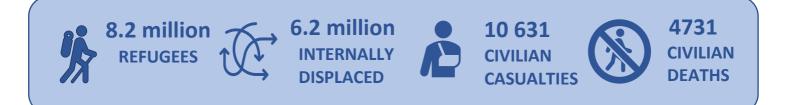


Emergency in Ukraine

External Situation Report #16, published 30 June 2022 Reporting period: 16–29 June 2022

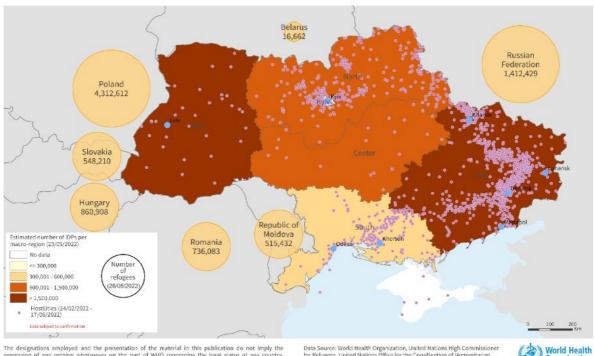


Key updates

- According to WHO's Surveillance System for Attacks on Health Care, there have been 323 attacks on health care, resulting in 59 injuries and 76 deaths, reported between 24 February and 29 June. Attacks on health care include those against health facilities, transport, personnel, patients, supplies and warehouses. These attacks deprive people of urgently needed care, endanger health-care providers, and undermine health systems.
- As of 28 June approximately 6.2 million people remain internally displaced, whilst 5.5 million people who were previously displaced within Ukraine or moved to other countries have now returned to their homes in Ukraine, according to the sixth round of a rapid representative assessment of the general population in Ukraine conducted by the International Organization for Migration.
- Damage and destruction to medical facilities as well as a shortage of service providers and critical supplies have severely compromised the delivery of essential health services, including access to maternal care for the estimated 265 000 women who were pregnant when the conflict erupted, and specialized services for survivors of gender-based violence.
- Due to an ongoing risk of cholera outbreak, particularly in Mariupol, where drinking water supplies are significantly affected, WHO is working with the Ministry of Health (MoH) to prepare a request to access cholera supplies and the global oral cholera vaccine (OCV) stockpile, if needed. WHO has also provided guidance on outbreak preparedness.

1. SITUATION UPDATE

Figure 1. Distribution of Internally Displaced Persons (IDPs) and refugees in Ukraine and in refugee-hosting countries as of 28 June 2022



The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its forntiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

Data Source: World Health Organization, United Nations High Commission for Relugges, United Nations Office for the Coordination of Humanitarian Affairs, ACLED, International Organization for Migration Map Production: WHO Health Emergencies Programme Map Projection: WEG 1984 World Mercator



Table 1. Key humanitarian figures as of 29 June 2022

| People affected | |
|------------------------------|----------------------|
| Internally displaced persons | 6.2 million |
| Refugees | 8.2 million |
| Ukrainians entering Ukraine | 3 million |
| Injuries among civilians | 5900 (as of 26 June) |
| Deaths among civilians | 4731 (as of 26 June) |

1.1 Population displacement and refugees

According to government data compiled by the Office of the United Nations High Commissioner for Refugees (UNHCR), over 8.2 million refugees have left Ukraine for surrounding countries between 24 February and 28 June, with the highest proportion in Poland (52%), followed by the Russian Federation (17%) and Hungary (10%). As of 28 June approximately 6.2 million people remain internally displaced, whilst 5.5 million people who were previously displaced within Ukraine or moved to other countries have now returned to their homes in Ukraine, according to the sixth round of a rapid representative assessment of the general population in Ukraine conducted by the International Organization for Migration.

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 in the refugee-hosting countries. WHO has mobilized experts and is working with partners, including the Global Outbreak Alert and Response Network (GOARN), EMTs, Health Cluster, and Standby Partners, to provide support with access to health services – primary health care (PHC), routine and COVID-19 vaccination, mental health and psychosocial support (MHPSS), trauma care, supply and logistics, prevention of and response to sexual exploitation and abuse, risk communication and community engagement (RCCE), and information management.

