

Emergency in Ukraine

External Situation Report #9, published 28 April 2022

Reporting period: 21–27 April 2022



5.3 million
REFUGEES



7.7 million
INTERNALLY
DISPLACED



6009
CIVILIAN
CASUALTIES



2829
CIVILIAN
DEATHS

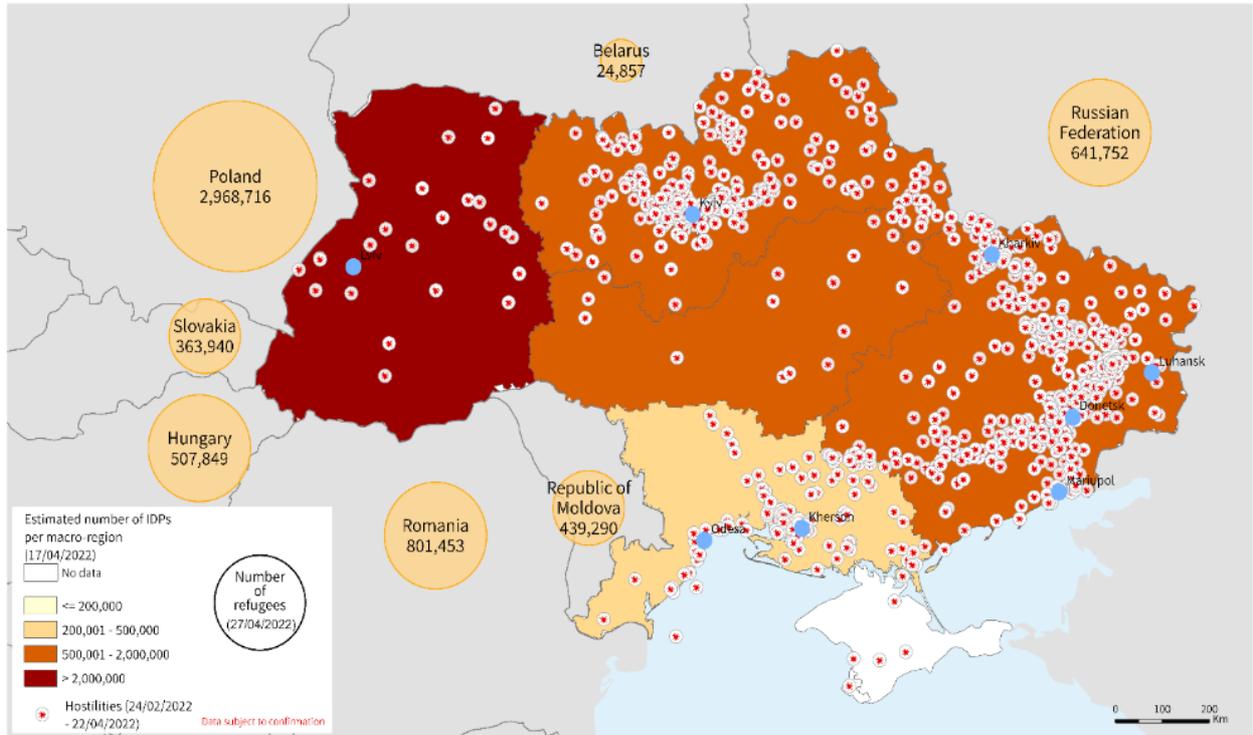
Key updates

- Through the engagement with the Ministry of Health (MoH) of Ukraine, national health institutions and many partners and donors, WHO has reached nearly 7.4 million people in last two months with life-saving supplies, equipment and medicines. However, accessing some of the hardest-hit areas in the east — where health systems have collapsed — remains a challenge.
- WHO, together with Premise,¹ conducted a household health needs assessment. Based on crowd-sourced data, among the 1000 households who responded to the survey, 30% have sought healthcare services. Of those, 36% reported having problems accessing services, while 34% had difficulty accessing routine medication. Among respondents who sought health-care services, 39% cited the security situation as the main barrier to access, while 27% reported that no health-care services at all were available in their area. For more information, click [here](#).
- A WHO team is on its way to Dnipro to provide training and support to the local health services and health workforce on all-hazards preparedness and response. The training and support will be provided through the Dnipro Hub.
- Attacks on health care (including those against health facilities, transport, personnel, patients, supplies and warehouses) continue, with 175 attacks resulting in 52 injuries and 73 deaths reported between 23 February and 27 April 2022. These attacks deprive people of urgently needed care, endanger health-care providers, and undermine health systems.
- In the Republic of Moldova, nine regional trainings for strengthening health-care worker capacities on routine immunization catch-up campaigns, including vaccination of refugees, were conducted by UNICEF and WHO. The health workers from 26 of the 37 districts improved their level of knowledge on routine immunization.

