WHO 2024 Emergency Appeal: Ukraine

JANUARY 2024





Foreword

Dear Partners,

As we begin 2024, the relentless war in Ukraine continues to profoundly impact people and the health care system nationwide. Despite being confronted with over 1475 attacks on health care facilities, as of January 2024, and a rising number of people in need of support, the resilience displayed by the health system and health workers remains extraordinary. As the World Health Organization (WHO), we acknowledge that the path to recovery will continue to be challenging. We will continue to focus our long-running humanitarian response and support to the country throughout 2024 and beyond.

The year 2023 saw WHO and Ukrainian health authorities continuing to collaborate under extraordinary conditions, supporting communities and health facilities severely affected by the war, often operating within close proximity to the contact line. In late 2023, WHO maintained its highest possible emergency grading (grade 3 emergency) for the war in Ukraine, showing the long-term nature and need for WHO to continue its committed response. We have also seen the scale of the war's impact extending far beyond the immediate toll on physical health, creating deep-rooted challenges in the health care sector.

Our response has encompassed critical areas such as mental health, primary health care (PHC), and public health surveillance, prioritizing the needs of the most vulnerable, including individuals in remote areas and on the frontlines, and addressing the compounded difficulties brought on by the winter and energy crisis. Our efforts have focused on responding to acute needs and adapting the health system to future challenges while ensuring its inclusiveness. Integrating innovative health service delivery models, comprehensive training for medical professionals and targeted medicinal supply delivery to facilities has been central to our approach.

Through our work, in 2023, we have supported 7 million individuals in Ukraine through diverse health interventions, delivering more than 2000 metric tonnes of essential supplies. Our numerous health partnerships and training programmes for emergency medical services responders in affected regions also embody our dedication.

The humanitarian crisis triggered by the war in Ukraine, characterized by a multitude of individuals desperately in need of urgent assistance, starkly

emphasizes the vast magnitude of the health response demanded. Access to essential services, particularly in the country's eastern and southern oblasts, remains severely hampered, adding strain to the health care system. WHO's commitment to enhancing health preparedness and response remains firm in the face of these realities.

In this 2024 WHO emergency response appeal, we acknowledge the ongoing need for life-saving interventions in Ukraine. Our focus is on maintaining access to emergency health services while reinforcing the health system against the backdrop of current and potential crises. The situation requires a balanced and prepared approach while considering the possibility of overlapping health emergencies.

The support of our donors and partners in 2023 was crucial, enabling us to assist millions of people in Ukraine through a team of over 300 dedicated colleagues working on the ground across the country. The need for sustained and focused support becomes even more apparent as we move forward in this protracted crisis. The task ahead remains significant, and with your continued partnership, we aim to make a meaningful difference in addressing the health needs of the people living in Ukraine.

In solidarity with Ukraine, we reiterate our commitment to health as a fundamental human right, working towards a future where equitable health care access is a reality for all.

Sincerely,

Hans Henri P. Kluge Regional Director WHO Europe



WHO is deeply grateful for all its contributors' unwavering support and commitment.

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Current situation and impact on health

27 768 civilian casualties have been officially reported since the escalation of the war in February 2022 including women and children. This includes 9806 deaths and 17 962 injuries¹, although the actual toll is anticipated to be much higher.

The number of internally displaced persons (IDPs) is estimated at 3.7 million, and a further 6.2 million refugees have been recorded globally².

1475 attacks on health, resulting in 112 deaths and 224 injuries³ **have been recorded.** 630 health facilities were damaged, where 454 768 people are treated monthly on average.

9.6 million people in Ukraine are estimated to be at risk of or living with a mental health condition, and 3.9 million people are estimated to suffer from moderate to severe symptoms⁴.

Significant disruption of water availability in health care facilities in Dnipropetrovsk, Kherson and Mykolaiv oblasts following the Nova Kakhovka dam destruction in June.

84% of all deaths are caused by noncommunicable diseases (NCDs)⁵.

Gender-based violence (GBV) is a major issue within Ukraine⁶: 26% of women and girls experience violence by an intimate partner.