WHO continues to support the MoH of Ukraine and the MoHs of the refugee-hosting countries to ensure safe medical evacuation (medevac) 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 29 June at least 736 patients (78% of the requests) have been medically evacuated from Poland, the Republic of Moldova, Slovakia and Ukraine via the EU Civil Protection Mechanism to 15 European countries (Austria, Belgium, Denmark, France, Germany, Ireland, Italy, Lithuania, Luxembourg, the Netherlands, Norway, Portugal, Romania, Spain and Sweden).

Funding

- WHO's updated appeal (May 2022) details its resource needs for Ukraine and refugee-receiving countries. It estimates that between March and August 2022 US\$ 80 million are required for the health response in Ukraine. To meet the health needs in refugee-receiving and hosting countries between March and December 2022, it estimates that US\$ 67.5 million will be required.
- WHO would like to thank donors who are supporting its response in Ukraine and countries receiving and hosting refugees, including: 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, Novo Nordisk Foundation, Switzerland, the UN Central Emergency Response Fund (CERF) and the Ukraine Humanitarian Fund (UHF), the United States Bureau of Population, Refugees, and Migration and Bureau of Humanitarian Assistance for their timely contributions.



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. Between 24 February and 29 June, 323 attacks on health care¹ were reported², resulting in 59 injuries and 76 deaths, with 28 new attacks reported in the past two weeks. These attacks deprive people of urgently needed care, endanger health-care providers, and undermine health systems.

Through engagement with the MoH of Ukraine, national health authorities, 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, where health systems have been severely disrupted, remains a challenge.

The WHO Country Office (CO) in Ukraine is working with the MoH of Ukraine and the Academy of Family Medicine of Ukraine to implement mobile teams providing medical assistance to the populations of Bucha, Irpin, Hostomel, Makariv, Borodianka, Dymer, Ivankiv and other surrounding communities. The project is funded by the Government of Switzerland and the Government of Canada.

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).

| Conflict-related trauma and injuries | Civilian casualties continue to occur, largely due to the use of explosive weapons. Disruption of health-care facilities and closure of many pharmacies in Ukraine has limited access to trauma care. Growing hostilities are expected to put increasing pressure on the health-care system. |
|--|---|
| Maternal and newborn health | According to the UNFPA, damage to and destruction of medical facilities as well as a shortage of service providers and critical supplies have severely compromised the delivery of essential health services, including access to maternal care for the estimated 265 000 women who were pregnant when the conflict erupted, and specialized services for survivors of gender-based violence. |
| Management of chronic diseases and noncommunicable diseases (NCDs) | Roughly 30% of households have at least one person with a chronic disease who reported challenges in accessing care for their condition in surveys conducted by various organizations between March and June. Two out of five households (39%) have at least one member with a chronic illness, such as cardiovascular disease, diabetes or cancer. |
| Risk of emergence and spread of infectious diseases | 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 COVID-19 vaccinations. Disruptions to vaccination programmes due to hostilities and displacement together with historical coverage gaps place both adults and children at risk. |
| | Between 23 February and 26 June the overall number of beds available and beds occupied by patients with COVID-19 decreased by 50% and 96%, respectively, reflecting potential challenges in accessing hospitals, limited data reporting, and a potential decrease in actual hospitalizations. The most notable decrease in the number of available beds was reported in the Luhansk oblast (100%), followed by the Vinnytsya (88%) and Chernivtsi (85%) oblasts. As of 26 June the average number of new COVID-19 cases continues to decrease. An average of 133 hospitalizations per day were reported in the last week. However, COVID-19 remains a substantial threat given the country's low vaccination rates. |
| | On 15 June a humanitarian convoy heading to Mariupol was attacked and destroyed. The water supply problem in Mariupol is worsening and residents are forced to draw water from puddles. |

¹ Attacks on health care include those against health facilities, transport, personnel, patients, supplies and warehouses.