¹ Premise is a data and analytics platform powered by a global network of on-the-ground contributors, data science, and machine learning. Link: <https://www.premise.com/why-premise/>.

1. SITUATION UPDATE

Figure 1. Distribution of Internally Displaced Persons (IDPs) and refugees in Ukraine and in refugee-hosting countries as of 27 April 2022



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.

Data Source: World Health Organization, United Nations High Commissioner for Refugees, United Nations Office for the Coordination of Humanitarian Affairs, ACLED, International Organization for Migration
Map Production: WHO Health Emergencies Programme
Map Projection: WGS 1984 World Mercator



Table 1. Key humanitarian figures as of 27 April 2022

People affected	
Internally displaced persons	7.7 million
Refugees	5 372 854
Injuries among civilians	3 189
Deaths among civilians	2 829

1.1 Population displacement and refugees

According to government data compiled by the United Nations High Commissioner for Refugees (UNHCR), over five million refugees have left Ukraine for surrounding countries in the last eight weeks of the conflict, with the highest proportion, 55%, in Poland, followed by 14.9% in Romania. According to the International Organization for Migration (IOM), as of 27 April approximately 7.7 million people have been internally displaced, which represents 17% of the country's population. Additionally, IOM estimated that 2.8 million people have moved back to their homes following earlier displacement.

1.2 Overall WHO response

WHO is supporting the health sector in Ukraine and the refugee-hosting countries. WHO has mobilized experts and is working with partners, including the Global Outbreak Alert and Response Network (GOARN), Emergency

Medical Teams (EMTs), Health Cluster, and Standby Partners, to provide support with access to health services – primary health care, routine and COVID-19 vaccination, mental health and psychosocial support (MHPSS), trauma care, supply and logistics, prevention of sexual exploitation and abuse, risk communication and community engagement (RCCE), and information management.

- WHO continues to coordinate with the MoH of Ukraine and refugee-hosting countries to ensure safe medical evacuation of patients. Transportation of patients within Ukraine is ensured by the national emergency services, while transportation across the border to the European Union (EU) is managed by international EMTs and coordinated by the CADUS team, a German nongovernmental organization (NGO) providing EMT support. To date, over 200 Ukrainian patients have been evacuated from both Poland and Ukraine via the EU Civil Protection Mechanism² to 11 European countries (Belgium, Denmark, Germany, Ireland, Italy, Luxembourg, Norway, Portugal, Romania, Spain and Sweden). In addition, 110 psychiatric patients were evacuated from Ukraine through Poland to facilities in Spain.
- WHO and the EU Civil Protection Mechanism conducted an assessment of a potential site for a reception centre for transitioning Ukraine patients through Poland to other EU Member States. The centre will provide basic health services for stable patients, coordinate patient flow and planning for medical evacuations, ensure transportation and logistic support for EMTs, and provide psychological support for patients and family members. According to the MoH of Poland, WHO in Poland will support the centre's operations.
- The WHO team is on its way to Dnipro to provide training and support for the local health services and health workforce on all-hazards preparedness and response. The training and support will be provided through the Dnipro Hub.

Standby Partners

Standby Partners have strengthened WHO's capacity for this response by confirming 13 positions to support operations in Ukraine and refugee-hosting countries. Most of these deployments are scheduled for six months. Of the 13 experts, 10 have already been deployed (one completed) and three are completing pre-deployment formalities. Roles mobilized through Standby Partners include: MHPSS – one expert, RCCE – two experts, Preventing and Responding to Sexual Exploitation, Abuse and Harassment (PRSEAH) – four experts, Geographic Information System (GIS) – one expert, Information Management – two experts, and Health Cluster coordination – two experts. These positions are supported through partners including the Norwegian Refugee Council (NORCAP) – five deployments, UK-Med – two deployments, Dutch Surge Support – one deployment, the Canadian International Civilian Response Corps (CANADEM) – three deployments, and iMMAP – two deployments. The UK Foreign, Commonwealth and Development Office (FCDO) has funded three deployments.

