Emergency in Ukraine



European Region

External Situation Report #17, published 14 July 2022 Reporting period: 30 June–13 July 2022





6.3 million
INTERNALLY
DISPLACED



11 544
CIVILIAN
CASUALTIES



5024CIVILIAN
DEATHS

Key updates

- According to WHO's Surveillance System for Attacks on Health Care, there have been 382 attacks on health care, resulting in 64 injuries and 82 deaths, reported between 24 February and 13 July. Attacks on health care include those against health facilities, transport, personnel, patients, supplies and warehouses. These attacks deprive people of urgently needed care, endanger health-care providers, and undermine health systems.
- The WHO Strategic Response Plan for June to December 2022 was published on 4 July 2022. It is an
 overarching framework built on the Ukraine Flash Appeal 2022 to guide priorities and work in support
 of government authorities who are leading the readiness, response and early recovery activities. It will
 be implemented in collaboration with partners providing life-saving support both inside and outside
 Ukraine.
- A team of WHO experts was on a mission from 1 to 8 July to provide technical support to Ukraine on environmental health issues, including water-related preparedness and response measures, with a focus on responding to a potential cholera outbreak. The team met with key national and international partners, including representatives from the United Nations Children's Fund (UNICEF), the United States Centers for Disease Control and Prevention (CDC), the Ministry of Health (MoH) of Ukraine, the Kyiv oblast Center for Disease Control and Prevention, the State Service of Ukraine on Food Safety and Consumer Protection, and the Ukrainian Association of Water and Sewer Utilities. The mission was organized by WHO, with financial support from the WHO Foundation.

1. SITUATION UPDATE

Figure 1. Distribution of Internally Displaced Persons (IDPs) and refugees in Ukraine and in refugee-hosting countries as of 5 July 2022

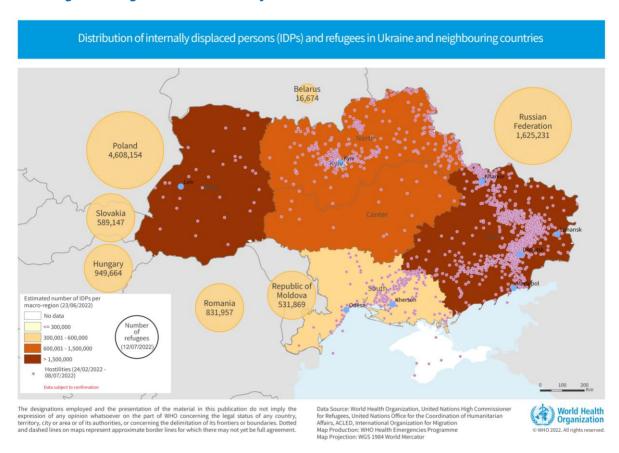


Table 1. Key humanitarian figures as of 12 July 2022

| People affected | |
|------------------------------|-----------------------------|
| Internally displaced persons | 6.3 million (as of 23 June) |
| Refugees | 9.2 million |
| People entering Ukraine | 3.5 million |
| Injuries among civilians | 6520 (as of 11 July) |
| Deaths among civilians | 5024 (as of 11 July) |

1.1 Population displacement and refugees

As the crisis evolves, displacement and mobility patterns continue to change. This requires a response that addresses both emerging and existing needs.

According to government data compiled by the Office of the United Nations High Commissioner for Refugees (UNHCR), 9.2 million refugees have left Ukraine for surrounding countries between 24 February and 12 July. Just over half have entered Poland (51%), while significant proportions have entered the Russian Federation (17%), Hungary (10%), Romania (9%), Slovakia (6%) and the Republic of Moldova (6%).

As of 23 June an estimated 6.3 million people remain internally displaced within Ukraine, representing 14% of the general population. Twenty-three per cent of Ukrainians have been unable to access medication due to the conflict.

