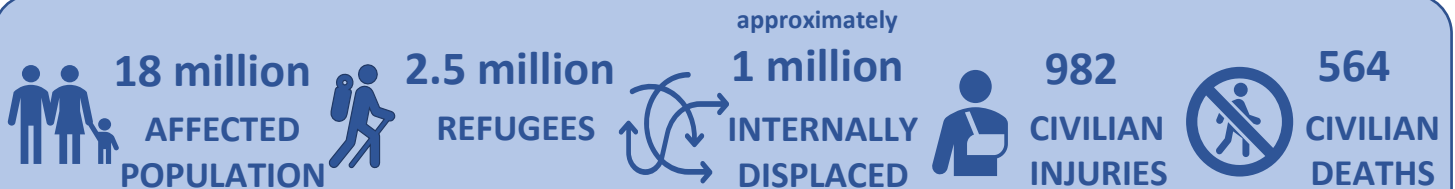


# Emergency in Ukraine

External Situation Report #2, published 11 March 2022

Reporting period: 4–11 March 2022

## 1. EVENT HIGHLIGHTS



### Key updates

As of 11 March, WHO has verified 30 reports of attacks on health care in Ukraine verified by WHO line with global [surveillance system for attacks](#) on healthcare since 24 February, resulting in 12 deaths and 34 injuries.

- WHO is preparing for a surge in Emergency Medical Teams (EMTs) and trauma management support in Ukraine. Requirements are being collected in terms of trauma care and oxygen capabilities from the Ministry of Health (MoH) and the health system.
- WHO has established direct logistics lines to almost all cities of Ukraine, with shipments now in progress, and more logistical lines being established with other United Nations (UN) agencies.

### Priority public health concerns

- **Conflict related trauma and injuries** exacerbated due to increasing intensity of violence and by lack of access to health facilities by patients and health staff due to insecurity and difficulties for safe access to lifesaving medicine and supplies.
- **Risk of excess illness and death from noncommunicable diseases (NCDs)** such as cardiovascular disease, diabetes mellitus and cancer due to a disruption in medical supply lines and health services.
- **Risk of emergence and spread of infectious diseases** such as measles, polio, COVID-19 and other respiratory infections, tuberculosis (TB), HIV and diarrheal diseases due to widespread destruction of water and sanitation infrastructure, inadequate vaccination coverage, lack of access to medicines and medical care, population movements and over-crowding.
- **Risk of mental health and psychosocial health deterioration** due to significant stress from acute conflict in addition to two years of living with COVID-19.
- **Protection issues: risk of human trafficking** exacerbated by an increasingly vulnerable situation for refugee populations, particularly for unaccompanied children and young people, and lack of resource management or follow-up within surrounding countries.
- **Escalated risk of gender-based violence** as women, children and the elderly travel and stay in reception centers, apartments and houses alone or with volunteer families.
- **Risk to maternal health** due to lack of access to obstetric care will increase the risk of maternal and neonatal morbidity and mortality. It is expected that 80 000 women will give birth in Ukraine in the next three months.

