WHO RESPONSE TO THE UKRAINE CRISIS: JANUARY 2023 BULLETIN

8 M refugees from Ukraine in Europe

700 verified reported attacks on healthcare

18 657 civilian casualties

Table of contents

→ Highlights 1

→ Humanitarian situation 1

→ Updates on the response in Ukraine 4

→ Updates from refugee-hosting countries 6

→ Latest guidance and publications 13

WHO has moved from biweekly situation reports to monthly bulletins. The monthly bulletin will provide a deep dive on a technical topic, updates on the strategic response plan (SRP) pillar areas, and stories from the field.

Highlights

• As of early February 2023, WHO’s Surveillance System for Attacks on Health Care (SSA) has verified over 760 attacks in Ukraine, with close to 700 attacks impacting health facilities. The situation is particularly dire in areas close to the front line, or areas recently retaken by the Government of Ukraine. In these areas most health facilities are not functioning, and the people who stayed behind - the elderly, persons with low mobility, those with physical disabilities – have complex needs that the health system is struggling to meet under the current circumstances.

• From December 2022 to January 2023, WHO collaborated with the nongovernmental organization (NGO) Infection Control in Ukraine to organize and conduct 51 monitoring visits to 10 designated regions. The visits assessed transport and storage of vaccinations, occupational safety, waste management and documentation procedures.

• WHO has supported the procurement and distribution of equipment, reagents, and consumables for the microbiological testing of drinking-water in the oblasts most affected by the war. This will allow for the rapid testing of a large number of drinking-water samples and ensure reliable results.

• WHO continues to closely monitor the utilization of health-care services among Ukrainian refugees in hosting countries. Since March 2022, WHO has carried out or contributed to 21 surveys/assessments on access to health care to better understand the barriers refugees may face in receiving care.

Humanitarian situation

Ukraine has seen intense hostilities since 24 February 2022. This has led to a grave humanitarian crisis, with millions of people in dire need. This includes refugees who have arrived in other countries, those who have been displaced within Ukraine, and those in areas either not under Government control or recently retaken.
As of 30 January 2023, the Office of the United Nations High Commissioner for Human Rights (OHCHR) has reported a total of 18,657 civilian casualties in Ukraine since the war began, of which 7,110 were killed and 11,547 were injured.

From 1 to 29 January 2023, OHCHR recorded 676 civilian casualties in Ukraine, of which 170 were killed and 506 were injured.

In line with the standard operating procedures (SOPs) of the global SSA, WHO has verified 761 reported attacks on health care between 24 February 2022 and 31 January 2023. These have resulted in 131 reported injuries and 101 reported deaths of health-care personnel and patients.

As of 31 January 2023, the United Nations High Commissioner for Refugees (UNHCR) has recorded 8.0 million refugees from Ukraine in Europe. A total of 4.8 million were registered for temporary protection or similar national protection schemes in Europe. For cross-border movements, 18.2 million crossings out of Ukraine and 10.0 million crossings into Ukraine were recorded. These latter figures do not reflect individuals.

The International Organization for Migration (IOM) estimates that 5.4 million people are internally displaced across Ukraine as of 23 January 2023, a slight decrease from 5.9 million on 5 December 2022 (Fig. 1). The estimated number of people internally displaced within Ukraine has been steadily declining since August 2022.

Between 1 and 31 January 2023, 37 signals were detected through event-based surveillance; 21 of which related to health-care capacity, five were infectious disease signals, three related to technological hazards, two – to mass casualties, and one each – to lack of medical supplies, water supplies, and extreme weather.