External communications

- Press release: [Ukraine: People with chronic diseases face massive challenges in accessing health care, according to new WHO survey](#).
- Joint [WHO and UNICEF statement](#) on European Immunization Week 2022.
- [Guidance](#) on vaccination and prevention of vaccine-preventable disease outbreaks for countries hosting refugees from Ukraine, April 2022 update.
- [Health Emergencies Newsletter \(Issue No. 3\): Ukraine Emergency](#).

Funding

- To date, WHO has received US\$ 46.5 million (82%) against its appeal for US\$ 57.5 million covering the period from March to May.
- Planning is under way to update WHO's requirement for the next three months in Ukraine in line with the revised UN Flash Appeal for the period from March to August 2022.

² EU Civil Protection Mechanism (europa.eu).

- WHO's updated requirement for the response to refugee needs in neighbouring countries is US\$ 67.5 million for the period from March to December 2022.
- WHO would like to thank Canada, European Civil Protection and Humanitarian Aid Operations Ireland, Japan, King Salman Humanitarian Aid & Relief Centre, Norway, Switzerland, Novo Nordisk Foundation, and the UN Central Emergency Response Fund (CERF), and the United States Bureau of Population, Refugees, and Migration for their timely contributions.
- During the first weeks of the response WHO released US\$ 10.2 million from its [Contingency Fund for Emergencies](#) to kick-start activities. These funds have been fully absorbed.

More information on funding can be found [here](#).

2. HEALTH PRIORITIES AND WHO ACTIONS IN UKRAINE TO DATE

2.1 Access to health care in Ukraine

Ukraine's health system is facing multiple challenges. Access to health care is severely impacted due to security concerns, restricted mobility, broken supply chains and mass displacement. Health care continues to come under attack, with a total of 175 attacks³ on health care reported, resulting in 52 injuries and 73 deaths between 24 February and 27 April.⁴ Further attacks are being verified.

Through the engagement with the MoH, national health institutions and many partners and donors, WHO has been able to reach nearly 7.4 million people in last two months with life-saving supplies, equipment and medicines. However, reaching some of the hardest-hit areas in the east, where health systems have collapsed, remains a challenge – for instance, nearly all health facilities and hospitals in the Luhansk oblast are either damaged or destroyed. The situation remains critical in several other oblasts as well.

2.2 Priority public health concerns

Current health priorities are listed below (more details on each of these public health concerns can be found in the previously published [situation reports](#)).

Conflict-related trauma and injuries	Civilian casualties continue to rise due to the use of explosive weapons. Limited access to health care results from infrastructure disruption of health-care facilities and closure of many pharmacies in Ukraine.
Maternal and newborn health	While only limited data are available on the current situation of maternal and newborn health, there have been reports on disruptions to antenatal, intrapartum and postnatal care.
Management of chronic diseases and noncommunicable diseases (NCDs)	Provision of medicines and care for patients with chronic communicable diseases, such as HIV and tuberculosis (TB), as well as NCDs remains challenging. WHO, collaborating with international and local partners, continues to coordinate supply efforts to ensure mitigation of shortfalls of drugs for HIV, TB and NCDs in affected oblasts.
Risk of emergence and spread of infectious diseases	<p>The risk of disease outbreaks, such as cholera, measles, diphtheria or COVID-19, has been exacerbated due to lack of access to water, sanitation and hygiene (WASH), crowded conditions in bomb shelters and collective centres, and suboptimal coverage for routine and childhood immunizations. As highlighted in last week's publication, the water supply situation in Mykolayiv remains critical. There are reports of water shortages in two hospitals. Moreover, due to lack of safe drinking water, many communities are forced to use water from rivers and streams, raising concerns for waterborne diseases.</p> <p>Between 21 and 27 April, a total of 4594 new cases and 73 new deaths of COVID-19 have been reported. This represents a decrease of 29% and 20%, respectively, compared to the previous week. These numbers should be interpreted carefully due to underreporting of COVID-19 cases and deaths.</p>

³ Attacks on health care include those against health facilities, transport, personnel, patients, supplies and warehouses.