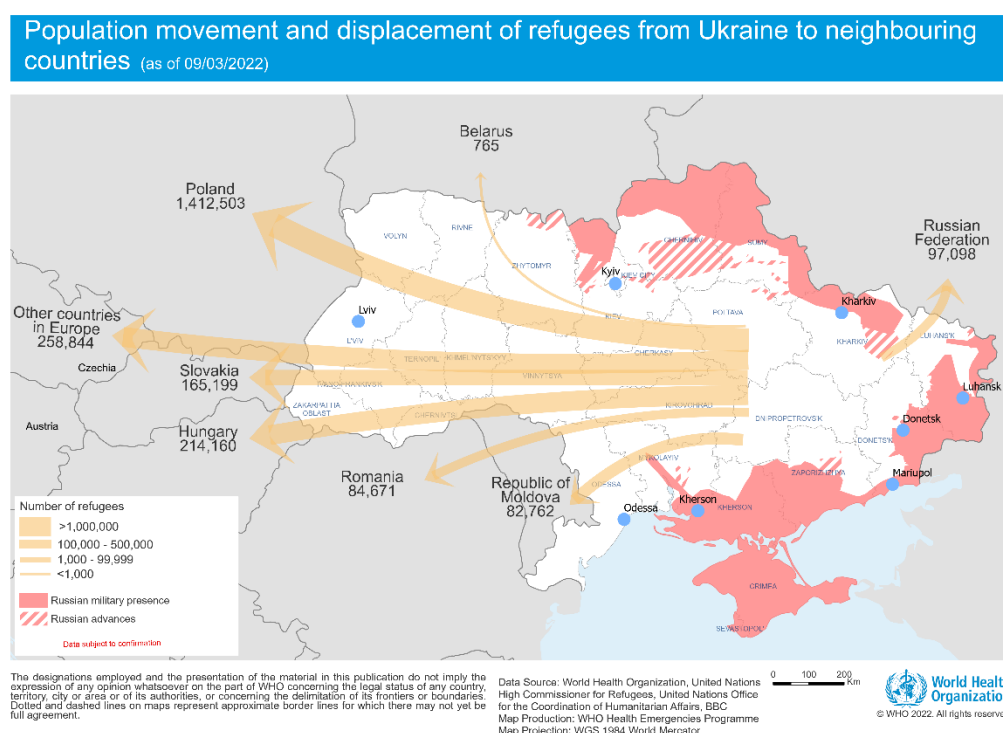
## WHO Actions

- Coordinating the health response in support of the MoH in Ukraine and surrounding countries;
- Monitoring technological and environmental hazards, and industrial sites affected by the conflict;
- Conducting public health risk assessments, and health facility and service assessments;
- Scaling-up surveillance and health information to detect and respond to outbreaks early and to better understand health needs, health threats, and the functionality and availability of health services;
- Providing WHO technical support and surge staff to manage the priority health concerns as well as mobilizing partners through EMTs, the Global Outbreak Alert and Response Network (GOARN) and the Global Health Cluster, among others;
- Providing health supplies and logistics capacity to deliver medicines, diagnostics, as well as trauma and preventive supplies;
- Provision of vaccines and supporting vaccination campaigns against vaccine-preventable diseases, such as measles and polio, to surrounding countries.

## 2. SITUATION UPDATE

On 24 February 2022, an escalation of military offensive in Ukraine triggered a humanitarian emergency affecting Ukraine and surrounding countries. The overall situation continues to deteriorate across Ukraine. To date, over 18 million individuals have been affected by the conflict, over 2 million refugees have arrived in neighbouring countries, with the United Nations High Commissioner for Refugees (UNHCR) estimating that this could rise to 4 million by July 2022 (Figure 1).

**Figure 1. Population movement and displacement of refugees from Ukraine to surrounding countries as of 9 March 2022**



Between 24 February and 9 March 2022, the Office of the High Commissioner for Human Rights (OHCHR) recorded 1 506 civilian casualties in Ukraine, including 549 deaths. The human cost is likely much higher as access and security challenges make it difficult to verify the actual number of deaths and injuries (Table 1). According to the latest government data compiled by UNHCR, over 2 million refugees have now left Ukraine to surrounding countries, with nearly 60% of them in Poland.

**Table 1. Key humanitarian figures as of 9 March 2022**

<b>People affected</b>	<b>18 million</b>
Internally displaced persons	Approximately 1 000 000
Refugees	2 504 893
Injuries among civilians (as of 10 March)	982
Deaths among civilians (as of 10 March)	564

## **Current Risk Assessment and priority public health concerns**

### **1. Access to health care**

The MoH and National Health System of Ukraine continue to operate, but safe and unhindered access across borders is still being negotiated as of 4 March 2022.

