

WHO emergency response in Ukraine and refugee- receiving countries

Annual report 2023



World Health
Organization

European Region

© World Health Organization 2024

Some rights reserved. This work is available under the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 IGO licence (CC BY-NC-SA 3.0 IGO; <https://creativecommons.org/licenses/by-nc-sa/3.0/igo>).

Under the terms of this licence, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: “This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition: WHO emergency response in Ukraine and refugee-receiving countries: annual report 2023. Copenhagen: WHO Regional Office for Europe; 2024”.

Any mediation relating to disputes arising under the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization (<http://www.wipo.int/amc/en/mediation/rules/>).

Suggested citation. WHO emergency response in Ukraine and refugee-receiving countries. Annual Report 2023. Copenhagen: WHO Regional Office for Europe; 2024. Licence: CC BY-NC-SA 3.0 IGO.

Cataloguing-in-Publication (CIP) data. CIP data are available at <http://apps.who.int/iris>.

Sales, rights and licensing. To purchase WHO publications, see <http://apps.who.int/bookorders>. To submit requests for commercial use and queries on rights and licensing, see <https://www.who.int/about/policies/publishing/copyright>

Third-party materials. If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

General disclaimers. 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 frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall WHO be liable for damages arising from its use.

Cover photo

© WHO / Christopher Black

Rostyslav, 6, works with a physical therapist at Okhmatdyt Children's Hospital in Kyiv, Ukraine. He and his mother moved from Dnipro to Kyiv in order to receive health support when Rostyslav was diagnosed with cancer. With rehabilitation exercises and a wheelchair provided by WHO he has started to move and is becoming more active, although tires easily. Regular visits to the team at Okhmatdyt have made a difference in his recovery.

Contents

Foreword.....	IV
Abbreviations.....	VI
● Response in Ukraine.....	1
● Response in refugee-receiving and hosting countries.....	11
Bulgaria.....	12
Czechia.....	15
Poland.....	18
Republic of Moldova.....	23
Romania.....	27
Slovakia.....	30
Hungary.....	33
Estonia, Latvia and Lithuania.....	33
● Ensuring an effective and safe response.....	34
● Funding overview and partnerships.....	37

Foreword

As I write this message, Ukraine has been in a state of war for over 2 years, causing untold suffering for the Ukrainian population, severely impacting the country's health system.

Even prior to February 2022, Ukraine had worked to build a strong health-care system, staffed by highly trained professionals. More than 2 years of sustained attacks have severely tested the health system's capacity, forcing thousands to forgo health services or delay their treatment. At WHO, we have repeatedly called for the protection of health care, as health must never be a target – a key principle of international humanitarian law.

However, attacks are just one side of the story. Interruptions and delays to the distribution of equipment and medication affect millions of people. An emergency of this scale has not happened on European soil since the United Nations came into existence in the wake of the Second World War.

Despite these previously unimaginable challenges, the health system has proved remarkably resilient – continuing to function, providing vital emergency support. WHO has been reinforcing the health system across the country whilst also supporting refugee-receiving countries to offer care to millions of Ukrainians.

Working closely with the Ukrainian Ministry of Health and over 300 partners on the ground, WHO's support seeks to maintain health care and ensure that those in difficult-to-access or remote areas can continue to receive the services they need. In areas where the government has regained control, WHO and partners are ensuring delivery of essential medicines, diagnostics and equipment, establishing essential health services to ensure access to care and investing in early recovery.

In 2023 alone, we supported over 800 health-care facilities in Ukraine with medical supplies and equipment and reached over 7 million people through various interventions. Over 2200 first responders have

been trained in preparing for and responding to public health events involving toxic chemicals. Through risk communication and community engagement activities we reached 1.8 million people with health information, helping them make informed decisions to mitigate the effects of the conflict on their health.

But the needs go far beyond Ukraine's frontiers. Currently, almost 6.5 million refugees from Ukraine are recorded globally, the vast majority within Europe. And despite the warm welcome extended to refugees, many of Ukraine's neighbours are now dealing with increased domestic challenges, affecting their ability to respond to refugees' needs. At WHO, we recognise the enormous generosity of host countries' citizens and governments, and we continue to offer our support to these countries – who are also WHO European Region Member States – in their response.

We have distributed over US\$ 15 million of medical goods and supplies to 540 primary and secondary health-care facilities and 44 public health institutions in refugee-receiving countries.

We have also provided skills training to almost 20 000 health providers as part of this effort. For those struggling with mental health, we are scaling up mental health interventions and supporting the most vulnerable, together with partners.

Our work at this level would have been impossible without the support of our partners and your continued commitment to meeting the health needs of the people of Ukraine.

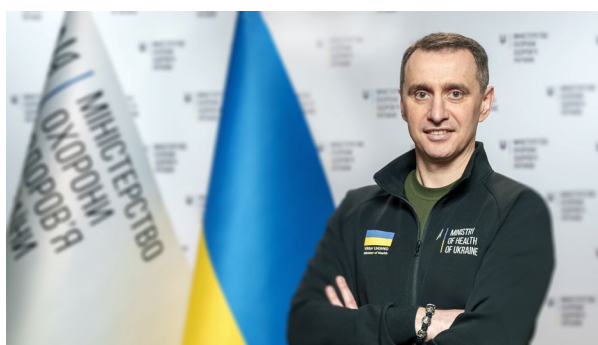
It is your support that makes it possible for WHO to fulfil its mission; to work where the needs are greatest and strengthen the foundation on which we can collectively help build back and strengthen the Ukrainian health system.

Hans Henri P. Kluge
Regional Director
WHO Regional Office for Europe



© WHO / Nyka Alexander

Viktor Liashko, Minister of Health, Ukraine, and Dr Hans Henri P. Kluge, WHO Regional Director for Europe, on the occasion of Dr Kluge's visit to Ukraine, 16 February 2023.



“The health sector is confronted with substantial challenges, particularly impacting the most vulnerable communities. We express profound gratitude to our partners, notably WHO, for their pivotal role and steadfast dedication to maintaining essential health services in the face of adversity.”

VIKTOR LIASHKO

Minister of Health of Ukraine



“The war on Ukraine has left millions of people in dire need of humanitarian assistance. We thank our partners, especially WHO, for its leading role and commitment to ensuring life-saving medical supplies and services remain available for those in need. The right to health care must always be protected especially in times of war. Health must remain a priority, and health systems must remain functional to provide essential medical services the people of Ukraine.”

DENISE BROWN

UN Resident Coordinator in Ukraine

Abbreviations

BRC	Bulgarian Red Cross	PFA	psychological first aid
CBRN	chemical, biological, radiological and nuclear	PHC	primary health care
ELISA	enzyme-linked immunosorbent assay	PPE	personal protective equipment
EMS	emergency medical services	PRSEAH	preventing and responding to sexual exploitation, abuse and harassment
GBV	gender-based violence	PSEA	protection from sexual exploitation and abuse
ICU	intensive care unit	RCCE	risk communication and community engagement
IHR	International Health Regulations	SRH	sexual and reproductive health
IPC	infection prevention and control	TB	tuberculosis
MDR-TB	multidrug-resistant tuberculosis	UN	United Nations
MHPSS	mental health and psychosocial support	UNFPA	United Nations Population Fund
MSNA	multi-sectoral needs assessment	UNHCR	United Nations High Commissioner for Refugees
NCD	noncommunicable disease	UNICEF	United Nations Children's Fund
NGO	nongovernmental organization		
PCR	polymerase chain reaction		
PFA	psychological first aid		

Response in Ukraine

The war in Ukraine continued to destroy lives and have a devastating effect on the country's health-care system. As of December 2023, more than 28 000 civilians had been killed or injured, while the WHO had verified 1422 attacks on health-care facilities.^{1,2} The injured population in need of trauma/surgical care continued to increase pressure on health facilities that are already stretched in providing essential services, especially in areas close to the frontlines. Nearly 4 million people were internally displaced across Ukraine, unable to return home because of safety concerns.³

The resilience of the Ukraine's health system has enabled continued access to healthcare despite the crisis. However, WHO needs assessments show that however, displaced communities face more challenges accessing services than people who have

remained in their home communities. At the same time households in areas that experience active hostilities show increasing primary health care (PHC) needs but with lower access to family doctors.

Overall, two-thirds of people seeking health care in Ukraine experienced problems primarily related to cost, time and transportation constraints. Half of the PHC facilities in Ukraine faced staff absences because of the war. But despite the conditions, facilities have adapted to the challenges and continued to provide essential health services, according to WHO's Continuity of Essential Health Services Facility assessment.⁴ WHO and health-sector partners continued to support the Ministry of Health to ensure continuity of services and reinforce the resilience of the health-care system.

Highlights


323

Operational health partnerships engaged in Ukraine


7 million

People reached with health interventions in Ukraine


2243

Emergency medical services (EMS) first responders and clinicians trained in chemical preparedness and response


3900

Health-care workers trained to ensure continuity and quality of mental health and psychosocial support services


1823

Health evacuations successfully completed by the Ministry of Health with WHO's technical support


2000 metric tonnes

Supplies distributed in Ukraine

1. Ukraine: protection of civilians in armed conflict. November 2023 update. Geneva: Office of the United Nations High Commissioner for Human Rights; 2023 (https://ukraine.un.org/sites/default/files/2023-12/Ukraine%20-%20protection%20of%20civilians%20in%20armed%20conflict%20%28November%202023%29_ENG.pdf, accessed 11 Jan 2024).
2. Emergency situation report: WHO Country Office in Ukraine. Copenhagen: WHO European Region; 2023 (WHO-EURO-2023-5319-45083-72745-eng.pdf, accessed 11 Jan 2024).
3. Ukraine: summary of the humanitarian needs and response plan and the regional refugee response plan. Geneva: United Nations Office for the Coordination of Humanitarian Affairs; 2024 (<https://www.unocha.org/publications/report/ukraine/ukraine-summary-humanitarian-needs-and-response-plan-and-regional-refugee-response-plan-january-2024>, accessed 20 February 2024).
4. New WHO assessment reveals resilience of Ukraine's primary health-care system amid the war. Copenhagen: WHO European Region; 2023 (<https://www.who.int/europe/news/item/12-10-2023-new-who-assessment-reveals-resilience-of-ukraine-s-primary-health-care-system-amid-the-war>, accessed 20 February 2024).

WHO and partner achievements

1

Specific objective 1

Strengthen trauma and emergency medical services, including control and prevention of infectious outbreaks in clinical settings

WHO AND PARTNER ACHIEVEMENTS

Emergency and critical health care

WHO supported more than 10 rapid response teams with essential medicine, equipment, and training to provide quality emergency care and continued to build the capacity of the national emergency medical services across all regions. In 2023, WHO supplied trauma and emergency equipment to facilities that served more than 372 000 people with trauma and emergency needs.

WHO provided technical support to the Ministry of Health to integrate EMS into the European Commission medevac (medical evacuation) system,

through which 1823 patients were successfully evacuated. The Ministry of Health has coordinated the medical evacuation of 3599 patients with technical support from WHO since the beginning of the crisis.

WHO trained 180 health-care providers in 10 International Trauma Life Support – Advanced Provider training sessions, increasing the availability of much-needed advanced life-support skills for the emergency response. Additionally, 50 instructors from 25 regional simulation centres were given specialized training, creating a pool of capable instructors in emergency care.



© WHO / Christopher Black

Emanuele Bruni, WHO Incident Manager, Ukraine Response, uses a CPR training device at the training centre for medical students in Poltava Regional Clinical Hospital, 17 February 2023.

Additionally, 270 health-care providers from hospitals in Zaporizhzhia, Donetsk, Volyn and Kharkiv oblasts were trained in mass casualty management, significantly enhancing the capabilities of national emergency medical teams.