1.2 Overall WHO response

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

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

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

Funding

- WHO's updated appeal (May 2022) details its resource needs for Ukraine and refugee-hosting countries. It estimates that between March and August 2022, US\$ 80 million is required for the health response in Ukraine. To meet the health needs in refugee-hosting countries between March and December 2022, it estimates that US\$ 67.5 million will be required.
- As of 13 July WHO has received US\$ 93.7 million (63.5%) against its total appeal from 17 donors.
- WHO would like to thank donors who are supporting its response in Ukraine and countries receiving and hosting refugees, including: Canada, European Civil Protection and Humanitarian Aid Operations (ECHO), European Commission Directorate-General for Neighbourhood and Enlargement Negotiations (DG NEAR), Germany, Ireland, Japan/Asia Europe Foundation, the King Salman Humanitarian Aid & Relief Centre (KSRelief), Kuwait, Norway, Novo Nordisk Foundation, Switzerland, the UN Central Emergency Response Fund (CERF) and the Ukraine Humanitarian Fund (UHF), the United States Bureau of Population, Refugees, and Migration and Bureau of Humanitarian Assistance, WHO Foundation, and the Socialist Republic of Viet Nam, for their timely contributions.

2. HEALTH PRIORITIES AND WHO ACTIONS IN UKRAINE TO DATE

2.1 Access to health care in Ukraine

Access to health care is severely impacted due to security concerns, restricted mobility, broken supply chains and mass displacement. Between 24 February and 13 July, 382 attacks on health care¹ were reported², resulting in 64 injuries and 82 deaths, with five new attacks reported in the past two weeks. These attacks deprive people of urgently needed care, endanger health-care providers, and undermine health systems.

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

Through engagement with the MoH of Ukraine, national health authorities, partners and donors, WHO has been able to provide populations with life-saving supplies, equipment and medicines. However, reaching some of the hardest-hit areas, where health systems have been severely disrupted, remains a challenge.

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

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

2.2 Priority public health concerns

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

| Conflict-related trauma and injuries | Emergency medical services, surgical departments and intensive care units have been overwhelmed with trauma patients. Access to health care has been limited, and essential health services have been disrupted or are collapsing. |
|--|---|
| Maternal and newborn health | According to the United Nations Population Fund (UNFPA), damage to and destruction of medical facilities as well as a shortage of service providers and critical supplies have severely compromised the delivery of essential health services, including access to maternal care for the estimated 265 000 women who were pregnant when the conflict erupted. |
| Management of chronic diseases and noncommunicable diseases (NCDs) | Noncommunicable diseases (NCDs) are the leading cause of morbidity and mortality in Ukraine, with the five major NCDs – cardiovascular disease, diabetes, cancer, chronic respiratory disease, and mental health conditions – accounting for 84% of all deaths. Disruptions in treatment for chronic cardiovascular and respiratory diseases increase morbidity and, most likely, mortality. About 120 000 people are living with type 1 diabetes and need to receive regular doses of life-saving medicines to survive. Among the key challenges identified were difficulties in controlling diabetes, lack of a continuous supply of medicines for chronic disease, and lack of compatibility of medicines for returnees to Ukraine due to differences in licensing and registration between the European Union and Ukraine. |
| Risk of emergence and spread of infectious diseases | Shortages of medicines and medical supplies, challenging access to essential health services, and the interruption of prevention, diagnostic and treatment services pose a high risk for adverse outcomes for people living with both HIV and TB. There is insufficient information about access to treatment for communicable diseases, including HIV and tuberculosis (TB), in cross-line areas, as well as on the availability of facilities and personnel equipped to provide the necessary services. It is reported that while 92% of HIV facilities nationwide continue to provide treatment, only 9% of HIV treatment sites are operational in the Luhansk oblast. While WHO has not suspended the supply of antiretroviral and TB drugs to the Donetsk and Luhansk oblasts, escalating hostilities have made deliveries extremely challenging. Ukraine has the second-highest burden of HIV/AIDS in Europe, with an estimated prevalence of 1% among Ukrainians between the ages of 15 and 49 years. It is assessed that about 59 000 people receiving antiretroviral therapy reside in areas affected by the conflict. Ukraine has the fifth-highest number of confirmed cases of extensively drug-resistant TB globally. The conflict has weakened TB surveillance capacity and interrupted continuous treatment regimens. Overcrowded conditions in shelters, population displacement, infrastructure damage as well as exacerbating factors, such as lack of adequate water, sanitation and hygiene, nutritional stress and exposure to cold weather during winter, could increase the risk of respiratory and diarrhoeal diseases. Between 23 February and 10 July the overall number of beds available and beds occupied by patients with COVID-19 decreased by 51% and 96%, respectively, reflecting potential challenges in accessing hospitals, limited data reporting, and a potential decrease in actual hospitalizations. The most notable decrease in the number of available beds was reported in the Luhansk oblast (100%), followed by the Vinnytsya (88%) and Chernivtsi (85%) oblasts. An average |

