



World Health Organization

REGIONAL OFFICE FOR **Europe**

Situation report # 2
April–June 2019

Ukraine humanitarian crisis



Advanced Trauma Care Training (ATCT) in Mariupol, Donetsk region
Photo: WHO Ukraine / Volodymyr Shuvayev

For the reporting period



1.3 million people are estimated to be in need of essential health services¹



Over 20 conflict-related injuries were recorded during the reporting period²



5 conflict-related deaths were recorded during the reporting period



2 million people live in mine-contaminated areas along the contact line

Key figures

Highlights

WHO emergency programme in eastern Ukraine	
OVER 30	Health and Nutrition Cluster partners
1 300 000	People targeted by Health and Nutrition Cluster partners in 2019
27%	Funded operations in 2019
6 550 540	US\$ requested for operations in 2019

Access to health care and medicine is a key health and protection concern for many people living in the conflict-affected regions, particularly for those living near the contact line and in non-government controlled areas (NGCAs), as well as for those crossing the contact line. WHO has activated a [Grade 2 emergency response to measles](#), allowing for the mobilization of human and financial resources to the countries most affected. Ukraine has been identified as one of the priority countries for interventions addressing the ongoing outbreak.

With the support of WHO:

- Over 60 health care specialists working in the conflict-affected regions improved their knowledge and skills in trauma care and pre-hospital care.
- People living on both sides of the contact line are better protected from disease outbreaks due to the improvement of the laboratory surveillance system.
- Sixty people with moderate to severe mental health disorders received assistance from the community-based mental health team.
- Chairs for the global platform, the Mental Health and Psychosocial Support (MHPSS) network, provided the unique opportunity for over 100 specialists working in Ukraine to learn about best practices for implementing MHPSS programmes for 16 emergencies worldwide.
- Technical assistance for catch-up vaccination activities provided to the Ministry of Health. WHO developed microplanning materials, a handbook for medical staff, and handouts on anaphylaxis diagnostic and first aid.

Situation overview

The long-term consequences of the ongoing conflict are serious with daily hostilities damaging critical infrastructure and often disrupting access to essential services, including health care services. The crisis significantly affects the elderly who make up to 30% of all people in need, the highest proportion in the world.³

The health system in the conflict-affected areas of the Donetsk and Luhansk regions faces several distinct patterns of disruption. About 35% of primary health care facilities have sustained damage – because of intentional damage caused through hostilities – and require rehabilitation⁴, and an unknown number are in poor condition due to a lack of maintenance. The health care facilities in NGCAs, and within 20 km of the contact line in GCAs, are particularly affected by the ongoing hostilities and have seen the departures of many health care practitioners. In addition, the ongoing skirmishes have significantly distorted referral paths, leaving the vulnerable population with significant difficulties in accessing specialised health care services.

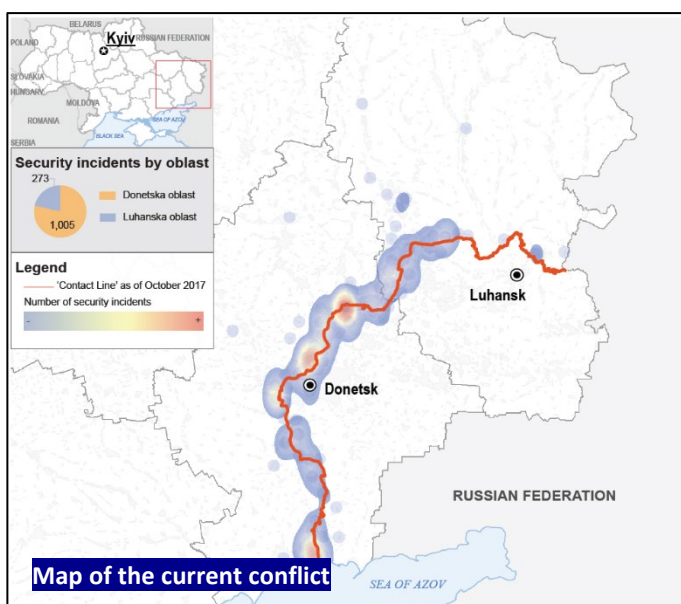
An increase in movements through the five operating Exit-Entry Checkpoints (EECPs) took place in April 2019, with an average of 1.1 million crossings per month. Safety and security around the checkpoints remained a concern as sniper activities were reported around the EECP Marinka in the Donetsk region.

