

Emergency in Ukraine

10.6 million
BORDER
CROSSINGS



6.2 million

REFUGEES
RECORDED
ACROSS EUROPE



6.64 million

INTERNALLY
DISPLACED



12 867

CIVILIAN
CASUALTIES



5401

CIVILIAN
DEATHS

Key updates

- According to [WHO's Surveillance System for Attacks on Health Care](#), there have been 445 attacks on health care, resulting in 105 injuries and 86 deaths, reported between 24 February and 11 August. 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.
- On 28 July a team of 32 Polish health-care professionals arrived via the medical evacuation (medevac) train. Under an initiative organized by the Government of Poland, they assessed which patients required medical evacuation and transferred them to Poland.
- United Nations (UN) Secretary-General Antonio Guterres appointed Denise Brown of Canada as the United Nations Resident Coordinator in Ukraine as of 30 July. She will also serve as Humanitarian Coordinator.
- WHO has supported the response to monkeypox by providing test kits and training health-care professionals on their use.

1. SITUATION UPDATE

Fig. 1. Distribution of IDPs and refugees in Ukraine and in refugee-hosting countries as of 9 August 2022

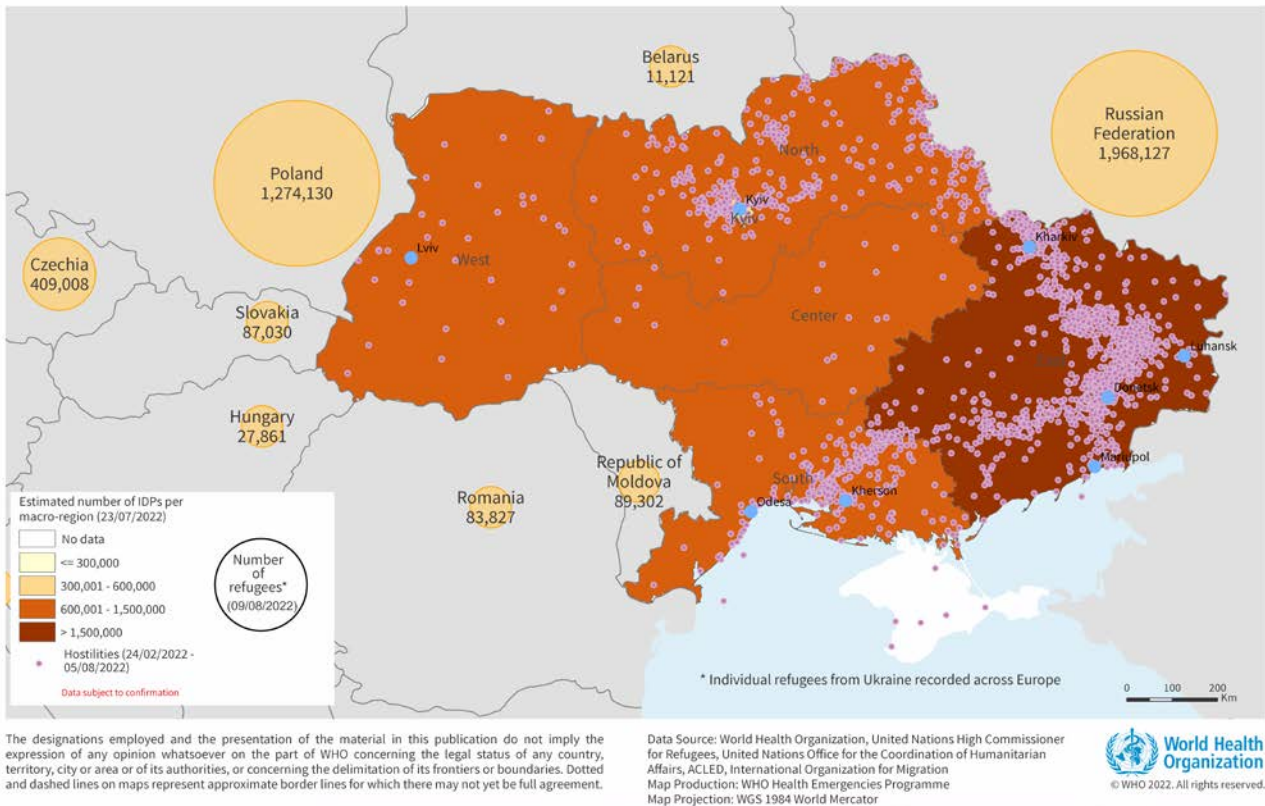


Table 1. Key humanitarian figures as of 9 August 2022

People affected	
Internally displaced persons (IDPs)	6.64 million (as of 23 July)
Border crossings	10.6 million
Refugees recorded across Europe	6.3 million
People entering Ukraine	4.5 million
Injuries among civilians	7466 (as of 7 August)
Deaths among civilians	5401 (as of 7 August)

1.1 Population displacement and refugees

Over 6.64 million people are internally displaced in Ukraine as of 23 July, according to the latest [survey](#) conducted by the International Organization for Migration (IOM). This represents 15% of Ukraine’s general population and is an increase from the 6.3 million recorded at the end of June.

Five and a half million people who were previously displaced have returned home. Most of them were displaced within Ukraine and 16% have returned from abroad.

According to government data compiled by the Office of the United Nations High Commissioner for Refugees (UNHCR), 10.6 million border crossings¹ from Ukraine took place between 24 February and 10 August. Just under half entered Poland (49%), while significant proportions entered the Russian Federation (18.5%), Hungary (10.7%), Romania (9%), Slovakia (6%) and the Republic of Moldova (5.3%).

1.2 Overall WHO response

The role of WHO is to coordinate the response to health emergencies, promote health and well-being, prevent disease and expand access to health care.

