

THE WORLD HEALTH ORGANIZATION'S

# HEALTH EMERGENCY APPEAL 2023

## SERVING THE MOST VULNERABLE DURING CRISES

As we enter 2023, the number of people in need of humanitarian relief has increased by almost a quarter compared to 2022, with a record 339 million people requiring urgent assistance – many of whom are at risk from disease outbreaks, nutritional crises, and a lack of access to essential medical services.

Driving these crises are the emergence of new epidemic diseases, increased geopolitical conflict, the collapse of trade leading to famine and shortages of essential goods, the intensification of ecological degradation and climate change. Taken in isolation, any one of these trends would pose a serious challenge to global health and prosperity, but evidence from the past few decades tells us that these trends increasingly interact in complex and unpredictable ways.

Sustained commitment and innovation are required to deal with the increasing scale and complexity of threats to health and the ever-growing scale of humanitarian need. WHO's Health Emergency Appeal calls for \$2.54 billion to continue to respond to health emergencies, in a way that builds sustainable resilience of people and communities to future health threats.

Through the Health Emergency Appeal, WHO will provide support to 54 health crises around the world, including 11 of the highest-level 'Grade 3' emergencies – those which require an urgent and major WHO response.

With adequate funding and urgent action, we can ensure that health is protected during emergencies - saving lives, supporting recovery efforts, preventing the spread of diseases within countries and across borders, and ensuring that communities have the opportunity to rebuild prosperous futures. Ultimately, progress towards the Sustainable Development Goals depends on protecting the health of the most vulnerable.

<sup>3</sup>UN 2023 Global Humanitarian Outlook.



North Darfur, Sudan - 25 April 2022: Midwife Bahja in her home in Abu Gaw with one of her children. Before the construction of the new health care center in her village, pregnant women used to have to go to Bahja's house for consultations, and sometimes ended up giving birth in her home. Now they can visit her at the new clinic.

"We are very happy, our health is better, the health center is beautiful and people are standing with us," she said.

The village's previous health care center was destroyed and residents of Abu Gaw, including Bahja, fled during the war in Darfur in 2004. The community identified rebuilding the health center as a priority through a series of community health dialogues facilitated by the WHO with North Darfur health authorities.

*Credit: WHO/Hala Habib*

## WHAT DOES THE APPEAL COVER?

WHO's Health Emergency Appeal is a consolidation of funding requirements for the protection of vulnerable populations affected by acute and protracted health emergencies around the world. The Appeal is fully aligned with WHO's role in delivering on the UN's regional and country-specific humanitarian response plans. Contributions to the appeal can be fully flexible across regions or within countries, allowing WHO to allocate resources according to the greatest need, flexible across a region, or flexible within a country.

Due to the unpredictable nature of health emergencies, the appeal is a snapshot of projected needs for all the emergencies that WHO is currently responding to. To respond to new emergencies, or escalations of existing emergencies, WHO is able to call on the Contingency Fund for Emergencies (CFE), which was created to save time, resources and lives by enabling rapid response to disease outbreaks and health emergencies, often within 24 hours or less. The CFE is a flexible, pooled fund, internal to WHO, for which funds are mobilised throughout the year and replenished and reimbursed when possible. As new emergencies arise, WHO also issues dynamic flash appeals, enabling rapid response to specific crises.

**WHO General Program of Work**  
**1 billion people better protected from health emergencies**

Contingency Fund for  
Emergencies

Emergency operations  
and appeals segment of  
the Program Budget

Health Emergency Appeal

Base Segment of the Program Budget



European Civil Protection and Humanitarian Aid (ECHO) delegation and WHO team visiting Al-Sadaqah Hospital in Aden Governate. They toured the Emergency Operation center and Dialysis center of the hospital.

Photo credit: WHO

## HEALTH EMERGENCIES

Health emergencies are disease outbreaks, disasters and humanitarian crises with public health consequences.