⁴ [Surveillance System for Attacks on Health Care \(SSA\)](#).

	Between 23 February and 26 April, the overall number of beds available and beds occupied by patients with COVID-19 has decreased by 43% and 91%, respectively, reflecting potential challenges in accessing hospitals, limited data reporting, and a potential decrease in actual hospitalizations.
Protection issues: risk of human trafficking and escalated risk of sexual and gender-based violence (GBV)	Women and children experience increased risk as access to health and social services declines. There are reports of sexual violence and harassment, exploitation and abuse, and high risk of trafficking at the borders, highlighting the need for systems that treat and support survivors of sexual violence. Referral pathways for GBV are not fully functional in many conflict-affected locations as access to police services remains limited.
Technological hazards and health risks	<p>Potential nuclear hazards</p> <p>There are 15 nuclear reactors at four operational nuclear power plants (NPPs) in Ukraine, one decommissioned NPP in Chernobyl, and a research reactor in Kharkiv. In addition, numerous radioactive sources are used in industry and health-care facilities.</p> <p>According to the International Atomic Energy Agency's (IAEA) daily updates, currently the nuclear facilities are operating normally, and the nuclear safety situation appears under control. However, the Zaporizhzhya NPP, located in the southeast and in proximity to the military operations, remains at risk of being affected by shelling. The risk of a nuclear emergency as a result of direct damage due to shelling of NPPs or failure of a reactor's power supply, or the inability to provide necessary maintenance, remains high.</p> <p>Potential chemical hazards</p> <p>Reports of toxic chemical events continue to be monitored and assessed. There were no new reports of chemical events from Ukrainian authorities in the past week.</p> <p>WHO is working directly with the MoH of Ukraine and with health partners on the ground to prepare for all public health hazards, including those that may be caused by unintentional or intentional release of toxic chemicals. In addition to the over 1200 health workers reached through online training in Ukraine, WHO has now accelerated its in-person practical training, reaching 54 health workers in the Lviv oblast last week. This week WHO deployed a team to Dnipro to conduct further training for emergency medical units and emergency physicians in referral hospitals. WHO is also working closely with partners and EMTs to extend capacity building and training for the response to chemical events in high-priority areas.</p>
Food security and nutrition	The food security situation continues to deteriorate across Ukraine. Many cities experiencing conflict and areas hosting IDPs have reported immediate food needs. According to World Food Programme, the conflict-affected populations have begun to adopt coping strategies by cutting down on meals or reducing portion sizes. A food crisis has been identified in Mariupol and Mykolayiv.

2.3 WHO actions in Ukraine to date

Leadership and coordination

WHO has initiated internal processes in the Ukraine health system recovery workstream and a core group has been created to coordinate this task.

Health information and operations

- WHO is supporting the MoH in the detection, diagnosis and clinical management of infectious diseases.
- A minimum package for the provision of primary health care by mobile clinics was developed and presented to the Health Cluster on 26 April.
- An update to the previously published Public Health Situation Analysis for Ukraine is currently being drafted and will be published by the end of April.

- Event-based surveillance activities continue for the various potential hazards. These include the use of Epidemic Intelligence from Open Sources.
- On 25 April WHO, jointly with the Immunization Academy, launched Ukrainian-language online training courses and video materials on routine vaccinations, for use by WHO, the Public Health Centre of Ukraine and the regional immunization training hubs.
- WHO conducted a survey on nationwide health needs assessment, in partnership with Premise, to illustrate the impact of the humanitarian emergency on the health and well-being of people, and the severe challenges faced by the Ukrainian health system. One thousand households responded to the survey and the preliminary findings are presented below.
 - Approximately one in three (30%) households have at least one person with a chronic disease reporting challenges in accessing care for those conditions.
 - Two out of five households (39%) have at least one member with a chronic illness, such as cardiovascular disease, diabetes or cancer.
 - Less than a third (30%) of the respondents sought out health-care services recently; of those, 39% cited the security situation as the main reason, while 27% reported that no health-care services were available in their area.
 - The top three medications that households are having difficulty accessing are painkillers, medication for hypertension and medication for cardiovascular diseases.

These findings highlight the urgent need for continued health system support in Ukraine.