In 10 high-risk oblasts near conflict zones, WHO provided specialized training in hospital readiness, mass casualty management, trauma care and secure patient transfer to enhance emergency medical care capabilities. Examples of training provided include:

- mass casualty management and trauma life support
- European Resuscitation Council's general instructor course
- hostile environment surgical training
- critical patient management
- advanced trauma life support
- trainers in advanced life support
- trainers in critical care transfers.

WHO also provided technical advice on transforming underground shelters into hospitals to ensure uninterrupted services, and developed principal guidelines and technical tools to guide operations in underground facilities.

Technological hazards, including chemical, biological, radiological and nuclear (CBRN) emergency preparedness

WHO partnered with Ukraine's EMS and the Centre for Disaster Medicine to enhance preparedness for CBRN emergencies, leading efforts in capacity-building for mass-casualty management, pre-hospital care and evacuation protocols for

contaminated areas. Over 35 training sessions were conducted, reaching more than 2000 health professionals across critical regions in Ukraine.

WHO provided essential equipment to manage technological hazards and conducted public awareness campaigns on nuclear and chemical safety, reaching more than 1.1 million people throughout 2022 and 2023.

Health supplies

WHO operated a supply distribution system with hubs in Dnipro, Kyiv, Odessa and Kharkiv through which 2000 metric tonnes of medical supplies valued at USD\$ 84 million were distributed to 807 health facilities across Ukraine's 24 oblasts, enabling continuity in the delivery of and access to health services. WHO worked through an extensive network of partners and interagency convoys to distribute medical supplies to the most affected populations.

Among other items, WHO distributed the following:

- trauma and emergency surgery kits to 236 hospitals and interagency emergency health kits to 154 health facilities;
- 88 ambulances, 570 patient monitors, 124 defibrillators and other intensive care unit (ICU) equipment, enhancing emergency response capacity in various health facilities;
- 269 diesel generators to meet the energy needs of health facilities;
- 34 cryogenic cylinders and 1050 regular oxygen cylinders with 200 country-specific adapters to hospitals in conflict-affected areas, increasing oxygen flow and storage capacity;
- 29 steam sterilizers and infection prevention



"The war in Ukraine has had a devastating effect on the lives and safety of civilians. We continue to work closely with WHO on surveillance and coordination to rapidly respond to the health emergency triggered by the conflict and to avert any health-care crisis. We are reminded again that in times of war, we must work together as one, to continue to deliver life-saving humanitarian assistance and ensure health services remain available."

EMILY DAKIN

USAID/BHA Response Director for Ukraine and Director of the Office of Middle East, North Africa, and Europe

- and control (IPC) equipment;
- 25 000 doses of rabies vaccine, rabies immunoglobulin, hepatitis A vaccine, tetanus antitoxin, diphtheria antitoxin and botulism antitoxin; and
- laboratory equipment, reagents, consumables and laboratory furniture to all Oblast Centres for Disease Control and Prevention, strengthening public health laboratory capacity to detect disease outbreaks.

Based on WHO monitoring and average estimates of health facility service utilization, medical supplies and equipment contributed to the Ukrainian health system in 2023 are estimated to have enabled various health interventions for 7 million people in Ukraine.

Disability and rehabilitation

WHO supported the Rivne Spinal Cord Injuries Centre to raise capacity from 50 to 100 beds and set up additional units for the medical care and treatment of people with spinal cord injuries and traumatic brain injuries.

WHO led the training and capacity-building of local rehabilitation personnel in the Rivne Spinal Cord Injuries Centre, with a vision of the Centre becoming a national referral hub for patients with spinal cord injuries and traumatic brain injuries.

WHO equipped 40 health-care facilities with cabinets of assistive technologies to support the provision of assistive products for individuals with rehabilitation needs upon discharge from hospital rehabilitation departments.



© WHO
WHO Ukraine team delivering essential supplies to frontline regions.

2

Specific objective 2

Enable access to PHC services and continuity of care for people suffering from infectious and chronic noncommunicable diseases in conflict-affected areas, at risk of or impacted by service disruptions

WHO AND PARTNER ACHIEVEMENTS

Continuity of essential services including care for chronic noncommunicable (NCDs)

WHO continued to support the delivery of essential services, especially in frontline and remote areas. This support involved the delivery of medical supplies and equipment to recently liberated regions, the installation of oxygen systems in hospitals, and the provision of alternative heating solutions to sustain needed energy supplies for health-care services.

WHO established seven prefabricated health-care facilities (using modular prefabricated structures) in areas where facilities had been damaged by the Kakhovka dam collapse. The facilities provided essential health-care services to 34 000 people every month.

WHO worked with the Academy of Family Medicine of Ukraine to operate mobile health units primarily focused on managing chronic conditions. The mobile health units conducted 52 field visits in Kherson and providing essential health-care services through 1273 on-site PHC consultations. WHO equipped the Academy of Family Medicine with essential medical kits to reach 20 000 people.

Overall, WHO supported 131 mobile teams in nine oblasts across 260 locations, focusing on NCD prevention and management, providing 40 718 consultations.



DAN JØRGENSEN

Minister for
Development
Cooperation and
Minister for Global
Climate Policy, Denmark

“The Russian Federation’s war in Ukraine has left millions of Ukrainians in dire need of humanitarian assistance. Denmark has been working with WHO since the beginning of the war to alleviate the suffering. Thanks to WHO, life-saving medical services remain available for those in need including people living with non-communicable diseases, such as cancer and diabetes. Denmark remains unwavering in our support for the people of Ukraine.”



© WHO

WHO field officers visit an immunization centre in the Rivne oblast in Ukraine. WHO is supporting the Ministry of Health in rolling out vaccination as well as ensuring children, adolescents and adults receive any vaccines they may have missed.

Mental health and psychosocial support

WHO provided technical support and coordination of 300 partners through the Mental Health and Psychosocial Support (MHPSS) Technical Working Group to ensure efficient MHPSS responses and adherence to good practices.

WHO supported the scale-up of mental health services in PHC and specialist services; more than 93 000 people received mental health services from primary care doctors, and up to 5000 people with severe mental health conditions received mental health care for their recovery.

Through the mhGAP initiative, 4200 PHC workers were equipped with skills to provide MHPSS services, scaling capacity to identify and manage a range of mental health conditions, especially in the growing target group of new mothers, older people and, increasingly, children and adolescents.

WHO strengthened the community mental health team service model, with 84 teams providing community-based care to people with severe mental disorders as an alternative to hospital-based treatments.

More than 240 trainers were trained in the Self-Help Plus stress management course to enable large-scale cascade training of facilitators, who assist adults experiencing adversities in managing their stress.

Enhancing skills and capacity for infectious disease responses

WHO equipped more than 163 facilities with laboratory equipment, reagents, consumables and personal protective equipment (PPE) to strengthen diagnostics capacities. WHO's technical support

included backstopping in sequencing, polymerase chain reaction (PCR) testing, quality and laboratory management, calibrations, repairs, maintenance of laboratory equipment and certification of biosafety cabinets.

In response to the Kakhovka dam destruction, WHO procured and delivered reagents and consumables for rapid water testing to increase the capability of testing potable and surface waters. WHO also procured and delivered cholera laboratory kits to prioritized oblasts to strengthen response readiness. WHO delivered a complete package of laboratory equipment to the virology laboratories of two OCDCPs, in Lviv and Rivne, which are historical areas of polio outbreaks and poliovirus circulation.

WHO conducted 130 capacity assessments of public health and hospital clinical laboratories, collecting valuable data on testing capacity, staffing, available equipment and reagents, quality management, biosafety and biosecurity, and the nuanced needs of these establishments.

Public health workers in Odesa, Kherson, Mykolaiv and Zaporizhzhia oblasts were supported in emergency management following the collapse of the Kakhovka dam. This included support to enhance surveillance, management of potential patient pathways, supply management, diagnostics and screening, surge deployments and risk communication.

Training health workers to deliver quality health services

WHO trained more than 2000 health-care professionals in IPC requirements and core components, significantly enhancing their capabilities and nurturing a culture of safety.



“These times of war have deeply affected the Ukrainian people and will have a devastating and lasting effect on their mental health. The right to health care must always be protected, and we support our partners, including the WHO, to ensure that mental health services are available to Ukrainian communities suffering the consequences of this war.”

CATHERINE VAUTRIN

Minister of Labour, Health and Solidarity of France

WHO trained regional coordinators from the Centre for Disease Control and Prevention of the Ministry of Health and medical personnel from PHC facilities in the implementation of measles-mumps-rubella catch-up vaccination among children >2 years and supported the cascading of the training to 1518 medical workers in PHC.

WHO supported the delivery of 25 in-person training sessions on anaphylaxis diagnosis and first aid for 350 newly enrolled medical workers. WHO also prepared, printed and distributed over 70 000 handouts and 10 000 posters on the best practices of vaccine administration and tips for vaccinated patients, covering safe vaccine administration and response to anaphylaxis.

WHO supported the Ministry of Health and its Public Health Centre to prepare and conduct hepatitis A

vaccination training in response to the outbreak in the Vinnytska region, reaching 300 public health specialists and medical workers.

More than 45 face-to-face laboratory-based training sessions in 25 laboratories, in public health and hospital clinical setting, with in excess of 900 participants were facilitated. Further, more than 2500 laboratory specialists expanded their knowledge on diverse laboratory-related subjects through 17 webinars conducted by WHO.

In collaboration with the Ministry of Health and the Ukrainian Foundation for Public Health, a charitable organization, WHO conducted training for health-care providers on providing a basic package of services to survivors of gender-based violence (GBV).



© WHO / Christopher Black
A laboratory technician at work in the diagnostic laboratory at the Dnipropetrovsk Regional Clinical Hospital on 27 July 2023.

3

Specific objective 3

Lead effective coordination of humanitarian interventions, assessments and information management in public health

WHO AND PARTNER ACHIEVEMENTS

Health information

WHO scaled up the Health Resources and Services Availability Monitoring System (HeRAMS) from 2333 health service delivery units in 2022 to over 9000 by October 2023, generating information on service availability across the nation, including in conflict-impacted areas, to guide real-time, data-driven health-care responses. Two comprehensive HeRAMS reports were published in 2023.^{5,6} The data quality check through in-person verification was piloted in early 2023 with 70 health facilities along the frontline and scaled-up to the all-country 12-months verification project in September 2023.

Comprehensive health needs assessments were conducted: two representative assessments,^{7,8} two rapid assessments and four frontline assessments generating critical information for designing targeted health interventions.

WHO supported the expansion of sentinel sites for the monitoring of acute respiratory infections, including influenza, enabling the integration of high-quality data into the enhanced surveillance system.

WHO supported the Ukrainian Public Health Centre in deploying Epidemiologic Intelligence from Open Sources immediately after the Kakhovka dam explosion for early detection, verification, and assessment of public health risks and threats.

Through a nationwide syndromic surveillance training programme supported by WHO, six trainers were trained who in turn trained 48 regional public health specialists, bolstering the widespread understanding and application of advanced surveillance systems.

Health Cluster

WHO coordinated the Health Cluster with 323 partners (national and international nongovernmental organizations (NGOs), UN agencies and civil society organizations) in a partnership that ensured humanitarian health assistance to the conflict-affected population.

The Health Cluster supported local health authorities to coordinate health actors in delivering health-care services; 113 partners reported reaching 7.6 million people and supported 1364 health facilities in 4231



“We acknowledge the instrumental role of WHO in rapidly addressing the health crisis in Ukraine. Their vital contributions have bolstered emergency response efforts and ensured access to essential health-care services during this challenging period. The European Union remains committed to safeguarding the fundamental right to health, particularly in conflict settings, and expresses gratitude to WHO for their support.”