Ukraine has one of the **highest burdens of HIV**, **tuberculosis and maternal mortality ratios** in Europe.

High risk of **infectious diseases** and outbreaks of **food and water-borne diseases**.

Unprecedented threat of a **chemical**, **biological**, **radiological and nuclear (CBRN)** emergency.

- Source: Ukraine: civilian casualty update 8 October 2023. Geneva: United Nations Office of the High Commissioner for Human Rights; 2022 (Ukraine: civilian casualty update 11 September 2023 | OHCHR)
- 2. Source: IOM DTM October 2023
- 3. Source: Surveillance System for Attacks on Health Care (SSA), WHO.
- Source: WHO press release: Amid a year of relentless war, WHO Regional
 Director for Europe strengthens commitment for mental health services during
 visit to Ukraine, February 2023.
- $\label{eq:continuous} Source: https://reliefweb.int/report/ukraine/ukraine-war-impact-disruption-infectious-and-chronic-disease-programmes-expected-be-severe-and-durable and the continuous continu$
- Well-being and safety of women. OSCE-led survey on violence against women: Ukraine. OSCE, 2019. Режим доступу: https://www.osce.org/files/f/ documents/1/3/440312_0.pdf

People in need in 2024⁷



14.6 million people in need Of which **7.8 million** people in need of health assistance



8.5 million people targeted Of which **3.8 million** people targeted for health assistance

- 7. Source: HNRP 2024. The number of people in need has decreased between 2023 and 2024, as many Ukrainian families are now in need of post-emergency assistance, to provide sustainable solutions fostering their resilience and socioeconomic recovery. In addition, the humanitarian response in 2024 will focus on communities living in territories directly impacted by the war, those in close proximity of active conflict zones. Finally, the 2024 figures do not include people in need in non-government-controlled areas (Luhansk, Donetsk oblasts), contrary to 2023 figures.
- * As of November 2023

Funding requirements



US\$ 75 million required in 2024

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WHO Ukraine emergency response priorities in 2024

Provide life-saving trauma and emergency health care to the most vulnerable populations and communities affected by the war.

Support safe, dignified, and appropriate access to quality health care services and ensure continuity of care, including to GBV survivors, especially in areas directly impacted by the ongoing war.

Lead effective coordination of humanitarian health interventions, information management, surveillance, and early warning systems.

Support resilience, preparedness, and early recovery of the public health system.

Improve mental health awareness and practice, and **promote the well-being** of the population.

Support outbreak detection, investigation, and response capacity, using One Health approach, covering human, animal, and environmental health.

Prioritize response readiness and all-hazard readiness to respond to emergencies.

WHO impact in 2023



7 million people reached with various health interventions in Ukraine



323 operational health partnerships engaged in Ukraine



2000 metric tonnes of supplies distributed in Ukraine



372 625 people served in facilities supported with trauma supplies (including trauma and emergency surgery kits)



Over 7.2 million people reached by health cluster partners



Over 2243 emergency medical services (EMS) first responders and clinicians trained in chemical preparedness and response





Emergency health care needs in Ukraine

The ongoing war in Ukraine continues to affect millions of people, with approximately 3.7 million IDPs hesitant to return home due to safety concerns. The health care system, particularly in war-affected regions in the east and south of the country, faces severe disruptions. Key issues include staffing shortages, damage to health care facilities, and damaged infrastructure. This appeal focuses on WHO's emergency response to deal with the direct consequences of the war on health. It does not cover the longer-term work and support provided by WHO to Ukraine including critical work on recovery and reconstruction.

WHO is committed to building its support for Ukraine, aiming to assist 3.8 million people in 2024. As the crisis persists, WHO's focus extends beyond immediate health care delivery to fostering sustainable health care recovery, emphasizing reforms, resilience, readiness and trust.