- WHO has developed two surveys to assess cancer service capacity for and gaps in diagnosing and treating people in Ukraine, including IDPs, and refugees from Ukraine who have fled to neighbouring countries. The objective of these surveys is to gather information from the field on baseline capacity and evolving needs so that coordination mechanisms may be adjusted. The survey includes:
- WHO–IAEA Ukrainian facility assessment: aimed at hospitals and cancer centres that continue to treat Ukrainian cancer patients.

Supplies and logistics

- As of 27 April, WHO has delivered about 320 metric tonnes of medical supplies and equipment to Ukraine; of which 51% (162 metric tonnes) have been delivered to their intended destinations. The latest deliveries included body bags, ambulance vehicles, power generators, intravenous fluids for emergency medical care, and additional trauma and emergency surgery kits (TESK). Plans are under way to position medical supplies to additional locations to enable their further distribution to the hardest-hit areas. WHO is working closely with Ukraine’s MoH to coordinate support and distribution of supplies.
- On 19 April WHO released 15 generators from its warehouse in Lviv, with plans to deliver them to hospitals across the country to meet the minimum energy needs of medical and surgical units where power supply is limited or non-existent. Three generators will be dispatched to Luhansk (Luhansk oblast, non-government-controlled area (NGCA)) and Donetsk (Donetsk oblast, NGCA), where the power supply has been severely affected. Generators will be dispatched to Kharkiv and the encircled city of Mariupol when the security situation allows.
- The Guidance Note for Medical Supply Donations to support the Ukraine emergency response available [here](#) provides a list of critical supplies for which support is urgently needed.

Operational partnerships

EMT Coordination Cell (EMT CC) and Trauma & Rehabilitation Working Group (TRWG)

Since the start of the response, the EMT initiative has established the EMT CC in Ukraine integrated with the Health Cluster TRWG, as a joint operational mechanism working closely with partners.

- **Operational overview:**

- Five EMT partners are providing clinical care in Lviv, Mykolayiv, Chernivtsi and Kirovohrad within different capacities. These include:
 - six Type 1 mobile teams providing outpatient initial emergency care of injuries and other significant health-care needs;
 - four Type 1 fixed teams that, in addition to covering activities by mobile teams, also establish a fixed structure to provide care and services for up to 12 hours per day;
 - one Type 2 team providing emergency care, including surgery, and deploying field hospitals with at least 20 beds, which can replace and support small district hospitals; and
 - three specialized teams with expertise in specific medical care, such as senior specialist or specialist facility.

More details on the classification type can be found [here](#).
- An assessment of needs for deploying further EMT capacities is ongoing for Sumy, Kharkiv, Ivano-Frankivsk and Chernivtsi.
- Seven other international partners are active in the following areas: mobile clinical care, rehabilitation services, and provision of medical supplies.
- **Rehabilitation:** [Assistive technology](#) activities are ongoing to support hospitals providing surgical care and to support IDPs in Ukraine. On 25 April, 20 trauma emergency surgical kits arrived in the WHO Hub in Poland for delivery to hospitals providing acute surgical care in Ukraine.
- **Training:** To ensure standardization of trainings being delivered in the field and support the quality and consistency of training, a consolidated document on training activities is being developed by the EMT CC.
- **Transfer:**
 - EMT CADUS continues with the transfer coordination role at the Lviv ambulance dispatch centre, in response to a request for assistance from WHO.
 - Efforts are ongoing to mobilize and sustain the availability and preparedness of ambulances for transfer requests.
- So far CADUS has carried out at least three long-distance intensive care transports, including Rivne–Poland, Chernihiv–Lviv, and Kyiv–Lviv.

Health Cluster

- The Health Cluster in Ukraine currently has 106 partners, 87 of whom are operational partners, and 19 have planned activities. Partner activities span 141 unique settlements in 24 oblasts. Health Cluster Partners continue to support the ongoing activities in their respective Health Domain.