The parties of the conflict agreed to disengage their forces at a meeting of the Trilateral Contact Group on 5 June 2019. On 19 June, a ceasefire commenced and lasted for seven days, allowing for disengagement to begin on 26 June. The disengagement of the armed forces in the town of Stanytsya Luhanska will allow for the restoration of a concrete bridge, over the river Siverskyi Donets (Luhansk region), which was destroyed by shelling in 2015 and replaced by a makeshift wooden construction nearly four years ago. The bridge is the only way to cross from the GCA to the NGCA at the pedestrian checkpoint Stanytsya Luhanska. In May 2019, 465 000 people crossed this bridge in both directions on foot.

On top of the humanitarian situation, according to the Public Health Centre of the Ministry of Health, over 55 000 suspected measles cases were reported in Ukraine in 2019. Since April 2019, following WHO recommendations, all children from six months of age, and adults that have come into contact with people with measles, have access to the state-purchased vaccine and immunization services at public health care facilities.

Leadership and coordination

Together with the Ministry of Health, WHO carried out the Emergency Medical Service (EMS) survey in the Donetsk and Luhansk regions. The survey aims to assess current EMS capacities, identify gaps and provide the baseline for recommendations to improve emergency health care services and pre-hospital care in Ukraine. This survey demonstrated that the Ukrainian EMS is functioning but requires certain improvements, such as the establishment of an emergency medical care society, the launch of a computerized medical registry, a monitoring system, a computerized communications platform and additional public health campaigns.



The designations employed and the presentation of material on this map 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 its authorities, or concerning the delimitation of its frontiers or boundaries. Source: Health Cluster.

¹ 2019 Humanitarian Response Plan – Ukraine

<https://www.humanitarianresponse.info/en/operations/ukraine/document/ukraine-2019-humanitarian-response-plan-hrp>

² Data from the Office of the United Nations High Commissioner for Human Rights (OHCHR)

³ [HelpAge International \(2018\), Ukraine crisis disproportionately affecting older people](#)

⁴ Health Resources Availability Monitoring System (HeRAMS), Health Cluster (2018)

Partner coordination



As co-chairs of the Mental Health and Psychosocial Support (MHPSS) Working Group, WHO together with the Inter-Agency Standing Committee (IASC) Reference Group on MHPSS in Emergencies organized the MHPSS WG Co-chairs Forum: Linking Global to Local, held in Kyiv on 27 June 2019.

The Forum brought together MHPSS Working Group co-chairs from 16 humanitarian settings around the world. Participants also included over 100 participants from national and international agencies working on MHPSS in Ukraine, as well as key partners and donors. The focus of the event was the link between emergency and development programmes.

Information and planning

Health and Nutrition Cluster partners have reported on 115 activities including the MHPSS, mobile primary health care units, and cash and vouchers programmes through the [Health and Nutrition Cluster 3W dashboard](#).⁵ The dashboard is designed to provide key information regarding which organizations are carrying out which activities and in which locations. The dashboard facilitates the mapping of the four key areas of Cluster partner interventions in eastern Ukraine: health facility support, mobile clinics, cash and voucher support for health-related expenses, and mental health and psychosocial support. The mapping of activities at the settlement level provides Cluster partners with an interactive online tool for visual analysis and the identification of gaps and overlaps in humanitarian assistance.