There are significant access barriers due to active hostilities, martial law (curfew), limited medicines (availability, access to pharmacies, cost), access to health care facilities (distance, damage to roads, transportation, lack of mass transport, fuel shortages, restricted movement through military checkpoints, safety concerns in facilities, lack of specialized beds and equipment, few disability accommodations, limited telemedicine, health workforce shortages). Many isolated settlements do not have pharmacies or medical centres.

Mariupol, a city in the south, continues to report shortages of medical supplies and medications as humanitarian aid has not arrived as of March 9. This is partly because safe and unhindered access has been unavailable.

Health facilities are focused on treating trauma patients and there are already dire warnings concerning the availability of beds for both trauma and other conditions. At least three major oxygen plants in Ukraine have closed, and supplies are dangerously low, hampering treatment of a number of medical conditions, including COVID-19. Based on the shifting context, more than 316 health facilities are along conflict lines or in changed areas of control, including 159 hospitals, 153 primary health care centers, and 4 laboratories. A further 618 facilities are within 10 kilometers of the conflict lines.

There are reports, both verified and under investigation, of health facilities being damaged or destroyed. According to the MoH, as of 9 March, 34 hospitals have been damaged or destroyed since the conflict began. WHO has verified 28 attacks on health care since 24 February, resulting in 12 deaths and 34 injuries, 23 impacted health facilities, 5 attacks impacted transport, 9 impacted health personnel, 5 impacted patients and 5 impacted the delivery of medical supplies.

There will likely be staff shortages at health facilities for security reasons and displacement of some staff, either internally or to neighbouring countries. Accessibility of health services is likely to be severely disrupted within areas of active conflict.

### **2. Main health risks and needs**

A detailed assessment of the main health needs and threats can be found in the [Public Health Situation Analysis](#) published by the Ukraine Health Cluster on 3 March 2022. An update on a few main health priorities is provided below.

### **2.1. Crisis related trauma and injuries**

Between 24 February and 10 March 2022, OHCHR recorded 1 546 civilian casualties in Ukraine, including 564 deaths. Most of the civilian casualties recorded were caused by the use of explosive weapons with a wide impact area, including shelling from heavy artillery, multi-launch rocket systems, and missile and air strikes. OHCHR believes that the real figures are considerably higher, especially in Government-controlled territory and especially in recent days, as information from some locations where intense hostilities are ongoing has been delayed and many reports are still pending corroboration.

WHO is preparing for a surge in EMTs and trauma management support. Requirements are being collected in terms of trauma care and oxygen capabilities from the MoH and the health system.

### **2.2. NCDs**

In the past week, WHO has been monitoring technological hazards and industrial sites affected by the conflict. A list of frequently asked questions (FAQs) on radiation and health after a nuclear emergency has been developed.

NCDs are the leading cause of illness and death in Ukraine. Shortages of medical supplies, combined with challenging access to essential health services, may exacerbate the burden of chronic diseases.

### **2.3. Epidemic prone and other infectious diseases**

Recent outbreaks of polio and measles, and suboptimal vaccination coverage, pose a risk of ongoing spread. The prevalence of HIV and TB/Multidrug-resistant TB (MDR-TB) are among the highest in Europe. WHO recommends the planning of vaccination campaigns (including polio, measles, COVID-19) and enhanced surveillance for priority infectious diseases that may be imported or spread where people are in close settings.

A total of 791 021 new cases of COVID-19 and 8012 new deaths were reported from Ukraine and surrounding countries including Belarus, Hungary, Moldova, Poland, Romania, Russian Federation, and Slovakia between 3 and 9 March. These countries reported a decrease in the number of new cases of COVID-19 compared to the previous week. However, the ongoing high incidence levels of COVID-19 poses a significant risk of severe disease and death, particularly given the low vaccination coverage in at-risk population groups both amongst those remaining in Ukraine, the refugees in other countries, and among the resident population of many surrounding countries.

As part of WHO's humanitarian operation, 1200 vials of Tetanus immunoglobulin donated by Statens Serum Institute, Denmark were delivered to Lviv on 5 March. Additional deliveries will be made in the coming weeks.