Health Domain	Number of Partners
HIV/TB	29
Trauma/mass casualties	13
Sexual and reproductive health, child health and GBV	10
NCDs	9
Mental health	8
NCDs	8
Other communicable diseases	6
COVID-19	3
Child health	3
Palliative care	1

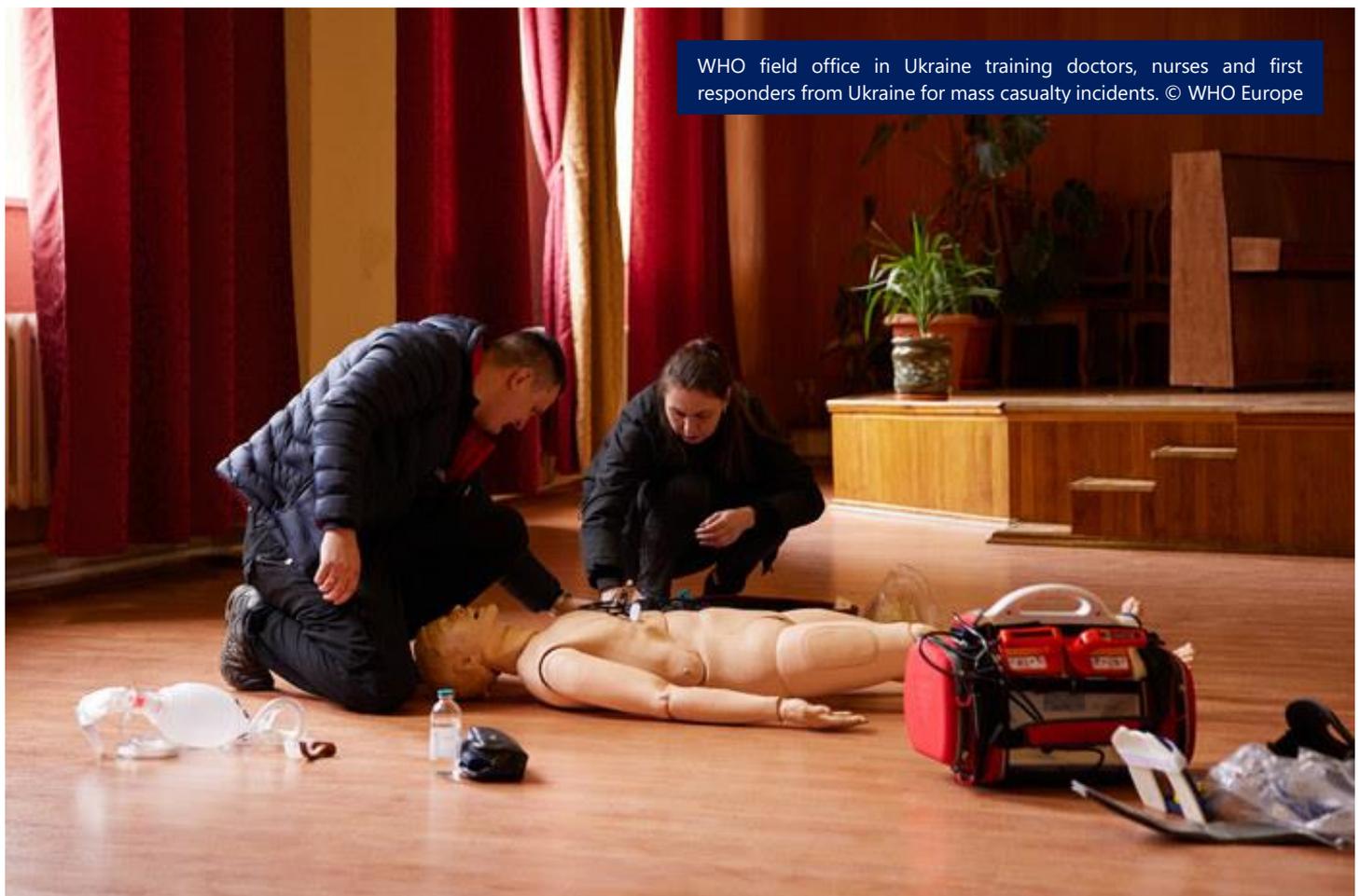
Note: Not all Partners reported the health domains of their activities.

- In addition to the activities mentioned in last week's situation report, Health Cluster Partners conducted about 400 household-level and community-level health needs assessments as part of their response activities on 18–22 April. Analysis of the data is under way.