In support of the health sectors in Ukraine and refugee-hosting countries, WHO is working with key stakeholders, including:

- Global Outbreak Alert and Response Network (GOARN) to provide support for infectious disease outbreaks;
- Emergency Medical Teams (EMTs) to deliver health-care services;
- Health Cluster Partners to coordinate humanitarian health activities;
- Standby Partners to deploy emergency health-care personnel; and
- the governments of Ukraine and of refugee-hosting countries to provide support to improve access to health care and to ensure safe medevac of patients.

1.3 Funding

As of 9 August WHO has received US\$ 93.8 million (64%) against its total funding requirement of US\$ 147.5 million under its [appeal for the Ukraine crisis](#) from 17 donors.

WHO would like to thank [donors](#) who are supporting its response in Ukraine, including: *Canada, European Commission – Directorate-General for European Civil Protection and Humanitarian Aid Operations (DG ECHO) and Directorate-General for Neighbourhood and Enlargement Negotiations (DG NEAR), Germany, Ireland, Japan/Asia–Europe Foundation (ASEF), the King Salman Humanitarian Aid & Relief Centre (KSRelief), Kuwait, 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 for Humanitarian Assistance (BHA), WHO Foundation, and the Socialist Republic of Viet Nam* for their timely contributions.

¹ This does not equal the actual number of refugees.

2. HEALTH PRIORITIES AND WHO ACTIONS IN UKRAINE TO DATE

2.1 Access to health care in Ukraine

Access to health care continues to be severely impacted due to security concerns, restricted mobility, broken supply chains and mass displacement. Between 24 February and 10 August, 445 attacks on health care² were reported³, resulting in 105 injuries and 86 deaths, with one new attack reported in the past two weeks. These attacks deprive people of urgently needed care, endanger health-care providers, and undermine health systems.

The conflict has disrupted supply lines, limiting the movement of medicines and consumables between and across institutions, cities and regions. Cargo movement by air has stopped, many roads are blocked, trains and train stations are damaged, and as movement on roads continues to be risky, the supplies of goods have been delayed.

Through engagement with the Ministry of Health (MoH) of Ukraine, national health authorities, partners and donors, WHO has been able to provide affected 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.

2.2 Priority public health concerns

More detail on each of the priorities listed below can be found in previously published [situation reports](#), the [Public Health Situation Analysis](#) and the [Strategic Response Plan](#).