CLAUDIA AMARAL

Head of EU Humanitarian Aid in Ukraine (European Commission’s Directorate-General for European Civil Protection and Humanitarian Aid Operations)

5. eRAMS Ukraine Status Update Report May–October 2023 (<https://www.who.int/publications/m/item/herams-ukraine-status-update-report-may-to-october-2023-en>).
6. HeRAMS Ukraine verification snapshot: September–December 2023 (<https://www.who.int/publications/m/item/herams-ukraine-verification-snapshot-september-to-december-2023>).
7. Health needs assessment of the adult population in Ukraine : survey report report April 2023 (<https://www.who.int/europe/publications/i/item/WHO-EURO-2023-6904-46670-70096>).
8. Health needs assessment of the adult population in Ukraine : survey report report October 2023 (<https://www.who.int/europe/publications/i/item/WHO-EURO-2024-6904-46670-73154>).

towns and villages across 24 oblasts. Seven Technical Working Groups of the Health Cluster provided technical guidance and oversight. Setting up a task team for Cash and Voucher Assistance for Health was a significant stride towards implementing cash for health interventions that would address financial barriers to health care.

The Health Cluster provided timely and reliable information during humanitarian response operations through monthly presence maps, dashboards, rapid standardized assessment tools

and Health Cluster bulletins, with two public health situation analysis updates in May and December 2023 to inform strategic decision-making.

An online dashboard was launched, enabling partners access to assessments and resources on the Ukraine health response in the Health Cluster's database and providing health context information ahead of the humanitarian needs and response plan for 2024. The health requests planning and response platform supported 396 partner requests for medicines and supplies.

Delivering a people-centred and comprehensive response

WHO is committed to supporting the Ministry of Health in Ukraine in tackling the humanitarian crisis and its severe impact on the health-care system. Wars destroy health-care infrastructure, cause medical supply shortages, damage health-care facilities, and injure and displace medical personnel. Comprehensive responses are required to minimize disruption of services, and mortality and morbidity.

WHO's operation in Ukraine is managed through the WHO country office in Kyiv and strategic hubs in Dnipro, Odessa and Kharkiv where it works with local partners to address health needs under fragile conditions.

Dnipro

Set up in April 2022, the hub focuses on health-care needs in south-eastern Ukraine, home to about 9 million people, including over 500 000 displaced people. The hub also supports the Donetsk and Zaporizhzhia regions, which have been heavily affected by the fighting. Through this hub, WHO has been central in delivering critical support to public health authorities and key hospitals, ensuring sustained medical assistance.

WHO's supplies to field locations are dispatched in convoys from all strategic hubs. Out of the 100 United Nations (UN) convoys in 2023, 85 assisted in distributing essential medical supplies.

Odesa

Active since October 2022, the hub has focused on supporting displaced persons and rebuilding medical infrastructure in the Odesa, Mykolaiv and Kherson regions. Through this hub, WHO has distributed medical supplies, trained laboratory personnel and established modular bases for emergency medical service teams.

Kharkiv

Moved from Poltava to Kharkiv in line with UN strategy in 2023, the hub serves a region with up to 10 million people, including over 800 000 displaced people. Through this hub, WHO has focused on providing care and rehabilitation for individuals injured by bombardments and shelling. WHO's activities also include repairing damaged health facilities and enhancing local capacity in emergency surgery, traumatology and burn treatment; overall, ensuring access to primary and specialized health care.



“Health is a fundamental human right, and WHO has been a critical partner in safeguarding and prioritizing health care throughout the war. The toll has been heavy on the people of Ukraine, and Norway will continue to provide support to health-care services in Ukraine.”

BÅRD VEGAR SOLHJELL

Director General of Norad, the Norwegian agency for development cooperation

Specific objective 4

Galvanize emergency recovery and resilience of public health systems through priority clinical, health-care and preparedness activities

WHO AND PARTNER ACHIEVEMENTS

WHO's assessment of the continuity of essential health services during the war in Ukraine revealed the resilience of PHC and adaptations to overcome challenges and continue health-service delivery. WHO is committed to supporting Ukraine in addressing immediate health challenges and strengthening the resilience and recovery of public health systems, especially in conflict and crisis-hit areas.

Infrastructure support

Through collaborations with TechnE1 and the Politecnico di Torino, WHO redesigned and upgraded health facilities to be environmentally resilient, setting new benchmarks for infrastructure in crisis-affected areas.

WHO facilitated the all-Ukrainian conference on advancing ICU treatments that allowed 65 people from 24 oblasts in Ukraine and international experts

to exchange experiences and ideas on enhancing ICU care quality and standards in Ukraine.

The architectural design of the Vinnytsya rehabilitation centre and specialized facilities for burn injuries and rehabilitation in Rivne was supported by WHO. The facilities are providing crisis-related interventions and will continue to offer critical health and rehabilitation services as Ukraine's health-care system recovers.

The National Cancer Institute and Chernivtsi Emergency Hospital was supported with three steam sterilizers, three washer-disinfector machines and water treatment systems to reduce surgical site infections. The National Cancer Institute's central sterile services unit will serve as a national training centre for reprocessing medical devices, addressing a long-term need in IPC.



© WHO / Christopher Black

WHO representatives (left) and the German ambassador to Ukraine (right) hand over ambulances to the Ukraine Minister of Health (centre) in December 2023.

Response in refugee-receiving and hosting countries

Highlights



345 483

People directly supported with health care, language, administrative or financial support to access health-care services in refugee host countries



19 240

People were trained to provide health services to refugees and host populations



US\$ 15 290 526

Medical goods and supplies worth more than US\$ 15 million were distributed to **540 primary and secondary health-care facilities and 44 public health institutions**, expanding capacity to meet increased health-care demands with quality and ensure continuity of care for refugees and host populations



18

Studies conducted across countries generating critical information for evidence-based decision-making and planning relevant interventions



“Two years have passed since the beginning of the war in Ukraine. From the very beginning, the people of Poland started to help those fleeing from the Russian Federation’s full-scale invasion of Ukraine. Today, the Ministry of Health of Poland, together with partners from other countries and international organizations, continues to help and assist all refugees. Over the last two extremely hard years, we have cooperated closely with our partners – internal and international, also from the Ukrainian side – to support the health services of Ukraine and help all patients to receive medical treatment in Poland and in other EU countries. Together, we created an efficient system of medical evacuation, and our Medevac Hub in Jasionka receives patients from Ukraine twice a week, providing them with the medical assistance they need. Poland is still willing to provide refugees with continuous support and meet their special needs, especially in the field of mental health, addressing also issues connected to war-related trauma and promoting vaccinations. The topics related to migration and refugees discussed in international organizations’ forums will certainly remain crucial to our agenda. Ukraine will not stand alone.”

IZABELA LESZCZYŃSKA

Minister of Health of the Republic of Poland

Bulgaria

At the end of December 2023, about 174 000 Ukrainian refugees had applied for temporary protection, with an estimated 51 000 refugees remaining in Bulgaria. The Bulgarian Government supports Ukrainian refugees with temporary protection to access social services, including health-care services, in the same way as Bulgarian citizens. Despite this support, refugees still face barriers in accessing health care, including high out-of-pocket co-payments and high financial costs in seeking over-the-counter medications and medical devices. Throughout all refugee response programmes, WHO has worked closely with the Bulgarian Ministry of Health, other government departments, UN partner agencies and nongovernmental agencies to strengthen the whole-of-government approach to planning for and providing health services to refugees.

WHO AND PARTNER ACHIEVEMENTS

Specific objective 1: Health leadership and governance mechanisms are streamlined and reinforced

WHO continued to lead the MHPSS Technical Working Group, providing leadership and coordination on MHPSS activities. The Technical Working Group trained the multi-sectoral needs assessment (MSNA) team of the United Nations High Commissioner for Refugees (UNHCR) on how to refer refugees to MHPSS care if a need was identified during the data collection for the 2023 MSNA.

To support health agencies to respond to the influx of refugees, WHO led a civil-military health collaboration on health security, engaging 40 medical and logistical professionals from the Ministry of Health, Ministry of

Highlights



16 000

People supported in accessing health-care services



583

MPHSS consultations provided to refugees



4672

People trained to provide health services to refugees and host populations



US\$ 215 000

Value of supplies and equipment distributed to health facilities

Defence and WHO, and providing training on mapping cross-sectoral civil-military capacities for strengthening health emergency preparedness and response.

Specific objective 2: Financial barriers to health-care access for refugees are reduced or removed

WHO supported partners AstraForum and the Bulgarian Red Cross (BRC) to cover co-payments or costs of life-saving medical treatments (such



“It is truly regrettable that Ukrainian people continue suffering from the consequences of the ongoing war. Our thoughts are always with them. Through our strong partnership with WHO, and financial support by Japan for WHO emergency response to address Coronavirus Disease (COVID-19) and other infectious diseases in Ukraine and neighbouring countries, we aim to ensure that health needs such as preventing the spread of infectious diseases in those countries are addressed. We are committed to continuing the delivery of humanitarian assistance to the most vulnerable people on the ground.”

TORU MORIKAWA

Executive Director, Asia-Europe Foundation

as specific medications, surgeries or links to oncological specialists, and medical equipment such as wheelchairs, eyeglasses and walking frames) for Ukrainian refugees that are not provided through the National Health Insurance Fund in Bulgaria. Over 381 refugees received financial support for medical services or devices enabled by WHO support to partner organizations in Bulgaria.

Specific objective 3: Access to adapted and appropriate primary and emergency health-care services for refugees regardless of legal status

WHO facilitated refugee access to health services through BRC health mediators who link refugees to general practitioners. With WHO support, the BRC developed and distributed 3000 patient handbooks in the Ukrainian language that defined where to access health services in Burgas, Varna, Sofia and Plovdiv.

Through WHO implementing partners BRC, AstraForum and Ukrainski Vulik outreach, just over 16 000 people were supported in accessing health services and consultations, as well as providing financial support to access services through provision of co-payment as needed.

Nearly 300 refugees were reached with life-saving medical treatment and essential health supplies,

and eight health mediators were trained, reaching 81 refugees through home-based outreach sessions. Over 700 medical consultations were provided to Ukrainian refugees through the BRC hotline supported by WHO.

With WHO support, Ukrainski Vulik provided 262 individual occupational therapy sessions to refugee children with special needs and 63 consultations with parents; 198 mental health consultations were also provided.

Through the MHPSS Technical Working Group, WHO led the creation of an MHPSS services map that covers governmental, municipal and NGO service providers across the country and disseminated the mapping to stakeholders supporting refugees.

Specific objective 4: Information management and surveillance is reinforced for evidence-based decision-making in public health

WHO facilitated a joint assessment of the health needs and risks for refugees in Bulgaria and opportunities to strengthen health-system capacity. Outcomes of the assessment have been integrated into country-level planning and continue to inform advocacy and engagement on refugee health.



© WHO / Arete / Todor Tsanov
Representatives from WHO meet staff from the Bulgarian Red Cross, joining forces to respond to the Ukrainian refugee crisis.

Specific objective 5: Equitable access to essential medical products, vaccines and technologies to vulnerable refugee populations

WHO procured essential supplies and equipment for the National Centre of Infectious and Parasitic Diseases, enhancing its capacity to prevent, detect and respond to disease outbreaks. Items worth US\$ 215 000, including an enzyme-linked immunosorbent assay (ELISA) reader, real-time PCR analyzer, a Synergy HTX Multimode Reader, an automatic multiparameter biochemical analyzer and laboratory freezers, increase Bulgaria's ability to meet the rapid increase in demand for health services due to the influx of refugees.

Specific objective 6: Health workforce is supported and strengthened to provide health-care services to refugees

Through a partnership with AstraForum, WHO supported the development and provision of a series of vaccine schools for medical professionals to share science-based information on vaccine-preventable diseases and improve vaccine management. About 4670 medical professionals who support refugees and Bulgarian citizens participated in the vaccine schools

in person, with another 5000 accessing the online materials.

