Key updates

- Attacks on health care (including those against health facilities, transport, personnel, patients, supplies and warehouses) continue, with 25 new attacks reported between 4 May and 11 May. Cumulatively, between 23 February and 11 May there have been 211 attacks reported, resulting in 55 injuries and 75 deaths reported. These attacks deprive people of urgently needed care, endanger health-care providers, and undermine health systems.

- WHO launched its second updated funding appeal, for US$ 80 million in Ukraine for March–August 2022, and US$ 67.5 million for March to December 2022 in refugee-receiving and hosting countries. The funds are to support implementation of the following priorities in Ukraine and refugee-hosting countries:
  - Coordinate the health response, including Emergency Medical Teams
  - Strengthen health information management
  - Strengthen 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.

- European Immunization pop weekly project for outreach vaccination of Internally Displaced People in Lviv and Rivne oblast (region) has been concluded. The project has successfully provided routine immunizations to around 2000 people (approximately 20% were children) during the week.

- In Lviv, a three-day chemical preparedness and response training of trainers was carried out from 4 May to 6 May for 14 national trainers who will work with WHO to roll out further support to priority oblast emergency medical services, and designated hospitals.
1. SITUATION UPDATE

Figure 1. Distribution of Internally Displaced Persons (IDPs) and refugees in Ukraine and in refugee-hosting countries as of 11 May 2022

WHO Director-General Dr Tedros visit to the University Hospital in Rzeszow, Poland where refugees are receiving treatment. ©WHO/Christopher Black
Table 1. Key humanitarian figures as of 11 May 2022

<table>
<thead>
<tr>
<th>People affected</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internally displaced persons</td>
<td>8 million</td>
</tr>
<tr>
<td>Refugees</td>
<td>5.9 million</td>
</tr>
<tr>
<td>Ukrainians entering Ukraine</td>
<td>1.5 million</td>
</tr>
<tr>
<td>Injuries among civilians</td>
<td>3785</td>
</tr>
<tr>
<td>Deaths among civilians</td>
<td>3541</td>
</tr>
</tbody>
</table>

1.1 Population displacement and refugees

According to government data compiled by the United Nations High Commissioner for Refugees (UNHCR), over five million refugees have left Ukraine for surrounding countries in the last eight weeks of the conflict, with the highest proportion, 54%, in Poland, followed by 14% in Romania. According to the International Organization for Migration (IOM), as of 3 May approximately 8 million people have been internally displaced, which represents 18% of the country’s population. Additionally, IOM estimates that 2.8 million people have moved back to their homes following earlier displacement.

As the crisis evolves, displacement and mobility patterns continue to change, requiring scaled-up and integrated response interventions that address both emerging and existing needs.

1.2 Overall WHO response

WHO is supporting the health sector in Ukraine and the refugee-hosting countries. WHO has mobilized experts and is working with partners, including the Global Outbreak Alert and Response Network (GOARN), Emergency Medical Teams (EMTs), Health Cluster, and Standby Partners, to provide support with access to health services – primary health care, routine and COVID-19 vaccination, mental health and psychosocial support (MHPSS), trauma care, supply and logistics, prevention of sexual exploitation and abuse, risk communication and community engagement (RCCE), and information management. WHO continues to support the Ministry of Health (MoH) of Ukraine and refugee-hosting countries to ensure safe medical evacuation of patients. Transportation of patients within Ukraine is ensured by the national emergency services, while transportation across the border to the European Union (EU) is managed by international EMTs and coordinated by the CADUS team, a German nongovernmental organization (NGO) providing EMT support. As of 9 May, over 205 Ukrainian patients have been evacuated from both Poland and Ukraine via the EU Civil Protection Mechanism\(^1\) to 11 European countries (Belgium, Denmark, Germany, Ireland, Italy, Luxembourg, Norway, Portugal, Romania, Spain and Sweden).

Operational Partnerships

Standby Partners

Standby Partners have strengthened WHO’s capacity for this response by confirming 13 positions to support operations in Ukraine and refugee-hosting countries. Most of these deployments are scheduled for six months. Of the 13 experts, 12 have already been deployed (one completed) and one is completing pre-deployment formalities. Roles mobilized through Standby Partners include: MHPSS – one expert, RCCE – two experts, Preventing and Responding to Sexual Exploitation, Abuse and Harassment (PRSEAH) – four experts, Geographic Information System (GIS) – one expert, Information Management – two experts, and Health Cluster coordination – two experts.

