

Ukraine

Emergency type: Protracted Emergency

Reporting period: June-July-August, 2021

2021 HRP Overview



1.3 million people targeted by the Health Cluster in 2021



351,520 people benefited from healthcare services in the first two quarters of 2021 (January-July, 2021)¹



20 projects approved for 2021 HRP

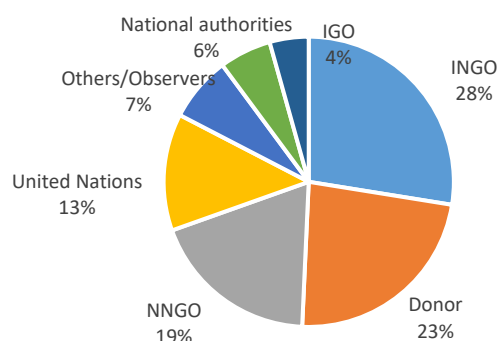


USD 28,7 million funds requested

USD 6,1 million funds received (21% of requested)

Health Cluster 2021

Number of partners: 69



Health Cluster – Summary

Health Cluster facilitated five national coordination meetings (on 09.06., 29.06., 14.07, 04.08 and 01.09), which included updating partners on humanitarian and COVID-19 situation in the East, presenting results of latest studies and missions, as well as following up on relevant issues and action points

Health Cluster (HC) together with partners started active work on Humanitarian Program Cycle (HPC) 2022. On 23 June, in a dedicated HPC session HC partners were briefed about key changes from previous year, including switch to activity-based costing (as opposed to project-based costing which has been used since the 2016 HRP) as well as changes in the geographical units for the analysis. The Cluster is also finalizing sectoral indicators to be used for the Joined Intersectoral Analysis Framework (JIAF) for the 2022 Ukraine Humanitarian Needs Overview (HNO).



¹ This number represents reports from partners received as part of Q1 HRP reporting, collected during January-March, 2021.

Health Cluster supported strategic review of humanitarian projects submitted under the first standard allocation of Ukraine Humanitarian Fund (UHF) in 2021. In total, there were 33 projects submitted to the UHF, of which 12 included health components. Following the Strategic Review Committee's decision, 11 projects of which 4 included health component were recommended for support in NGCA (with a total envelope of \$4.7 million) and 10 in GCA (\$4 million) of which 2 included health component, pending technical and financial review.

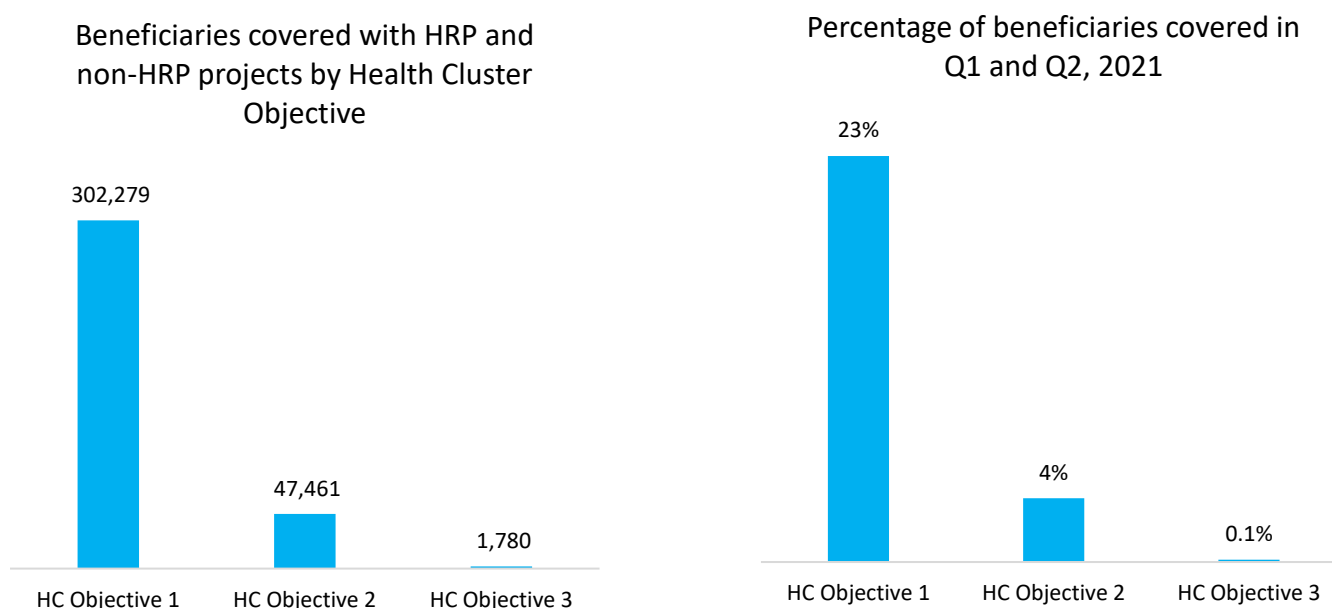
Health Cluster in partnership with REACH completed Health Perceptions Assessment in the Government Controlled Areas (GCA) of Donetsk and Luhansk oblasts. The assessment findings were presented at national coordination meeting of 4 August.