WHO supported the delivery of specialized mental health training to reduce burnout to 61 health-care workers and reached 801 health-care workers with messages through its partnership with AstraForum. Seven mental health ambassadors were trained to lead the fight against stigma and improve mental health service use among the refugee and vulnerable host populations.

Over 1500 frontline practitioners and local community members accessed a helpline to prevent burnout among medical professionals, facilitated by the Bulgarian Association of Social Workers and supported by WHO.

WHO supported the National Centre of Public Health and Analysis in providing emotional support to 30 frontline health workers who work with refugees from Ukraine and people affected by disasters and accidents. The center developed a guide for the early detection and prevention of burnout syndrome that was disseminated to frontline workers in Bulgaria.



© WHO

WHO and Bulgaria Ministry of Health officials discuss equipment needs at the Second Home community centre in Plovdiv.

Czechia

Czechia is currently hosting more than 370 000 Ukrainian refugees. Despite the high coverage of public health insurance for temporary protection directive holders in the country, challenges with access to health care persist. Needs assessments show that refugees' access to general practitioners remains low, yet many households report having individuals with chronic medical conditions and mental health and psychosocial issues that affect daily functioning. Refugees face administrative and language barriers in accessing health care. WHO and its partners are providing technical support, coordination and resources to enhance the capacity of national health systems to meet the health needs of refugees in Czechia.

WHO AND PARTNER ACHIEVEMENTS

Specific objective 1: Health leadership and governance mechanisms are streamlined and reinforced

WHO supported the Ministry of Health in coordinating the Ukrainian refugee response under the Refugee Coordination Forum and co-chaired the MHPSS Technical Working Group that fostered collaboration, information-sharing and resource mobilization.

WHO collaborated with the Ministry of Health to address a surge in multidrug-resistant tuberculosis (MDR-TB) cases in the country, particularly among Ukrainian refugees, with a focus on enhancing local health-care infrastructure and improving public health surveillance.

With the Ministry of Health, WHO conducted a review of health systems' response to the refugee crisis, documenting service delivery challenges and opportunities to strengthen system capacity further and ensure continued access to health services for refugees and host communities.

Specific objective 2: Financial barriers to health-care access for refugees are reduced or removed

WHO assisted 54 Ukrainian refugee patients with HIV who lacked medical insurance and temporary protection status to access life-saving antiretroviral therapy and essential HIV-related diagnostics and treatment, in partnership with the NGO Ceska Spolecnost AIDS Pomoc.

Highlights



137 013

People supported in accessing health-care services



4310

MPHSS consultations provided to refugees



4

Studies on the health of Ukrainian refugees conducted or supported by WHO



US\$ 1 506 000

Value of supplies and equipment distributed to health facilities and public health institutions



9

Health-care facilities and public health institutions receiving supplies

Specific objective 3: Access to adapted and appropriate primary and emergency health-care services for refugees regardless of legal status

WHO supported the Czech AIDS Help Society to conduct 464 HIV tests, distribute 91 HIV self-tests and provide HIV and sexually transmitted disease prevention services to 11 200 Ukrainian refugees, and reached about 60 000 people with information on mpox.

WHO partnered with the Bulovka Faculty Hospital and General University Hospital in Prague to enhance Ukrainian refugees' access to services by establishing two new PHC centres and creating child-friendly spaces in the facilities.

With WHO support, Alliance Center Duševního Zdraví, through regional community mental health centres, provided 2439 MHPSS consultations to Ukrainian refugees, covering their psychiatric, psychological, social and speech therapy care needs.

WHO supported Asociace Trigon in the Moravian-Silesian region to provide 2336 MHPSS consultations to Ukrainian refugees.

WHO, with the United Nations Children's Fund (UNICEF) and the National Institute of Mental Health, through an MHPSS programme for Ukrainian children, engaged 652 teachers and 201 Ukrainian parents to reach an estimated 70 000 school students with mental health support.

With WHO support, the Society for All completed the development of a comprehensive online trauma-informed educator training course for professionals working with children affected by traumatic experiences.

The National Institute of Mental Health, with the support of WHO's Collaborating Centre for Public Mental Health Research and Service Development, maintained a geographic information systems map of 389 locations offering mental health support for Ukrainian refugees in Czechia and implemented an information campaign that encouraged help-seeking behaviour.

Specific objective 4: Information management and surveillance is reinforced for evidence-based decision-making in public health

With technical support from WHO, the Institute of Public Health enhanced surveillance of respiratory viruses; the institute monitored prevalent respiratory viruses and shared whole genome sequencing data with the Global Initiative on Sharing Avian Influenza Data.

WHO, in collaboration with the Institute of Health Information and Statistics of the Czech Republic, implemented an automated reporting system for general practitioners and provided training to enhance the reporting of acute respiratory infections and influenza-like illnesses.



“Focusing on my baby gave me the strength to cope with the reality of my situation.”

Julia is one of over 200 Ukrainian mothers who have delivered babies at a maternity hospital in Prague. Since the start of the war in Ukraine, the WHO Country Office in Czechia has significantly scaled up operations to support and strengthen the

national health systems to deliver equitable health care for all, including the refugee population.



Watch the video⁹

9. “Focusing on my baby gave me the strength to cope with the reality of my situation.” Copenhagen: WHO European Region; 2023 (<https://www.who.int/europe/news-room/feature-stories/item/focusing-on-my-baby-gave-me-the-strength-to-cope-with-the-reality-of-my-situation>, accessed 30 April 2024).

WHO supported the establishment of a National Respiratory Virus Cryobank that will enhance public health surveillance, benefiting refugees and the local community.

WHO partnered with the National Association of Patients' Organization to assess access to health information among Ukrainian refugees, outcomes of which informed the design of a health literacy campaign.

A behavioural and cultural insights study among Ukrainian refugees in Czechia was conducted to assess access to health services, with the study's outcomes incorporated into WHO activities.

Specific objective 5: Equitable access to essential medical products, vaccines and technologies for vulnerable refugee populations

WHO delivered a capillary genetic analyzer to the Centre of Epidemiology and Microbiology at the National Institute of Public Health, strengthening diagnostics and surveillance capabilities for infectious diseases.

To increase the capacity of the Thomayer University Hospital to manage a surge in MDR-TB, WHO provided electrocardiogram machines and digital laryngoscopes. The Thomayer University Hospital is the sole MDR-TB treatment centre in Czechia.

WHO supported eight hospitals with vital medical supplies, including patient ventilators for adults and paediatrics, pulse oximeters, disposable plastic aprons, examination gloves, surgical gloves and medical/surgical masks to expand the capacity to meet refugee and host population needs.

Specific objective 6: Health workforce is supported and strengthened to provide health-care services to refugees

WHO partnered with the Institute for Postgraduate Medical Education to create a career support centre that provides support on accreditation and facilitates connections with employers. This initiative aims to address workforce gaps and integration challenges for foreign health-care professionals, including Ukrainian refugees.

*"Not only do I consider the project necessary, but I also feel a strong need to continue for several reasons. **The war is not over. Refugees are staying in Czechia and their numbers are increasing.** With the war dragging on, the mental health of some refugees is deteriorating. The reduced interest of political representation in the refugee crisis leads to less societal interest in this topic, which might result in greater isolation for certain Ukrainian individuals. **The fear of returning home increases existential uncertainty and subsequently worsens mental health, increasing the risk of substance abuse.** Help is needed, and assistance should not be dependent on political will or unwillingness but on humanity and reciprocity."*

Martin Vlček

Director and Therapist, Prague region – Mental Health Centre at CEPsYMED

Behavioural insights on health service needs, access and uptake
Results of a qualitative study among refugees from Ukraine in Czechia

May–September 2023



Read the Behavioural and cultural insights (BCI) report¹⁰

10. Behavioural insights on health service needs, access and uptake: results of a qualitative study among refugees from Ukraine in Czechia: May–September 2023. Copenhagen: WHO European Region; 2024 (<https://iris.who.int/handle/10665/376031>, accessed 30 April 2024).

Poland

Over 1.6 million Ukrainian refugees were registered for temporary protection in Poland as of December 2023. The refugee population in Poland has a large proportion of older adults, women and children who have higher needs for health care, ranging from maternal and child health care to chronic disease management. Moreover, refugees who were receiving treatment for illnesses like tuberculosis (TB) and HIV in Ukraine require continued treatment. The Polish health-care system provides refugees with the same health benefits and services as Polish citizens, but the increased health needs and prolonged stay of refugees continue to stretch its capacity. At the same time, some refugees still face difficulties accessing existing health services due to administrative and language barriers, the cost of services and challenges navigating the health system.

WHO AND PARTNER ACHIEVEMENTS

Specific objective 1: Health leadership and governance mechanisms are streamlined and reinforced

WHO coordinated the health sector's response as co-lead for the Health Coordination Group and co-chaired the MHPSS Technical Working Group, platforms that are critical for aligning response efforts, facilitating information exchange and problem-solving.

In collaboration with the Polish Red Cross and UNHCR, WHO convened partners in the health sector and the MHPSS Technical Working Group to improve patient pathways between health and MHPSS actors and set priorities for the 2024 health and MHPSS sectors.

Specific objective 2: Financial barriers to health care access for refugees are reduced or removed

WHO supported the procurement of new TB drugs for the National Institute of Tuberculosis to enhance access to treatment and address the cost-related barrier to treatment.

Several NGOs supported by WHO provide free-of-charge health services and mental health consultations to refugees, addressing financial barriers to accessing services.

Highlights



345 483

People supported in accessing health-care services



1819

MPHSS consultations provided to refugees



12 998

People trained to provide health services to refugees and host populations



13 576

Ukrainian health workers using the training platform or receiving support through the call centre service about working in the Polish health system



1232

Staff and partners trained in preventing and responding to sexual exploitation, abuse and harassment



US\$ 845 000

Value of supplies and equipment distributed to health facilities and institutions across Poland



220

Health facilities and public health institutions/laboratories receiving medical supplies and equipment to expand capacity to meet refugee health needs

WHO supported the development of the national TB drug programme that addressed specifically the inclusion of bedaquiline, a costly MDR-TB treatment drug. The TB drug programme has been approved by the National Health Fund and integrated into the country's health-care framework, addressing a cost barrier to accessing medicine long term.

Specific objective 3: Access to adapted and appropriate primary and emergency health-care services for refugees regardless of legal status

Emergency health and trauma care

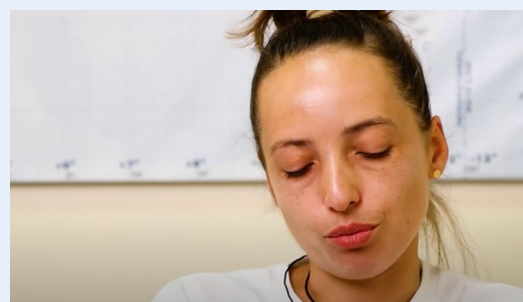
Until June 2023, WHO, with the ministries of health of Poland and Ukraine and the European Union (DG-Santé, DG Echo), supported a medevac hub at the border city of Rzeszow (Poland) to coordinate medevac, support trauma patients and relieve the strain on national health facilities receiving war casualties. WHO provided technical assistance, including training, quality assurance and information management.

Under the medevac hub, WHO procured and delivered four patient bus ambulances to the Humanosh Foundation to safely transport seriously injured patients from Ukraine. WHO trained first responders in Ukraine and Poland to operate the bus ambulances to ensure quality patient care. With the support of the MEDEVAC hub in Poland, more than 2350 Ukrainian patients were transferred to hospitals in 21 European countries.