| Protection issues: risk of human trafficking and escalated risk of sexual and gender-based violence (SGBV) | Crises and emergencies greatly exacerbate all forms of SGBV, including sexual exploitation and abuse (SEA). At least two out of three women in Ukraine had experienced some form of gender-based violence (GBV) before the conflict. The security context and displacement have resulted in a sharp increase in the risk of multiple forms of violence, including SEA and trafficking of persons. The proliferation of agencies and non-vetted volunteers and voluntary organizations further increases the risk of SEA and all forms of sexual misconduct. Several interagency networks, led by UNHCR, have been activated in refugee-hosting countries, and risk assessments are under way, with one already completed in Romania. According to the April 2022 rapid assessment in Romania, more than 90% of refugees are women and children, who are at heightened risk of exploitation. Many are being hosted by families and community volunteers. There are concerns due to the lack of a process for vetting volunteers, and although many local organizations have highly skilled and qualified volunteers, unfamiliarity with international humanitarian safeguarding standards could pose additional risk. |
|--|--|
| Mental health and psychosocial support (MHPSS) | The affected population is considered at high risk for adverse mental health outcomes and there is an urgent need for continued mental health and psychosocial support services. Health-care workers face challenges of working over capacity due to understaffing, and are at increased risk of psychological distress, burnout and mental health issues. This comes against a backdrop of already responding to the COVID-19 pandemic, which has overstretched systems. |
| Food security and nutrition | The conflict is affecting food security within and outside Ukraine. In June the World Food Programme (WFP) served 2.6 million beneficiaries, which included providing nutrition support by distributing fortified cereals, bread and general food. Food distribution has mostly focused on the eastern part of Ukraine, where the conflict is the most intense. The remaining beneficiaries were people who moved to different areas within Ukraine. |

2.3 WHO and partner actions in Ukraine to date

Leadership and coordination

- The WHO Strategic Response Plan for June to December 2022 was published on 4 July 2022. It is an overarching framework built on the Ukraine Flash Appeal 2022 to guide priorities and work in support of government authorities who are leading the readiness, response and early recovery activities. It will be implemented in collaboration with partners providing life-saving support both inside and outside Ukraine.
- A team of WHO experts was on a mission from 1 to 8 July to provide technical support to Ukraine on environmental health issues, including water-related preparedness and response measures, with a focus on responding to a potential cholera outbreak. The team met with key national and international partners, including representatives from the United Nations Children's Fund (UNICEF), the United States Centers for Disease Control and Prevention, the MoH of Ukraine, the Kyiv oblast Center for Disease Control and Prevention, the State Service of Ukraine on Food Safety and Consumer Protection, and the Ukrainian Association of Water and Sewer Utilities. The mission was organized by WHO, with financial support from the WHO Foundation.
- A WHO expert led a mission to Odesa to assess the establishment of a hub, with mission members
 addressing matters related to public health and Health Cluster coordination with Partners. The expert was
 joined by the Deputy Minister of Health and the Chief State Sanitary Doctor of Ukraine to observe the
 training on chemical hazards.

Medical evacuation of patients (medevac)

 A total of 764 patients who were in need of medical evacuation, corresponding to 74% of the requests received by the European Commission, have been evacuated from Poland, Republic of Moldova, Slovakia, and Ukraine for medical treatment in 17 other European countries via the European Union Civil Protection Mechanism.