Between 27 January and 2 February 2023, the average number of new COVID-19 cases was 530 per day, an increase from 425 per day in the previous week. The seven-day average polymerase chain reaction (PCR) tests performed increased to 3,652 per day from 3,475 per day in the previous week (compared to 4,260 per day in the week before the war, 18–24 February 2022). A similar trend was observed with rapid diagnostic tests performed in laboratories and at primary health-care and hospital level.
SPECIAL FOCUS: Shock, Hardship and Resilience: One year on the impact of the war on the health-care system of Ukraine

When the war in Ukraine began on the morning of 24 February 2022, the world woke up to one of the biggest crises in Europe since the end of the Second World War. Around eight million people, or almost 20% of the total Ukrainian population, have been displaced from Ukraine into the rest of Europe, on top of the millions of people who have been internally displaced.

In the early days of the war, many health-care facilities were struggling to operate. Whilst facilities in the west of the country had to cope with millions of displaced people in need of medical attention, facilities in eastern and central areas were either evacuated or had to provide care in improvised basement wards, which were ill-equipped for the provision of more complex services such as intensive care.

As the war continued, health facilities were adapting. In many parts of the country, medical staff continued to deliver services in basement shelters, which were steadily upgraded with ventilation systems and improvised operating theatres. The need for services such as mental health and psychosocial support (MHPSS) and support services for survivors of gender-based violence (GBV) increased. Many facilities struggled to address these needs adequately under the circumstances in which they had to operate.

The most recent phase of the war has been predominantly characterized by continuous attacks on civilian infrastructure, at times leaving millions of people without heating, water, and electricity. The lack of electricity left hundreds of hospitals unable to provide even the most basic services: vaccines and temperature-sensitive medicines could not be kept cold, critical equipment like ventilators and defibrillators could not function, and even basic emergency obstetric care could not be performed safely. In February 2023, one year into the full-scale war, this is still a reality faced by many health facilities in Ukraine.

Health needs to be at the forefront of reconstruction. WHO is committed to supporting Ukraine in building a stronger health-care system that serves its citizens and protects the vulnerable. The goal is for places like Mariupol, Izum, and Bakhmut to once again become the safe and healthy homes that residents deserve, with a health system that matches the resilience of its people.
Updates on the response in Ukraine

WHO is supporting Ukraine in addressing immediate health challenges and humanitarian health needs, and investing in longer-term efforts to reconstruct the health system.

PILLAR 1: Access to life-saving, critical care and essential services, and support for health system recovery

From the beginning of the response and as of 31 January, emergency medical teams (EMTs) coordinated by WHO and Health Cluster Partner organizations have provided over 19,346 consultations across 10 oblasts. Of these, 12% were trauma-related and 7% were for infectious diseases overall. EMT activities include outpatient and inpatient care, hospital surgical support, trauma care, patient transfer and medical evacuation, training, and acute rehabilitation (including spinal cord and traumatic brain injury and burn care).

WHO continues to deliver vital medical supplies to the recently retaken territories, and other parts of Ukraine. In January 2023, WHO delivered:
- surgical kits and kits for injury treatment, trauma care equipment and medicines for the treatment of chronic diseases to villages in the Kherson oblast as part of two UN interagency humanitarian convoys;
- hygiene kits, medical supplies and ambulances equipped for transporting severely injured patients to health-care facilities to areas in the Donetsk region as part of a UN interagency humanitarian convoy;
- medicines to help victims of a missile strike on a residential building in Dnipropetrovsk that killed and injured dozens of civilians on 14 January; and
- medicines and consumables to the frontline areas where the Ukrainian Government has recently retaken control, as part of an interagency humanitarian convoy.

Since the beginning of the war and as of 1 February 2023, WHO has delivered 1860 metric tonnes of supplies and equipment to Ukraine, including:
- 62 ambulances
- personal protective equipment
- trauma and emergency surgery supplies to treat up to 25,116 people
- interagency emergency health supplies for a catchment population of 1.8 million
- noncommunicable disease supplies for a catchment population of 2.4 million.

WHO responded to the Ministry of Health (MoH), national authorities and partners in Kyiv to reflect on 2022 and plan directions for 2023. WHO outlined its commitment to support response, reform and recovery efforts.