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\(^1\) EU Civil Protection Mechanism (europa.eu).
These positions are supported through partners, including the Norwegian Refugee Council (NORCAP) – five deployments, UK-Med – two deployments, Dutch Surge Support – one deployment, the Canadian International Civilian Response Corps (CANADEM) – three deployments, and iMMAP – two deployments. The UK Foreign, Commonwealth and Development Office (FCDO) has funded three deployments. Two new requests have been submitted to Partners for Monitoring and Evaluation and Donor Relations Specialist, for which funding needs to be confirmed.

**External communications**

- Visibility of the ambulance handover to MoH in Ukraine, including press release, photos, videos and social media posts
- Video on WHO mental health and psychosocial support activities in Ukraine reaching 16 thousand people.
- In April WHO Ukraine reached 34.5 million people across three social media platforms (Facebook, Twitter, Instagram).

**Funding**

- WHO issued an updated appeal detailing its resource needs for Ukraine and countries receiving and hosting refugees for March–August for Ukraine and March–December for other countries. As of 10 May WHO has received US$ 54.5 million (37%) against its appeal for US$ 147.5 million.
- An estimated US$ 147.5 million is needed to address the health needs of Ukrainian people affected by the conflict in countries receiving and hosting refugees; of which US$ 80 million is required for the health response in Ukraine and another US$ 67.5 million is needed to address the health needs of Ukrainian people affected by the conflict in countries receiving and hosting refugees.
- WHO would like to thank Canada, European Civil Protection and Humanitarian Aid Operations (ECHO), European Commission – Directorate-General for Neighbourhood and Enlargement Negotiations (DG NEAR), Ireland, Japan/Asia Europe Foundation, the King Salman Humanitarian Aid & Relief Centre (KSRelief), Norway, Switzerland, Novo Nordisk Foundation, the UN Central Emergency Response Fund (CERF), and the United States Bureau of Population, Refugees, and Migration for their timely contributions.
- During the first weeks of the response, WHO released US$ 10.2 million from its Contingency Fund for Emergencies to kick-start activities. These funds have been fully absorbed.

More information on funding can be found here.

### 2. HEALTH PRIORITIES AND WHO ACTIONS IN UKRAINE TO DATE

#### 2.1 Access to health care in Ukraine

Ukraine’s health system is facing multiple challenges. Access to health care is severely impacted due to security concerns, restricted mobility, broken supply chains and mass displacement. Health care continues to come under attack (including those against health facilities, transport, personnel, patients, supplies and warehouses), with 25 new attacks reported between 4 May and 11 May, and a total of 211 attacks on health care reported, resulting in 55 injuries and 75 deaths between 24 February and 11 May. Further attacks are being verified. These attacks deprive people of urgently needed care, endanger health-care providers, and undermine health systems.

Through engagement with the MoH, national health institutions and many partners and donors, WHO has been able to provide populations with life-saving supplies, equipment and medicines. However, reaching some of the hardest-hit areas in the east, where health systems have been severely disrupted, remains a challenge.

2 Attacks on health care include those against health facilities, transport, personnel, patients, supplies and warehouses.
3 Surveillance System for Attacks on Health Care (SSA).
## 2.2 Priority public health concerns

Current health priorities are listed below (more details on each of these public health concerns can be found in the previously published situation reports).