- Among current requests, a further 13% are in transit. These evacuations are mainly due to chronic conditions and sustained traumatic injuries.
- Transportation of patients within Ukraine is conducted by the national emergency services, while transportation across the border to other countries within the European Union (EU) is managed by international EMTs and coordinated by the CADUS team, a German nongovernmental organization (NGO) that provides EMT support

Health information and operations

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

- From 27 to 30 June representatives from WHO and the CDC trained 24 national- and regional-level epidemiologists in Ukraine on unique aspects of conducting traditional field epidemiology in emergency conditions, as well as additional epidemiological methods and information management services used in responding to health emergencies. The trainings were conducted with financial support from the World Bank in Ukraine.
- The WHO Representative to Ukraine attended the international Ukraine Recovery Conference held on 4–5 July in Lugano, Switzerland. The WHO delegation participated in the social recovery session, highlighting the importance of the health system in any recovery plans. WHO shared a technical document on the "Principles to guide health system recovery and transformation in Ukraine," published on 30 June.
- The WHO Country Office in Ukraine worked with the GTFCC team to translate the GTFCC Cholera application into Ukrainian. The beta version of the Ukrainian-language app has been tested and will soon be available on the Apple Store and Google Play.
 - The mobile app was developed to provide clear guidance and up-to-date information for early detection, monitoring and efficient response to cholera outbreaks. The app is addressed to public health professionals from all sectors working in cholera control, and designed to be used offline to accommodate those working in remote areas.

Supplies and logistics

- The Dnipropetrovsk, Kharkiv, Mykolayiv, Lviv, and Kyiv oblasts received medical supplies and equipment with a total value of US\$ 404 933 and a total weight of more than 21 tonnes.
- The process of interconnecting WHO's distribution plans with the MoH's MedData system for facilitating the handover of medical supplies has been initiated.
- Efforts are ongoing to coordinate transportation and other activities related to logistics support with local warehouses.
- Eleven procurement procedures exceeding US\$ 10.8 million have been initiated and the distribution plans for generators supplied have been approved.
- Goods with a total value of US\$ 1 049 311 and a total weight exceeding 42.6 metric tonnes reached Ukraine and were distributed across 24 oblasts.
- WHO continues the provision of support to Médecins Sans Frontières (MSF) for the importation of controlled medicine kits for various beneficiaries around Ukraine.
- WHO provided support to the finance team in finalizing the Ukraine conflict workplan that has been established to concentrate all awards related to the support of the Ukrainian health system since 24 February 2022.
- WHO supported CDC/IRR (International Reagent Resources) in importing reagents for the Ukrainian Public Health Centre.

• WHO is working with the MoH of Ukraine to distribute WHO health supplies to regions. WHO is continuing to support procurement processes for therapeutics, lab equipment, steam sterilizers and decontamination kits.

Risk communication and community engagement (RCCE) and external communications

- The Health information section for the vBezpetsi chatbot on Telegram and Viber was developed and launched. It provides automated health information in response to user questions.
- Message testing on access to mental health services in Ukraine has begun.
- In partnership with Facebook, WHO has launched a campaign to promote messages on cholera prevention and treatment.
- From 4 to 10 July WHO published 13 Twitter posts and five Facebook posts, which received a total of 32 696 and 13 809 impressions, respectively, covering various topics for displaced people in Ukraine, including health attacks, news about WHO support for Ukraine, and WHO's new publication titled "Building a stroke agenda for Ukraine".

Operational partnerships

Emergency Medical Teams

EMT Coordination Cell (CC) Ukraine.

- In the past two weeks, three mass casualty trainings were conducted in Ukraine for Emergency Medical Services (EMS) and Trauma in the Chernihiv region for over 100 health-care providers.
- The EMT CC is currently coordinating 27 EMTs from nine organizations operating across 13 oblasts in Ukraine. Their priority activities continue to be trauma care (inpatient and outpatient), rehabilitation (including burns and spinal cord injuries), mobile health, patient transfer and medevac, and trainings.
- As of 12 July several trainings using mixed modalities, virtual or face-to-face, have been conducted on topics such as advanced trauma life support for adults and children, basic emergency medicine and trauma, surgical management of penetrating trauma, and tactical emergency casualty care.
- From 13 March to 12 July, 5495 consultations were provided across 11 oblasts. Among outpatient visits, 11% were for respiratory infections, and 683 consultations for trauma injuries were provided.
- A national EMT Awareness Workshop is planned for early September in Ukraine.

GOARN

From 2 March to 12 July the GOARN institutions/network provided technical support, deploying seven experts to Denmark (2), Poland (2), Romania (1), Slovakia (1), Ukraine (1, remote) and six experts are scheduled to be deployed soon to Poland (1), Ukraine (3), Denmark (1), Czechia (1). So far 11 experts have completed their deployment – Poland (3), Denmark (2), the Republic of Moldova (1), Czechia (3), Slovakia (1) and Romania (1).