WHO grading of emergencies is used to determine the level of operational response required. Following a risk assessment, emergencies are classified as:

### ○ **UNGRADED:**

A public health event or emergency that is being monitored by WHO but that does not require a WHO operational response.

### ○ **GRADE 1:**

A single country emergency requiring a limited response by WHO, but that still exceeds the usual country-level cooperation from WHO.

### ○ **GRADE 2:**

A single country or multiple country emergency, requiring a moderate response by WHO.

### ○ **GRADE 3:**

A single country or multiple country emergency, requiring a major/maximal WHO response.

### ○ **PROTRACTED (GRADE 1, 2, OR 3):**

emergencies that persist for longer than 6 months and require a prolonged response from WHO.

## DASHBOARD

Data as of 20 January, 2023\*

**54**

TOTAL GRADED EMERGENCIES

**5**

GRADE 1

**1**

PROTRACTED 1

**30**

GRADE 2

**7**

PROTRACTED 2

**6**

GRADE 3

**5**

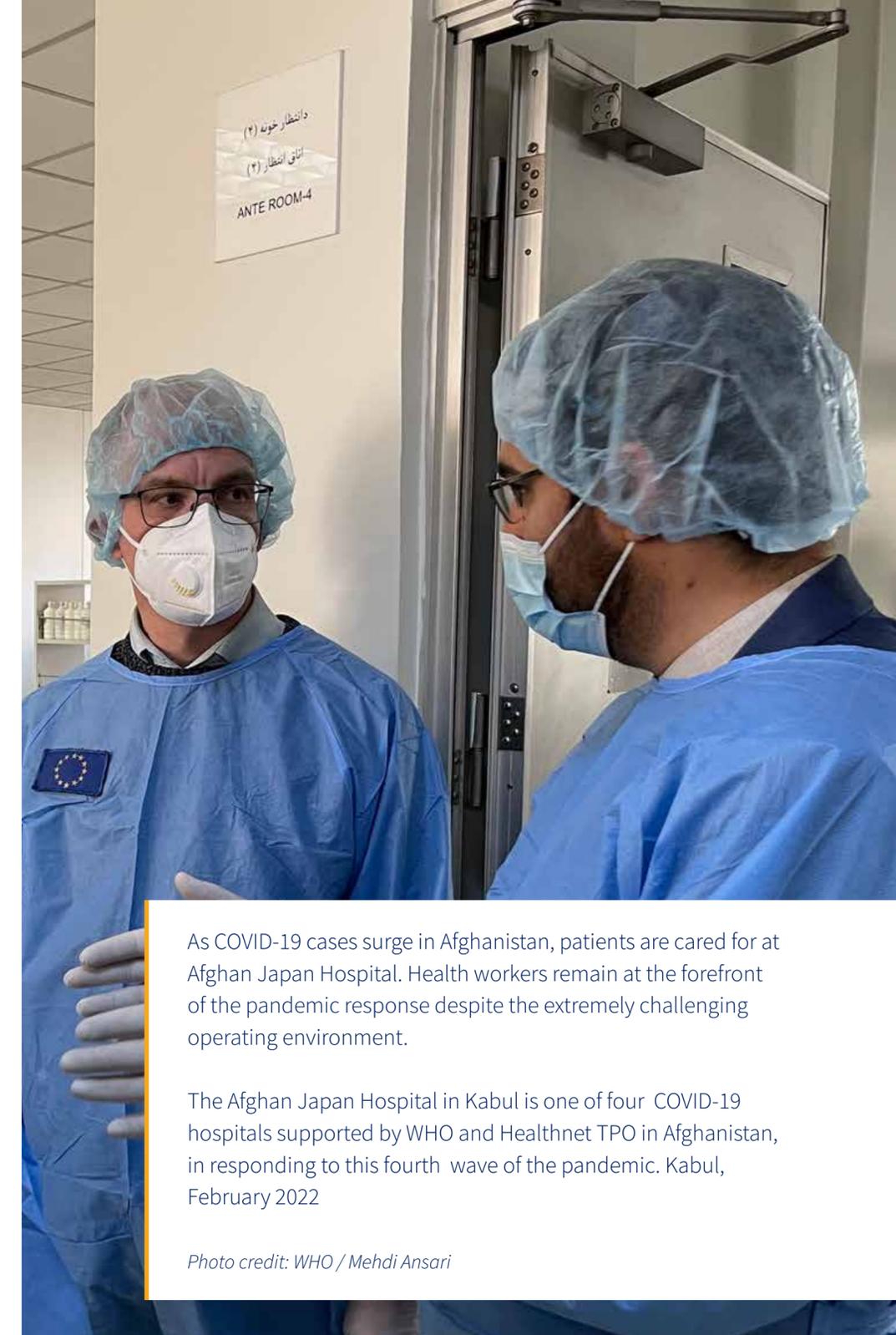
PROTRACTED 3

**234**

Country, area or territory reporting COVID-19 cases

**110**

Country, area or territory reporting mpox cases



As COVID-19 cases surge in Afghanistan, patients are cared for at Afghan Japan Hospital. Health workers remain at the forefront of the pandemic response despite the extremely challenging operating environment.

The Afghan Japan Hospital in Kabul is one of four COVID-19 hospitals supported by WHO and Healthnet TPO in Afghanistan, in responding to this fourth wave of the pandemic. Kabul, February 2022

*Photo credit: WHO / Mehdi Ansari*

\*WHO continuously updates the graded emergencies figures based on data reconciliation exercises and on-the-ground updates from WHO Country and Regional Offices. These figures represent the compilation as of 20 Jan 2023.

# GRADE 3 HEALTH EMERGENCIES



## SYRIAN ARAB REPUBLIC

### Complex Emergency

WHO is working with partners to provide life-saving primary health services and coordinate referrals to trauma services and specialized care for more than 15 million people in need. In addition, broader work is underway to restore health system functionality and build resilience, including strengthening preparedness and response to disease outbreaks such as cholera.