WHO engaged with UN agencies, international partners and NGOs to discuss humanitarian coordination, security and other areas for priority support in 2023.

As of 2 February 2023, 1823 medical evacuations have been successfully completed by the MoH of Ukraine with the support of WHO and the EU. This support included assisting the Ukrainian MoH in maintaining the current medical evacuation referral system. Evacuated patients are primarily being treated for cancer, war-related injuries, and emergency trauma.

In January 2023 WHO undertook a number of training activities, which included:
- two training courses on operating haematology analysers at the Ternopil Children’s City Hospital for 84 laboratory personnel;
- a chemical preparedness and response training for over 2000 emergency medical service first responders, provided in collaboration with international agencies;
- a three-day training course on pre-hospital trauma care, attended by 18 emergency medical care providers from the Ivano-Frankivsk and Kirovohrad regions;
- two training courses on new COVID-19 vaccine products in the Kirovohrad oblast for 44 health-care workers delivering COVID-19 vaccination services;
- a webinar and Q&A session on “Contamination in the PCR laboratory” for 107 laboratory staff; and
- the provision of WHO’s free learning platform, OpenWHO, where 61% of users in Ukraine are health-care workers. Across all countries, 25% of users are health-care workers, which highlights the value of OpenWHO to health-care workers in Ukraine.
WHO RESPONSE TO THE UKRAINE CRISIS: JANUARY 2023 BULLETIN

PILLAR 2:
Timely and effective prevention of and response to infectious diseases

WHO continues to assess the basic quality and biosafety requirements of public health laboratories implementing COVID-19 testing using WHO-designed laboratory assessment tools. The Centralized Clinical Diagnostic Laboratory within the Kyiv Oblast Clinical Hospital, six laboratories in the Ternopil oblast and the National Reference Laboratory of Virology at the Ukrainian Public Health Centre were assessed in January and recommendations were provided.

From December 2022 to January 2023, WHO collaborated with the NGO Infection Control in Ukraine to organize and conduct 51 monitoring visits in 10 designated regions. The visits assessed transport and storage of vaccinations, occupational safety, waste management and documentation procedures.

WHO has initiated operational preparation for support to be provided to the MoH’s Task Force on vaccine-preventable diseases. WHO is the main partner for the development of strategic and operational documents and monitoring of implementation under the National Immunization Programme.

WHO has supported the procurement and distribution of equipment, reagents, and consumables for the microbiological testing of drinking-water in the oblasts most affected by the war. This will allow for the rapid testing of a large number of drinking-water samples and ensure reliable results.

PILLAR 3:
Emergency health information and surveillance for evidence-based decision-making in health

WHO is conducting readiness assessments of facilities in areas that were affected by shelling and temporary military control by the Russian Federation. In January, an assessment was completed in the Kharkiv oblast to support the health system to recover and provide health services for the territory.

To enable access to primary health-care services and ensure continuity of care for people in conflict-affected areas, at risk of or impacted by service disruptions, WHO is conducting a rapid assessment in seven oblasts. Support has been requested to restore space for primary health-care activities by providing prefabricated modular units that will serve as health-care facilities.

PILLAR 4:
Effective leadership and coordination of humanitarian interventions in the health sector

Since 24 February 2022, the number of Health Cluster Partners has increased significantly, from 73 to 196. The number of Technical Working Groups (TWG) has increased from two to 11.

Since its launch on 15 April 2022, the Health Requests, Planning and Response tool has been revised and upgraded, and 481 requests have been logged. The tool is used by Health Cluster Ukraine to collect information on requests for humanitarian health assistance and refer them to relevant Partners for support. The most recent requests were recorded in the Donetsk, Dnipropetrovsk and Cherkasy oblasts.

The distribution of generators to health facilities to ensure continuity of care remains a key priority for the Health Cluster. As of 31 January, Health Cluster Partners have donated 382 generators to health facilities across Ukraine. Most of them were distributed to health facilities in the Kharkiv (65 generators), Kherson (48 generators), Kyiv (36 generators), Dnipropetrovsk (28 generators) and Chernihivsk (24 generators) oblasts.