² Surveillance System for Attacks on Health Care (SSA).

| Protection issues: risk of human trafficking and escalated risk of sexual and gender-based violence (SGBV) | An estimated 90% of refugees are women or children. There are increasing allegations of sexual violence by Russian troops. As of 3 June the Office of the United Nations High Commissioner for Human Rights (OHCHR) had received reports of 124 alleged acts of conflict-related sexual violence across Ukraine – mostly against women and girls – and a national hotline had received reports of crimes ranging from gang rape to coercion to watch an act of sexual violence committed against a partner or a child. |
|---|---|
| Mental health and psychosocial support (MHPSS) | Mental health and psychosocial support needs of the affected population are intensifying as a result of the significant distress and socioeconomic impact caused by the war. |
| | The WHO CO in Poland has set up a MHPSS Technical Working Group (TWG) in Poland for the coordination of MHPSS services. |
| Technological hazards and health risks | Potential nuclear hazards There are both operational and decommissioned nuclear facilities in Ukraine. In addition, numerous radioactive sources are used in industry and in health-care facilities. According to the International Atomic Energy Agency's analysis, the current nuclear safety situation appears under control. However, as we see from the latest events involving severe damage due to the shelling of the Neutron Source facility in Kharkiv, the ongoing armed conflict puts nuclear installations at risk of accidental or deliberate damage and jeopardizes the security of radioactive sources. WHO has developed technical guidance and public communication materials on this subject. Training courses and webinars focusing on medical and public response to radiation emergencies are also being delivered in collaboration with national partners in Ukraine. Potential chemical hazards Asbestos has been widely used in the Ukrainian construction industry. There is a risk of asbestos powder being released as a result of the attacks. The substance is linked to various diseases ranging from breathing difficulties to cancers of the lungs and other organs. Reusing asbestos manufacturing materials in reconstruction would further increase the risk |
| Food security and nutrition | of exposure. The conflict is affecting food security within and outside Ukraine. In May the World Food Programme (WFP) served 2.2 million beneficiaries, of which approximately 1.35 million received food assistance in the form of ready-to-eat foods and more substantial rations of dry goods. Food distribution has been provided mainly in the eastern part of the country, where the conflict is at its most intense. The remaining beneficiaries are displaced people who have moved to different areas across the country to seek safety. So far in June WFP has provided 1.4 million beneficiaries with food and cash assistance. Fuel shortages remain a serious operational impediment across Ukraine. WFP is continuing to work on various options to procure fuel for critical humanitarian operations. According to the United Nations Food and Agriculture Organization (FAO), a key source of income for 30% of the population in Ukraine has been severely impacted due to the destruction of, or damage to, the agricultural infrastructure, market and food supply chains. Since the conflict began, FAO has delivered 862 tonnes of seed potatoes to 17 740 households across ten of the country's oblasts in the east, south, centre and west of Ukraine to support people in need. The seed potatoes were distributed in time for the sowing season in mid-May, for harvesting in September. |

2.3 WHO and partner actions in Ukraine to date

Leadership and coordination

- The WHO team has increased its footprint in the country, working closer to the affected populations with partners.
- The WHO Incident Manager has been working with the authorities to prepare for all hazards, including cholera and chemical, biological, radiological, nuclear and high-yield explosives.

 The World Bank and the WHO Regional Office for Europe have published a report reviewing the progress of the implementation of health financing reform in Ukraine. The report's authors concluded that tremendous progress had been made. They also set out several areas of improvement: refinement of the benefit packages, efficiency-enhancing reforms to increase available health resources, enhanced internal governance and external accountability.

Health information and operations

The health sector response continues to prioritize saving lives and protecting mental health. Actions focus on ensuring access to emergency health care and priority essential health services for wounded people and others affected by the armed conflict, COVID-19, poliomyelitis (polio), and other health threats – including technological, industrial, and chemical, biological, radiological, and nuclear hazards. Continuity of treatment and care for people with NCDs – including diabetes and cancer – is a top priority.