## UKRAINE

### Conflict

WHO is working with partners to respond to the health emergency triggered by the war. This includes delivering specialized medical supplies, coordinating the deployment of medical teams, and working with health authorities to minimize disruptions to the delivery of critical health care services within Ukraine and in countries hosting refugees.



## AFGHANISTAN

### Complex Emergency

With Afghanistan facing one of the most complex humanitarian emergencies in the world, WHO is focused on reaching everyone everywhere and putting mothers and children first. WHO and partners are working to expand coverage and increase the quality of healthcare services; provide life-saving medical supplies; and respond to emerging health threats, with a focus on disease outbreaks.

Globally, WHO continues to respond to COVID-19 and mpox, both Grade 3 emergencies.



## YEMEN

### Complex Emergency

Following years of conflict, 19 million people in Yemen are food insecure and less than 50% of all life-saving health facilities are fully functional. WHO is working to ensure access to lifesaving and life-sustaining, health and nutrition services for the most vulnerable – as well as to tackle recent polio outbreaks. Efforts are also ongoing to strengthen and sustain health system capacity.



## GREATER HORN OF AFRICA<sup>1</sup>

### Drought and Food Insecurity

WHO is coordinating with partners in the health sector and beyond to avert the worst effects of food insecurity and to give people access to the health services they need. This includes countering the consequences of malnutrition, monitoring and responding to outbreaks of diseases, and maintaining essential health services – including those for sexual and reproductive health, treatment for chronic infectious diseases, and mental health services.



## SOMALIA

### Complex Emergency

Food insecurity worsened by drought has put millions of people in Somalia at risk of severe malnutrition and outbreaks of diseases. With the health care system weakened by ongoing conflict and insecurity, WHO is working to provide essential services, including countering the consequences of malnutrition in children, strengthening surveillance of disease outbreaks, and supporting the response to cholera and measles outbreaks.