At least 27 Partners have reported ongoing, completed and/or planned activities in the recently retaken areas in the Kharkiv, Donetsk, Kherson and Mykolayiv oblasts. The support provided by Partners includes delivery of medicines and supplies, donations of generators, minor infrastructure repairs, and deployment of mobile health services. By the end of January, at least eight Partners have participated in UN-led interagency humanitarian convoys to deliver critical
WHO RESPONSE TO THE UKRAINE CRISIS: JANUARY 2023 BULLETIN

Updates from refugee-hosting countries

WHO is providing operational and technical support to refugee-hosting countries’ ministries of health (MoHs) as their health systems continue to cope with refugee arrivals. The primary refugee-hosting countries receiving WHO support are Bulgaria, Czechia, Hungary, Poland, Republic of Moldova, Romania and Slovakia.

Refugee Health Extension

The Refugee Health Extension (RHE) interagency initiative is led by WHO in close collaboration with the European Centre for Disease Prevention and Control, IOM, United Nations Population Fund (UNFPA), UNHCR and UNICEF. Originally with an in-person team based in Kraków, Poland, the RHE moved to a hybrid modality as of January 2023. The interagency team remains to function as an extension of the agencies’ respective regional offices/bureaus, providing immediate operational support to the refugee-hosting countries, and drawing on the expertise and complementary mandates of each organization.

In January, in addition to other activities included in the Refugee Response Pillars below:

- the RHE conducted country support missions to Bulgaria, Hungary, Poland, Republic of Moldova, and Romania and engaged with health partners and government representatives to understand the current status of Temporary Protection Directive (TPD) registration and implementation in refugee-hosting countries, including barriers that refugees from Ukraine face in accessing health-care systems and services;
- partners WHO and IOM conducted a three-day workshop on “Building Connections and Facilitating Self-Expression Using Psychosocial Art” for 20 psychologists and frontline workers that are providing MHPSS to Ukrainian refugees in the Republic of Moldova;
- the RHE provided support from WHO to the Cultural Mediators project in Romania that focuses on Ukrainian health professionals in health facilities as well as community and reception centres in order to improve access to MHPSS services in communities;
- partners WHO, UNFPA, UNHCR, and local NGO Equita conducted a weeklong training on Clinical Management of Rape for NGOs and government emergency providers in Slovakia; continued to provide technical capacity building support to partners in Bulgaria, Poland, Republic of Moldova, and Slovakia on integrated topics such as MHPSS, GBV, sexual and reproductive health, and prevention of and response to sexual exploitation, abuse and harassment (PRSEAH); and
- the RHE coordinated external communications efforts across UN partners on the refugee health response in the region and upcoming one-year mark of the start of the Ukraine crisis.

In January, Health Cluster Ukraine appointed three co-coordinators from partner organizations to represent assistance in areas where the Government of Ukraine recently regained control.

The Lviv oblast will be supported by Première Urgence Internationale (PUI), the Kyiv oblast – by International Medical Corps (IMC), and the Mykolayiv oblast – by Alima.

Bulgaria responding to the Ukrainian refugee crisis. © WHO Areva / Todor Tsanov / WHO
REFUGEE RESPONSE PILLAR 1:
Streamlining and reinforcing health leadership and governance mechanisms