- As many countries worldwide report cases of monkeypox, as of 29 June no cases of monkeypox have been detected in Ukraine. WHO continues to provide situation updates and various guidance documents, including clinical management, RCCE, laboratory testing, gatherings, case reporting and surveillance etc. For more information, please see the 27 June report on the multi-country monkeypox outbreak.
- To improve infection control measures in Ukrainian hospitals, the WHO CO in Ukraine, with financial support from the EU, has provided equipment for disinfecting medical institutions as part of an initiative to strengthen the health system in the Odesa Regional Clinical Hospital.
- WHO is preparing for a potential cholera outbreak in Mariupol as the risk remains present. It is reported that water supply is limited and people are forced to resort to drinking from puddles. WHO is working with the MoH to prepare a request to access the global OCV stockpile if needed, and has provided guidance on prevention, preparedness, case definitions, detection (including in wastewater monitoring), standards of care and case management. WHO has prepositioned medical supplies, including WHO cholera supplies and rapid diagnostic tests.
- On 16 June WHO in Ukraine prepared an informative video explaining how to obtain data on vaccinations for IDPs and people who have left the country because of the conflict. The EU is donating patient monitors, infusion pumps, ventilators and personal protective equipment such as gowns and masks. The EU also provided additional supplies, including 300 000 specialized protective suits, 5600 litres of decontaminants, and 850 pieces of equipment for decontamination efforts. All these items were donated following a request from the Government of Ukraine for donation of specialized equipment for public health risks such as chemical, biological, radiological and nuclear threats.
- In partnership with USAID's Bureau for Humanitarian Assistance, WHO will deliver oxygen concentrators to 500 primary health-care centres, with a key focus on southern and eastern parts of Ukraine.
- WHO completed the translation and adaptation of technical handouts on the Johnson & Johnson/Janssen COVID-19 vaccine. The printed materials will be delivered to each vaccination team, to be included in the vaccine implementation process in Ukraine.
- On 17 June a Ukraine Polio Outbreak Response Strategy Planning Meeting was hosted by WHO under the Global Polio Eradication Initiative in Rzeszów, Poland, to review the pre-conflict polio outbreak response plan, conduct in-depth analysis and a technical discussion on gaps, re-strategize based on the status of the conflict and discuss the way forward.

Supplies and logistics

- As of 27 June over 627.1 tonnes of supplies with a total value over US\$ 12 million have been delivered to the Ukraine humanitarian response, including infection, prevention and control supplies and personal protective equipment, ambulances and items related to diagnostics, energy and cold chain, COVID-19 and NCDs. Of the 627.1 tonnes, 289 tonnes of critical and life-saving supplies have already been distributed to and received by the oblasts.
- As of 27 June medical supplies and equipment with a total value exceeding US\$ 87 700 and a total weight of more than 52 metric tonnes were delivered to WHO's Lviv warehouse in the past week.

- The Poltava, Vinnytsya, Zaporizhzhya, Dnipropetrovsk, Chernivtsi, Donetsk, Ivano-Frankivsk, Kharkiv, Kyiv, Lviv, Rivne, Ternopil, Volyn, Zakarpattya and Zhytomyr oblasts received medical supplies and equipment for a total amount of US\$ 309 871 and a total weight of more than 8.4 tonnes.
- Efforts are ongoing to coordinate transportation and other activities related to logistics support with local warehouses.

Risk communication and community engagement (RCCE) and external communications

- In recognition of the increasing threat of cholera infection/outbreak, WHO, in partnership with Facebook, has launched an online campaign to promote messages on cholera prevention and treatment in Ukraine. In addition, 365 000 leaflets on cholera prevention and treatment have been distributed across the country.
- WHO published a feature story for World Refugee Day on a Ukrainian mental health volunteer working in Poland. The story is available here.

Operational partnerships

EMTs

- The EMT Coordination Cell (CC) is currently coordinating 28 EMTs from 10 organizations operating across 13 geographical regions in Ukraine.
- Between (13–16 June), four international EMTs collaborated on and carried out the transfer of 21 patients. The following transfers have been reported from CADUS, Global Response Management, Samaritan's Purse and International Rescue Team from Lviv to Rzeszów (Rzeszów Airfield): 12 transfers using the German medevac plane; nine transfers using the Norwegian medevac plane.
- As of 26 June several trainings using mixed modalities (virtual and/or face-to-face) have been conducted on topics such as advanced trauma life support (for adults and children), basic emergency medicine and trauma, surgical management of penetrating trauma, and tactical emergency casualty care.
- Between 13 March and 26 June EMTs in Ukraine responded to 5120 outpatient visits, of which 13% were infectious diseases and 13% were trauma. Among infectious diseases, 86% (561) were acute respiratory infections.