<table>
<thead>
<tr>
<th>Public Health Concern</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conflict-related trauma and injuries</td>
<td>Civilian casualties continue to rise due to the use of explosive weapons. Limited access to health care results from infrastructure disruption of health-care facilities and closure of many pharmacies in Ukraine.</td>
</tr>
<tr>
<td>Maternal and newborn health</td>
<td>While only limited data are available on the current situation of maternal and newborn health, there have been reports on disruptions to antenatal, intrapartum and postnatal care.</td>
</tr>
<tr>
<td>Management of chronic diseases and noncommunicable diseases (NCDs)</td>
<td>Provision of medicines and care for patients with chronic communicable diseases, such as HIV and tuberculosis (TB), as well as NCDs, remains challenging. WHO, collaborating with international and local partners, continues to coordinate supply efforts to ensure mitigation of shortfalls of drugs for HIV, TB and NCDs in affected oblasts.</td>
</tr>
<tr>
<td>Risk of emergence and spread of infectious diseases</td>
<td>The risk of disease outbreaks, such as cholera, measles, diphtheria or COVID-19, has been exacerbated due to lack of access to water, sanitation and hygiene, crowded conditions in bomb shelters and collective centres, and suboptimal coverage for routine and childhood immunizations. Between 5 May and 11 May, a total of 3590 new cases and 38 new deaths of COVID-19 have been reported. This represents an increase of 24% in cases and decrease of 27% in deaths compared to the previous week. These numbers should be interpreted carefully due to underreporting of COVID-19 cases and deaths. Between 23 February and 8 May, the overall number of beds available and beds occupied by patients with COVID-19 has decreased by 44% and 92%, respectively, reflecting potential challenges in accessing hospitals, limited data reporting, and a potential decrease in actual hospitalizations. The most considerable decrease (100%) is seen in Luhansk oblast.</td>
</tr>
<tr>
<td>Protection issues: risk of human trafficking and escalated risk of sexual and gender-based violence (SGBV)</td>
<td>Increasing numbers of reports in Ukraine of unaccompanied children, women travelling alone, interim care arrangements, limited access to protection/treatment/support, and many vulnerable populations (including men and the elderly). There is an increased risk of physical injury, psychological distress and long-term mental health problems, pregnancy, STIs, and negative coping strategies, such as addictions. Prevention and protection from GBV, trafficking, sexual exploitation and abuse remain key concerns.</td>
</tr>
<tr>
<td>Mental health and psychosocial support (MHPSS)</td>
<td>Mental health stressors continue in Ukraine, with limited access to psychological and psychiatric support. Psychosocial support is much needed, particularly in view of a likely increase in negative coping mechanisms, including abuse and self-harm. The Government of Ukraine has adopted a resolution on the establishment of an inter-departmental coordination council for mental health and psychological assistance to support affected population.</td>
</tr>
<tr>
<td>Technological hazards and health risks</td>
<td>Potential nuclear hazards</td>
</tr>
<tr>
<td></td>
<td>There are 15 nuclear reactors at four operational nuclear power plants (NPPs) in Ukraine, one decommissioned NPP in Chernobyl, and a research reactor in Kharkiv. In addition, numerous radioactive sources are used in industry and health-care facilities. According to the International Atomic Energy Agency’s (IAEA) daily updates, currently the nuclear facilities are operating normally, and the nuclear safety situation appears under control. However, the Zaporizhzhya NPP, located in the southeast and in proximity to the military operations, remains at risk of being affected by shelling. The risk of a nuclear emergency as a result of direct damage due to shelling of NPPs or...</td>
</tr>
</tbody>
</table>
failure of a reactor’s power supply, or the inability to provide necessary maintenance, remains high.

Potential chemical hazards
During the current reporting period there have been no reported events involving the release of toxic chemicals. However, WHO continues to assess the risk of toxic industrial chemical releases as significant given the number of sites storing or producing industrial chemicals. Therefore, WHO continues to monitor the situation in areas affected by the conflict closely. WHO is working with the MoH of Ukraine and with health partners on the ground to prepare for all public health hazards, including those that may be caused by unintentional or intentional release of toxic chemicals.

Food security and nutrition
Conflict and insecurity continue to disrupt supply chains, aggravate food insecurity and malnutrition across the country. In eastern Ukraine, there have been reports of food shortages in Kramatorsk (Donetsk oblast) as supplies were mostly coming from Kharkiv.

2.3 WHO actions in Ukraine to date

Leadership and coordination

• WHO Director-General Dr Tedros Adhanom Ghebreyesus visited Kyiv on 6–9 May to discuss the health situation in the country, and identify the best ways for WHO to provide support for the MoH in delivering care in conflict areas, and sustain care of those who need it throughout Ukraine. For more information click here.
• The WHO Regional Director for Europe, in close consultation with the President of 71st session of the WHO Regional Committee for Europe and the members of its Standing Committee, called upon Member States from the WHO European Region to meet virtually on 10–11 May to discuss the health impacts of the war in Ukraine. For more information click here.