WHO provides support to national authorities in refugee-hosting countries through nationally led and country-focused interagency coordination mechanisms.  
- MoHs continue to operate health sector working groups with direct support from WHO. WHO is providing key support to existing health working groups at country level in Poland, the Republic of Moldova, Romania and Slovakia with various health sector partners, which meet weekly, biweekly or monthly.  
- WHO continues to support all refugee-hosting countries in strategic planning.  
  - In Czechia, WHO initiated a series of individual meetings with all national implementing partners in order to reflect on lessons learned in the Ukraine refugee response in 2022 and, on this basis, plan the activities for 2023. The first meetings were held with the National Institute for Mental Health (NUDZ) and with the secretariat of the MHPSS TWG.  
  - In Poland, as part of its interagency coordination efforts, the Information Management Working Group agreed to initiate an Assessment Task Force (ATF) for the refugee response in Poland. The first meeting was held on 26 January 2023, chaired by UNHCR. The key stakeholders of the ATF are the Danish Refugee Council, IRC, IOM, REACH, Save the Children, WHO, UNICEF and UNHCR through their representatives in Poland.  
- In the Republic of Moldova, WHO co-chaired a total of 15 regular meetings (online and hybrid) and several ad hoc meetings in 2022 that supported stronger interagency and intersectoral coordination, and service delivery between and among partners.

REFUGEE RESPONSE PILLAR 2:
Removal of financial barriers to accessing health care

WHO provides support to governments and health authorities in refugee-hosting countries to design policies to increase access to health services, medicines and medical products. To provide health services, countries must grant refugees entitlements to access services within the hosting country.

- The governments of Bulgaria, Czechia, Hungary, Poland, Romania, Slovakia and other countries in the region offer primary and/or emergency medical care for refugees from Ukraine under the Temporary Protection Directive (TPD). For some refugees, the TPD has ended, and WHO and partners continue to monitor and follow up on these cases, providing support to local organizations and individuals.  
- Based on UNHCR figures, the percentage of refugees registered under temporary protection or similar protection schemes that often grant refugees the same entitlement to health services as the local population increased across all countries in December, with Romania seeing the biggest increase (7%), followed by Slovakia (3%), Hungary (3%), Czechia (2%) and Poland (1%). Overall, 60% of refugees recorded across Europe are also registered for temporary protection or similar national protection schemes in Europe.
WHO provides support to refugees to access health-care services through national systems, ensuring inclusive access to quality health services, diagnosis and continuity of care.

- WHO has continued to provide policy guidance and technical support to refugee-hosting countries for disease prevention programmes.
  - In Slovakia, WHO has been working alongside UN agencies with representatives of the MoH, Ministry of Social Affairs and Family, and palliative care service providers to support palliative care for refugees. WHO and IOM launched a joint project in support of cancer patients in active care.
  - In Slovakia, WHO intensified the contact and exchange of information on provision of health care for refugees from Ukraine at the Poliklinika in Bratislava by monitoring the distribution of clinical diagnoses among the clients, in order to better understand the needs of the refugees in comparison to the self-reporting from the survey on health-care needs from Košice. There are also plans to carry out an indirect estimation of eventual outbreaks of infectious diseases, as well as an estimation of the gaps in the existing health-care system in the region.

- Governments’ increased recognition of the importance of integrating MHPSS into emergency preparedness, response and recovery has intensified the collaboration between WHO country offices and national authorities in Czechia, Estonia, Poland, Romania and Slovakia. By the end of 2022, WHO provided 32,880 mental health and psychosocial support consultations for Ukrainian refugees.
  - In Poland, the MHPSS team conducted a MHPSS capacity building workshop on Doing What Matters in Times of Stress (DWM) and the Mental Health Gap Action Plan (mhGAP) as part of the WHO MHPSS Response. Participants received training starting in December 2022 with four experts reviewing the mhGAP guidelines.
  - In Poland, WHO, together with the Sports Institute, is launching a project integrating mental health into sports programmes and will conduct Psychological First Aid Training of Trainers for sports coaches and school psychologists to support social cohesion of Ukrainian children in schools.

- In Czechia, the “Handbook on MHPSS Coordination” developed by the Inter-Agency Standing Committee on MHPSS (IASC) is currently being translated into Czech.

- In Romania, WHO initiated the Cultural Mediators project, which allows Ukrainian health professionals to work at health facilities as well as community and reception centres, in order to improve access to MHPSS services in communities.