## DEMOCRATIC REPUBLIC OF THE CONGO

### Complex Emergency

In the Democratic Republic of the Congo (DRC), following several epidemics and with current outbreaks of mpox and cholera, activities are focused on strengthening capacities to detect, prevent and respond to outbreaks and other public health emergencies. WHO is also working with partners to improve access to essential health services with a focus on the most vulnerable populations, such as those at risk of sexual violence or in need of mental health services.



## SOUTH SUDAN

### Complex Emergency

The combination of conflict and flooding has contributed to high levels of acute food insecurity and outbreaks of diseases including measles, cholera and hepatitis E – plus a risk of Ebola virus disease outbreaks. WHO is working with partners to provide essential health and nutrition services, as well as strengthen preparedness and response for disease outbreaks – including deployment of vaccines.



## NORTHERN ETHIOPIA

### Complex Emergency

In a complex and volatile humanitarian situation – with added challenges caused by drought – WHO is coordinating with partners in Tigray and neighbouring areas. This includes providing emergency health support, maintaining essential services such as newborn, maternal and child health services, and strengthening capacities for prevention, preparedness, and response to disease outbreaks.

1. Djibouti, Ethiopia, Kenya, Somalia, South Sudan, Sudan and Uganda

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.



## 2023 FINANCIAL REQUIREMENTS

In 2023, US\$ 2.54 billion of funding is required to enable WHO to reach the millions of people in need of urgent and life-saving support.

| Grade 3 emergency                                                                                                            | Planned costs (US\$ '000) |
|------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| G3 - Global COVID-19                                                                                                         | 772 221                   |
| G3 - Afghanistan, Complex Emergency                                                                                          | 165 488                   |
| G3 - Global, mpox                                                                                                            | 30 571                    |
| G3 - Greater Horn of Africa, Drought and Food Insecurity (Djibouti, Ethiopia, Kenya, Somalia, South Sudan, Sudan and Uganda) | 178 019                   |
| G3 - Northern Ethiopia, Complex Emergency                                                                                    | 42 466                    |
| G3 - Syrian Arab Republic, Complex Emergency                                                                                 | 105 847                   |
| G3 - Ukraine, Conflict                                                                                                       | 253 000                   |
| P3 - Democratic Republic of the Congo, Complex Emergency                                                                     | 33 300                    |
| P3 - Nigeria, Complex Emergency                                                                                              | 22 676                    |
| P3 - Somalia, Complex Emergency                                                                                              | 16 913                    |
| P3 - South Sudan, Complex Emergency                                                                                          | 28 588                    |
| P3 - Yemen, Complex Emergency                                                                                                | 133 884                   |
| Other graded emergencies and ongoing operations                                                                              | 730 750                   |
| CFE - Contingency Fund for Emergencies*                                                                                      | 50 000                    |
| <b>Total</b>                                                                                                                 | <b>2 541 047</b>          |

\*minimum requirement for the replenishment of the Contingency Fund for Emergencies  
 \*\*Please note: Several of the countries listed in the table above are responding to multiple emergencies with different grades simultaneously. For further details on the full funding requirements please refer to the country specific appeals. Below is a snapshot of the total funding requirements, across WHO's ongoing emergency responses in Afghanistan, Ethiopia, Syrian Arab Republic, Democratic Republic of Congo, Somalia, South Sudan and Yemen.  
 4WHO Investment Case: <https://www.who.int/about/funding/invest-in-who/investment-case>