GOARN

From 2 March to 28 June the GOARN institutions/network provided technical support, deploying seven experts (Denmark (2), Poland (2), Romania (1), Slovakia (1), Ukraine (1, remote)), with six experts scheduled to be deployed soon (Poland (1), Ukraine (3), Denmark (1), Czechia (1)). So far ten experts have completed their deployment – Poland (3), Denmark (1), the Republic of Moldova (1), Czechia (3), Slovakia (1) and Romania (1).

Regional WHO-UN-Red Cross Movement Coordination Platform for Emergencies

- On 23 June the second meeting of the Regional WHO-UN-Red Cross Movement Emergency Coordination Platform took place, focused on the emergency in Ukraine and refugee-hosting countries. In total, 29 representatives from 11 UN agencies and partner organizations were present, as well as members of the Issue-based Coalition on Health and Well-being (IBC-Health) and members of the WHO Regional Office for Europe's Incident Management Support Team. The meeting focused almost exclusively on information sharing with regard to the Refugee Health Extension (RHE) based in Kraków, Poland.
- Colleagues from WHO and UNICEF shared updates on RHE activities and UNFPA shared a targeted overview
 of their activities in the impacted countries. During the meeting WHO also provided information on the
 current status of the cholera outbreak in the region. The role of the IBC in supporting UN Country Teams
 (UNCTs) was raised and as a workstream of IBC-Health, the Platform will meet in July to discuss how activities
 can best support Resident Coordinators and UNCTs in their work, including through the provision of
 analytics.

Health Cluster

WHO plays an essential coordination role in the response as the lead agency of Health Cluster Ukraine. As of 15 June Health Cluster Ukraine has 137 international and local Partners, with planned, ongoing and/or completed health-related activities in 24 oblasts. The Health Cluster team continues to support the review of new projects submitted to the Ukraine Humanitarian Fund (UHF).

Additional information is available on Health Cluster Ukraine's website. Health Cluster Partners have reached over 2.8 million people in the provision of medical supplies and services.

- From 21 to 24 June the Deputy Health Cluster Coordinator was in Poltava and Sumy to meet with Partners and conduct site visits to assess key areas for strengthening, capacity building needs, and IDP centre requests.
- Dnipropetrovsk Subcluster: a subcluster meeting with representatives from agencies and the Department of Health was held on 28 June.
- Vinnytsya and western Ukraine: the first subcluster meeting was held on 28 June. Currently, the subcluster is mapping health Partners active in the oblast and meeting with regional health authorities and other agencies.
- Health Cluster Partners' presence and activities across Ukraine are mapped weekly through the 5Ws3 to chart the continuously changing humanitarian response landscape. Health Cluster Partners have completed or ongoing activities in 437 settlements in 24 oblasts and have provided support to over 160 health facilities across Ukraine.

| Health domain of response activities | Number of Partners |
|--|--------------------|
| HIV/TB | 31 |
| Sexual and reproductive health, child health and GBV | 32 |
| Trauma/mass casualties | 21 |
| NCDs | 20 |
| Mental health | 15 |
| Other communicable diseases | 11 |
| Risk communication and community engagement (RCCE) | 7 |
| Child health | 4 |
| COVID-19 | 4 |
| Palliative care | 3 |

Table 2: Number of Partners by health domain

Note: Not all Partners reported the health domains of their activities.

- 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 210 requests.
- Analysis of the Health Cluster rapid health needs assessments, as described in the situation report published on 19 May, is ongoing.

³ The 5W matrix aims to understand the operational presence and activities of Health Cluster Partners in response to humanitarian emergencies. The tool refers to what, who, where, when and for whom.