War-affected oblasts such as Chernihiv, Dnipropetrovsk, Donetsk, Kharkiv, Kherson, Kyiv, Luhansk, Mykolaiv, Odesa, Sumy and Zaporizhzhia continue to face significant or full disruption of primary care services and infrastructural damage. A health needs assessment conducted by WHO in October 2023 revealed that two-thirds of respondents seeking health care encountered **barriers primarily related to cost, time and transportation constraints**⁸. In areas close to the frontlines, 22% of households delay seeking medical care, with 7% struggling to acquire essential medications. Family doctor access is significantly lower in these regions, where financial constraints are more acute; 24% cannot afford medicines, and 51% are unable to pay for medical services. Additionally, households in areas directly affected by the war are less likely to seek care for chronic conditions (41%) and children's health (25%).

According to the Health Resources Availability Mapping System (HeRAMS), war-related incidents have significantly impacted structural integrity and equipment, particularly in the north-eastern, eastern, south-eastern, and southern parts of Ukraine. In the accessible territories of the 10 most affected oblasts (Dnipropetrovska, Kyivska, Sumska, Odeska, Mykolayivska, Kharkivska, Zaporizka, Chernihivska, Khersonska, Donetska), more than 16% of health facilities have sustained at least partial damages. The impact varies significantly, with the most severe damages observed in Donetska (50%), Kharkivska (26%), Chernihivska (34%), and Khersonska (57%). Overall, the main challenges affecting functionality and accessibility are staff shortages, facility damage,

^{8.} Source: WHO representative health needs assessment conducted in October 2023

security concerns, infrastructural constraints and physical barriers, highlighting the urgent need for targeted interventions to maintain health service provision and equitable access.

The surge in injury rates in Ukraine strains the rehabilitation system. According to the WHO health needs assessment, 28% of households have members with disabilities while the 2023 multisector needs analysis (MSNA) found that households with disabilities in eastern and southern oblasts are respectively 10% and 20% less likely to access health care services compared to households without individuals with disabilities. This is related to physical barriers and the absence of disability-inclusive and universally designed health facilities. The cost of assistive technologies and services must also be addressed.

Mental health and psychosocial support (MHPSS) in Ukraine are limited. People in need of support during the first year of the full-scale war were estimated at more than 10 million, with that number and longterm impact rising as we enter the third year. 52.7% of individuals seeking MHPSS exhibit psychological distress symptoms, including anxiety (54.1%), depression (46.8%), and insomnia (12.1%). Those with pre-existing mental health conditions reliant on public services face increased risks of neglect.

The proximity of active fighting to chemical industrial sites and nuclear power plants poses significant chemical and radiation hazards. Preparedness for onsite response, acute clinical care, and long-term morbidity management is crucial, alongside ensuring essential supplies and building health workforce capacity.

Ukraine's life expectancy is among the region's lowest, exacerbated by NCDs and their risk factors. The predominant NCDs include heart disease, stroke and cirrhosis. The prevalence of smoking (34%), alcohol consumption (nearly 50%) and obesity (25%) is expected to rise post-invasion. Moreover, three out of four household members aged 50 years or older report taking hypertension medication.



WHO response in 2023

The emergency response in 2023 was characterized by several complex challenges in reaching the most vulnerable target groups. New territories with substantial needs have become accessible in 2023, and effective coordination of humanitarian responders is necessary to reach vulnerable groups more than ever before. Accessing people in need in active war zones in eastern and southern Ukraine remains difficult, given the volatility of the war and the severity of hostilities. This threat was compounded by security concerns and the presence of landmines and unexploded ordnances, which not only hindered access but also posed risks to the safety of health staff, affecting the delivery of health programmes.

In 2023, despite of the challenging circumstances, WHO and its partners achieved significant health care delivery and training milestones in Ukraine. The following are key highlights of our efforts:

- Frontline health care delivery: WHO delivered 2000 metric tonnes of supplies across affected oblasts, mainly via its extensive network of partners and some through inter-agency convoys. Out of the United Nation's (UN) 100 convoys this year, 85 assisted in distributing essential medical supplies.
- EMS: Conducted 4556 consultations in Kharkiv Oblast, demonstrating the effectiveness and reach of our EMS.
- Supported the Ministry of Health in the coordination of deploying medical specialists, particularly in Kherson, Mykolaiv and Zaporizhzhia, in response to the urgent health care needs following the Nova Kakhovka dam destruction.
- CBRN risks: In response to the evolving threat of CBRN risks WHO has established a specialized unit comprising of chemical and radionuclear experts. They have maintained continuous communication with local authorities and conducted vigilant monitoring activities. Critical CBRN materials have been supplied by WHO to all relevant public health actors.
- Health care infrastructure: Installed 11 fully equipped prefabricated modular structures to deliver PHC in Kharkiv, Kherson, Mykolaiv and Sumy Oblasts to provide safe and adequate health care in areas lacking suitable facilities.
- Medical evacuations: Provided technical support to the Ministry of Health for the medical evacuation