Health information and operations

Saving lives continues to be the priority of WHO’s response in Ukraine. Action focuses on ensuring access to care and basic health services to wounded people and others affected by the armed conflict, continuity of treatment and care for people with NCDs – including diabetes, cardiovascular disease and cancer, prevention of epidemics such as poliomyelitis (polio), measles, and prevent other health threats, including technological hazards (chemical or radio-nuclear). As of 1 May WHO has 45 staff in Truskavets and Lviv; 20 in Kyiv; five in Dnipropetrovsk; one in Odesa; two in Luhansk; two in Donetsk and 15 in Rzeszów. Other staff members are teleworking from various locations in Ukraine (Volyn, Vinnytsya, Rivne, Bila Tserkva, Ilnytsa, and Khmelnytsky). Overall, 132 personnel have been deployed and repurposed in Ukraine to support the response activities.

• The weekly European Immunization Week (EIW) project involving outreach vaccination of IDPs in Lviv, and Rivne oblasts has been completed successfully, providing routine immunizations to approximately 2000 people (of whom approximately 20% are children). This outreach vaccination for IDPs was launched during EIW in April and will continue throughout the 2022 summer season.
• Event-based surveillance activities continue for the various potential hazards. These include the use of Epidemic Intelligence from Open Sources and syndromic surveillance through EMTs and Health Cluster Partners. Additionally, WHO continues to support the public health centre (UPHC) and regional centres for disease control (RCDC) to enhance the capacity to timely detect and respond to outbreaks.
• Between late April and late May, several webinars covering disease targeted by the National Immunization Schedule (excluding polio) have been delivered. From 3 May to 5 May, three webinars including measles, rubella and whooping cough were delivered for trainers of the regional immunization training hubs. Additionally, two webinars on tetanus and mumps were conducted on 10–11 May. The next round of webinars will begin at the end of May and will cover Haemophilus influenzae type b, tuberculosis, hepatitis B. Altogether, two rounds of webinars will cover all diseases targeted by National Immunization Schedule (excluding polio).
In Lviv, a three-day chemical preparedness and response training of trainers was carried out on 4–6 May for 14 national trainers who will work with WHO to rollout further support to priority oblast emergency medical services, and designated hospitals. The training focused on the knowledge required to manage patients exposed to highly toxic chemicals, and the practical skills to protect healthcare staff and patients using personal protective equipment, decontaminate and treat exposed patients. Since March 2022, WHO has trained over 1532 health workers on chemical preparedness and response. WHO is also working with Ukraine’s MoH, in coordination with the State Emergency Services, to strengthen response and referral systems for such events.

**Supplies and logistics**

- WHO is working with other UN agencies, humanitarian partners and local authorities to support the MoH of Ukraine’s emergency response plan to deliver medical supplies to the most affected oblasts.
- In addition to the logistics centre WHO established in Lviv at the start of the conflict, the WHO OSL has set up an additional supply hub in Dnipropetrovsk, Odesa and Poltava to facilitate delivery of medical supplies to eastern and southern Ukraine.
- During the visit by the WHO Director-General, WHO delivered 20 ambulances to Ukraine to support emergency health needs in the country. These ambulances will help bring vital life-saving care to people in Ukraine and improve the national emergency medical teams’ timeliness and quality of health services.
- As of 11 May, WHO has delivered 485 metric tonnes of medical supplies, comprising trauma and emergency surgery kits (TESK), interagency emergency medical supplies (IEHK), blood transfusion materials, essential medicines, and other critical supplies, including body bags, ambulance vehicles, power generators, refrigerators and other equipment. The emergency surgery kits delivered are sufficient to cover up to 16,000 surgeries and IEHK items to serve an estimated 650,000 people for three months.
- Of the 485 metric tonnes of medical supplies, 195 metric tonnes have been delivered to beneficiaries in 20 oblasts across Ukraine. Fuel shortages and access problems continue to pose challenges on the delivery and distribution of medical supplies.
- Additionally, laboratory items such as gloves, lab consumables and reagents were distributed to 16 public health centres in Zaporizhzhya, Lviv, Kyiv and Dnipropetrovsk, while personal protective equipment (masks, gowns and gloves) was distributed to three medical facilities in the city of Kyiv.
- To date WHO has received US$ 4 million in product donations and in-kind services for the Ukraine response. WHO is engaging with governments, private organizations, and biomedical and shipping companies to secure more donations. In the last week, WHO, in coordination with Ukraine’s MoH, facilitated donations from the Government of Ontario, Canada, and the Public Health Agency of Canada.