Conflict-related trauma and injuries	Emergency medical services, surgical departments and intensive care units have been overwhelmed with trauma patients. Access to health care has been limited and essential health services have been disrupted or are collapsing.
Maternal and newborn health	According to the United Nations Population Fund (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.
Management of chronic diseases and noncommunicable diseases (NCDs)	Noncommunicable diseases (NCDs) are the leading cause of morbidity and mortality in Ukraine, with the five major NCDs – cardiovascular disease, diabetes, cancer, chronic respiratory disease, and mental health conditions – accounting for 84% of all deaths. Disruptions in treatment for chronic cardiovascular and respiratory diseases increase morbidity and, most likely, mortality.
Risk of emergence and spread of infectious diseases	<p>Between 23 February and 7 August the overall number of beds available and beds occupied by patients with COVID-19 decreased by 47% and 93%, 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 (82%) oblasts.</p> <p>An average of 226–252 hospitalizations per day were reported in the last week. However, COVID-19 remains a substantial threat given the country's low vaccination rates.</p>

² Attacks on health care include those against health facilities, transport, personnel, patients, supplies and warehouses.

³ [Surveillance System for Attacks on Health Care \(SSA\)](#).

<p>Protection issues: risk of human trafficking and escalated risk of sexual and gender-based violence (SGBV)</p>	<p>Women and girls face heightened risks of gender-based violence (GBV) and abuse, including conflict-related sexual violence and rape, while those fleeing their homes are exposed to increased risks to their safety and well-being. National protection systems and mechanisms for women survivors of violence have been compromised.</p>
<p>Mental health and psychosocial support (MHPSS)</p>	<p>The affected population is considered at high risk for adverse mental health outcomes and there is an urgent need for continued mental health and psychosocial support services. Health-care workers face challenges of working over capacity due to understaffing, and are at increased risk of psychological distress, burnout and mental health issues. This comes against a backdrop of already responding to the COVID-19 pandemic, which has overstretched systems.</p>
<p>Food security and nutrition</p>	<p>The conflict is affecting food security within and outside Ukraine. In July, the World Food Programme (WFP) served 2.8 million beneficiaries. Approximately two thirds of beneficiaries received food assistance in the form of ready-to-eat foods and dry goods. Food distribution has been concentrated on the eastern part of Ukraine, where the conflict is the most intense. The remaining beneficiaries were IDPs, who received mainly cash assistance.</p>
<p>Technological hazards and health risks</p>	<p>Potential nuclear hazards</p> <p>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, the ongoing armed conflict puts nuclear installations at risk of accidental or deliberate damage and jeopardizes the security of radioactive sources.</p> <p>WHO has developed technical guidance and public communication materials on this subject, including materials in Ukrainian. Training courses and webinars focusing on medical and public response to radiation emergencies are also being delivered in collaboration with national partners in Ukraine.</p> <p>Chemical hazards</p> <p>The risks posed by industrial facilities or sites storing, transporting or producing toxic industrial chemicals remain, particularly to populations living near industrial facilities located close to the line of conflict. During the reporting period no new chemical events were reported. However, WHO continues to prepare health authorities, health responders and communities for such potential events.</p>

2.3 WHO and partner actions in Ukraine – recent updates

Leadership and coordination

- United Nations Secretary-General Antonio Guterres appointed Denise Brown of Canada as the United Nations Resident Coordinator in Ukraine as of 30 July. She will also serve as Humanitarian Coordinator.
- WHO has supported the response to monkeypox by providing test kits and training health-care professionals on their use.
- A team of physical rehabilitation experts travelled throughout Ukraine and shared their findings with the Government of Ukraine. This was part of WHO’s continued operational support in the area of burns, spinal cord injuries, prosthetics and other physical rehabilitation needs.

Medical evacuation of patients (medevac)

As of 9 August, 1000 patients requiring medevac (83% of the requests received from the European Commission) have been evacuated from Poland, Republic of Moldova, Slovakia, and Ukraine for medical

treatment in 18 other European countries via the European Union Civil Protection Mechanism. Among current requests, a further 5% are in transit. These evacuations are mainly due to chronic conditions and traumatic injuries.

Transportation of patients within Ukraine is provided by the national emergency services, while transportation across the border to other countries within the European Union is managed by international EMTs and coordinated by the CADUS team, a German nongovernmental organization (NGO) that provides EMT support.