Health operations and technical expertise

Improving trauma care and mental health skills



Over 60 general and trauma surgeons, anaesthesiologists, and emergency health care professionals improved their knowledge and acquired contemporary skills in the management of patients with trauma during two courses of the [Advanced Trauma Care Training](#) conducted by WHO experts. Saving lives and protecting people from preventable deaths and disabilities is a cornerstone of trauma care, which is especially vital in eastern Ukraine's conflict-affected areas. The WHO health emergencies programme provides state-of-the-art knowledge and experience to upgrade the skills of health care professionals so that they are better enabled to treat injured

⁵3W: Who, what where. To access the dashboard, use the following credentials: User name: HCpartner; Password: HCpartner.

patients and more confident in their interventions.

WHO Advanced Trauma Care Training offers a standardized ABCDE (Airway, Breathing, Circulation, Disability, Exposure) approach for treating a patient with injuries, thereby saving precious time, and capitalizing on teamwork to ensure optimal treatment outcomes. Most of the training is dedicated to practical skill stations, such as synthesizing lectures with hands-on experience and fostering the real-life implementation of life-saving procedures.

Improving access to mental health services

Twelve teams of family doctors and nurses from Kramatorsk, Donetsk region were trained in identifying the symptoms of widespread mental conditions, such as depression, acute stress, grief, post-traumatic stress disorder, self-harm and substance use disorders. The [training](#) highlighted the rollout of the Mental Health Gap Action Programme (mhGAP) at the subnational level in Ukraine.

Shortly after the mhGAP training, experts from the WHO headquarters, Regional Office for Europe and Country Office visited Kramatorsk to follow up on the integration of mental health care services at the primary health care level. A focus group discussion was held with family doctors and health care managers to understand and review their experiences and needs as well as suggestions for effective programme coordination and implementation.

As part of its humanitarian response to the crisis in eastern Ukraine, WHO provides support in organizing mhGAP trainings and supervision for health care workers. It also aims to ensure the sustainability of the newly established service model to address the needs of the conflict-affected population.



Community-based mental health care

Sixty people with moderate to severe mental health disorders living in conflict-affected areas received assistance through the community-based mental health team in Sloviansk, Donetsk region. This team works along the contact line and in areas with a high concentration of internally displaced people, providing evidence-based primary health care, mental health care and psychosocial support. The mental health team cooperated with family doctors and provided consultations to patients with mental health disorders at primary health care facilities.

Improving surveillance and immunization



Laboratory surveillance is pivotal for protecting the population from disease outbreaks and other health hazards.

From April–June 2019, WHO’s laboratory consultant carried out the fourth mentoring visit to Luhansk (NGCA). The implementation of the WHO Initiative [“Better labs for better health”](#) in the conflict-affected areas resulted in establishing a quality management system in the laboratory of the central hospital in Luhansk (NGCA) which performs over 100 000 biochemistry and haematology tests per year.

Furthermore, the WHO consultant provided mentoring support to the National Virology and Microbiology Reference laboratories of the Public Health Center of the Ministry of Health located in Kyiv.