- of 1823 patients and return of approximately 300 patients, through the EU Medevac system. Approximately 3500 medical evacuations of patients have been supported since the beginning of the operation.
- Services and supplies: Provided leadership, services, coordination and information, and procured and distributed supplies including medicines, trauma supplies and generators, valued at a total of US\$ 84 million.
- Ambulance provision: Donated 115 ambulance to health facilities, enhancing emergency response capabilities.
- MHPSS: 300 partners were provided with technical support, with coordination facilitated through the MHPSS technical working group (TWG) to ensure efficient response and adherence to the good practices.
- Coordination in mental health: Contribution
 to the scale-up of mental health services in PHC
 and specialist services as a part of response to the
 rapidly growing need related to the war. As a result,
 more than 93 000 people recieved mental health
 services from primary care doctors, and up to
 5000 people with severe mental health conditions
 received mental health care for their recovery.



- PHC services: Supported 131 mobile health units (MHUs) in nine oblasts, across 260 locations, focusing on NCD prevention and management, providing over 40 718 consultations.
- Medical worker training: Trained 100 medical workers on the practical implementation of the WHO package of essential noncommunicable disease interventions for PHC, integrated into MHU operations.
- Training programmes: Conducted 56 training courses on chemical and radiation preparedness for hospitals, reaching more than 2400 clinicians. Additionally, trained 531 health care professionals in service delivery to GBV survivors.
- Health care manager training: Six Ministry of Health health care managers and civil society organization representatives received training of trainers (ToT) on improving the availability and quality of GBV services.
- Specialized medical training: Trained 2029 health care workers in mass casualty management and international trauma life support. Additionally, 184 surgeons and nursing staff were trained in 'Stop the Bleed', point of care ultrasound, FAST (focused assessment with sonography for trauma) exam, and a systematic approach to trauma.
- Critical patient management training: Provided specialized training for 140 doctors and feldshers at the prehospital level in critical adult and pediatric patient management.

- Advanced life support training: 36 medical workers completed the General Instructor Course as a preliminary step towards ToT on Advanced Life Support.
- Equipment provision to Ministry of Health: Supplied the Ministry of Health with essential equipment as preparedness stock for technological and industrial hazards response.

WHO country and field offices Emergency response and health system recovery and reform activities WHO country office WHO field offices



WHO response results framework in Ukraine

In 2024, in the framework of the UN-led Humanitarian Need and Response Plan, WHO remains resolute in its primary goal to minimize mortality and morbidity among those affected by the war in Ukraine. We are committed to ensuring life-saving emergency assistance and equitable access to essential health services, especially in the eastern, southern, and northern oblasts, which are directly impacted by the war.

Our approach is to dynamically adapt our support to the Ukrainian government and collaboration with partners, gradually shifting our focus from immediate response to long-term reforms and recovery. We aim to integrate our response operations with early recovery efforts seamlessly. Among the key longterm challenges, WHO, in collaboration with the Ministry of Health, is tackling the rehabilitation and social inclusion of war-affected individuals affected with trauma and the sustainable institutionalization of health care systems. Critical cross-cutting interventions for the prevention of sexual exploitation abuse and harassment, as well as risk communication and community engagement to foster preventive and positive health-seeking behaviours, will be mainstreamed into all areas of WHO operations in Ukraine.

WHO will continue advocating for localized and community-based strategies to ensure a continuous operational spectrum, from policy formulation to implementation, prioritizing the needs of the most vulnerable populations.

