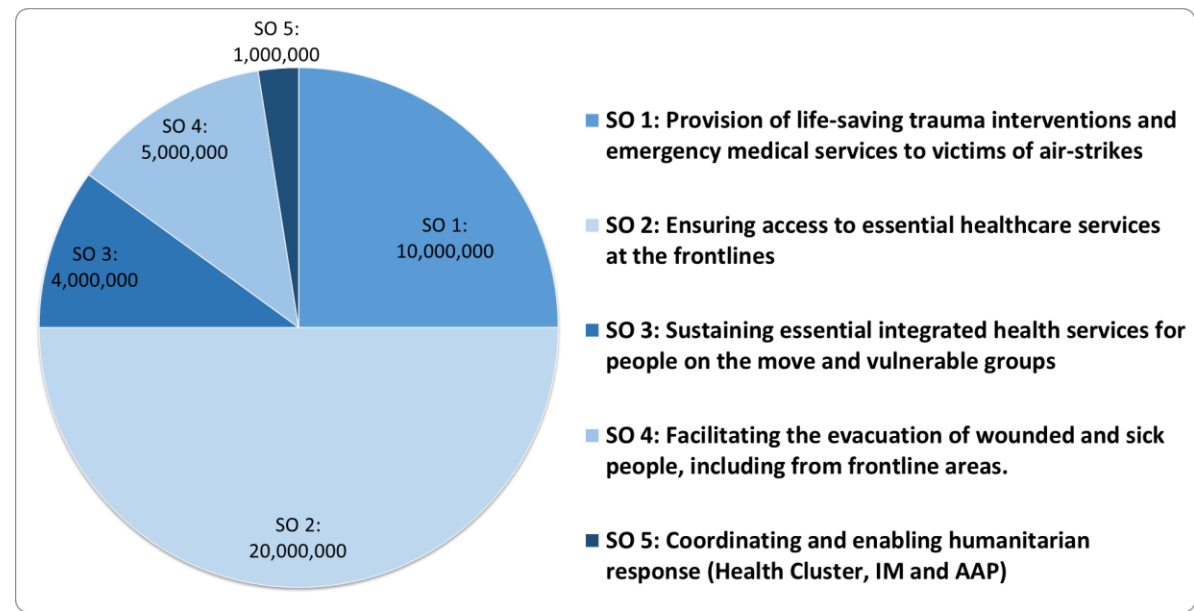
2026 WHO Humanitarian Appeal

People in Need	Planned Reach	People Prioritized	Requirements (US\$)	Prioritized Requirements (US\$)
10.8M	4.1M	3.6M	\$2.3B	\$2.0B

Overall people in need, planned reach and prioritized by cluster

Cluster	People in need	Planned reach	People prioritized	Requirements	Prioritized requirements
 Health	4.47M	1.47M	1.27M	\$90M	\$82M

Funding needs by Specific Objective (SO) in Ukraine (US\$)



WHO Ukraine 2026 Appeal is estimated for US\$ 42 million

Health Situation in Refugee hosting countries

Situation overview and impact on health



Protracted Emergency Grade 2

- 5,374,780 Refugees from Ukraine recorded in Europe
- 5,923,870 Refugees from Ukraine recorded globally^[1]
- On 31 December 2026 over 4.35 million under temporary protection status^[2]

^[1] <https://data.unhcr.org/en/situations/ukraine>

^[2] <https://ec.europa.eu/eurostat/statistics-explained/index.php?oldid=614936>

Regional Analysis – based on data from the Socio-Economic Insights Survey (SEIS) across 10 Countries

Conducted by UNHCR, WHO, UN Women, UNFPA, UNICEF, IOM & IFRC

- **Healthcare as a priority need:** households with specific needs, such as those with disabilities or serious medical conditions, disproportionately struggle to access healthcare services.
- **Access to healthcare:** Nearly one in seven refugees (15 per cent) report barriers to accessing healthcare, with long waiting times, high direct and indirect costs and language barriers preventing timely care
- **Mental Health Needs:** Mental health and psychosocial support needs are particularly acute, with 32 per cent of households reporting at least one member of their household experiencing a mental health and psychosocial problem that affects their daily functioning
- **Barriers to accessing healthcare disproportionately affect households with chronic illnesses and disabilities:**