Health Cluster in partnership with WHO completed the study on the Impact of COVID-19 on essential health services in Donetsk and Luhansk oblast, GCA. The assessment will be followed by in-depth visits to selected health facilities. Findings will be presented at the upcoming national coordination meetings and will be included in the HNO.

Health Cluster completed a second cycle of quarterly reporting, covering activities under the 2021 Humanitarian Response Plan. According to the obtained analysis, over 300,000 people benefited from healthcare services in the first half of 2021, which is 30 per cent of the total target for people in need in 2021.

2021 HRP Q2 analysis – Health Cluster

Achievement of Cluster Objectives



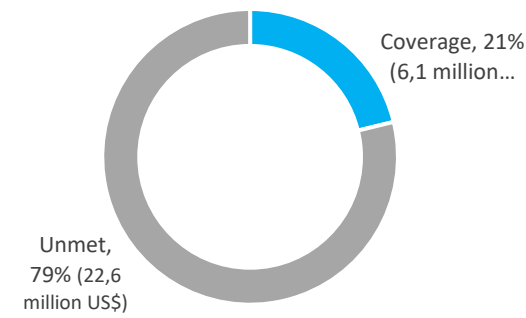
Health Objective 1. Reduce infectious disease transmission and hospitalization rate by supporting healthcare system, including laboratories and immunization, and COVID-19 incident management system (Surveillance, Infection Prevention and Control, Case Management, EECs, Risk Communication and Community Engagement).

Health Objective 2. Improve access of conflict-affected population, exacerbated by COVID-19, to essential healthcare services, including HIV/TB and MHPSS.

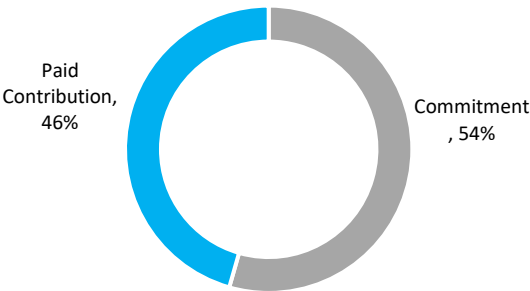
Health Objective 3. Improve capacity, sustainability and quality of healthcare services provided at different levels of care for conflict-affected population, exacerbated by COVID-19, and ensure implementation of humanitarian exit strategy in GCA from 2021-2023.