- As of 15 April, the Ukraine [Health Requests, Planning and Response \(HRPR\) Form](#) is available online. This KoBo-based form aims to collect information on requests for assistance to meet humanitarian health needs in order to refer those requests to relevant partners for support.
- To meet the increased needs, OCHA has revised its appeal for funding with the launch of the [Ukraine Flash Appeal \(March–August 2022\)](#). Based on the revised appeal, over US\$ 2.25 billion is now required to meet the needs of people inside Ukraine as the estimated number of people in need of humanitarian aid has increased from 12 million to 15.7 million. The revised appeal aims to support 8.7 million people affected across the country:

Risk Communication and Community Engagement

WHO is preparing Ukrainian-language RCCE materials on food security and waterborne diseases, aimed at displaced and conflict-affected Ukrainian communities, to be shared with the MoH of Ukraine this week.



3. SITUATION AND ACTIVITIES IN REFUGEE-HOSTING COUNTRIES

3.1 Overall WHO actions in some refugee-hosting countries

Countries neighbouring or close to Ukraine have triggered emergency response systems for receiving refugees. In other countries WHO is strengthening operations to support the needs of refugees.

Health operations

A rapid survey on cancer hospital assessment was developed for hospitals and cancer centres in refugee-hosting countries, including Poland and the Republic of Moldova, that are treating Ukrainian refugees who have cancer. The survey will be conducted on a monthly basis from April to June and will be re-evaluated in July 2022.

3.2 Specific WHO actions in some refugee-hosting countries

Czechia

Situation update

Between 24 February and 27 April over 300 000 Ukrainian refugees entered Czechia.

WHO actions to date

- On 21 April the first meeting with NGOs and community-based organizations on health sector coordination was co-convened by the MoH and WHO. Future meetings will take place every two weeks and will focus on specific issues.
- On 25 April WHO met with the Director of the Department of Development Cooperation and Humanitarian Aid of the Ministry of Foreign Affairs to discuss WHO's work on the refugee crisis response in Czechia, as well as organizational issues.

Hungary

Situation update

Between 24 February and 27 April an estimated 507 849 Ukrainian refugees entered Hungary. There are fluctuations in daily arrivals, roughly between 2500 and 7000. Approximately 1000 Ukrainian refugees have received temporary residency status in Hungary.

WHO actions to date

- WHO holds weekly meetings with national health authorities to discuss the current situation, refugee health needs, as well as any gaps and opportunities for support from WHO.
- WHO has provided the Government of Hungary information on the estimated routine immunization coverage of refugees arriving from Ukraine.
- WHO has supported with the procurement of diphtheria antitoxin and medications for COVID-19 clinical care, including remdesivir and tocilizumab.
- WHO and the Hungarian health authorities have discussed a plan to establish an alternative medical supply line for Ukraine.

Poland

Situation update

- Between 24 February and 27 April 2022 an estimated 2 968 716 Ukrainian refugees entered Poland, accounting for 55% of the total refugee population. Refugee arrivals in Poland have decreased from a peak of 147 000 per day to 13 700 per day as of 25 April, when 11 400 exits back to Ukraine were reported.
- On April 21 UNHCR briefed the Information Management Working Group on planned initiatives involving data collection and information sharing related to the [Regional Refugee Response Plan](#) in Poland and the planned Multi-Sector Needs Assessment through REACH.

- On 26 April Premise, launched a household-level health survey in Poland.

WHO actions to date

- Following the surveillance mission held throughout March and April, WHO established a working group consisting of surveillance experts from the National Institute of Public Health (NIPH), the State Sanitary Inspectorate, WHO and the European Centre for Disease Prevention and Control to review approaches to:
 - implementing an early warning and response system for key priority diseases and syndromes; and
 - enhancing the completeness and timeliness of the existing surveillance system for infectious diseases.
- WHO has been working with MoH of Poland on the validation of Ukrainian prescription psychotropic medications in Poland. The MoH of Poland decided that treatment could continue, and psychotropic medication could be provided by general practitioners at primary health-care level. WHO will focus on capacity building and supervision of general practitioners in primary health-care settings in preventing and treating mental health conditions.
- WHO and IOM held a regional webinar on community-based MHPSS in emergency settings on 27 April.
- **EMT CCs in Poland:**
 - So far 32 Health Partners reported activities on the ground, including first aid, primary care services, medical evacuation and rehabilitation.
 - In liaison with the MoH and the WHO Country Office, the key priorities for partner coordination are as follows:
 - ensuring systematic reporting of Partners' activities to inform operational needs;
 - agreeing on and adapting a quality assurance approach for organizations providing health-care services; and
 - facilitating licensing of health-care providers.