**Operational partnerships**

WHO continues to work with more than 70 Emergency Medical Teams (EMTs) 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. WHO is coordinating with three EMT Coordination Cells (EMT CCs) in Ukraine, Poland, and the Republic of Moldova.

The EMT CC in Ukraine is integrated into the Trauma and Rehabilitation Working Group of the Health Cluster and is supporting medical teams working with IDPs and providing direct life-saving interventions, including direct trauma and clinical care of patients; rehabilitation of patients with burn injuries as well as spinal cord and brain injuries.

EMTs in Ukraine provide training to local health-care professionals on areas such as technological hazards, trauma care and mass casualty. EMTs are operational in Ukraine in the following oblasts: Lviv, Mykolayiv, Khmelnytsky, Donetsk, Dnipropetrovsk, Poltava, Kyiv, Kharkiv and Sumy.
Health Cluster
WHO plays an essential coordination role as part of the response as the lead agency of Health Cluster Ukraine. As of 4 May Health Cluster Ukraine has 120 international and local partners with planned, ongoing and/or completed health-related activities in 24 oblasts. Additional information is provided in the Health Cluster Ukraine Bulletin (February–April 2022) and on the Health Cluster Ukraine website.

- As of 4 May Health Cluster Partners have reached nearly 1.5 million people, including over 500,000 people in the past two weeks. Most of the people who have benefited from health interventions, supplies and medicines reside in the Kyiv oblast (322,200), western Chernivtsi (215,100) and western Ternopil (211,600) oblasts.
- Health Cluster Partners’ presence and activities across Ukraine are mapped weekly to chart the continuously changing humanitarian response landscape (5W (who, what, where, when why)). Health Cluster Partners have completed or ongoing activities in 164 settlements in 24 oblasts and have provided support to 162 health facilities across Ukraine.

<table>
<thead>
<tr>
<th>Health Domain of response activities</th>
<th>Number of Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV/TB</td>
<td>29</td>
</tr>
<tr>
<td>Trauma/mass casualties</td>
<td>16</td>
</tr>
<tr>
<td>Sexual and reproductive health, child health and GBV</td>
<td>11</td>
</tr>
<tr>
<td>NCDs</td>
<td>10</td>
</tr>
<tr>
<td>Mental health</td>
<td>9</td>
</tr>
<tr>
<td>Other communicable diseases</td>
<td>8</td>
</tr>
<tr>
<td>Child health</td>
<td>4</td>
</tr>
<tr>
<td>COVID-19</td>
<td>3</td>
</tr>
<tr>
<td>Palliative care</td>
<td>2</td>
</tr>
</tbody>
</table>

Note: Not all Partners reported the health domains of their activities.
• **Health Cluster rapid needs assessments**
  o Between 18 April and 22 April, six Health Cluster partners (five international NGOs and one national NGO) conducted 379 interviews across 11 oblasts (Donetsk, Zaporizhzhya, Dnipropetrovsk, Poltava, Cherkasy, Zhytomyr, Vinnytsya, Khmelnytsky, Rivne, Chernivtsi, and Lviv).
  o Analysis of the data is ongoing.
• The health requests, planning and response tool (HRPR), being used to respond to requests for humanitarian health assistance from partners and health facilities, is currently tracking over 70 requests.

**Risk Communication and Community Engagement**

• WHO launched an RCCE activity mapping tool in Ukraine within the RCCE working group.
• RCCE materials on chemical release, mental health, prevention of foodborne and waterborne diseases have been developed.

WHO in Ukraine with support from Canada, donated a multi-purpose mobile tent to the State Emergency Service of Ukraine so they can continue to provide life-saving medical care to people wherever and whenever it is needed. ©WHO/ long.wave82@mail.ru0502846169
3. SITUATION AND ACTIVITIES IN REFUGEE-HOSTING COUNTRIES

3.1 Overall WHO actions in some refugee-hosting countries

Countries neighbouring or close to Ukraine have triggered emergency response systems for receiving refugees. In other countries WHO is strengthening operations to support the needs of refugees.

Health operations

WHO, in coordination with key MHPSS agencies and refugee-hosting countries, organizes weekly regional webinars on various topics related to MHPSS. Last week, a webinar on Children and Adolescent MHPSS in Emergencies was delivered.