Specific Objective 1: Strengthen trauma and emergency medical services

Our focus is to collaborate with the Ministry of Health to bolster critical emergency medical services preparedness, readiness and response in priority regions. This includes enhancing the clinical skills and technical capacities of health care professionals, particularly national Emergency Medical Teams, and ensuring the availability of essential medical supplies, such as trauma kits. We are developing practical standard operating procedures to refine the country's overall emergency response framework based on past experiences.

A critical investment area for 2024 is CBRN readiness and response. WHO is dedicated to equipping emergency medical services with the capabilities to manage CBRN events and operate in hazardous environments.

In addition, infection prevention and control measures are crucial for quality health care delivery, especially under current circumstances. We are intensifying our support in priority oblasts to combat health care-associated infections and antimicrobial resistance through capacity building, supply provision, and technical guidance.

We continue to prioritize GBV, focusing on enhancing the clinical management of survivors, training health care workers, providing postexposure prophylaxis and updating national protocols to ensure accessible clinical care for vulnerable populations.

Specific Objective 2: Enable access to PHC and continuity of care for people suffering from infectious and chronic NCDs in war-affected areas, at risk of or impacted by service disruptions

To improve continuity of care in war-affected communities, WHO is dedicated to enhancing access to quality PHC services, early complication detection, and developing appropriate referral pathways. We are addressing the impact of NCDs and their risk factors through preventive measures and early disease detection, leveraging telemedicine and other innovative solutions in collaboration and coordination with Ukraine's Ministry of Health.

In response to pharmaceutical service disruptions along the frontline, WHO will pilot an "over the counter" (OTC) project to enhance basic medicine access at the household level. This initiative will distribute OTC kits containing essential medicines and medical devices, adhering to Ukraine's national OTC list and WHO's essential medicines list, aligned with needs identified by the MSNA.

Additionally, WHO will continue strengthening public health and surveillance systems to support outbreak and pandemic prevention, focusing on improving chemical safety and infection prevention.

Risk communication, community engagement, and infodemic management will be key in disseminating vital health information, including preventive and protective messages. Social listening from communities and frontline health care workers will guide our response operations.

Specific Objective 3: Lead effective coordination of humanitarian interventions, assessments, and information management in public health

The structure and positioning of the health cluster coordination team will be informed by the evolved geography of the response with coordination presence in the eastern, southern and northern

oblasts as outlined in the 2024 Humanitarian Needs and Response Plan (HNRP). This will enable coordination to be as close as possible to operational partners, promote alignment with the HNRP strategy 2024, and avoid duplication. Capacity will also be kept at the national level to plug into the major coordination with the government leadership and inter-cluster coordination.

Localization efforts will be strengthened across the response by training and involving local actors in coordination, collaborating with locally existing coordination structures, health authorities and volunteer groups for the sustainability of health interventions and a people-centred approach. Such efforts will aim at enhancing support to static health facilities (where available) and operating outreach services from static facilities to serve hard-to-reach populations.

The health cluster team will embark on rigorous partner field visits to supervise the response to ensure projects are implemented according to accepted standards while ensuring they are accountable to the affected populations.

The MHPSS TWG will continue to provide technical support to partners and will support the National Mental Health Coordination Center to strengthen oblast-level coordination in the area of MHPSS.

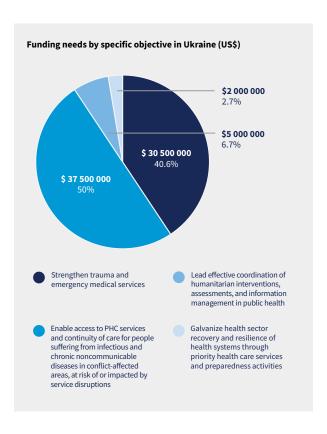
Specific Objective 4: Galvanize health sector recovery and resilience of health systems through priority health care services and preparedness activities

As more investments are needed to prevent, prepare for and respond to emergencies, WHO will provide strategic advice on early recovery, models of care, and accountability, as well as coordination of services within and across sectors, to support an integrated and efficient health service delivery system. This is particularly relevant as Ukraine continues health system reform to ensure it meets the EU standard. WHO will also support building

even stronger capacities for rapid response and emergency preparedness in terms of health system strengthening, coordination, surveillance, essential supplies, and the necessary human resources.