Resource mobilization

Health cluster Funding progress*

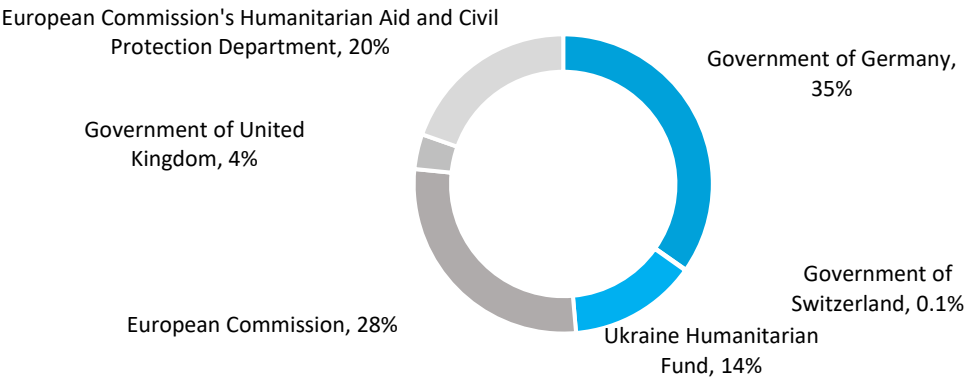


HRP Health Cluster Activities by funding status

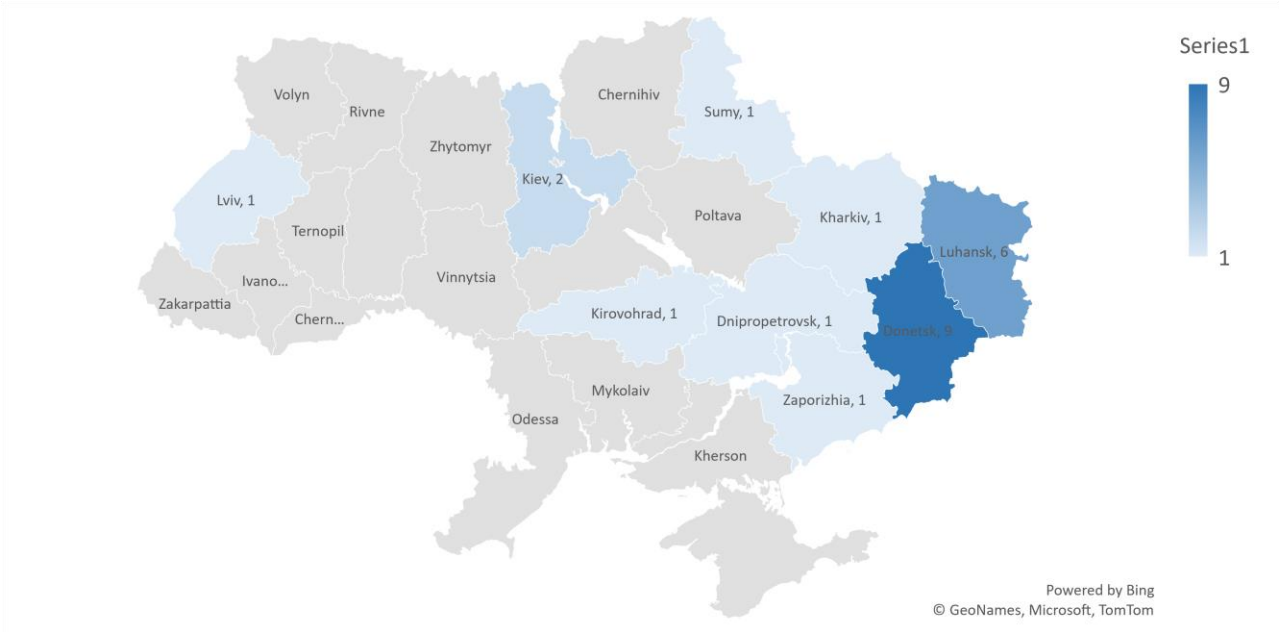


*Total financial requirement for 2021: 28,7 million US\$

Funding by organizations source, including Commitments and Paid Contributions



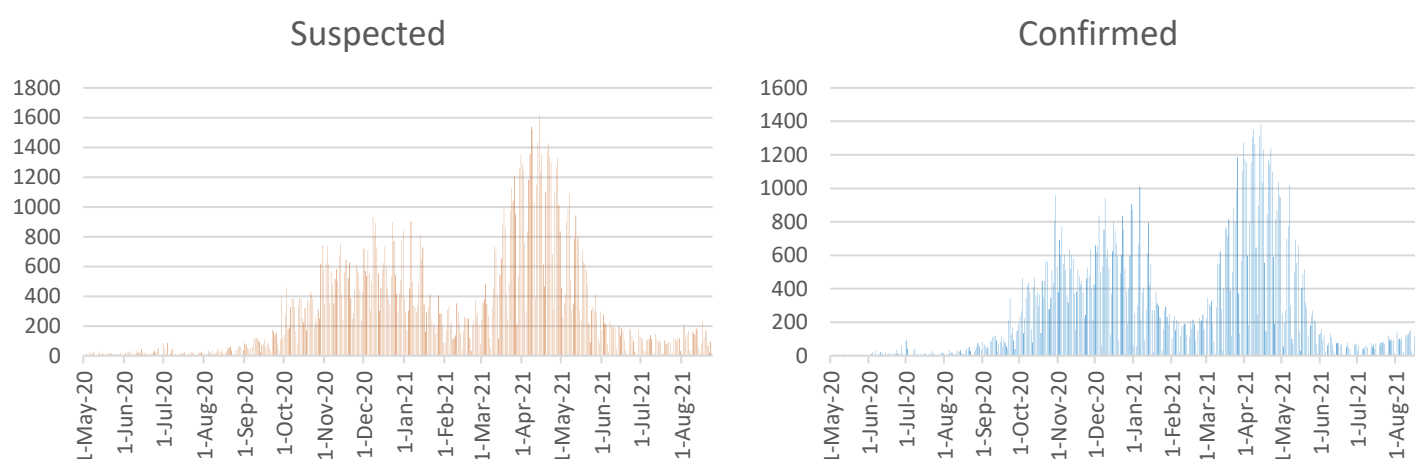
Partners' presence by oblast



Situation overview

COVID-19 Epidemiological situation in ECA

In **Government-Controlled area (GCA)** numbers continue to rise. In **Donetska oblast** number of confirmed cases has slightly increased (93,827 cases as of 31.08.2021 comparing to 91,687 cases on 31.07.2020). According to the UPHC, in Donetska oblast, cumulative test positivity rate is 23.6%. 89,983 recovered and 2,479 died as of 31 August. As for health care workers, there are 3,367 confirmed cases, of which 3,279 recovered and 47 died (as of August 24). In **Luhanska oblast**, 28,563 confirmed cases have been reported (over 27,164 as of July 31). Test positivity rate – 10.7%, 26,591 recovered and 1,012 died. As for health care workers, there are 1,561 confirmed cases, of which 1,533 recovered and 18 died (as of August 24).



Donetska oblast, GCA

Suspected	Confirmed	Recovered	Deaths	Active	14-day incidence rate	Case fatality rate	Active cases per 100,000 population	Number of available beds	Bed occupancy rate
104883	93827	89983	2749	1365	62.1	2.6%	72.7	2207	17.4%

Luhanska oblast, GCA

Suspected	Confirmed	Recovered	Deaths	Active	14-day incidence rate	Case fatality rate	Active cases per 100,000 population	Number of available beds	Bed occupancy rate
31477	28563	26591	1012	960	119.1	3.5%	142.8	1432	24.1%

In **Non-Government Controlled Area (NGCA)** the situation is less clear than in GCA. In addition, no case-based data is being provided, limiting the possibility of further analysis. In Donetsk, 56,336 cases have been reported as of 31 August, including 45,437 recovered and 4,094 died. In Luhansk, 8,950 cases have been reported on 31 August, including 7,224 recovered and 903 died. High infection rate among healthcare workers remains one of the of the major concerns reported in NGCA.