3.2 Specific WHO actions in some refugee-hosting countries

Countries neighbouring or close to Ukraine have triggered emergency response systems for receiving refugees. In other countries WHO is strengthening operations to support the needs of refugees.

Czechia

Situation update
Between 24 February and 10 May over 331,000 Ukrainian refugees entered Czechia. The country has been under a state of emergency for Ukrainian war refugees since 4 March. The status has been extended to 31 May.

WHO actions this week
• WHO met with the Director of the Department of UN Affairs at the Ministry of Foreign Affairs to discuss the UN and WHO’s response to the Ukraine crisis in Czechia.
• WHO participated in the presentation of the UN Refugee Response Plan for Czechia to the donor countries at the event hosted by Canada’s Ambassador to Czechia.
• WHO participated in the UN interagency coordination meeting and in the UNHCR health protection working group meeting.

Hungary

Situation update
Between 24 February and 10 May an estimated 577,820 Ukrainian refugees entered Hungary.

WHO actions this week
• WHO and the Hungarian health authorities have discussed a plan to establish, in case of need, an alternative medical supply line for Ukraine. On 4–6 May WHO deployed OSL support for development of a plan for an alternative supply line. During the mission experts met with the authorities, assessed the supply and capacity infrastructure in Hungary, looking at customs and importation procedures, cold chain and warehouses capacities and other logistics capacities so that alternative supply lines could be established. WHO would like to acknowledge an excellent support of the Hungarian authorities throughout the process.
• WHO regularly meets with Health Authorities to discuss the current situation, access to health service for refugees. Identify potential bottle necks and gaps and the assess the need for any WHO support.
• WHO is supporting Hungary with the increased demand for immunization services by strengthening the cold chain capacities.
Poland

Situation update

- Between 24 February and 10 May an estimated 3,251,955 Ukrainian refugees entered Poland, accounting for 54% of the total refugee population. The most recent groups of refugees are arriving after enduring weeks of conflict and difficult conditions in Ukraine, and may therefore be more vulnerable. There are also indications that the younger groups of Ukrainians are moving further to third countries within Europe, whereas the older population is more likely to stay in Poland.
- The MoH has declared that, from 16 May, the COVID-19 epidemic in Poland will be downgraded to an endemic. This may have implications for COVID-19 vaccination procedures, health-care-related services and procedures, patient roadmaps, access to services and the demographic situation.
- Current key priorities include conducting a comprehensive service mapping for MHPSS in Poland. The aim is to have it available in Ukrainian and Polish for both service providers and people in need of services.

WHO actions this week

- The WHO Director-General and the Executive Director visited Poland on 5 May. During the visit the DG attended a high-level international donors’ conference for Ukraine, co-hosted by the Prime Ministers of Poland and Sweden, visited the WHO Logistic Warehouse and the paediatric ward of the University Hospital in Rzeszów.
- On 9 May a virtual meeting was held between Statistics Poland and WHO to finalize a set of questions that will be piloted before running a full survey in two regions and five centres – on a sample of 1000 respondents using up to 300 enumerators, collecting representative data on the health of refugees arriving in Poland.
- WHO has deployed a PRSEAH coordinator to Poland to provide technical inputs on key documents, including country-level health surveys (providers, beneficiaries), global/regional strategic response plans, emergency response framework, PRSEAH plan of action, PRSEAH deployment package, in addition to participating in the Prevention of sexual exploitation and abuse P network and GBV sub-sector meetings.
- The Poland MHPSS Technical Working Group (TWG) has developed a MHPSS Communication Essentials document, describing how MHPSS services are positioned in different layers and using the correct terminology especially around trauma.
- On 9 May WHO visited the UNHCR and UNICEF Blue Dot facility on Kamionkowska Street in Warsaw.

EMT CC in Poland:
- In liaison with health authorities and close coordination with EMTCC, starting the week of 2 May, EMTs and health actors will begin reporting on consultation activities.
- The EMT CC is facilitating quality assurance of care delivery, licensing of international health providers and providing technical support to establish a basic medical reception centre in Rzeszów for patients medically evacuated from Ukraine.