3. SITUATION AND ACTIVITIES IN REFUGEE-HOSTING COUNTRIES

3.1 Specific WHO actions in select refugee-hosting countries

Czechia

Situation update

- Between 24 February and 28 June an estimated 382 617 Ukrainian refugees entered Czechia and have been granted a protection visa in Czechia. The authorities estimate that some 300 000 of them remain in the country.
- The Czech Senate almost unanimously approved tighter rules of distribution of humanitarian support to refugees from Ukraine on 22 June The changes, which include an end to the CZK 5000 humanitarian benefit for refugees with free accommodation, food, and basic hygiene products, are intended to prevent so-called "benefit tourism".
- The Czech health-care system is facing a shortage of nurses and doctors in some areas. As a result, the health-care system can be overloaded in the long run with increased pressure from refugees. Lack of funding and strict EU regulation have so far been an issue in including Ukrainian health-care workers in the Czech health-care system.

WHO actions

- WHO continues to meet with the Government of Czechia to coordinate the refugee response and to improve access to health services for refugees from Ukraine.
- WHO is drafting a situational analysis report on the Czech public health information systems in the context of the Ukraine crisis.
- WHO is working to establish data analysis of the health profile of the Ukrainian refugees utilizing the Ukraine assistance points in Czechia.

Hungary

Situation update

Between 24 February and 28 June an estimated 860 908 Ukrainian refugees entered Hungary.

WHO actions

- WHO continues to meet with the Government of Hungary to further coordinate the refugee response and work to improve access to health services for refugees from Ukraine.
- WHO will work to support Hungary with respect to long-term planning and strategy.

Poland

Situation update

- Between 24 February and 28 June an estimated 4 312 612 Ukrainian refugees entered Poland, accounting for 52% of the total refugee population.
- From the beginning of January to mid-June this year, 94 798 cases of chickenpox were recorded in Poland. During the corresponding period of 2021, there were 24 565 cases reported.
- In Poland patients will be able to get vaccinated at pharmacies also against diseases other than COVID-19.
- Access to specialized health services for people with disabilities remains a major issue.
- Statistics Poland shared preliminary data from a pilot regional survey conducted at five reception centres at the Polish-Ukrainian border in mid-May. The survey provides a good overview of vaccination status, prevalence of diseases among Ukrainian refugees and their immediate and long-term health requirements. The data were gathered at border crossing reception points and are unlikely to be representative in terms of access to health care nationally. Overall, 184 interviews were conducted with a population sample of 570 (381 female / 189 male). An analysis of the data highlighted the following findings and health service requirements:
 - 44% of respondents and their family members had a health-care need at the time of the survey (40 female / 51% male)
 - Acute illnesses accounted for 20% and chronic diseases for 6% of all health complaints.
 - o 28% of respondents / family members with health-care needs were able to access health services.
 - The main service provider was the Polish National Health Service (74%), followed by mobile/temporary services (19%).
 - $\circ\,$ The main barriers to accessing health services are lack of information, language, and cultural differences.
 - The vaccination coverage of children aged 1–4 years is low (measles, mumps, rubella 68%, polio 56%).
 - 40% of respondents have not been vaccinated against COVID-19, and the main reason given was not seeing the need.
 - 3% of respondents reported mental health issues, with 1% requiring support and 36% of respondents stating that no mental health support was required.

WHO actions

- A series of three Protection from Sexual Exploitation and Abuse (PSEA) orientation workshops were
 organized by WHO for the Health Sector and MHPSS TWG. The WHO PSEA team highlighted the work with
 Health and MHPSS partners through the PSEA orientation workshops that helped to raise awareness of
 sexual exploitation and abuse, engage in the identification of cases and provide an overview of the
 humanitarian architecture. In addition, WHO is undertaking translation of key WHO guidelines/protocols
 on clinical management of rape (CMR) to work on health sector capacity development.
- A total of 25 participants attended the three-day in-person workshop with a focus on creating awareness, understanding of core principles of sexual exploitation and abuse and international UN policy and how it applies to NGOs. There is a need for area-based coordination among the actors providing assistance to Ukrainian refugees with respect to general information sharing and updates on needs, geographical reach, type of operations and capacity.