Infectious diseases control

WHO initiated video-supported outpatient treatment for TB, benefiting patients with caring responsibilities who would otherwise be hospitalized and benefiting the health-care system by reducing hospitalization and associated costs. Twenty-three Ukrainian patients with drug-resistant TB have been successfully enrolled in video-supported treatment. WHO, together with Médecins Sans Frontières and the Latvian WHO Collaborating Centre for Research and Training in Management of Multidrug-Resistant Tuberculosis, trained 133 medical personnel in diagnostics, treatment and the clinical management of drug-resistant TB.

WHO supported the Institute of Tuberculosis and Lung Diseases and the Polish Respiratory Society in streamlining national TB guidelines. TB drugs and equipment were procured and donated to the



Tuberculosis: ensuring continuity of care for Ukrainian refugees in Poland

Maryna, a Ukrainian refugee, was part way through treatment for tuberculosis (TB) when she fled the war. However, Polish health authorities, WHO and Doctors without Borders teamed up to ensure continuity of care and treatment for TB patients entering Poland.



Watch the video¹¹

Institute of Tuberculosis in Poland to strengthen TB diagnostic and treatment capacity. Overall, TB medicines worth US\$ 216 990 as well as 14 GeneXpert PCR machines with consumables, genome sequencing equipment and a set of mobile equipment for TB screening were donated.

High-technology diagnostic equipment was procured and donated to the Social AIDS Committee, a national NGO that runs the largest HIV, viral hepatitis and sexually transmitted infections testing and counselling centre in Poland, to address the heightened need for HIV testing services.

More than 9200 people accessed HIV and sexually transmitted infections (STI) prevention services and were reached with information on HIV/STI through local NGOs, supported by WHO, to expand community engagement in HIV/STI through outreach, health promotion, screening and facilitation of pathways for refugee patients to enter the Polish health system.

MHPSS

WHO supported community-based organizations in implementing MHPSS activities including art therapy,

11. Tuberculosis: ensuring continuity of care for Ukrainian refugees in Poland [video]. Copenhagen: WHO European Region; 2023 (<https://www.youtube.com/watch?v=urlKeSxYeEc>, accessed 30 April 2024).

individual counselling, mental health education and burnout-prevention activities for caregivers. More than 2390 MHPSS consultations were delivered to Ukrainian refugees, contributing to their improved mental health and psychosocial well-being.

The Mental Health Gap Action Programme was rolled out to increase the capacity of general practitioners to provide MHPSS services. WHO trained the first cohort of 40 instructors to train other providers across Poland.

WHO facilitated the training of responders in psychological first aid (PFA), equipping them with skills to immediately assist refugees who experienced distressing events and prevent or reduce long-term psychological effects. Overall, 14 psychologists and paramedics from the State Fire Service and 25 individuals from civil society and public institutions were trained in PFA.

WHO equipped 40 trainers with skills to train first responders who support refugees and host populations in coping with adversity, using WHO's guide, *Doing What Matters in Times of Stress*.

Promoting healthier populations in the context of the refugee response

WHO convened experts, government representatives, local authorities, civil society organizations and academics to address the challenges older refugees face and promote the development of Age-friendly Cities and Communities in Poland.

Community physical activity programme

Children and adolescents make up a large proportion of the refugees in Poland. Many live with the stress and anxiety that come with being forcibly displaced and with related experiences such as violence, profound personal loss, disruption to their educational, economic and social activities, and the daily challenges of adapting to new and often difficult lives.

With the Polish Ministry of Sports, the Institute of Sports and the Olympic Refugee Foundation, WHO implemented a community physical activity programme in 30% of schools in Poland to provide health education and psychological support for Ukrainian children and their families. Under the programme, WHO trained 32 trainers in PFA, who in turn trained 617 sports coaches and psychologists to provide PFA to children. The sports programme has played a critical role in breaking down cultural barriers, improving physical and mental well-being, and creating opportunities for positive social interaction.



© WHO

Children participating in sports activities within the scope of the community physical activity programme "Be active, be healthy!" for school-aged children, launched by WHO Europe in collaboration with the Polish Ministry of Sports and Tourism and the Institute of Sport – National Research Centre.

WHO supported numerous activities in the Centre for Integration and Health Promotion to disseminate information about navigating the health-care system, promote healthy lifestyles and foster integration within the local community with a special focus on older people. About 230 people attended activities in the centre every month.

Specific objective 4: Information management and surveillance is reinforced for evidence-based decision-making in public health

WHO supported the process of developing the National Plan of Action for Measles and Rubella Elimination and the National Action Plan for Measles Outbreak Response.

WHO also facilitated activities to strengthen the International Health Regulations (IHR) in Poland, including training of national focal points for the IHR on their practical and effective implementation and facilitating peer learning and partnership through twinning with the national focal points of other countries.

A TB epidemiological review to understand the TB burden, epidemiologic trends, the capacity of TB surveillance systems in Poland, and the level of compliance with TB case definitions and reporting frameworks was conducted by WHO.

Specific objective 5: Equitable access to essential medical products, vaccines and technologies for vulnerable refugee populations

To support the health-care system in Poland, WHO procured and distributed medical equipment worth US\$ 845 000 to hospitals and laboratories across the country. The distribution of high-standard equipment has enhanced the quality and capacity of health-care delivery during the refugee response.

Medical goods delivered by the end of December 2023 include, among others, the following:

- 14 GeneXpert genome sequencing machines, a tape station and TB drugs to the Institute of Tuberculosis and Lung Diseases;
- 19 000 HIV self-tests for the Social Education Foundation – the tests were further distributed to 10 NGOs around Poland;



WHO helps Ukrainian health professionals support the Polish health system as they await their return home

WHO is working closely with the Polish Ministry of Health to provide support and guidance to enable qualified Ukrainian health workers to use their skills and education in the national health system. Ukraine refugees, such as Dr Olha Kompaniets, a renal specialist who was working at the Kyiv Kidney Institute prior to the crisis in Ukraine, are

making valuable contributions to the national health system in Poland while they are staying in the country.



Watch the video¹²

12. WHO helps Ukrainian health professionals support the Polish health system as they await their return home. Copenhagen: WHO European Region; 2023 (<https://www.who.int/europe/news/item/03-04-2023-who-helps-ukrainian-health-professionals-support-the-polish-health-system-as-they-await-their-return-home>, accessed 30 April 2024).

- microscope for syphilis diagnostics to the Social AIDS Committee;
- NCD and cancer equipment (ultrasound systems, oxygen concentrators, blood pressure monitors, electrocardiographs, radiologist reading stations) for two hospitals, the Polish Centre for International Aid, provincial ambulance stations, emergency reception centres in Przemyśl, and CORDIS Hospice in Katowice;
- ventilator for newborns donated to Lubaczow Hospital, close to the border; and
- the National Institute of Public Health received four freezers for two laboratories and consumables.

Specific objective 6: The health workforce is supported and strengthened to provide health-care services to refugees

WHO and the Ministry of Health operated a call centre for Ukrainian health professionals seeking information about working in the Polish health system. WHO supported the Ministry of Health in training 30 people to manage the hotline and implement an information campaign about the call centre. Overall, 13 576 Ukrainian doctors, dentists and nurses were integrated into the Polish health-care system in 2023, increasing the availability of language-sensitive services and reducing the risk of deskilling refugee health professionals.

With the Ministry of Health and the Centre of Postgraduate Education in Warsaw, WHO developed an online course for doctors and dentists to orient and prepare Ukraine health professionals to work in the Polish national health system. The course is free and offered in both Polish and Ukrainian languages.

WHO facilitated the training in the Polish health system of Ukrainian doctors and nurses in Murcki Hospital, expanding the facility's capacity to offer language- and culture-sensitive services to the refugee population. Murcki Hospital provides specialized medical services to refugees from Ukraine.

WHO provided training to frontline health workers and non-specialized GBV actors, equipping them with knowledge and skills to recognize and support survivors of GBV and improve the quality of GBV response:

- 20 call centre operators equipped to provide information on health services for GBV survivors and referral pathways;
- 29 Ukrainian psychologists and social workers equipped with knowledge and skills in survivor-centred care to provide services to Ukrainian refugees at the Polish border; and
- a cohort of 26 national clinical trainers for improved quality of care for survivors of violence.

Training of 40 people from different NGOs, universities, social services and firefighter services in stress management was facilitated by WHO, equipping them to support refugees with the practical skills to cope with stress.

WHO worked with Natan Worldwide Disaster Relief and Folkowisko humanitarian aid group to deliver training of trainers on MHPSS for 31 psychologists and educational professionals who are volunteers from western Ukraine working with internally displaced communities



© WHO
Rzeszów, Poland, 10 March 2023. WHO has donated four additional ambulances for medical evacuation and repatriation operations from Ukraine to Poland.

Republic of Moldova

Since 24 February 2022, more than 1 million people have fled to the Republic of Moldova from Ukraine, of whom approximately 116 080 are refugees who remain in the country, making up 5% of the Moldovan population. The majority of Ukrainian refugees in the Republic of Moldova are women and children. According to an MSNA conducted in 2023 among Ukrainian refugees about 33% of households that participated had a chronically ill member while an estimated 32% had at least one person aged 60 or more; 21% of households reported experiencing mental health or psychosocial issues. Health remains among the top priority needs for Ukrainian refugees in Moldova, especially among families with children, women and older people. WHO's response focused on strengthening the health system and community resilience while building on the principles of universal health coverage. The response merged a humanitarian and long-term approach to address the evolving needs of affected populations as the refugee crisis becomes protracted.

Highlights



US\$ 1 600 000

Value of supplies and equipment distributed to health facilities



320

Health facilities receiving supplies



340

Partners trained in PRSEAH



13

Studies including assessments on the health of Ukrainian refugees conducted or supported by WHO



© WHO / Schimbator_Studio

25 year old Tetiana fled Mykolaiv with her young son, sister and nephew in early March 2022. After enduring an extremely dangerous and traumatic journey she arrived in Moldova, her father's country. After 10 months in the country she has had extensive mental health support and she is now working and retraining in beauty therapy.

WHO AND PARTNER ACHIEVEMENTS

Specific objective 1: Health leadership and governance mechanisms are streamlined and reinforced

WHO, with the Ministry of Health, co-led the refugee health response through the Interagency Health and Nutrition Technical Working Group, led by the Technical Reference Group on MHPSS, and provided technical support to the Gender-Based Violence Sub-Working Group, ensuring coordinated and relevant responses.

WHO, jointly with the Ministry of Health, co-led the Working Group on Temporary Protection and Health Services Coordination. Through this working group, WHO provided technical support in the revision of the legislative frameworks to facilitate access to health services for refugees waiting for approval of temporary protection status.

WHO worked with the Office of the High Commissioner for Human Rights, UNICEF, UN Women and the UN Population Fund (UNFPA) to improve access to services for refugees with disabilities, resulting in the integration of the needs of persons with disabilities into the national contingency plan for crisis management in the event of an increased influx of refugees.

WHO contributed to the development of the national winterization strategy to mitigate the consequences of the cold season for refugees and affected host community members.

Strengthening surgical skills contributes to emergency preparedness

Surgical staff in the Republic of Moldova attended a Hostile Environment Surgical Training (HEST) course to strengthen their capacity to treat those injured in emergency settings.



Watch the video¹³

WHO coordinated partners in identifying health-sector priorities and led the planning of the refugee response for 2024 within the refugee response planning mechanism.

Specific objective 2: Financial barriers to health-care access for refugees are reduced or removed

WHO supported the Ministry of Health in assessing the health service package for refugees in Moldova against the High-Priority Health Services for Humanitarian Response. The assessment results were used to revise the health package for refugees for 2024.