Republic of Moldova

Situation update

- Between 24 February and 10 May, an estimated 458,242 Ukrainian refugees entered the Republic of Moldova.
- To date, 93 refugee accommodation centres are providing shelter to 4,306 people (capacity: 7,568). Of those, 19% are pregnant and lactating women, 27% are people with disabilities, 4% are people with serious medical conditions, 5% are children aged 0–2 years, 39% are children aged 2–18 years, and 6% are older people.
- UNCHR, in collaboration with UNFPA, convened the final round of the session on core GBV concepts, safe disclosure, and referral for the GBV sub-working group (SWG). A total of 34 participants attended the session, including frontline humanitarian responders and GBV actors.
• The Centrul pentru Drepturile Persoanelor cu Dizabilități (Centre for Disability Rights of Persons with Disabilities) provided information and assistance to 50 persons with disabilities on asylum procedures in Republic of Moldova. As part of mass casualty management training, WHO conducted a basic awareness session on chemical for 30 emergency physicians and other health workers in the country.

**WHO actions this week**

• On 29 April WHO held a meeting with the MoH and the national MHPSS coordinator. During the meeting the estimates of people in need of specialized mental health services and the suggested steps to address these needs were discussed. The proposal to formalize access to mental health services for refugees was supported by the MoH and joint information dissemination efforts were commenced.

• On 3 May and 5 May WHO held social events at the Children’s Creation Centres and Refugee Centre in Hîncești and Chișinău to promote vaccination.

• On 4 May WHO prepared for a tabletop exercise (TTX) to test the draft on national-level mass casualty management contingency plan for the Republic of Moldova. The TTX was developed by a joint group of representatives from the MoH, academia as well as WHO, and will be conducted on 17 May.

• **EMT CC in the Republic of Moldova:**
  o The EMTs from two refugees accommodation centres (MoldExpo and Patria Lukoil) have been evaluated in order to identify the gaps in the clinical services needed to meet the standards of a WHO Type 1 Mobile EMT, to support the needs of the refugees displaced during the Ukrainian crisis in the Republic of Moldova.
  o Technical support was offered to the MoH by the EMT CC and other EMTs with ground medical evacuation within the Moldovan and EU territory.
  o As of 30 April EMTs have provided 2131 outpatient consultations to the refugee population, ensuring universal health coverage. EMT reporting systems also support monitoring for potential outbreaks.

**Romania**

**Situation update**

• Between 24 February and 10 May an estimated 889,674 Ukrainian refugees entered Romania. However, most are in transit to other countries, primarily to Hungary (34%) and Bulgaria (22%).

• As of 10 May, the current refugee accommodation centre occupancy is at 22.7% capacity.

• As of 10 May, 186 refugees have received inpatient care.

**WHO actions this week**

• On 11 May WHO held the fourth virtual meeting of the Refugee Coordination Forum Health Working Group, which was attended by refugees, national and international health specialists, as well as national and international NGOs.

• WHO donated laboratory consumables and provided financial support to the National Public Health Institute for enhanced polio environmental surveillance.

• WHO is facilitating information exchanges and bilateral discussions on access to medicines for people with rare diseases in Ukraine.

• WHO is participating in meetings regarding sexual and reproductive health with NGOs to improve access to contraception and abortions for people coming from Ukraine.

• WHO will carry out a field mission in Iași county, Romania, on 11–14 May. The mission will include visits to refugee centres managed by NGOs, hospitals, family doctors etc.
Slovakia

**Situation update**
- Between 24 February and 10 May an estimated 406,833 Ukrainian refugees entered Slovakia.
- As of 10 May, 74,851 refugees have requested temporary protection in Slovakia and 184 people have applied for asylum.
- As of 10 May, the National Health Information Centre reported that 3160 refugees from Ukraine have been provided with emergency and accident health care, of whom 1492 were children under the age of 18.

**WHO actions this week**
- WHO continues to liaise with the MoH to use the coordination platform more effectively. The MoH will nominate a public health officer to work alongside the WHO team based in the MoH.
- WHO has supported the development of questions for the health thematic area as part of the multisectoral needs assessment. In addition, WHO is supporting the collection and analysis of migrant health data.

**Resources**
- Public Health Situation Analysis (PHSA) Ukraine, 29 April 2022
- Public health situation analysis: refugee-hosting countries, 17 March 2022
- Previously published Situation Reports: Emergency in Ukraine
- Guidance Note for Medical Supply Donations
- Ukraine emergency webpage
- Health cluster; Emergency Medical Teams (EMT)
- Dashboards with the most recent posts across Facebook, Instagram and Twitter