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

The third meeting of the Regional WHO-UN-Red Cross Movement Emergency Coordination Platform will take place on 14 July. Focal points to the Platform, including representatives from 19 UN agencies and partner organizations, have been invited, alongside members of the Issue-based Coalition on Health and Well-being (IBC-Health) and members of the WHO Regional Office for Europe's Incident Management Support Team. The meeting is focused on health information and assessments and will include an update on the Ukraine crisis by WHO/Europe, briefings on discussions from the Regional Cooperative Platform from IBC-Health and requests from Resident Coordinators/UN Country Teams. Further discussion and updates from Partners will also be included.

Health Cluster

WHO plays an essential coordination role in the response as the lead agency of Health Cluster Ukraine. As of 5 July, Health Cluster Ukraine has 144 international and local Partners, with planned, ongoing and/or completed health-related activities in 24 oblasts. The Health Cluster team continues to support the review of new projects submitted to the Ukraine Humanitarian Fund. Additional information is available on Health Cluster Ukraine's website. Health Cluster Partners have reached over 2.9 million people in the provision of medical supplies and services.

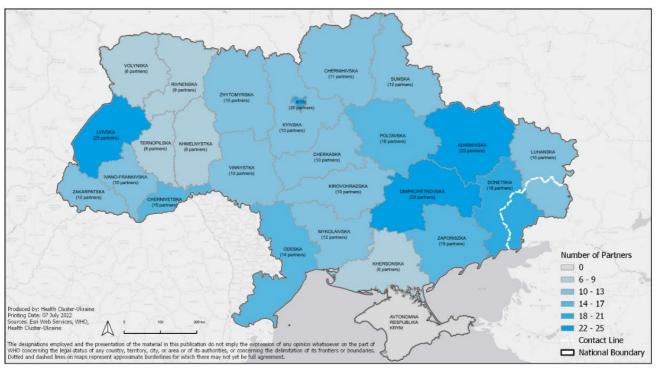
- From 4 to 8 July the Deputy Health Cluster Coordinator was in Odesa to meet with Partners and conduct site visits to assess key areas for strengthening and capacity building needs.
- The Dnipropetrovsk Subcluster: a subcluster meeting with representatives from agencies and the Department of Health was held on 12 July. The subcluster is meeting with regional health authorities and Partners.
- Vinnytsya and western Ukraine Subcluster: a second subcluster meeting will be held with Partners on 14 July.
 Currently, the subcluster is mapping Health Partners active in the oblast and meeting with regional health authorities and Partners.

Health Cluster Partners' presence and activities across Ukraine are mapped weekly through the 5Ws³ to chart the continuously changing humanitarian response landscape. As of 5 July Health Cluster Partners have completed or ongoing activities in 476 settlements in 24 oblasts and have provided support to over 160 health facilities across Ukraine.



Ukraine: Health Activities Number of Partners by Oblast - 07 July 2022





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

Table 2: Number of Partners by health domain, as of 5 July 2022

| Health domain of response activities | Number of Partners |
|--|--------------------|
| Sexual and reproductive health, child health and GBV | 30 |
| HIV/TB | 29 |
| Trauma/mass casualties | 24 |
| NCDs | 18 |
| Mental health | 16 |
| Other communicable diseases | 10 |
| Risk communication and community engagement (RCCE) | 10 |
| COVID-19 | 4 |
| Palliative care | 3 |
| Sexual and reproductive health, child health and GBV | 30 |

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

The health requests, planning and response tool (HRPR) being used to respond to requests for humanitarian health assistance from Partners and health facilities is currently tracking over 220 requests.