- In Bulgaria, WHO and the Directorate of Mental Health at the National Center for Public Health and Analysis have initiated capacity-building activities in order to adapt the IASC and WHO MHPSS guidelines and approaches to the national context.

- In Czechia, WHO is supporting seven organizations in the provision of MHPPSS services at various levels, such as in schools and community centres, as well as in conducting MHPSS needs assessments.

- Through the deployment of EMT coordination centres in Poland and the Republic of Moldova, WHO has continued to support broader access to primary and emergency health services. EMTs have continued to provide support for MHPSS services through medical consultations. WHO has continued to develop messages to meet the health needs of refugees and host communities. In 2022 WHO provided adapted risk communication and community engagement (RCCE) materials to target audiences reaching over 873,600 people.

- Following the release of the results of the qualitative survey by Statistics Poland (GUS) and WHO launched in December 2022, WHO has extended its existing hotline to Ukrainian patients and their relatives who have questions on how to access health services and find a family doctor and/or medical specialist within the national health system in Poland. The extension went live on 16 January 2023.

- In Poland, WHO developed a 15-day bus campaign in Warsaw to promote the WHO helpline for Ukrainian refugees. As part of the campaign, a total of 500 municipal buses with LCD screens will broadcast a 15-second message four times per hour about 16 hours per day.
WHO RESPONSE TO THE UKRAINE CRISIS:
JANUARY 2023 BULLETIN

REFUGEE RESPONSE PILLAR 4:
Reinforcing emergency health information and surveillance for evidence-based decision-making in health

WHO continues to closely monitor the utilization of health-care services among Ukrainian refugees within hosting countries. Since March 2022, WHO has carried out or contributed to 21 surveys/assessments on access to health care to better understand the barriers refugees may face in receiving care.

Fig.2 Health assessments carried out in refugee hosting countries

<table>
<thead>
<tr>
<th>Country</th>
<th>Type of assessment</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bulgaria</td>
<td>Health needs survey</td>
<td>1</td>
</tr>
<tr>
<td>Czechia</td>
<td>Health needs survey, IOM Sentinel network survey</td>
<td>2</td>
</tr>
<tr>
<td>Hungary</td>
<td>IOM Sentinel network survey, Health needs survey</td>
<td>2</td>
</tr>
<tr>
<td>Poland</td>
<td>Behavioural insights on refugee health service needs and access, Multi-sector needs assessment, IOM Sentinel network surveys, Health needs survey</td>
<td>5</td>
</tr>
<tr>
<td>Republic of Moldova</td>
<td>IOM Sentinel network surveys, REACH multisector needs assessment, Health needs survey</td>
<td>4</td>
</tr>
<tr>
<td>Romania</td>
<td>IOM Sentinel network surveys, Health needs survey, Behavioural insights on refugee health service needs and access</td>
<td>4</td>
</tr>
<tr>
<td>Slovakia</td>
<td>Health needs survey, IOM Sentinel network survey</td>
<td>3</td>
</tr>
<tr>
<td>Republic of Moldova</td>
<td>IOM Sentinel network surveys, REACH multisector needs assessment, Health needs survey</td>
<td>4</td>
</tr>
</tbody>
</table>

Assessments continue to be carried out across all refugee-hosting countries to reinforce access to emergency health information.