- WHO supported the development of a poster about accessing health care in Poland. The purpose of the poster is to help Ukrainian refugees to navigate the health system in Poland and provide clear guidance on how to access the treatment and medicines they need, as well as additional services such as psychological services and COVID-19 vaccination.
- WHO continues to strengthen collaboration with civil society organizations (CSOs) in Poland by reaching
 out and engaging with them. Meetings with several CSOs were held to learn about refugees' health needs,
 access to information and services in Poland, and integration of Ukrainian health workers. The organizations
 are added to the mapping sheet for future engagement (e.g. message testing, dissemination campaigns
 etc.).
- Through listening mechanisms such as monitoring major social media communities of Ukrainian refugees in various cities in Poland, weekly insights are collected to understand the questions and concerns of refugees that help to tailor risk communication materials and advice.
- Members of the Poland MHPSS TWG were invited by the Ukraine MHPSS TWG to a meeting on 16 June dedicated to MHPSS during the war in Ukraine.
- The association of physical therapists and WHO launched a survey providing direct information from physiotherapy providers on Ukrainian refugees receiving care. Based on the survey results with 238 samples, approximately 42% of the physiotherapy practices (both public and private sector) in Poland reported treating Ukrainian refugees. The statistic will have a 90% confidence with a 275 sample.
- WHO, in collaboration with the Alliance for Public Health, prepared information notes for Ukrainian refugees in need of medical help with regard to hepatitis, opioid substitution therapy, tuberculosis (TB) and HIV testing. On 16 June WHO supported Poland with building the pilot project to ensure access to TB and multidrug-resistant TB for refugees from Ukraine.
- On 22 June WHO established a social listening system to capture feedback and concerns raised by Ukrainian refugees.
- EMT CC:
 - Currently the EMT CC in Poland is coordinating 15 EMTs from eight organizations operating across five geographical regions.
 - The EMT CC continues to provide technical assistance and advice regarding a possible request from Poland to deploy EMTs to establish and run a medevac hub in Rzeszów (ToR drafting, scope of practice, integration of Polish NGOs in the hub, facilitated mechanism for professional licensing in Poland for WHO-classified EMTs, legal requirement of having a Polish pharmacist integrated with the EMT).
 - The EMT CC with multilingual (Ukrainian/Polish/English) industrial design capacity from WHO is providing technical assistance and advice to parties in Norway and Ukraine involved in a project through Union Civil Protection Mechanism (UCPM) to provide Ukraine with multistretcher ambulance buses with flexible capacity (including ICU-level transport). This assistance is provided in close cooperation with WHO=, who is involved in medevac.
 - Between 4 May and 27 June approximately 88 daily minimum data set reports have been submitted to the EMT CC from six operating EMTs: NATAN Worldwide Disaster Relief, PMM & IMC, Hadassa Israel, Polish Center for International Aid (PCPM) and Humanity First. Initial analysis of the data includes statistics stemming from 1975 consultations, of whom 72% are non-pregnant women, 1% are pregnant women, and 27% are male patients.
 - The MoH signalled on 24 June that PCPM will be the designated Lead EMT, tasked with establishing and operating the medevac hub. Introductions will be made between WHO and PCPM to ensure continued close cooperation with the WHO EMT CC and to promote direct WHO participation in the communication and coordination unit that is proposed to be part of the hub.

Republic of Moldova

Situation update

- Between 24 February and 28 June an estimated 515 432 Ukrainian refugees entered the Republic of Moldova.
- To date, 87 refugee accommodation centres provide shelter to 3177 people (total capacity: 6015). Of these, 16% are pregnant and lactating women, 33% are people with disabilities, 0% are people with serious medical conditions, 5% are minors aged 0–2 years, 38% are children between 2 and 18 years old, and 9% are older people. As for the gender breakdown, 65% are women and 35% are men.
- Starting from 24 June the state of emergency in the Republic of Moldova related to the Ukraine conflict was extended for another 45 days.