### **2.4. Mental Health and Psychosocial support**

To help cope with the effects of the war, many people are in urgent need of mental health and psychosocial support services (MHPSS). Exacerbation of chronic mental health problems and high levels of Post-Traumatic Stress Disorder, depression and anxiety are likely among the affected population of all ages. The Health Cluster's MHPSS working group maintains [online maps](#) of MHPSS and prevention of gender-based violence services, and a list of hotlines available in Ukraine.

## **3. Supply chains**

The supply chains for medicines, medical supplies, and common goods have been disrupted in Ukraine, creating urgent need. Many distributors are not operational, and many government and humanitarian stockpiles are inaccessible due to ongoing military operations. Lifesaving and essential medicines, such as oxygen and insulin, personal protective equipment, surgical supplies, anaesthetics, and safe blood products, are reported in short supply. WHO has been working with partners to alleviate some of these shortages and has delivered trauma and emergency surgical supplies.

## 4. Needs of refugees and displaced populations

Over 2 million refugees have been displaced to neighbouring countries, with UNHCR estimating that this could rise to 4 million by July 2022. Many conditions linked to population displacement (such as poor shelter, inadequate sanitation, overcrowding, lack of health-care access) are risk factors for disease or exacerbation of existing conditions. Displaced populations (including internally displaced people and refugees) are at increased risk of communicable diseases (e.g., COVID-19, measles, polio), TB and HIV primarily due to closer and more intense social mixing as well as vaccination coverage gaps, disrupted surveillance systems, lack of access to health care, poor quality shelter, water, sanitation, and hygiene (WASH) conditions, and greater exposure to the elements including the cold winter weather. The risk of NCDs (e.g., hypertension, diabetes) and maternal, new-born, child health and sexual and reproductive health concerns is increased by the discontinuation of care and challenges accessing essential health services, particularly primary health care, and medications. NCDs are particularly prevalent in older persons; many of whom have not been able to flee the hostilities due to reduced mobility and limited financial means. Providing safe shelter, adequate water, sanitation and hygiene, vaccination and prevention measures for displaced or crowded settings, health services upon entry and to access to emergency and primary health care in surrounding countries free of charge is essential.

## WHO ACTIONS TO DATE

### Leadership and coordination

- WHO continues to coordinate the health response in Ukraine and surrounding countries with communications experts deployed on the ground.
- WHO has established direct logistics lines to almost all cities of Ukraine, with shipments now in progress, and more logistical lines being established with other UN agencies.
- The Regional Emergency Director, a senior Emergency Officer and WHO staff in Poland travelled to Lviv on 7 March to establish an office to support local operations.

### Health Information

- Ongoing event-based surveillance activities for the various potential hazards are ongoing, including through Epidemic Intelligence from Open Sources.
- A public health situation analysis for the refugee population is being prepared.
- A compendium of communicable diseases/syndromes for enhanced surveillance among internally displaced people in Ukraine is being developed.
- Support is being provided to the development or enhancement of tools to assess health needs and for facility assessments.
- Further mapping of health facilities and other key information is ongoing.

### Health Operations

- An EMT coordinator arrived in Lviv to assess the location of EMTs for the western part of Ukraine with potential deployments further east being assessed, as well as setting up medical referral pathways.
- Health needs assessments are being scaled up further in Ukraine as security allows and in neighbouring countries.
- A Ukraine Ministry of Health UKR-MOH working group has been established to quantify oxygen needs. Proposals are being developed to procure and distribute liquid oxygen and/or high-pressure cylinders and to procure and set-up pressure swing absorption systems including power generators.
- WHO is continuing to source medicines, supplies/equipment while responding to requests from the MoH. Therapeutics for COVID-19 have been purchased.
- A concept note for WASH and IPC is being developed.