WHO supported the National Health Insurance Company and the Ministry of Health with a forecast of the volume of services required to support refugees in 2024 for advocacy, resource mobilization and planning. The forecast estimates basic expenditure items for all levels of care: prehospital, emergency care, PHC, outpatient care and inpatient care.



© WHO / Schimbator Studio

Fifty-year-old grandmother, Svetlana, lived under occupation when her village in southern Ukraine was occupied at the start of the war. She was forced to flee when her home was destroyed by a bomb. She is now staying in Anenii Noi, Moldova. Svetlana's experiences have impacted her mental health so she is now having regular sessions with a psychologist

13. Moldovan surgeons train to save lives on the frontline [video]. Copenhagen: WHO European Region; 2023 (<https://www.youtube.com/watch?v=EbZHBdNgUNI&t=6s>, accessed 30 April 2024).

Specific objective 3: Access to adapted and appropriate primary and emergency health-care services for refugees regardless of legal status

WHO supported the Ministry of Health in expanding the capacities of PHC facilities, hospitals and public health laboratories to provide quality primary and emergency health-care services to refugees and the host population.

A toolbox was developed for IPC in PHC and missions to 10 rural and urban ambulatory clinics were conducted to assess their compliance with WHO minimum IPC requirements and support the development of action plans to strengthen IPC.

WHO supported the Ministry of Health in developing and adapting standardized protocols for family doctors to improve the quality of health-care services for people with risk factors for cardiovascular disease.

Support was provided to the national HIV and TB programmes in implementing up-to-date WHO recommendations in clinical protocols and practice for integrated infectious disease management for HIV and TB in both the refugee and host population.

WHO supported the microbiological laboratory in the National Agency for Public Health with antimicrobial preparations and kits, enabling prompt screening and confirmation of resistance mechanisms in microorganisms and timely treatment – a critical intervention in the context of high population movement.

Specific objective 4: Information management and surveillance is reinforced for evidence-based decision-making in public health

WHO supported the introduction of a new module in the communicable diseases surveillance system to capture information on vaccination processes among refugees (receiving vaccines and monitoring adverse effects) and manage immunization schedules.

WHO provided maintenance and technical assistance to personnel in the National Agency for Public Health laboratory, focusing on new types of sample collection and drafting reports, to improve surveillance and detection of infectious diseases.

WHO supported the National Agency for Public Health in training over 1200 medical workers in the National Information System for the Surveillance of

Communicable Diseases and Public Health Events. The increased health-worker capacity will improve the digital collection, analysis, interpretation and dissemination of health data on infectious diseases and public health events.

Partner-led assessments of needs, gaps and service availability were conducted to inform WHO and health sector-wide decision-making. Among others, these included:

- an MSNA led by UNICEF and the UNHCR – WHO provided technical expertise and consolidation of information on the health sector;
- interagency Protection from Sexual Exploitation and Abuse (PSEA) risk assessment co-led with the UNHCR;
- supporting the Ministry of Health and the Oncology Institute in assessing palliative services and developing a long-term roadmap;
- a rapid review of CBRN hazards and establishing equipment required for detection, measurement and decontamination in case of events; and
- a qualitative study of mental health needs and perspectives of Ukrainian refugees.

Specific objective 5: Equitable access to essential medical products, vaccines and technologies for vulnerable refugee populations

WHO has ensured the maintenance of the forecasting platform for the volume of services required by refugees with a granularity of data on types and quantities of essential medicines, medical devices, consumables, reagents, PPE and vaccines.

Medical supplies, medicines and equipment worth approximately US\$ 8.4 million were procured and distributed to 11 laboratories, 320 PHC facilities and 40 hospitals across the country to ensure sufficient capacity to meet increased demands and continuity of care for refugees in Moldova. Items included:

- medical equipment, including computed tomography units, ultrasound units, patient ventilators, hospital beds, stretchers, resuscitation trolleys, anesthesia machines, and electrocardiographs distributed to 40 hospitals and the National Centre for Medical Prehospital Emergency Unit;
- medical devices and consumables distributed to 40 hospitals, the National Centre for Medical Prehospital Emergency Unit and the National Laboratory Network;
- medicines for oncological treatment

(trastuzumab) distributed primarily to the Oncology Institute, and antidote for CBRN risks to the National Agency for Public Health;

- PPE (chemical sets, decontamination shower, gloves and respirators) distributed to 320 PHC facilities;
- laboratory equipment, reagents and laboratory consumables, including CBRN detection consumables, distributed to 11 laboratories nationwide; and
- information technology equipment distributed to the National Centre for Medical Prehospital Emergency Unit, University Cathedra and the national service for emergency calls, 112.

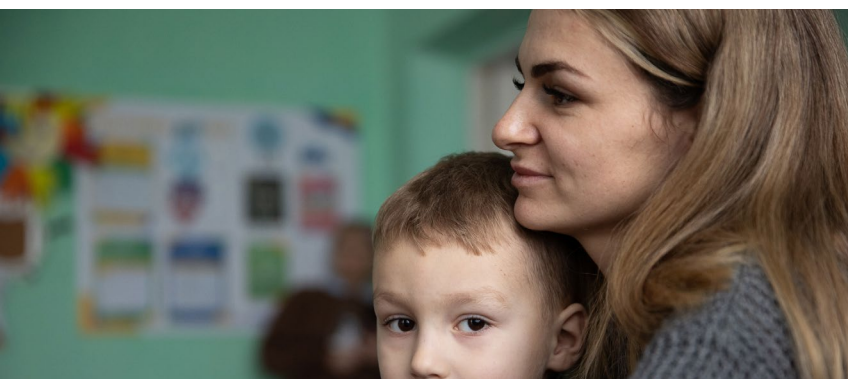
Specific objective 6: Health workforce is supported and strengthened to provide health-care services to refugees

Through simulation-based trainings, WHO enhanced the capacity of 601 health-care workers across the country in mass casualty management, emergency care, hostile environment surgical care, and basic and advanced trauma life support.

WHO implemented a capacity-building initiative on health data management for 45 key national specialists, including IT and legal officers from major medical entities.

WHO equipped 44 national and local coordinators from public health centres with knowledge and skills in immunization logistic information systems to ensure smooth coordination and execution of immunization plans.

WHO trained 150 teachers from all five medical colleges in the Republic of Moldova on COVID-19, human papillomavirus and routine vaccination processes.



© WHO / Schimbator_Studio
25 year old Tetiana fled Mykolaiv with her young son, sister and nephew. After enduring an extremely dangerous and traumatic journey she arrived in Moldova, her father's country.

WHO convened and provided training in IPC to 450 surgeons and nurses as part of trauma/surgery health-care service delivery.

WHO built the capacity of 370 MHPSS workers to identify people needing mental health and psychosocial support and provide services, including PFA or referral to appropriate service providers. A further 78 frontline workers were equipped with skills in trauma-informed care, suicide prevention and response, and GBV.

WHO provided training in first aid to more than 300 refugees and host families attending an event to mark World Refugee Day.

WHO equipped 40 hospital and district health centre managers with knowledge and skills in establishing clinical services for survivors of GBV and supported four national experts from the School of Public Health Management to participate in cross-regional training of trainers to strengthen the health system's response to GBV.



"Health remains among refugees' top three needs, especially for families with children, women and elderly people. Risk communication, community engagement and infodemic management have been core public health interventions in Ukraine's refugee emergency response. Refugees and members of the host community in the Republic of Moldova should have access to reliable information sources, guidance on how to maintain their health and well-being, and be empowered to participate in the response efforts and know how to access health-care services."

Ion Dodon

General Director, National Health Insurance Company

Romania

Over 5 million Ukrainian refugees have crossed the Romanian border since the Russian Federation's invasion of Ukraine, with approximately 150 000 registering for temporary protection status. The refugee population in Romania is highly dynamic, with thousands of refugees crossing the border to and from Ukraine and transiting through to other countries. The large-scale movement of refugees has placed significant pressure on the national health-care system, necessitating emergency response operations to address the refugees' health needs alongside continuing health-system development to meet the health needs of the Romanian population.

WHO AND PARTNER ACHIEVEMENTS

Specific objective 1: Health leadership and governance mechanisms are streamlined and reinforced

WHO coordinated the Health Sector Working Group and led the Sub-working Groups on MHPSS and Sexual and Reproductive Health (SRH), and participated in the Inter-Sector Working Group and Information Management Working Group, leveraging partnership for the health response.

To enhance coordination of the health response at the county level, WHO deployed five county coordinators to operate in counties with a high volume of refugees. They engage with local representatives, municipalities and health providers in advocating for and addressing issues faced by refugees in accessing care.

Specific objective 2: Financial barriers to health-care access for refugees are reduced or removed

WHO enabled Ukrainian refugees to access essential services without financial hardship through advocacy to address issues in the health system and through direct support to the medical clinic at RomExpo and family medicine clinics to register and provide language-sensitive services.

Three midwives were deployed to provide to provide free of-charge services, including antenatal and postnatal support, referral to family doctors, obstetrics and gynaecology and family planning, and to organize self-help groups and psychological counselling sessions for Ukrainian women in Bucharest, Constanta and Galati.

Highlights



10 895

People supported in accessing health care services



3616

MPHSS consultations provided to refugees



170

People trained to provide health services to refugees and host populations



61

Partners trained in PRSEAH



3

Studies on the health of Ukrainian refugees conducted or supported by WHO



US\$ 1 600 000

Worth of supplies and equipment distributed to health facilities



13

Primary care facilities, 28 DSU centres and the national TB institute received medical supplies and equipment from WHO

Specific objective 3: Access to adapted and appropriate primary and emergency health-care services for refugees regardless of legal status

Supported by WHO, cultural mediators helped over 1200 Ukrainian refugees access essential health-care services by facilitating appointments, acting as translators and guiding patients through the health-care system. Cultural mediators also provided more

than 3000 counselling sessions, organized art and music therapy activities, and disseminated health-related information through social media including Ukrainian Telegram channels.

To address gaps in access to health information, WHO developed a Ukrainian and Russian language Viber chatbot, providing guidance on how to access health services; as of December 2023, the chatbot had more than 1200 subscribers and in excess of 4700 users, with a user satisfaction rate of 90%.

In collaboration with UNHCR and the International Organization for Migration, WHO supported a government call centre to provide Ukrainian refugees, especially new arrivals, with information on health access, education, housing and employment. WHO trained call-centre agents in health issues and developed standard operating procedures for health-related calls. The call centre received 5428 calls, of which 119 were health-related.

County coordinators, supported by WHO, worked with local partners to map over 600 health services available to Ukrainian refugees. These were included in UNHCR's service advisor platform and disseminated to refugee and host populations by cultural mediators via dedicated Telegram and Viber channels.

WHO provided funding to selected family medicine clinics identified as refugee-inclusive to enhance their capacity and incentivize the registration and

treatment of Ukrainian refugees. The supported clinics provided more than 4300 PHC consultations to refugees in Bucharest, Brasov, Suceava and Galati.

To address the high need for SRH care in the refugee community and reduce pressure on national health services, WHO supported three midwives in Bucharest, Constanta and Galati to offer free services to Ukrainian women, providing over 570 midwifery consultations for refugees.

In collaboration with the Interagency GBV Sub-working Group and the Ministry of Health, WHO developed GBV referral pathways in counties with high refugee populations and disseminated the information to clinicians and refugees to facilitate access to GBV care.

Specific objective 4: Information management and surveillance is reinforced for evidence-based decision-making in public health

Using data from the National Health Insurance House, the National Institute of Public Health and the Ministry of Health, WHO published a monthly report on refugee health access providing insights on trends in health service utilization among refugees.

WHO conducted a qualitative study on health service needs and access among Ukrainian refugees, with the findings shared with the government and other stakeholders to inform programming and decision-making in health care for refugees. The qualitative study was supplemented with a quantitative study on health needs and medical service access for Ukrainian refugees in Romania.