On 28 July a team of 32 Polish health-care professionals arrived via the medevac train. Under an initiative organized by the Government of Poland, they assessed which patients required medical evacuation and transferred them across Poland.

Health information and operations

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

During the reporting period, WHO has supported the health response in Ukraine by providing, among other things:

- trainings on clinical laboratory diagnostics, chemical preparedness and response, and mass casualty management;
- support to coordinate and improve vaccination of IDPs;
- technical guidance and planning support for upcoming COVID-19 vaccinations; and
- a monkeypox information and awareness campaign.

Supplies and logistics

- As of 10 August WHO has delivered to Ukraine 990 metric tonnes of medical supplies, valued at US\$ 27 million.
- Over the past week, more than 18 metric tonnes of medical supplies, valued at US\$ 4.9 million, were delivered to warehouses in Kyiv and Lviv. WHO also delivered 44.4 metric tonnes of medical supplies, valued at US\$ 948 900 to medical facilities in 11 oblasts. These supplies included NCD kits, laboratory items, personal protective equipment, trauma and emergency surgery supplies, venturi masks, oxygen concentrators, laboratory items, medicines and other essential equipment for clinical care.
- Discussions with the MoH of Ukraine are ongoing to coordinate allocation of donated financial resources to support the national health system.
- WHO continues to support procurement of supplies from German funds, BHA, UHF, ASEF and DG ECHO.

Risk communication and community engagement (RCCE) and external communications

During the reporting period WHO has supported:

- the development of updated materials for chemical, biological, radiological and nuclear preparedness;
- online promotion of the [WHO report setting out its response in Ukraine to date](#).

Operational partnerships

Emergency Medical Teams

Since the start of the EMT initiative response in Ukraine, the EMT Coordination Cell (CC) has been integrated within the Trauma and Rehabilitation Working Group (TRWG) of the Health Cluster.

The EMT CC currently coordinates 23 EMTs across Ukraine. The priority activities of these EMTs are trauma care, rehabilitation (including burns and spinal cord injuries), mobile health, patient transfer and medevac, and training.

- EMTs continue to carry out daily medical consultations addressing diverse health conditions, including trauma, outpatient, NCDs and infectious diseases.
- **An EMT Coordination Unit** is being established as part of transitioning the current coordination structure of the EMT TRWG into the MoH. The transition process will go through EMT CC mentorship of locally recruited staff to guide them through EMT methodology and coordination processes.
- **A national EMT awareness workshop** is being planned for 6–9 September in agreement with and at the request of the MoH.
 - More than 30 participants will join across different roles and oblasts, with representatives from the EMT Coordination Unit and the newly recruited staff from the national EMT concept.
 - The workshop will focus on the principles of the EMT initiative and the minimum standards, adapting to the local context.
- **The national EMT concept** developed by WHO in partnership with the MoH/Centre for Disaster Medicine and the All-Ukrainian Resuscitation Council is now approved. It aims to:
 - Focus on national capacity buildingThe workshop will focus on the principles of the EMT initiative and the minimum standards, adapting to the local context.
 - ultimately establish 25 Type 1 Mobile Teams, within coordination structures at national and regional level; and
 - adapt all-hazards capabilities.

Standby Partnership deployments

From 2 March to 10 August, 17 experts were deployed to Ukraine, Hungary, Poland, and the WHO Regional Office for Europe. A further deployment has been confirmed to begin on 1 September.

They have provided expertise on:

- health information management
- Geographic Information System mapping
- risk communication and community engagement
- mental health and psychosocial support
- prevention of sexual exploitation and abuse
- sexual and reproductive health
- gender-based violence
- Health Cluster coordination

Health cluster

WHO is the lead agency of Health Cluster Ukraine. As of 3 August Health Cluster Ukraine has worked with 152 international and local Partners, with activities in 24 oblasts. Between 24 February and 3 August, Health Cluster Partners have reached over 4.6 million people in the provision of medical supplies and services. They are engaged in activities in 571 settlements in 24 oblasts and have provided support to over 160 health facilities across Ukraine. 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 240 requests. Additional information is available on Health Cluster Ukraine's [website](#).