- The first field hospitals that will be established in the western part of Ukraine including in Lviv arrived in Poland on 6 March. The focus of the EMTs will be to reduce pressure on the health system, augment capacities where possible, and establish a medical evacuation system for the western part of the country
- Technical expertise on readiness, migration and refugee health will be deployed in the coming days to strengthen the WHO capacity in the field and in trauma rehabilitation.
- WHO deployed an expert on MHPSS to Poland on 7 March to support the response in Ukraine's inpatient psychiatric facilities.
- WHO continues global mapping of MHPSS interventions in Ukraine and neighbouring countries by UN Agencies and international nongovernmental organizations (NGOs).
- WHO continues to advance contingency planning for possible technical and environmental hazard situations.

### **Supplies and Logistics**

- The first batch of WHO emergency supplies – 5 metric tonnes, mostly surgical kits – arrived in Kyiv on 8 March. More supplies will be distributed through MoH or commercial partners.
- WHO is working to dispatch supplies to designated hospitals.
- Logisticians continue to be deployed to Ukraine and neighbouring countries.
- A shipment consisting of 10 tonnes of trauma and emergency surgery kits and Interagency Emergency Health Kits were loaded at a WHO warehouse and then dispatched on 9 March to Dnipro, Kharkiv, Kherson and Sumy.
- Two charter flights from the WHO Dubai Logistics Hub to Warsaw, Poland, have dispatched a total of 76 metric tonnes of emergency medical supplies, including trauma and surgical kits, and have been transported to Lviv, Ukraine. In addition, 600 doses of tetanus vaccines have been delivered to Lvivska.
- On 3 March, the first set of emergency medical supplies and the first set of NCD supplies were delivered to Moldova and dispatched to pharmaceutical storage. WHO and the European Union have now donated a tonne of medicines and medical products.
- An additional 400 cubic meters of emergency medical supplies are waiting to be transported to Poland.
- WHO is working to develop a pipeline of trauma supplies to support the care of at least 24 000 casualties.

### **Operational Partnerships**

- WHO EMT "Coordination Cells" are being established in Moldova, Poland and Ukraine, with focus on scoping missions and transit to Ukraine. There are over 20 teams to be deployed pending a formal request for assistance from the Ukrainian MoH.
- Preparedness teams have been deployed to Moldova and transition teams to Poland to support the set-up of coordination cells.
- A series of experts are currently sourced through the Standby Partners to support WHO's response and will strengthen the Health Cluster Coordination in Ukraine, MHPSS Technical Group Coordination, Prevention of Sexual Exploitation and Abuse measures as well as supply and logistics coordination. These deployments are of 3 to 6 months' duration and to be based in Poland, Hungary, Moldova as well as remotely.

### **Risk communication and community engagement (RCCE)**

- RCCE priorities include:
  - 1) mapping priority topics and existing topics;
  - 2) developing, adapting and translating materials;
  - 3) identifying effective channels and key influencers to better reach target audiences.
- RCCE coordination with United Nations Children's Fund (UNICEF), other UN partners and the International Federation of Red Cross has been initiated at both global and regional levels.

- FAQs on [Radiation and Health](#) were published
- RCCE materials are being developed, including for mental health, psychological first aid and breastfeeding
- Community and Civil Society Organizations have been mapped and in-country missions are being organized for operational engagement.
- Listening insight mechanisms were set up to detect media coverage, signals and public sentiment.
  - o This week's highlights: A strong need for mental health support is highlighted by a continued increase in interest for *sedatives* in Ukraine. General sentiment on Ukrainian refugees is positive or neutral.

### External Communications

- Two press conferences have taken place at the regional and global level with a focus on the health needs and response:
  - o [Media briefing on #COVID19 and other emergencies with @DrTedros](#) – 9 March
  - o [WHO/Europe's virtual press briefing](#) – 8 March

A statement was issued by WHO/Europe's Regional Director on 8 March: [WHO: Health care provision for civilians within and refugees beyond Ukraine our priority](#).