WHO, with 42 Romanian family doctors, conducted a study to determine the key challenges faced by family doctors in delivering services to refugees. The results of the study guided the advocacy for simplification of registration and reimbursement procedures for Ukrainian patients.

Specific objective 5: Equitable access to essential medical products, vaccines and technologies for vulnerable refugee populations

WHO procured and distributed medical supplies and equipment worth US\$ 1.6 million to support the health system in coping with the increased demand for services and continuity of care for refugees in Romania, including:



© WHO
WHO cultural mediators providing Ukrainian refugees in Romania with information on how to access national health services and psychosocial support.

- essential medicines and consumables to family medicine clinics and medical facilities, as well as patient monitors, emergency stretchers, defibrillators and PPE kits to Romanian hospitals;
- cold chain vaccination equipment (ice-lined 60-litre vaccine refrigerators, 100 vaccine cold boxes complete with icepacks, and continuous temperature monitoring equipment) for 42 county public health authorities, facilitating the delivery of vaccination services to both refugee and host populations;
- TB diagnostic equipment – two GenXpert TB machines, 600 TB screening cartridges and 250 MDR-TB screening cartridges – for the Marius Nasta TB Institute to meet TB diagnostic and screening needs in high-risk counties; and
- emergency medical equipment (transport patient monitors, transport incubators, mobile ultrasound systems, laryngoscopes, suction pumps, pulse oximeters, masks and hand sanitizer) to enhance Romania's emergency response and preparedness capacity.

Specific objective 6: Health workforce is supported and strengthened to provide health-care services to refugees

WHO implemented a capacity-building initiative for family doctors to enhance their knowledge and capacity to support vaccination among Ukrainian

refugees. The initiative included a family doctor workshop on pathways to strengthen immunization coverage, the distribution of 15 000 copies of the vaccination guide for family doctors and the conversion to an e-book of The Vaccination Guide for Family Doctors.

To improve national capacity to support survivors of rape, WHO trained 156 clinicians in six GBV integrated centres that offer forensic testing. Additionally, in cooperation with UNFPA, UNICEF and UNHCR, WHO conducted a 5-day interagency training on the clinical management of rape and intimate partner violence for 28 multidisciplinary professionals.

WHO also trained 30 health managers and 20 family doctors in Bucharest on responding to and preventing GBV, including first response to GBV, and referral pathways for GBV and SRH in primary care such as emergency contraception and contraception counselling.



© WHO
WHO cultural mediators providing Ukrainian refugees in Romania with information on how to access national health services and psychosocial support.



A day in the life of a Ukrainian cultural mediator

Iryna Kaskova is a cultural mediator working with the WHO Country Office in Romania. Originally from Mykolaiv in Ukraine, she is helping her fellow countrymen and women to find the information they need to access health care. A trained doctor in Ukraine, Iryna's language skills and professional training enable her to help Ukrainian refugees by giving advice on navigating the Romania health-care system and other social assistance, which refugees are entitled to receive.



Watch the video¹⁴

14. A day in the life of a Ukrainian cultural mediator [video]. Copenhagen: WHO European Region; 2023 (https://www.youtube.com/watch?v=-2C_xjHXknU, accessed 30 April 2024).

Slovakia

In the Slovak Republic, more than 1.8 million border crossings from Ukraine were recorded by the end of 2023, while 114 270 Ukrainian nationals were granted refugee status or temporary protection. According to an MSNA in 2023, health care is among the top three needs of Ukrainian refugees in Slovakia, with 47% of households reporting having at least one member with health-care needs. As of 1 September 2023, full health coverage was granted to temporary protection status holders from Ukraine, giving them access to health services. Despite the health coverage, refugees still face administrative, insurance and language barriers when accessing health care. Notably, vaccination coverage is low among children in refugee households, particularly for measles and polio, and mental health is a concern. WHO worked with the Ministry of Health and a range of partners to meet the health needs of refugees and the host population.

WHO AND PARTNER ACHIEVEMENTS

Specific objective 1: Health leadership and governance mechanisms are streamlined and reinforced

WHO coordinated the Health Technical Working Group, which facilitated information exchange, dialogue on response workstreams, collaboration and joint initiatives. The Group led advocacy for universal health coverage of refugee health needs.

WHO co-chaired the MHPSS Technical Working Group, a collaboration platform with more than 90 national and international partners. The MHPSS Technical Working Group led the adaptation of MHPSS services to the evolving needs of refugees, supported a

Highlights



52 662

People supported in accessing health-care services



115

Ukrainian health-care professionals supported to take Slovak language courses with a focus on medical terminology to facilitate integration



US\$ 543 197

Worth of supplies and equipment distributed to health facilities



52 662

People supported in accessing health-care services



national conference on MHPSS and was integrated into the National Commission for Mental Health to continue leading capacity-building and institutional development of MHPSS services, and contribute to mental health reform.

To support the integration of MHPSS services into the national support service portfolio and strengthen related governance mechanisms, WHO and partners introduced a basic MHPSS standardization framework for Slovakia.

Specific objective 2: Financial barriers to health-care access for refugees are reduced or removed

The WHO-led Health Technical Working Group advocated for universal health coverage for refugee health needs in Slovakia. The Ministry of Health of Slovakia decided to grant all holders of temporary protection status in Slovakia full access to medical care at the same level as citizens, effective from 1 September 2023.

Specific objective 3: Access to adapted and appropriate primary and emergency health-care services for refugees regardless of legal status

Prior to the provision of universal health coverage to those with temporary protection status in Slovakia, WHO, with partners, supported the expansion of outpatient care services for refugees in the Rovnianska Health Centre in Bratislava and supported mobile health teams to deliver services to Ukrainian refugees and other vulnerable people in regions and remote areas: 12 000 medical examinations were conducted, including 800 preventive examinations and 2000 psychotherapist consultations.

WHO supported the National Cancer Institute to build capacity for cancer care given the growing number of oncological and palliative patients, including those from Ukraine. WHO provided technical support to the Institute to adapt procedures to systematically include Ukrainian refugees and provided new equipment to improve the quality of health care.

Since February 2022, the Institute has admitted and treated over 300 Ukrainian refugee patients. WHO collaborated with the Regional Public Health Authority in Slovakia, the Department of Epidemiology, Comenius University and other partners to implement awareness activities and voluntary testing for HIV, syphilis, hepatitis B, and hepatitis C, with testing offered to 2078 people. Outcomes of voluntary testing shed light on the prevalence of infectious diseases among Ukrainian refugees and local communities that will guide prevention and control activities.

To enhance collaboration in rapid diagnosis of drug-resistant TB, WHO and the National Institute of Tuberculosis, Lung Disease and Thoracic Surgery in Vysne Hagy convened clinicians and laboratory specialists to discuss issues related to TB screening and referral pathways, leading to the development of a rapid TB screening and confirmatory system with referral pathways.



© WHO

A community member receives health information and infectious disease testing through community activities implemented by the Public Health Authority of the Slovak Republic in collaboration with WHO in the eastern part of Slovakia.

Specific objective 4: Information management and surveillance is reinforced for evidence-based decision-making in public health

WHO actively engaged in the Information Management Working Group which plays a central role in coordinating the flow of information regarding Ukrainian refugees and dissemination of data critical for addressing the needs of displaced populations.

Testing for HIV and sexually transmitted infections was supported in migrant and refugee communities in partnership with the Institute of Epidemiology, Faculty of Medicine and Comenius University in Bratislava, offering an insight into disease prevalence to inform prevention and treatment interventions.

Together with the Public Health Authority, WHO held an inaugural meeting for IHR focal points from six countries to share experiences and identify opportunities for cross-border cooperation in strengthening capacities for health-threat detection. To complement the meeting, WHO also provided two days of training on practical and effective implementation of the IHR.

WHO supported a review of Slovakia's health information management system to identify strengths and weaknesses regarding health emergencies such as COVID-19 and the influx of Ukrainian refugees, and provided recommendations to improve data-management practices during health crises.

Specific objective 5: Equitable access to essential medical products, vaccines and technologies for vulnerable refugee populations

WHO procured and delivered laboratory equipment and supplies worth more than US\$ 500 000 to enhance diagnostics of polio, measles and other infectious diseases in public health laboratories in Slovakia. Items delivered by WHO included:

- test kits and consumables to enhance laboratory

capacity to detect and report diphtheria cases and improve the identification of other bacterial strains at the National Reference Centre for Diphtheria;

- two hot air sterilizers and two CO₂ thermostats for the Regional Public Health Authority laboratory in Banská Bystrica and training of laboratory technicians to operate the devices to strengthen diagnosis of polioviruses and enteroviruses; and
- an ELISA reader, with accessories, for the Department of Medical Microbiology of the Public Health Authority of the Slovak Republic based in Bratislava to enhance laboratory work in diagnosing polio, measles and other pathogens.

Specific objective 6: Health workforce is supported and strengthened to provide health-care services to refugees

In collaboration with the Medical Faculty of Comenius University in Bratislava, WHO supported 115 Ukrainian health-care professionals in undertaking Slovak language courses specifically tailored to medical terminology to facilitate the process of integration into the national health-care system.

WHO supported experts from the National Reference Centre for Diphtheria to participate in an international workshop on laboratory diagnosis of diphtheria at the University of Cyprus, Nicosia, for exposure to new developments in diphtheria diagnosis.

WHO supported four Slovakian health experts to attend training at the WHO Collaborating Centre in Helsinki and the Specialized Reference Laboratory for Polio at the National Institute for Public Health and the Environment, Netherlands (Kingdom of the), to improve human resource capacity for processing laboratory samples and diagnosing polio and other viruses.

Hungary

As of 31 December 2023, more than 40 000 Ukrainians had applied for temporary protection in Hungary and around 65 000 were recorded as refugees. With the protracted refugee crisis, the national health system has to meet refugees' critical health needs such as cancer treatment, chronic illnesses and other NCDs, and ensure access to continuous and comprehensive health care.

WHO has maintained close contact and cooperation with the Hungarian authorities, providing information and technical guidance in planning the health response for refugees. In mental health, WHO supported the translation of Inter-Agency Standing Committee MHPSS resources into the Hungarian language. The translated documents were critical for the capacity-building of partners and for guiding the delivery of MHPSS services to Ukrainian refugees.

WHO also supported Szabolcs-Szatmar Hospital and the National Koranyi Institute for TB and Pulmonary Diseases to increase their capacity and strengthen access to health-care services for Ukrainian refugees. Szabolcs-Szatmar Hospital is located close to the border and on the frontline of providing health-care services to Ukrainian refugees.



Managing diabetes while fleeing from war – Artur's story

Artur, a 14-year-old refugee from Ukraine living in Hungary, has diabetes. Getting treatment for Artur's condition was a primary concern for his family on arrival in Hungary. Ukrainian refugees have access to health care for free. The family were soon able to access Ukrainian language information about treatment in Hungary.



[Read more¹⁵](#)

Estonia, Latvia and Lithuania

As of 31 December 2023, Estonia, Latvia and Lithuania hosted more than 130 000 Ukrainian refugees. In Baltic countries, Ukrainian refugees have experienced difficulties in accessing health care due to long waiting times, affordability and denied access. Health is a priority among the refugees' primary needs.

In Estonia, WHO conducted a rapid qualitative assessment of perceived health-service needs and gaps, and barriers and drivers of uptake of health services and immunization programmes. WHO and partners used the assessment's outcomes to tailor local immunization programmes to overcome barriers and increase vaccination coverage. WHO also used

the findings on health access barriers to engage key stakeholders in finding solutions to improving the health system and services for refugees and migrants.