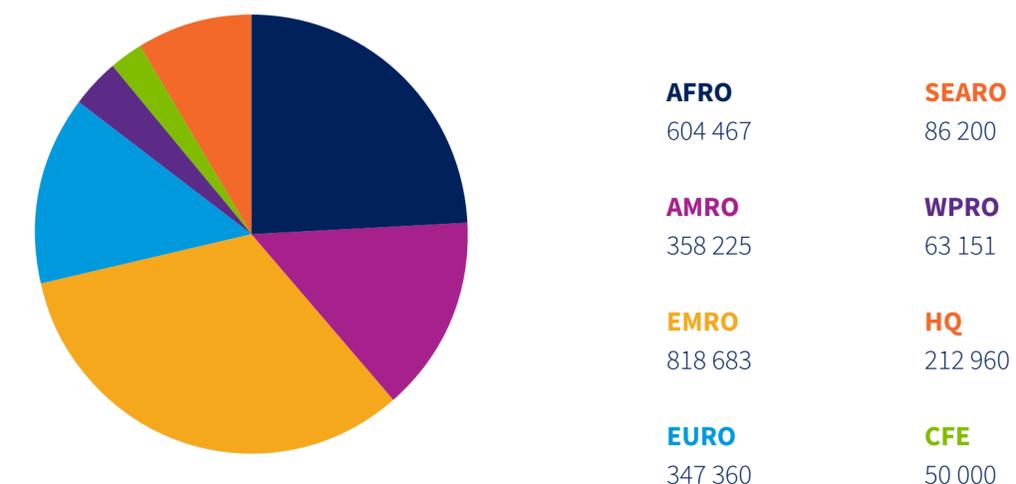
### Overall funding requirements for all ongoing WHO response operations in country

| Emergency response           | 2023 Funding requirements ( US\$ '000) |
|------------------------------|----------------------------------------|
| Afghanistan                  | 188 398                                |
| Ethiopia                     | 127 955                                |
| Syrian Arab Republic         | 88 315                                 |
| Democratic Republic of Congo | 41 100                                 |
| Somalia                      | 98 605                                 |
| South Sudan                  | 52 093                                 |
| Yemen                        | 141 523                                |

A doctor checks on a boy who was displaced by the Pakistan floods at a medical tent in a makeshift camp in Charsadda Sports Complex on 31 August.



## FUNDING REQUIREMENTS BY MAJOR OFFICE (US\$ '000)



\*Minimum requirement for the replenishment of the Contingency Fund for Emergencies

WHO PRIORITISES COST-EFFECTIVE, HIGH IMPACT RESPONSES AND SOLUTIONS THAT PROTECT HEALTH, LIVES AND LIVELIHOODS. EVERY US\$ 1 INVESTED IN WHO GENERATES AT LEAST US\$ 35 IN RETURN ON INVESTMENT.<sup>4</sup>

# OUR IMPACT IN 2022

In December 2022, the World Health Organization was able to reach millions of people during crisis - responding to 54 health emergencies, including 13 grade 3 emergencies.

From preventing deadly Ebola from spreading beyond Uganda, vaccinating children in Pakistan against waterborne disease and following deadly floods, to supporting maternal and newborn health in Ukraine, our dedicated in-country teams delivered lifesaving healthcare to those who needed it most. The examples below illustrate the breadth of WHO's response around the globe in 2022.

**236.8K**

disability- related consultations carried out

**5.2M**

maternal health consultations provided by the Health Cluster

**1.88BN**

COVID-19 vaccine doses delivered to 146 countries by ACT- Accelerator partners and WHO

**11.8K**

active mobile clinics each month

**600**

medical doctors and nurses trained by WHO in Afghanistan in August 2022, ensuring proper treatment of conditions such as acute watery diarrhoea following flooding

**600K**

doses of cholera vaccine shipped following WHO support to the Ministry of Public Health in Lebanon

**140**

public health facilities in Libya received medicines, medical supplies and equipment from WHO

**9M**

pieces of surveillance information processed by WHO every month – including the assessing of 4,500 potential risks and verifying an average of 30 threats

**6K**

health care workers trained in mass casualty management and trauma care in Ukraine

**10K**

metric tons of health commodities delivered by WHO in 2022

**2M**

consultations related to mental health and psychosocial support organized



Temira is pictured with her 12-month-old daughter Zahara in front of the Eltomale Site Mobile Health and Nutrition Team in Chifra, Afar.

WHO supports mobile health and nutrition teams in Afar directly or through partners. The pictured mobile health team is one of five teams that WHO directly supports by covering operational costs, providing medical supplies and training.

*Photo credit: WHO / Martha Tadesse*