- WHO's statements reiterated that Health is not a Target (see <https://twitter.com/DrTedros/status/1501652132793098240>)
- Stories published in the media, social media and WHO websites include:
  - o [Access to vaccination for refugees from Ukraine needed to protect the most vulnerable among them from vaccine-preventable diseases](#).
  - o ['Running for their lives, without even a toothbrush' - a community nurse at a refugee centre in Romania shares her experiences](#).
  - o [Food, medical attention, a safe haven: Poland responds to the Ukraine crisis with an emphasis on the physical and mental health of refugees](#).
  - o [WHO in the Republic of Moldova delivers much-needed health supplies to aid refugees from Ukraine](#).
  - o [Ukraine's most vulnerable children in a Kherson home, designed to keep them safe and healthy](#).

### Funding needs

- To support its response, WHO has so far released US\$ 5.2 million from the Contingency Fund for Emergencies (CFE). Additional funds might be released from CFE to address increasing needs.
- WHO's spending needs for the next three months are estimated at US\$ 45 million for health response in Ukraine. Of which only 7% has been received.
- Another US\$ 12.5 million is needed to address the health needs of Ukrainian people affected by the conflict in neighbouring countries. No funding has yet been received in this regard

## 3. SPECIFIC ACTIVITIES IN REFUGEE-RECEIVING COUNTRIES

Countries surrounding Ukraine – primarily Poland, Romania, Slovakia, Hungary and Moldova – have triggered emergency response systems for the intaking of refugees from Ukraine. In other countries, WHO are strengthening their operations to support the needs of refugees.

### Hungary

#### Situation Update

- Between 24 February and 9 March 2022, approximately 214 160 Ukrainian refugees entered Hungary.
- Refugees are granted access to comprehensive health-care services, either through possession of a Ukrainian passport or by registration upon arrival (with asylum status).
- Health emergency services have been strengthened at the country level, and the public health authorities have established collaborations with local NGOs when receiving refugees across the country.

- Mobile teams have been sent to registration points along the Ukrainian border to provide medical care, screening and, if need be, hospital care for those arriving from Ukraine.
- As of 5 March 2022, nearly 100 refugees had required hospital care, mostly out-patient services. At least 14 refugees were in hospital, including nine children.
- COVID-19 responses include testing, the offer of free vaccination for Ukrainians who cross the border, testing mechanisms in place at border entry points, pop-up isolation centres for symptomatic cases and hospitalization of severe cases.
- Health workers providing aid at the border are being assisted by partner organizations.

#### **WHO actions to date**

- WHO office in Hungary has offered laboratory support including COVID-19 testing, and has provided guidance on the surveillance of diseases including TB, HIV and polio.
- WHO guidance and resources have been given to the National Emergency Coordinator and mental health resources sent to relevant authorities.

### **Poland**

#### **Situation Update**

- Between 24 February and 9 March 2022, approximately 1 294 903 Ukrainian refugees entered Poland, accounting for about 60% of the total refugee population.
- There are reports of long waits of multiple days to cross the border, and cold weather at night, which may put refugees at heightened risk of ill health.
- Medical points have been set-up to provide medical care to those who have crossed the border with a train to transport some of those with medical needs from the border with Ukraine to Warsaw.
- There is a risk of the health system being overwhelmed due to shortages of health-care staff, particularly specialists.

#### **WHO actions to date**

- On 6 March, WHO opened a field office in Rzeszow, close to the Ukrainian border, and started coordinating the health response.
- On 7 March, the first health coordination meeting was held with more than 33 NGOs and UN partners.
- WHO is working closely with the government and other health partners to rapidly respond to the health emergency with a broad focus on physical and mental health.