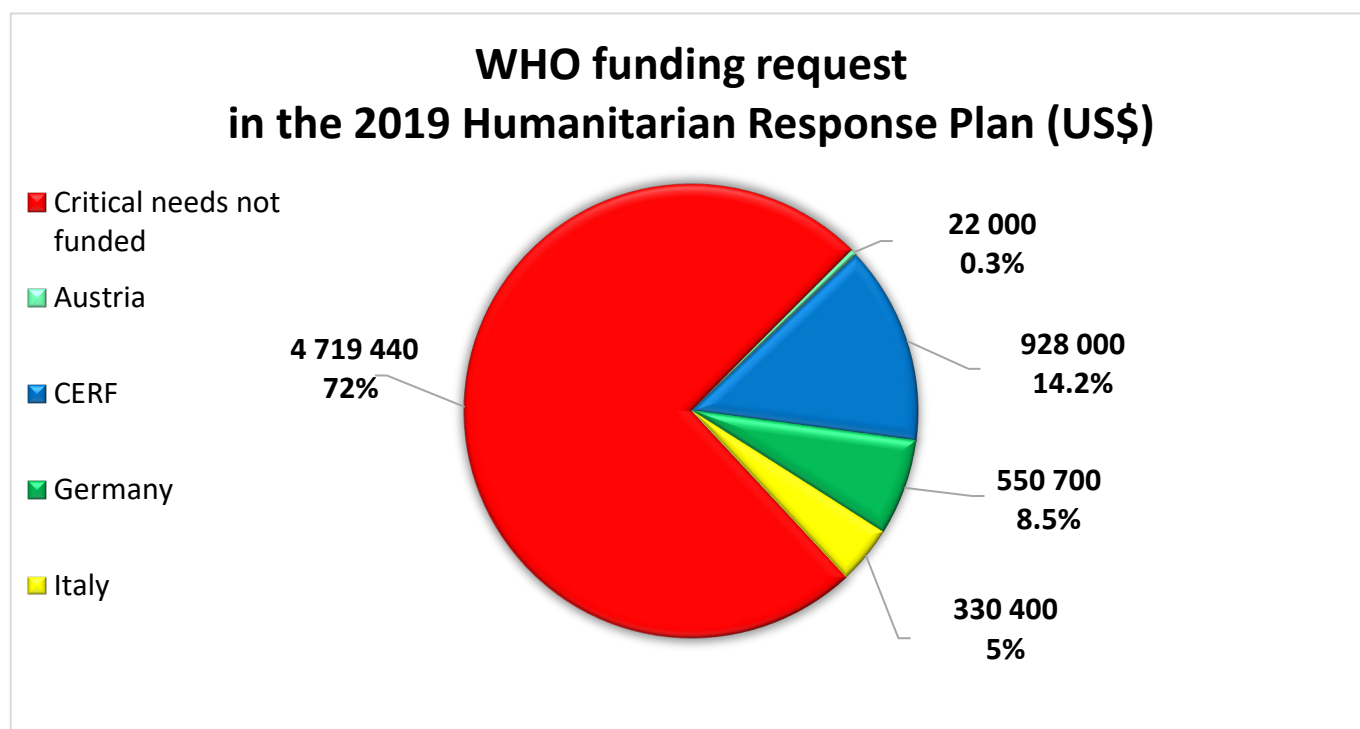
Mentorship visits are carried out every 3 or 4 months. During these visits, a mentor can answer questions, help to develop action plans to overcome obstacles, support the development of standard operating procedures, perform external audits and provide training to lab specialists.

To address the ongoing measles outbreak, WHO and health partners continue to support catch-up immunization activities and strengthen the immunization system in the country. Following the outreach vaccination activities in Lviv region that took place in the beginning of 2019, an additional vaccination campaign was conducted in Khmelnytskyi region in May 2019. Efforts aimed at increasing coverage and closing gaps in the immunization of schoolchildren and education workers. WHO supported different technical areas and trainings, and developed microplanning materials, a handbook for medical staff, and handouts on anaphylaxis diagnostic and first aid.

Finance and administration

Financial support from the governments of Austria, Germany and Italy, along with a contribution from the UN Central Emergency Response Fund (CERF), allowed WHO to cover the most critical response activities in the first six months of 2019.

However, the scarcity of resources remains a barrier to increasing responses by the health sector. Increased political and financial attention to this protracted crisis is urgently needed. Only sufficient funding of humanitarian, early recovery and development activities in 2019 will allow WHO and its health partners to continue to provide life-saving health care services in the fields of infection prevention and control, trauma care, emergency medicine, country preparedness, mental health care, and the provision of medicines, medical supplies and medical equipment to hospitals in the conflict-affected areas.



Visit the WHO Ukraine web page: <http://www.euro.who.int/en/countries/ukraine>

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