During the reporting period Health Cluster Ukraine:

- published its [17th Health Cluster Bulletin](#) on 29 July;
- released the [July Update](#) of its **Public Health Situation Analysis (PHSA) for Ukraine**. Initially published on 3 March and updated on 29 April (ENG & UKR), the July update adds depth to the information presented in the previous versions, tracks changes in the situation, considers additional threats, and incorporates data from assessments; and launched the second round of data collection for its Rapid Health Needs Assessments with Partners on 3 August. It will gather information on health needs at household and community/collective centre levels over a period of three weeks. The information will be used to direct the response.

The Health Cluster has continued to map Health Cluster Partners' presence and activities across Ukraine through the 5Ws,⁴ with particular focus on areas covered by the subclusters. This work charts the continuously changing humanitarian response landscape.

On 8 August OCHA [launched a revision to its Flash Appeal](#) to run from March to December 2022. The appeal has identified 14.5 million people in need of support with a financial requirement of US\$ 310 million.



WHO recently provided the Ukraine Ministry of Health 20 all-terrain ambulances to help provide healthcare to all who need it. The ambulances are now being used throughout the country, including in the eastern oblasts where ambulances are desperately needed. © WHO / Anne Pellichero

⁴ 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 9 August an estimated 409,008 individual refugees from Ukraine⁵ were recorded in Czechia.

WHO actions

- A monkeypox information and awareness campaign was launched in Czech, Ukrainian and Russian and information materials are being distributed all over the country.

Hungary

Situation update

- Between 24 February and 9 August an estimated 27,862 individual refugees from Ukraine were recorded in Hungary. All of them have registered for temporary protection or similar national protection schemes.

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.

Poland

Situation update

- Between 24 February and 9 August an estimated 1,274,130 individual refugees from Ukraine were recorded in Poland.
- Poland has received permission from the European Commission to launch a cross-border e-prescription exchange service with other Member States. This new functionality will enable foreign patients to complete e-prescriptions in a Polish pharmacy, and Polish patients will be able to fill their e-prescriptions abroad.
- EMT initiative response
 - As per the Health Actor Registration Dashboard, the EMT CC is coordinating 17 Health Actors across five regions. Top services provided are focused on health promotion and MHPSS, while 11 teams are delivering direct clinical care.
 - As of 8 August reporting EMTs submitted 187 reports on medical activities and delivered 4730 outpatient consultations for the refugee population. A total of 16% of the health events reported relate to infectious diseases.

WHO actions

- The WHO RCCE team is working on adapting key informant interviews with health and social service providers for refugees from Ukraine in Poland. The research was previously completed in Romania and provided valuable findings about refugee health-care needs and access. As more refugees from Ukraine

⁵ Please note that the reduction in the reported numbers is due to a change in reporting to reflect the number of individual refugees from Ukraine recorded rather than the number of border crossings.

arrive and register in Poland, this study will help to design appropriate policies and interventions, taking into consideration current and emerging needs.

- Additional communications materials on viral hepatitis were adapted and translated into Polish and Ukrainian from the campaign developed by WHO to mark World Hepatitis Day on 26 July. The materials provide guidance on how to protect yourself from viral hepatitis and encourage people to test and seek treatment.
- The first batch of WHO's donation of drugs for the treatment of drug-resistant tuberculosis (12 items) was delivered to the warehouse on 28 July. Distribution of the drugs to medical facilities has also started.
- WHO started funding two of four Polish NGOs whose project activities are aimed at facilitating access to the health system and HIV prevention, care, and treatment for people living with HIV/AIDS and at-risk populations, with a focus on refugees arriving in Poland from Ukraine. The pilot initiatives will continue until 31 December 2022.
- On 28 July WHO launched a call for proposals for NGOs and organizations registered in Poland and working with Ukrainian refugees with disabilities.
- EMT CC Poland
 - On 28 July the WHO EMT CC coordinator joined the train medevac route.