### **Republic of Moldova**

#### **Situation Update**

- Between 24 February and 9 March 2022, approximately 82 762 Ukrainian refugees entered the Republic of Moldova, of which 90% are women and children.
- Free of charge vaccination against COVID-19 and other vaccine-preventable diseases has been provided to all in primary health care institutions. Mobile vaccination teams have also been formed, and IPC measures established at all points of entry. Medical staff present along the border regions are performing triage and COVID-19 testing for symptomatic refugees.
- There is currently a lack of humanitarian health supplies, and additional WASH facilities are needed. Health supplies are needed for those suffering from chronic illness (including HIV/AIDS), and there is a need for support in referral of refugees to medical institutions, as well as in the administration of polio and measles vaccinations.
- The MoH has directed health-care facilities to provide health services in primary health care centers and hospital settings during the ongoing emergency situation, and has defined a set of response measures: surveillance; testing and monitoring for communicable diseases including COVID-19; medication supply; medical emergency case management algorithm and referral; and provision of health services to refugees.



### **WHO actions to date**

- WHO and UNHCR are preparing for a larger influx of refugees due to further military actions closer to Odessa. Needs include supplies and services for this second wave of refugees. An additional appeal has been made for coordination of EMTs in-country.
- WHO is working with the MoH Moldova to map needs and registration of EMTs that have responded to the official call.
- WHO conducted a national conference for health-care workers to raise awareness about the surveillance and case management of vaccine preventable diseases and to enhance the measures needed for an immunization catch-up campaign.
- WHO provided information technology equipment to help register the health and vaccination status of the refugees and to record and monitor the distribution of medicines as part of the noncommunicable disease kit.
- WHO supported the pilot of the information system for the screening of migrants and registration of health-care services.
- WHO supported capacity building for mass casualty and trauma care; updated the recommendations on immunizations; contributed to the development of needs assessment and costing tools; and initiated an interagency exchange on sexual and reproductive health, gender-based violence and harm reduction.

## **Romania**

### **Situation Update**

- Between 24 February and 9 March 2022, approximately 84 671 Ukrainian refugees have entered Romania however, most are in transit to other countries, primarily Hungary. Overall, the occupancy rate of accommodation centres managed by the Immigration General Inspectorate is 73.2 %.
- On 9 March the state of alert for COVID-19 was lifted resulting in the removal of a number of restrictions. However, the MoH has mobilized medical teams to provide health assessments and COVID-19 testing and vaccination of refugees, and the health system will be accessible without charge.

### **WHO actions to date**

- Between 28 February and 9 March, WHO conducted a readiness mission in the country which included consultations with key health partners and stakeholders, MoH, National Institute of Public Health, UNICEF, and site visits in five border towns with Ukraine and the Republic of Moldova (Stîncă, Siret, Sighetu Marmației, Isaccea, Galați).
- On 10 March a field visit to Bucharest refugee centre was conducted with UNICEF and other partners.
- WHO will focus initially on surveillance for polio and measles and increasing routine immunization coverage nationally, enhancing data systems for collecting information from syndromic surveillance including for both the refugee and local population with all refugee children under age 6, offered the Measles, Mumps and Rubella and poliovirus vaccines;
- The provision of MHPSS, as well as addressing and putting in measures to prevent sexual and gender-based violence, distributing health information booklets and leaflets beyond the crossing points and provinces and establishing a national hotline for refugees.

## **Slovakia**

### **Situation Update**

- Between 24 February and 9 March 2022, approximately 153 303 Ukrainian refugees have entered Slovakia however most are in transit to other countries such as Austria, Czechia, Germany and Lithuania.

- Hospitals are ready to receive refugees as needed. Health care has been made available for those who obtain temporary refugee status, while those who are transiting are required to pay. COVID-19 treatment is provided free of charge.
- The eastern city of Košice is facing a humanitarian crisis due to the rapidly increasing number of refugees.

#### **Preparedness and Operational Readiness (national and neighbouring countries)**

- WHO has worked across Ukraine and neighbouring countries prepositioning supplies, training health and front-line workers and developing contingency plans in collaboration with other UN agencies and health partners.
- As events unfold, WHO continues to assess the health situation, including the elaboration of different possible scenarios in order to have response plans ready.

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