Donetska oblast, NGCA

Confirmed	Recovered	Deaths	Active	New cases including arrived from GCA	New cases including arrived from Russia	Case fatality rate	Cases among health care workers
56336	45437	4094	6805	108* ²	16*	7.3%	135*

Luhanska oblast, NGCA

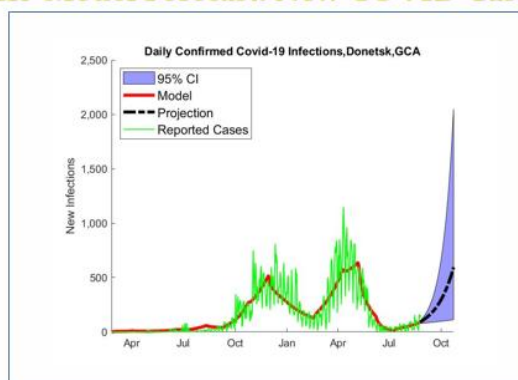
Confirmed	Recovered	Deaths	Active	New cases, including arrived from GCA*	New cases, including arrived from Russia*	Case fatality rate	
8950	7224	903	778	-	-	10.1%	-

Modeling of SARS-CoV-2 Transmission in Donetska oblast, GCA: September-October 2021

The latest SARS-CoV-2 projections in Donetska oblast (GCA) conducted by WHO CO Ukraine estimate a possible 95 per cent increase in confirmed cases in September-October 2021 at a worst-case scenario, with an expected median of 590 case (this analysis excludes asymptomatic cases). The same model projects also a similar worst-case scenario increase of 95 per cent in hospital occupancy rate out of the currently estimated at 2,207 beds available (as of 28 August 2021, with a median of 2,048 beds).

Model (2) Donetsk

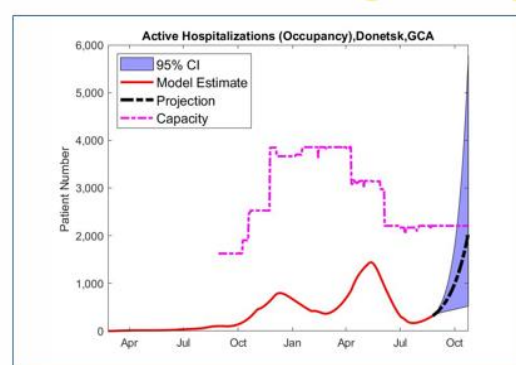
SEIR Model Forecast: New COVID Cases



End October Projection: Median 590 - 95% CI [111- 2,048]

Model (2) - Donetsk

SEIR Model Forecast: Hospital Occupancy



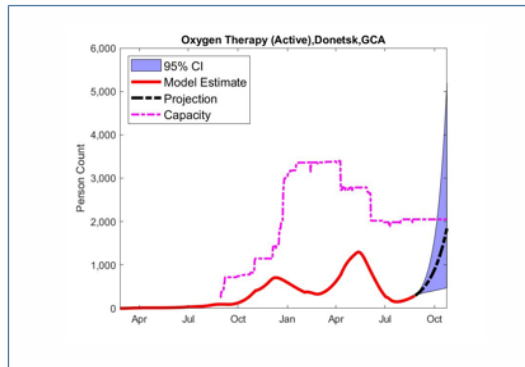
End of October Projection: Median 2,048 95% [524-5771]
Current Capacity of Covid Beds: 2207 (as of Aug 28, 2021)

Similarly, the SEIR model estimates a worst-case scenario increase of 95 per cent in oxygen bed occupancy rate out of the currently estimated at 2,051 beds available (as of 28 August 2021, with a median of 1,843 beds) and a 95 per cent increase in the ICU bed occupancy rate out of the currently estimated 185 beds available (as of 28 August 2021, with a median of 184 beds) by end of October.

² * number may not be representative of the information available.