Republic of Moldova

Situation update

- Between 24 February and 9 August an estimated 89,302 individual refugees from Ukraine were recorded in the Republic of Moldova.
- The state of emergency in the Republic of Moldova will be extended by 60 days starting from 8 August.
- To date, 68 refugee accommodation centres (RACs) are providing shelter to 3055 individuals (capacity: 5302).
- EMT initiative response
 - The WHO EMT CC is currently coordinating six EMTs on the ground, while 16 teams are on standby.
 - As of 8 August reporting EMTs submitted 516 reports on medical activities and delivered 5183 health-care consultations for refugees in the RACs.

WHO actions

- A survey on the coordination of the Inter-agency Refugee Health and Nutrition Technical Working Group meetings is ongoing.
- A national action plan was developed to integrate immunization in primary health care by the end of 2023. The plan aims to bridge immunization gaps taking into account refugee risk assessment. The plan was developed in coordination with national authorities, UNICEF and WHO.
- The rapid assessment of 100 primary health care facilities with regard to access and financial protection of Ukrainian refugees started with joint data collection visits by the joint team of WHO and other UN agencies. Results will be provided to the MoH to guide the development partners' support for primary health care services for refugees and the host population.
- A self-benchmarking training was held by WHO on 1–5 August. The Medicines and Medical Device Agency staff were trained on the principles and procedures of performing the benchmarking using the Global Benchmarking Tool, established a roadmap, and will define new actions for improvement.

Romania

Situation update

- Between 24 February and 8 August an estimated 83,827 individual refugees from Ukraine were recorded in Romania.

- In total, from 14 March to 7 August, 112 children from Ukraine were vaccinated in Romania against diphtheria, hepatitis, measles, mumps, and rubella. Vaccinations are available for all children from Ukraine who are in need of such services.
- Syndromic surveillance signals identified in refugee centres as of 8 August include one hospitalized case of diphtheria, 117 hospitalized with acute diarrhoea syndrome and 133 hospitalized with acute respiratory syndrome. As of 8 August, 26 patients were hospitalized in surgical and non-surgical wards.

WHO actions

- A joint WHO-UNHCR-UNICEF contingency and assessment mission regarding the upcoming winter was carried out in Botoșani county on 26–29 July. WHO is engaged in the contingency planning meetings, including supply chain management, with UN agencies. The main objectives are to identify opportunities to establish a new health clinic in Botoșani based on the WHO model of the Romexpo Integrated Services Centre. From 20 June to 1 August over 164 patients received care at the Romexpo Integrated Services Centre for primary health services, reproductive and sexual health services, psychological counselling and emotional support for children and adults.
- WHO conducted a field mission to Cluj-Napoca on 8–9 August to meet with the President of the Romanian Society of Obstetrics and Gynecology, to plan improved access to contraception and antenatal care for Ukrainian refugees:
 - In addition, WHO met with the President of the Professional Association of Family Doctors in Cluj county and two Russian-speaking family doctors caring for refugees to discuss barriers and remedies regarding access to primary health care services and information, education and communication needs.
 - WHO met with Cluj NGOs providing support for health-care access to refugees and visited the Cluj RAC set up at Hotel Granata.

Slovakia

Situation update

- Between 24 February and 9 August an estimated 87,030 individual refugees from Ukraine were recorded in Slovakia.
- As of 10 August, 88 982 refugees have registered for temporary protection in Slovakia.

WHO actions

- WHO supported the development of a proposal for an MHPSS strategy that was delivered to representatives of the Government of Slovakia (the Office of the Government Plenipotentiary for the Development of Civil Society) on behalf of the MHPSS Sub-Working Group on 26 July, to serve as programming for the National Integration Strategy.
- WHO continued to map personal stories and experiences of refugees with specific needs (in health- and mental health-related areas) trying to access support services, to spotlight challenges and opportunities for improvement in accessibility of services and support.
- WHO held an exchange with UNFPA (GBV Global Cluster Ukraine) and UNHCR focused on Gender-Based Violence in Emergencies (GBViE), discussing programming baselines and priorities, focus on referral pathways and GBViE response capacity building needs.



WHO is also working closely with the Ministry of Health, city authorities and partners to identify what support is needed most urgently and ensure that help is delivered. © WHO / Anne Pellichero

Resources

- [Response to the Ukraine Crisis: interim report, February to June 2022](#)
- [Ukraine crisis strategic response plan for June–December 2022](#)
- [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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