- In Poland, WHO is continuing its collaboration with Statistics Poland on the development of a health module for a six-question border monitoring questionnaire (PDP) to be conducted during the first week of each quarter with all foreigners who are exiting Poland. The official title of the survey is “Trips made by non-residents to Poland. The movement of vehicles and persons at the Polish border with the countries of the EU”.
- In Poland, WHO is developing a survey assessing the needs of people with disabilities among the Ukrainian refugee population.
- In Slovakia, partners in Košice finalized the health needs assessment analysis and report from the survey carried out among Ukrainian refugees. WHO continues to provide support by contributing technical expertise.
- WHO EMTs visited the Sosnowiec Municipal Hospital and the city of Katowice, together with the Polish Center for International Aid and representatives from the EU Committee for the Prevention of Torture and Inhuman or Degrading Treatment of Punishment (CPT), to assess potential alternative locations further from the border for medical evacuation operations should airspace in Jasionka become compromised.
- In Bulgaria, Czechia, Poland, Romania, and Slovakia, WHO has continued to support assessments of the current MHPSS needs and perceptions of refugees from Ukraine. Exploring the perceptions of refugees will help to elucidate the reasons for the underutilization of MHPSS services shown in studies over the past year, including:
  - a baseline survey conducted in Czechia, which found that only 6% of surveyed refugees perceived psychological counselling as one of their main needs; and
  - a study conducted by the WHO Behavioural and Cultural Insights team in Poland, Romania, Slovakia, and Slovenia, which revealed several barriers to accessing MHPSS services, including motivational (thinking others need it more), practical (no one to take care of their children) and structural (most psychological services are offered in a group format, whereas people would prefer individual counseling).
REFUGEE RESPONSE PILLAR 5:
Provision of priority medical products, vaccines, and technologies to refugee populations in need

From March 2022 to January 2023 WHO delivered 7696 kg of supplies and equipment to refugee-hosting countries, including Hungary, Poland, Republic of Moldova and Romania, for a total value of over US$ 3.47 million. The supplies delivered are blood supplies, medical supplies, personal protective equipment and other infection prevention and control supplies, chemical supplies (such as oropharyngeal airway tubes for oxygen masks), HIV and tuberculosis (TB) medications, rehabilitation and laboratory supplies (Fig. 3).

In January WHO delivered 25 790 kg of laboratory supplies and medical kits to Poland and the Republic of Moldova.

Since the beginning of the response, 54.7% of the supplies requested from refugee-hosting countries have been delivered.

7696 kg
of supplies and equipment to refugee-hosting countries, including Hungary, Poland, Republic of Moldova and Romania, from March 2022 to January 2023.

54.7%
of the supplies requested from refugee-hosting countries have been delivered.
WHO has continued to support refugee-hosting countries and the health workforce by providing trainings. In January, trainings and workshops continued to be held to support health workers to provide services to refugees.

- In Poland, WHO provided technical support for a Norwegian and EU project and the design of specialized multistretcher transport buses alongside the Ukrainian National Emergency Medical Service as part of the TWG. During the handover, a dedicated four-day training was provided for Ukrainian medical and technical personnel. The participants included doctors, paramedics and technicians from Kyiv, Lviv, Dnipropetrovsk, Kharkiv and Cherkasy. The training on interhospital patient transfers was held in close cooperation with the Medical Simulation Centre of the College of Medical Sciences of the University of Rzeszów.

- In Czechia, WHO launched the first phase of a project with the Czech Expert Society for Inclusive Education (CESIE), which will last until 31 March 2023. The overall goal of the project is to implement the e-learning on trauma-informed approach (TIA) in the Czech educational system to support refugee children from Ukraine. The first phase will focus on adapting and piloting the approach.

- In Slovakia, WHO provided training on the clinical management of rape to national health-care and MHPSS service providers, delivered together with UNFPA and UNHCR.

- In Poland, WHO procured 56 mechanical translators to support the paediatric clinics in Katowice. The devices will facilitate communication between medical staff (physicians and nurses) and Ukrainian patients (parents and children) in the specialized paediatric outpatient clinics.

- On 18–20 January 2023, in the Republic of Moldova, WHO provided a three-day training on “Building connections and facilitating self-expression using psychosocial art” in partnership with IOM. A total of 20 psychologists and frontline workers benefited from this training, which offered recommendations for the safe and effective use of art as a therapeutic tool and introduced psychosocial art activities.