3. SITUATION AND ACTIVITIES IN REFUGEE-HOSTING COUNTRIES

3.1 Specific WHO actions in select refugee-hosting countries

Czechia

Situation update

- Between 24 February and 5 July an estimated 387 945 Ukrainian refugees entered Czechia and were granted a protection visa under the Temporary Protection Act. The authorities estimate that approximately 300 000 of them remain in the country. As of 5 July approximately 151 asylum applications have been submitted.
- The Czech Senate approved almost unanimously tighter rules of distribution of humanitarian support to refugees from Ukraine on 22 June. The changes, which include an end to the CZK 5000 humanitarian benefit for refugees with free accommodation, food, and basic hygiene products, are intended to prevent so-called "benefit tourism".
- The Czech health-care system is facing a shortage of nurses and doctors in some areas. As a result, it can become overloaded in the long run with increased pressure from refugees. Lack of funding and strict EU regulation have so far been an issue in including Ukrainian health-care workers in the Czech health-care system.
- Health insurance for Ukrainian refugees in Czechia has been allocated for a maximum of 150 days, in accordance with the Amendment of Act No. 65/2022. Children under 18 and adults over 65 years will automatically receive insurance via the state, but adults aged 18–65 years are obliged to inform their insurance companies about their method of payment for health insurance.

WHO actions

- WHO continues to meet with the Government of Czechia to coordinate the refugee response and to improve access to health services for refugees from Ukraine.
- WHO is drafting a situational analysis report on Czech public health information systems in the context of the Ukraine crisis.
- WHO is working to establish data analysis of the health profile of Ukrainian refugees utilizing the Ukraine assistance points in Czechia.
- WHO hosts a weekly MHPSS Working Group (WG) to discuss the current provision of psychosocial support to Ukrainian refugees and volunteer workers and to identify gaps and needs.

Hungary

Situation update

Between 24 February and 13 July an estimated 905 104 Ukrainian refugees entered Hungary. Approximately 26 199 have registered for temporary protection or similar national protection schemes.

WHO actions

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

Poland

Situation update

- Between 24 February and 12 July an estimated 4 472 349 Ukrainian refugees entered Poland, accounting for 51% of the total refugee population.
- Emergency medicine training for Ukrainian doctors is ongoing. Specialists from the Medical University of Warsaw will train 400 Ukrainian doctors in emergency medicine, battlefield medicine and treating multi-organ injuries in wartime conditions.
- Primary public health concerns include communicable diseases such as TB and HIV in accommodation centres and access to specialized health services for people with disabilities.
- EMT CC Poland
 - Currently EMT CC Poland is coordinating 17 Health Partners, of whom 12 are providing direct clinical care to Ukrainian refugees.
 - The EMT CC has engaged with the MoH in a joint effort to disseminate information on access to medevac pathways for Ukrainian patients in Poland.

WHO actions

- Regular Health WG meetings chaired by WHO continue on Mondays via Zoom.
- A meeting with UNHCR and a visit to the Protection Centre in Rzeszów took place on 30 June–1 July. The main issue highlighted was access to health and disability services, specifically in terms of wait times (3–4 months in Rzeszów for the first appointment).
- From 26 to 30 June WHO hosted a lunchtime session at the World Forum meeting, providing an overview of the situation and needs of Ukrainian refugees in Poland, including demographics, key challenges and health needs.
- The PRSEAH (Preventing and Responding to Sexual Exploitation, Abuse and Harassment) Orientation workshop follow-up is ongoing. A six-month plan is under development, including activity and budget. WHO is developing a strategy and implementation framework. Additionally, candidates for Gender Based Violence/Sexual and Reproductive Health (GBV/SRH) positions are currently being recruited.
- A new EMT CC Coordinator has been deployed to Rzeszów as of 26 June.
 - The EMT CC continues to provide technical assistance and advice regarding a possible request from Poland to deploy EMTs to establish and run a medevac hub in Rzeszów (assistance provided includes drafting the terms of reference, scope of practice, integrating Polish NGOs in the hub, facilitating a mechanism for professional licensing in Poland for WHO-classified EMTs, legal requirement of having a Polish pharmacist integrated with the EMT).
- Processes are under way to align the Minimum Data Set (MDS) with needs in the field and patient profiles.
- Re-initiation of the EMT Coordination Meeting, as of 1 July, with WHO and six teams providing care to refugees

Republic of Moldova

Situation update

- Between 24 February and 10 July an estimated 523 707 Ukrainian refugees entered the Republic of Moldova and approximately 419 141 refugees have exited. Of these, 8121 asylum applications have been registered, from both Ukrainians and other third country nationals (TCNs).
- To date, 78 refugee accommodation centers (RACs) provide shelter to 3180 individuals (capacity: 6715). Of these individuals, 15% are pregnant and lactating women, 27% are people with disabilities, 3% are people with serious medical conditions, 5% are children between 0 and 2 years old, 37% are children between 2 and 18 years old and 11% are older people (65+). In terms of gender, 64% are women and 36% are men.
- As of 24 June the state of emergency in the Republic of Moldova related to the Ukraine conflict was extended for another 45 days, until 8 August.