Refugee Response Pillars

1. Health leadership and governance mechanisms streamlined and reinforced
2. Financial barriers for accessing health care
3. Access to adapted and appropriate primary and emergency health care services for refugees regardless of legal status
4. Health information and surveillance for evidence-based decision-making
5. Equitable access to essential medical products, vaccines and technologies to vulnerable refugee populations
6. Health workforce to provide health care services to refugees

Cross-cutting areas: RCCE-IM; PRSEAH; accountability to affected populations; age, gender, diversity, and disability

WHO impact and key achievements 2025

- In Moldova, WHO strengthened coordination and financing for refugee inclusion—161,199 registered with family doctors, 43,879 services delivered, and 2,682 received compensated medicines.
- WHO supported the Moldovan MoH and the National Health Insurance Company (NHIC) by conducting a forecast and costing exercise for refugee healthcare needs, estimating expenditures across all levels of care
- Additionally, WHO supported joint efforts to improve refugees' navigation of the health system in Moldova through an awareness campaign.
- In Romania, WHO helped reduce barriers by providing guidance, appointment support, interpretation, psychosocial care, and creative therapies, including art and music, to over 7,000 Ukrainian refugees

WHO impact and key achievements 2025

- In Romania, WHO's family doctor network registered 35,000+ Ukrainian refugees, delivered 6,039 consultations, provided immunization counselling to 1,984 people, and administered 781 childhood vaccinations.
- Cultural mediators promoted vaccination and healthy behaviors via Ukrainian Telegram channels (635,000+ views in 2025)
- In Poland, WHO strengthened provider capacity (821 health professionals and 1,285 non-health workers trained), enabled 4,450 refugees to access testing for HIV, hepatitis, STIs, and TB with referrals, and engaged 1,031 refugees in prevention and health-system navigation sessions.

WHO impact and key achievements 2025 (cont'd)

- In Czechia, WHO supported testing and counselling for 824 refugees (3,100+ tests for HIV, HBV, HCV, syphilis), with referrals for positive cases; 1,648 people received pre- and post-test counselling
- In Bulgaria, WHO strengthened TB response by supplying rapid tests and materials, enabling screening of 2,850 Ukrainian refugees
- In Slovakia, WHO supported TB prevention and treatment, improved oncology care for refugee cancer patients, and enhanced access for people with special needs
- In 2025, WHO delivered over US\$1.83 million in emergency supplies and medical equipment to Moldova, Slovakia, Bulgaria, and Romania.



Gaps and further needs

- Continued socio-political support and integration into national systems is needed for refugees who have been displaced in the region.
- There is a need for ensuring sustainability and strengthening resilience of the health systems moving forward.
- Persistent healthcare access barriers, like language, navigating complex health system procedures, long waiting time to specialized care, need to be addressed in order to meet the needs of the refugee population.
- The 2025-2026 Refugee Response Plan (RRP) focuses on 4 overarching objectives: protection, inclusion, social cohesion, and localization.

- Ukrainian refugees have lived in neighboring countries for over four years under Temporary Protection; jobs/livelihoods and healthcare are their top needs. (SEIS Slovakia, Poland, and Moldova)
- Basic healthcare is legally available, but barriers persist (language, system navigation, complex procedures, lack of culturally appropriate care).
- Costs remain a major obstacle—many older people and persons with disabilities cannot access rehabilitation, and mental health needs are significant. (November 2025, SEIS Moldova)
- Priority should be equitable access to specialized care for people with chronic conditions or disabilities (SEIS Hungary, 2025)
- In some contexts, refugees can obtain national insurance only with formal employment, leaving most uninsured. (Nov 2025, SEIS Moldova)

Thank you