Republic of Moldova

Situation update

- Between 24 February and 27 April 2022 an estimated 439 290 refugees entered the Republic of Moldova.
- As of 27 April, approximately 100 cases of acute watery diarrhoea were reported at refugee reception centres in the Republic of Moldova, of whom 17 are children under five years of age. These cases are currently being monitored by EMTs on site.
- Between 28 March and 18 April IOM provided psychological counselling (individual/group) to 52 refugees and third-country nationals at refugee accommodation centres. IOM also conducted psychological first aid training for 25 psychologists (five men and 20 women) working with the General Inspectorate of Border Police, the General Inspectorate of Police, and the Civil Protection and Emergency Inspectorate of the Republic of Moldova.
- In the Republic of Moldova, the National AIDS Programme, NGOs and the Joint United Nations Programme on HIV and AIDS (UNAIDS) continue to work together to support refugees with HIV/AIDS. Since 28 March, 113 refugees have been referred for antiretroviral therapy treatment. In the Republic of Moldova, there are currently 179 refugee cancer patients registered at the Institute of Oncology of the Republic of Moldova Cancer Institute, 10 of whom were treated due to urgent medical needs. The remaining patients are eligible for transportation to EU Member States for treatment.

WHO actions to date

- With WHO support, updates were made to the health sector contingency plan for refugee emergency management targeting health-care service delivery, public health and procurement and supply management.
- A total of nine regional trainings for strengthening health-care worker (HCW) capacities on routine immunization catch-up campaign, including vaccination of refugees, were conducted with UNICEF and WHO. The HCWs from 26 (70%) out of 37 districts improved their level of knowledge on routine immunization.
- 100 coordinators from 36 primary health-care institutions across the country have been trained during four trainings on boosting the COVID-19 immunization campaign and development of long-term microplanning for COVID-19 immunization.
- UNICEF and WHO are preparing for an Immunization Week event (concerning routine and COVID-19 immunizations) for the refugee and host populations.
- **EMT CCs in the Republic of Moldova**
 - Operational overview
 - eight Specialized Cell EMTs are currently operational in Chişinău, Ocniţa, Ştefan Vodă and Bălţi; and
 - eighteen teams are on standby.
 - As of 24 April EMTs have conducted 1875 outpatient medical consultations to support primary care facilities.
 - In liaison with the WHO Country Office, the MoH has approved the use of the EMT quality assurance list to conduct governance checks on teams delivering care.

Romania

Situation update

- Between 24 February and 27 April 2022 an estimated 801 453 Ukrainian refugees entered Romania. However, most are in transit to other countries, primarily to Hungary (36%) and Bulgaria (22%).
- As of 26 April the current refugee accommodation centre occupancy is at 22.8% capacity.

WHO actions to date

- On 26 April WHO met with the Temporary Refugee Coordinator Assignment to Romania, Bureau of Refugees, Population, and Migration United States Department of State, to discuss the refugees' health needs, gaps and potential funding.
- On 27 April WHO attended the second online meeting of the Refugee Coordination Forum Health Working Group.

Slovakia

Situation update

- Between 24 February and 27 April 2022 an estimated 363 940 Ukrainian refugees entered Slovakia.
- As of 26 April, 71 250 refugees have requested temporary protection in Slovakia and 177 people have applied for asylum.

WHO actions to date

- WHO continues to convene and lead the Health Technical Working Group in Slovakia.
- WHO and the Minister of Interior initiated the development of interagency contingency planning for the refugee crisis in Slovakia.

Resources

- [Public Health Situation Analysis \(PHSA\) Ukraine, 3 March 2022](#)
- [Public health situation analysis: refugee-hosting countries, 17 March 2022](#)
- [Previously published Situation Reports: Emergency in Ukraine](#)
- [Guidance Note for Medical Supply Donations](#)
- [Ukraine emergency webpage](#)
- [Health cluster; Emergency Medical Teams \(EMT\)](#)
- [Dashboards with the most recent posts across Facebook, Instagram and Twitter](#)

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