WHO actions

- The online Interagency Refugee Health WG meeting took place on 6 July, with the participation of more than 36 representatives of UN Agencies, donors and NGOs. WHO and UNICEF jointly presented activities on nutrition among refugees.
- WHO participated in the EU DG Sante/EU ECHO meeting on the medevac of refugees using the EU Civil Protection Mechanism. The preparatory meeting to develop the Standard Operating Procedures on Medical Evacuation for the partners and NGOs involved in the medical transfer is ongoing.
- On 6 July a local immunization campaign titled "Get Vaccinated! Protect your future!" was launched in the Chişinău municipality, organized by the MoH and the National Agency for Public Health, with the support of WHO and the EU. More than 100 people attended the event, including heads of institutions and departments from local authorities.
- EMT CC Republic of Moldova
 - Currently the EMT CC is coordinating six EMTs from six organizations operating in four geographical regions in the Republic of Moldova.
 - The MoH accepted the offer of Humedica EMT Type 1 capacity to support routine services in the field. The expected start date is around the end of July.

Romania

Situation update

- Between 24 February and 11 July an estimated 1 331 382 Ukrainian refugees entered Romania. Of these entries, approximately 1 246 989 have exited Romania. Approximately 42 207 have registered for temporary protection or similar national protection schemes.
- As of 7 July a total of 14 cases of monkeypox have been reported. All patients are men and in good health. No cases have been reported in children, with no deaths reported overall.
- From 20 June to 11 July a total of 100 patients received care at the Romexpo Integrated Services Centre and primary, reproductive and sexual health services. This also includes psychological counselling and emotional support for children and adults.

WHO actions

- WHO/Europe is providing ongoing support to a behavioural insight (BI) and health system strengthening mission (6–7 July) to present the results of the BI study to MoH leadership, including the Minister of Health, and to WHO- and MoH-led WGs on health needs and access to services for Ukrainian people.
 - The results of the BI study were presented to MoH leadership, including the Minister of Health, and agreement was reached on how to increase access to services for people coming from Ukraine. The Minister of Health has agreed to establish a BI centre of excellence in Romania.
 - o Plans have been made to produce a video in Ukrainian explaining how the health system works in Romania.

- WHO has finalized the mapping of family doctors (24) willing to provide care for refugees and who have agreed to widely disseminate their work via personal channels.
- The seventh meeting of the WHO-led Health WG and co-led MoH Health WG was held on 6 July, focusing on the results of the BI analysis and the path forward after discussions between the MoH of Romania and WHO.
- Plans are under way to set up primary healthcare clinics (PHC) clinics for refugees in high-density counties.
- WHO continues to support the development and dissemination of information materials for refugees, humanitarian workers and health-care workers in Ukrainian, Romanian and English. The flyers, posters, Q&As, and social media tiles explain how to access health care, health rights, vaccination and antibiotics, and are available in digital and print format. The materials are co-produced with the MoH and approved by the National Health Insurance House and National Institute of Public Health.

Slovakia

Situation update

- Between 24 February and 6 July an estimated 580 621 Ukrainian refugees entered Slovakia.
- As of 6 July, 84 334 refugees have requested temporary protection in Slovakia and 190 people have applied for asylum.
- The MoH will assess the possibility of changing legislation to allow pharmacies to administer vaccines. The negotiations and interdepartmental comment procedure are expected to start in August 2022.
- There is a long-term shortage of doctors and nurses in Slovakia. In total, the country lacks approximately 500 doctors for all districts and the situation is critical.

WHO actions

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

Resources

- Ukraine crisis strategic response plan for June-December 2022
- Public Health Situation Analysis (PHSA) Ukraine, 29 April 2022
- Public health situation analysis: refugee-hosting countries, 17 March 2022
- Previously published Situation Reports: Emergency in Ukraine
- Ukraine emergency webpage
- Health cluster; Emergency Medical Teams (EMT)
- Dashboards with the most recent posts across Facebook, Instagram and Twitter