- In the Republic of Moldova, WHO held a three-day training on 26–28 January 2023 on Advanced Trauma Life Support (ATLS) for 32 doctors working with major trauma patients in pre-hospital and hospital settings (advanced life support ambulance team, the emergency department).

On 23–25 January 2023, WHO helped to carry out three mass casualty management simulation exercises, involving around 150 health-care workers in three designated hospitals from Căușeni, Hincești and Soroca. The training was provided to build human resource capacities of hospital staff to engage collectively and further strengthen and coordinate surge requirements during major mass casualty scenarios.
Prevention of and response to sexual exploitation, abuse and harassment (PRSEAH)

WHO is committed to PRSEAH in Ukraine and refugee-hosting countries. A team of PRSEAH experts coordinates efforts in and across countries in line with the overall strategic WHO PRSEAH approach, identifying areas for collaboration in interagency efforts and strengthening internal accountability mechanisms.

In January the PRSEAH team continuously provided technical support in country and at interagency level to move the portfolio priorities forward.

- For the refugee-hosting countries, the PRSEAH technical support in the Republic of Moldova continued to be provided to the PSEA Taskforce, prioritizing the Inter-agency PSEAH Risk Assessment for the country, as well as other activities. A one-day training in January with MHPSS partners covered 42 participants. In Poland and Romania, the focus is on supporting the WHO country offices in building capacity on PSEAH both within the agency and among partners. Preparations are supported to conduct trainings in February and March, with an integrated training being set up in collaboration with GBV, MHPSS and RCCE colleagues in both countries. For Hungary and Slovakia, technical and coordination support has been provided to PSEA networks/task force, particularly supporting review and inputs to SOPs, training, and action/national plans, as well as PSEAH briefing notes.

- In Poland, WHO held technical discussions with academic partners from the Jagiellonian University in Kraków, University of Warsaw and University of Zielona Góra on next steps for the dissemination of the Polish-language version of WHO Guidelines on the health response for GBV survivors.

- In Poland, on 18–19 January 2023, 40 health-care professionals, including doctors, nurses and medical students, providing health services in shelters in Kraków were trained on WHO LIVES (Listen, Inquire, Validate, Enhance safety, and Support), which teaches providers to identify violence in a clinical context and provide first-line support, and received the WHO clinical handbook on health care for women subjected to intimate partner violence or sexual violence in order to support their capacity to provide survivor-centred care for GBV survivors.

- On 20 January WHO conducted shelter site visits with a health partner based in Kraków, Poland, for a joint PRSEA and GBV risk assessment using customized tools adapted to the Polish context. PRSEA awareness-raising materials were also provided, with several risk mitigation measures implemented.
WHO RESPONSE TO THE UKRAINE CRISIS: JANUARY 2023 BULLETIN

Latest guidance and publications

1. War in Ukraine: situation report from the WHO Ukraine Country Office
2. WHO Ukraine crisis response: December 2022 bulletin
5. Emergency appeal: Ukraine and refugee receiving and hosting countries
6. Risk assessment for winter in Ukraine, December 2022

Thanks
WHO would like to thank donors who are supporting its response in Ukraine, and countries receiving and hosting refugees.

Donors
- Canada
- European Civil Protection and Humanitarian Aid Operations
- European Commission – Directorate-General for Neighbourhood and Enlargement Negotiations
- Germany
- Ireland
- Japan – Asia-Europe Foundation
- King Salman Humanitarian Aid & Relief Centre
- Kuwait
- Norway
- Novo Nordisk Foundation
- Socialist Republic of Viet Nam
- Switzerland
- UN Central Emergency Response Fund
- United Kingdom
- UN Ukraine Humanitarian Fund
- United States Bureau of Population, Refugees, and Migration
- USAID’s Bureau for Humanitarian Assistance
- WHO Foundation

© World Health Organization 2023. Some rights reserved. This work is available under the CC BY-NC-SA 3.0 IGO license.