WHO actions

- WHO launched two additional local immunization campaigns titled "Get vaccinated! Protect your future!" in the Cahul and Ungheni districts. The workshops discussed and approved the local decisions for implementation of the immunization plan to bridge the gaps and decrease the risk of importation of vaccine-preventable diseases. More than 300 heads of local institutions and departments of local authorities expressed their commitment to stepping up immunization efforts.
- Nutrition activities as part of the Ukrainian refugee response were established jointly by WHO and UNICEF, and involved agreeing upon a series of evaluations of nutrition components in the refugee accommodation centres and in the community.
- WHO has donated a new batch of medicines, medical supplies, and disinfectants to the refugee crisis management for Ukraine and the COVID-19 pandemic to the MoH. Specifically, 200 000 bottles of hand sanitizer, 770 kilograms of drugs and medical supplies were provided, alongside 900 ampoules of tocilizumab – an injectable drug used in the treatment of COVID-19 and rheumatoid arthritis – as well as a malaria treatment kits.
- EMT CC:
 - Currently the EMT CC is coordinating six EMTs from six organizations operating in four geographical regions in the Republic of Moldova.
 - The MoH accepted the offer from an EMT that provides dental care (Dentists without Limits Federation). The anticipated start date is 24 July.
 - EMTs provided 3903 health-care consultations for refugees at refugee accommodation centres.
 - As of 29 June, 150 cases of acute watery diarrhoea have been reported, of which 24 are among children under five years of age. In addition, two cases of tuberculous bronchitis were reported. All cases are currently being monitored by EMTs.
 - In June 5.7% (14) of mental health consultations identified acute mental health problems (AMHPs). The prevalence of AMHPs diagnosed in such consultations is increasing. This could be due to the following factors: MHPSS professionals among team members, increased reporting of such cases, increased demand due to the fact that basic needs are partially covered, but the overall situation in Ukraine is unstable, etc.
 - Approximately 19% of reported outpatient visits are related to infectious diseases.

Romania

Situation update

- Between 24 February and 28 June an estimated 691 412 Ukrainian refugees entered Romania. However, most are in transit to other countries, primarily to Hungary (28%) and Bulgaria (20%).
- As of 27 June, 19 patients were hospitalized in surgical and non-surgical wards. The overall daily bed occupancy rate between 28 April and 27 June did not exceed 1.8%.
- As of 27 June the highest bed occupancy was 5% in Arges county. However, in most counties the bed occupancy rate was closer to 0%.
- As of 26 June syndromic surveillance signals identified three cases of diphtheria, of which one has been hospitalized, 302 cases of acute diarrhoea, of which 111 have been hospitalized, and three cases of acute jaundice syndrome, of which two have been hospitalized.
- In total, 69 children from Ukraine have been vaccinated in Romania since 14 March. Vaccinations are available for all children from Ukraine who are in need of such services.

WHO actions

- WHO supported the launch and opening event of the integrated service centre in Bucharest (providing medical and MHPSS services) on 20 June. At the centre refugees can receive medical consultations, pregnancy check-ups, free prescriptions for chronic and acute diseases, free contraceptives, and preventive care such as routine vaccination. People who come to the service centre can receive useful information in Ukrainian and English. The medical team is assisted by two Ukrainian translators. WHO is preparing to open other similar microclinics in other counties hosting many displaced people.
- WHO developed and disseminated information materials for refugees, humanitarian workers and healthcare workers in Ukrainian, Romanian and English. The flyers, posters, Q&As, and social media tiles explain how to access health care, health rights, vaccination and antibiotics, and are available in digital format and print format The materials are co-produced with the MoH and approved by the National Health Insurance House and National Institute of Public Health.
- WHO completed a qualitative behavioural insights study on refugee health service needs and access. Preliminary results of the study were presented in several working groups, including during a meeting with a state councillor from the Prime Minister's Office on 21 June, the Health Working Group meeting on 22 June, the Interagency Refugee Forum on 24 June, the Mental Health Working Group on 24 June, and the Information Management Working Group on 24 June.
- WHO created a list of family doctors in various Romanian counties who are willing to provide services to people coming from Ukraine. The information will be uploaded to an online map and shared with service providers, volunteers, other stakeholders and the Ukrainian community.

Slovakia

Situation update

- Between 24 February and 28 June an estimated 548 210 Ukrainian refugees entered Slovakia.
- As of 22 June, 82 440 refugees have requested temporary protection in Slovakia and 190 people have applied for asylum.

WHO actions

• WHO continues to coordinate with the Government of Slovakia on the refugee response and work to improve access to health services for refugees from Ukraine.

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

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Corrigendum: on 4 July 2022, on the first page in the blue banner, "5.5 internally displaced" was corrected and replaced with "6.2 internally displaced".