In Lithuania, WHO supported Artscape, a local organization to provide psychosocial support to Ukrainian refugee children through art therapy, performing arts, design creation and other activities that promote the children's psychosocial well-being.

In Latvia, WHO planned a survey on unmet health needs among Ukrainian refugees, the results of which will be used to plan relevant interventions in 2024.

15. Managing diabetes while fleeing from war – Artur's story. Copenhagen: WHO European Region; 2023 (<https://www.who.int/europe/news-room/feature-stories/item/managing-diabetes-while-fleeing-from-war---artur-s-story>, accessed 30 April 2024).

Ensuring an effective and safe response

Risk communication and community engagement

Risk communication and community engagement (RCCE) remains central to WHO's response to the Ukraine crisis, enabling people to make informed decisions to mitigate the effects of the conflict on their health and empowering communities to shape emergency response solutions. WHO worked with local officials and health sector partners across the countries to implement different RCCE interventions.

Ukraine

- Chaired the RCCE technical working group, harmonizing risk communication messages and coordinating partners in developing public health preventative messages.
- Following the collapse of the Kakhovka dam, WHO developed and disseminated printed materials on prevention of diarrhoeal diseases and food and water safety, reaching over 270 000 people in six oblasts.
- Distributed 21 810 cholera posters to health professionals in 23 oblasts, providing information on early detection of cholera cases, notification and case management, and links to the WHO Cholera Control app.
- Produced and distributed materials on CBRN threat awareness, reaching 350 000 people in the territories close to the Zaporizhzhia nuclear power plant.
- In response to the hepatitis A outbreak in Vinnytsia, WHO, with the Ministry of Health and partners, supported the production and distribution of information materials on the disease and ran a social media campaign that reached more than 41 000 people.

Bulgaria

- Worked with local partner PR Care to launch and disseminate the Health Assessment on Refugee Health.

- With WHO support, local partner AstraForum provided risk communication materials on mental health to health-care workers burdened by increased service demand due to the influx of refugees.
- Through WHO support, national NGO partners delivered weekly focus group discussions with children and adolescents on the prevention of HIV, sexually transmitted infections and other sexually transmitted diseases.

Czechia

- Equipped 20 people from partner organizations, including the National Institute of Public Health, the Ministry of Interior, emergency medical services and faculty hospitals, with knowledge and skills in RCCE planning so they are better prepared and able to respond to emergencies.

Poland

- Supported community-based organizations to address barriers to accessing health services and increase health literacy through risk-communication activities, reaching over 20 000 refugees. WHO also equipped 25 regional health spokespeople from all 16 voivodeships with knowledge and skills in RCCE.
- Distributed 2500 copies of My Health Booklet, a multilingual guide that provides information to Ukrainian refugees about available health-care services in Poland and tips on how to stay healthy and safe in a new country.
- Supported information hotlines in Ukrainian and Russian to provide health-related information to refugees and offer guidance on how to access health services in Poland; more than 800 refugees used the hotlines.

Republic of Moldova

- Supported and coordinated the production and distribution of multilingual brochures on health-care access in Moldova and the temporary protection health benefit package to refugees and health professionals.
- Supported the National Hygienists Society in disseminating information on nutrition through healthy lessons and other information materials, reaching an estimated 5000 children, including Ukrainians.
- Supported the Breastfeeding Caravan campaign to promote breastfeeding, in Romanian and Ukrainian languages.
- Supported the Festival of Friendship, Creativity and Sport to promote physical activity among school students and support the social integration and emotional well-being of Ukrainian refugee children, reaching 250 children.
- Supported a tailored vaccination awareness campaign implemented with the Ministry of Health, the National Public Health Agency and UNICEF.
- With MHPSS partners, conducted a Mental Health Day fair to advocate for and raise awareness about mental health, reaching more than 1000 people including Ukrainian refugees.

Romania

- Launched a social media campaign, in Ukrainian, Romanian and English and targeting young people, aimed at tackling myths and misconceptions around contraception and sexually transmitted diseases that reached 5000 people on Facebook and 700 on Instagram.
- In response to a measles outbreak, WHO and UNICEF launched a social media campaign in Romanian and Ukrainian to increase demand for vaccinations and address common vaccination misinformation. The campaign is estimated to have reached 215 000 people.

Slovakia

- Produced and distributed over 15 000 copies of The Health Booklet in three languages providing information on health services and health-care rights for refugees from Ukraine. The booklet was also published online and has had more than 30 000 views.
- Supported regional public health authorities and local NGOs in developing health education materials in multiple languages and disseminating them at national and regional levels, targeting Ukrainian refugees and other vulnerable groups.
- Conducted an online RCCE workshop for experts in public health authorities and media teams, equipping 40 people with skills and knowledge in designing risk communication, community engagement and infodemic management activities for disease outbreaks and emergency preparedness.



Risk communication, community engagement and infodemic management in humanitarian emergencies: lessons from the Ukraine war



[Read more¹⁶](#)

16. Risk communication, community engagement and infodemic management in humanitarian emergencies: lessons from the Ukraine war. Copenhagen: WHO European Region; 2023 (<https://www.who.int/europe/news/item/28-02-2024-risk-communication--community-engagement-and-infodemic-management-in-humanitarian-emergencies--lessons-from-the-ukraine-war>, accessed 30 April 2024).

Preventing and responding to sexual exploitation, abuse and harassment (PRSEAH)

The continuing conflict and need for humanitarian assistance increase vulnerabilities to sexual exploitation and abuse among affected populations. WHO has zero tolerance for all forms of sexual misconduct – sexual exploitation, sexual abuse, sexual harassment and sexual violence – and aims to ensure that our personnel and implementing partners do no harm to the people we serve or the people we serve alongside. To this end, priorities include strengthening and enforcing PRSEAH recruitment safeguarding measures, ensuring technical support to mainstream PRSEAH in response operations, engaging and supporting interagency PRSEAH mechanisms, and capacity-building on PRSEAH in all countries.

Ukraine

- Trained more than 1520 individuals, including WHO staff, external partners and health-care professionals, in PRSEAH.
- Through Training for Trainers, over 100 future PRSEAH trainers were trained to enhance PRSEAH knowledge dissemination and community engagement.
- Developed an online video course on PRSEAH basics for partners to increase awareness and understanding of PRSEAH roles and responsibilities

Bulgaria

- Through UNHCR, supported a review of the action plan for the Technical Working Group and development of PSEA elements of the 2023 MSNA tool.
- Supported the NGO Animus Association in implementing a multi-layered information strategy on GBV and mental health awareness and managing a health line that reached 6002 desktop-user Ukrainian refugees and 15 245 mobile users.

Poland

- Through cascade training on PSEA under the community physical activity programme in schools, more than 1200 physical education teachers and school psychologists were equipped with skills and tools to prevent and respond to sexual exploitation and abuse.
- Provided PSEA training to 24 psychologists, educators and social workers from western Ukraine who work with refugees to enhance the protection of the vulnerable population.

Moldova

- Co-led the PSEA interagency risk assessment, generating evidence on PSEA risks in the refugee response, and disseminated findings and recommended risk-mitigation measures to the PRSEAH Network and senior UN leaders in Moldova.
- Enhanced sexual exploitation and abuse investigation capacity by training 15 PSEAH investigators from UN and civil society organizations under the Investigator Qualification Training Scheme.
- Trained 22 interagency PSEA focal points to roll out PSEA Standard Operating Procedures.
- With UNHCR, trained 76 frontline humanitarian workers on GBV, PFA and PSEA core principles and reporting channels, equipping them with skills to safely respond to a GBV/PSEA disclosure.
- Trained 13 emergency medical teams in caring for women subjected to violence, a WHO curriculum for training health-care providers.

Slovakia

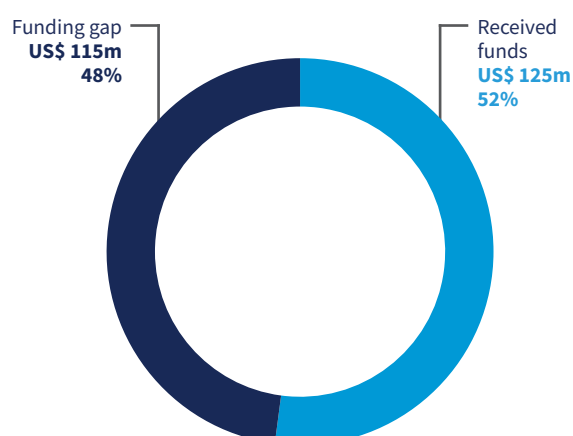
- Supported sensitization of partners in the Health and MHPSS Technical Working Groups on PRSEAH and, with the GBV and PSEA Task Force, identified entry points for the PSEAH mainstreaming into GBV and MHPSS programming that have been incorporated into partner training.

Funding overview and partnerships

In February 2023, WHO issued an appeal detailing its resource needs for Ukraine and refugee-receiving and hosting countries between January and December 2023. The resource needs were an estimated US\$ 240 million. This included US\$ 160 million for the health response in Ukraine and US\$ 80 million to address the health needs of Ukrainian people affected by the conflict in refugee-receiving and hosting countries. By the end of December 2023, WHO received US\$ 125 million of the appealed funds.

WHO would like to thank donors who are generously supporting it to work where the needs are greatest and to strengthen the health systems in Ukraine, and countries receiving and hosting refugees so that the health needs of Ukrainians are met wherever they are.

Received funding as of 31 December 2023



Donors	US\$
Austria	159 915
Canada	739 098
European Commission - European Civil Protection and Humanitarian Aid Operations	17 920 510
European Commission – Directorate General for Neighbourhood and Enlargement Negotiation	2 347 068
European Commission – Service for Foreign Policy Instrument	5 430 960
United Kingdom of Great Britain and Northern Ireland	3 503 185
France	2 200 220
Ukraine Humanitarian Fund	5 714 482
Slovenia	537 057
UNICEF (GAVI)	1 549 720
UNDP Multi-Partner Trust Fund	773 718
United States Agency for International Development	2 289 365
US Bureau of Humanitarian Assistance	28 406 948
Asia-Europe Foundation	10 000 000
Denmark	5 066 589
Germany – Federal Foreign Office	10 548 523
Ireland	1 609 442
Norway	8 282 883
US Bureau of Population, Refugees, and Migration	16 100 000
WHO Foundation	1 852 987
Total	125 032 670

The WHO Regional Office for Europe

The World Health Organization (WHO) is a specialized agency of the United Nations created in 1948 with the primary responsibility for international health matters and public health. The WHO Regional Office for Europe is one of six regional offices throughout the world, each with its own programme geared to the particular health conditions of the countries it serves.

Member States

Albania
Andorra
Armenia
Austria
Azerbaijan
Belarus
Belgium
Bosnia and Herzegovina
Bulgaria
Croatia
Cyprus
Czechia
Denmark
Estonia
Finland
France
Georgia
Germany
Greece
Hungary
Iceland
Ireland
Israel
Italy
Kazakhstan
Kyrgyzstan
Latvia
Lithuania
Luxembourg
Malta
Monaco
Montenegro
Netherlands (Kingdom of the)
North Macedonia
Norway
Poland
Portugal
Republic of Moldova
Romania
Russian Federation
San Marino
Serbia
Slovakia
Slovenia
Spain
Sweden
Switzerland
Tajikistan
Türkiye
Turkmenistan
Ukraine
United Kingdom
Uzbekistan

WHO/EURO:2024-9723-49495-74056

CONTACT

Pierre Roca

External Relations, WHO Regional Office for Europe

Karim Yassmineh

External Relations, WHO Headquarters

World Health Organization Regional Office for Europe

UN City, Marmorvej 51,
DK-2100 Copenhagen Ø, Denmark
Tel.: +45 45 33 70 00 Fax: +45 45 33 70 01
Email: eurocontact@who.int
Website: www.who.int/europe