WHO is committed to enhancing health emergency preparedness and response. Our support will encompass strategic advice on health sector reforms, care models, workforce management, digitalization, governance, and coordination of services and medical supplies. This support is particularly vital as Ukraine progresses towards EU accession.

In summary, WHO's approach in 2024 is multifaceted, prioritizing immediate health care needs while laying the groundwork for sustainable recovery and resilience in Ukraine's health care system.





WHO funding needs in Ukraine

Specific objective 1: Strengthen trauma and emergency medical services

| | US\$ 30 500 000 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| Support protection and rehabilitation services for survivors of sexual abuse and violence | US\$ 500 000 |
| Strengthen the provision of acute trauma rehabilitation services as part of holistic health care for people injured or affected by the war | US\$ 500 000 |
| Public health, prehospital and hospital level response readiness for chemical, biological, radiological and nuclear emergencies | US\$ 3 500 000 |
| Implement infection prevention and control clinical bundles, programmes, and protocols | US\$ 500 000 |
| Provide life-saving medicines, medical supplies, equipment and modular prefabricated structures close to the contact line and to medical facilities hosting internally displaced persons | US\$ 21 800 000 |
| Strengthen humanitarian health preparedness, readiness and response for emergency medical services in hospital and prehospital levels (national Emergency Medical Teams, emergency medical services, mobile health care units) through inter alia reinforcement of the disaster medicine capacity and strengthening of clinical skills, logistics and coordination | US\$ 3 700 000 |

Specific objective 2: Enable access to primary health care services and continuity of care for people suffering from infectious and chronic noncommunicable diseases in war-affected areas, at risk of or impacted by service disruptions

| | US\$ 37 500 000 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| Advocacy, risk communication, and community sensitization to reduce risks, prevent diseases, navigate health services and promote health-seeking behaviours, including for prevention and management of infectious and noncommunicable diseases | US\$ 500 000 |
| Support mental health and psychosocial interventions for war-affected and/or at-risk populations including frontline health workforce, through inter alia necessary assistance for implementation of the national action plan for mental health | US\$ 2 000 000 |
| Support Ukraine's capacities to prevent, detect and respond to communicable diseases | US\$ 2 000 000 |
| Provide essential medicines, medical supplies, equipment, modular prefabricated structures and technical/operational assistance including training in primary health care settings | US\$ 25 000 000 |
| Provide technical support and develop referral pathways to detect, manage and/or rapidly respond to critical infectious diseases and noncommunicable conditions, including through mobile health care units in humanitarian contexts, as well as life saving maternal and reproductive health interventions in clinical settings | US\$ 8 000 000 |

Specific objective 3: Lead effective coordination of humanitarian interventions, assessments, and information management in public health

| Health cluster/sector coordination systems are operational, key capacities activated at the national and regional levels including for mental health and psychosocial support and for the prevention of sexual exploitation abuse and harassment, partner project supervision carried out and regular updates provided to government and health partners on needs, constraints and priorities | US\$ 2 500 000 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| Strengthen information management and public health intelligence through health needs and impact assessments, monitoring drivers of morbidity/mortality, and health facilities mapping by type of service packages | US\$ 2 500 000 |
| | US\$ 5 000 000 |

Specific objective 4: Galvanize health sector recovery and resilience of health systems through priority health care services and preparedness activities

| Facilitate health services reinforcement and resilience building | US\$ 79 000 |
|----------------------------------------------------------------------------------------------------------------------------|----------------|
| Support national laboratory and surveillance systems to detect and monitor outbreaks and other life threatening conditions | US\$ 700 000 |
| Support policy reforms in public health to enable response readiness and foster systemic resilience | US\$ 46 000 |
| Strengthen core International Health Regulations capacities in priority areas | US\$ 1 000 000 |
| Support recovery of health governance capacities and systems | US\$ 175 000 |
| | US\$ 2 000 000 |

Total: US\$ 75 000 000