Model (2) Donetsk

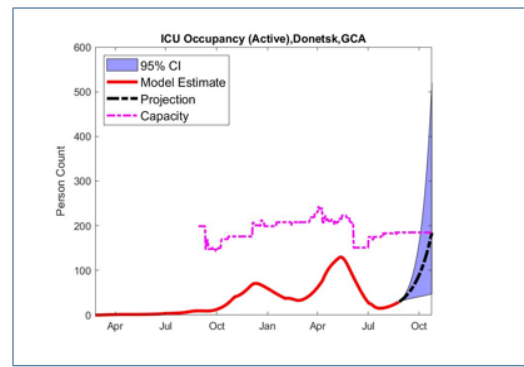
SEIR Model Forecast: Oxygen Bed Occupancy



End of October Projection: Median 1,843 95% [472-5193]
Current Capacity of O₂ Beds: **2051** (as of Aug 28, 2021)

Model (2) Donetsk

SEIR Model Forecast: ICU Occupancy



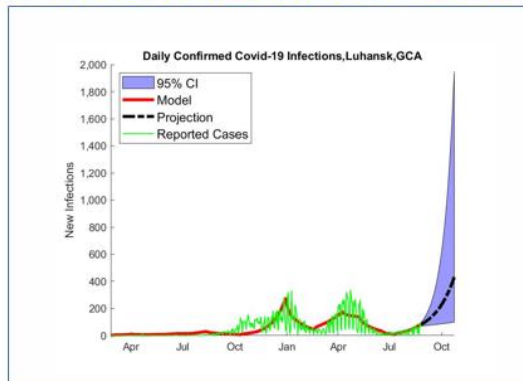
End of October Projection: Median 184 95% CI [47-519]
Current Capacity of ICU Beds: **185** (as of Aug 28, 2021)

Modeling of SARS-CoV-2 Transmission in Luhanska oblast, GCA: September-October 2021

The latest SARS-CoV-2 projections in Luhanska oblast (GCA) conducted by WHO CO Ukraine estimate a possible 95 per cent increase in confirmed cases in September-October 2021 at worst-case scenario, with an expected median of 430 cases (this analysis excludes asymptomatic cases). The same model projects a similar worst-case scenario increase of 95 per cent in hospital occupancy rate out of the currently estimated at 758 beds available (as of 28 August 2021, with a median of 834 beds).

Model (2) Luhansk

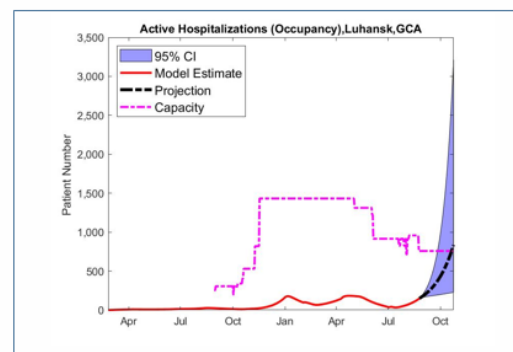
SEIR Model Forecast: New COVID Cases



End October Projection: Median 430 - 95% CI [98-1,947]

Model (2) - Luhansk

SEIR Model Forecast: Hospital Occupancy

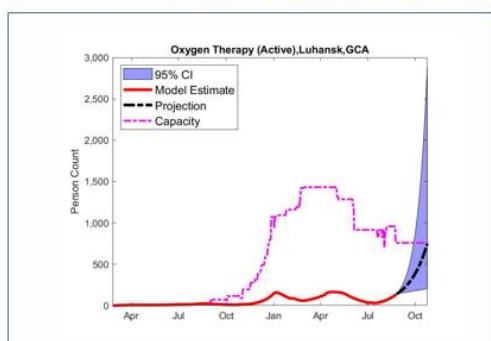


End of October Projection: Median 834 & 95% [227-3212]
Current Capacity of Covid Beds: **758** (as of Aug 28, 2021)

Similarly, the SEIR model estimates a worst-case scenario increase of 95 per cent in oxygen bed occupancy rate out of the currently estimated at 758 beds available (as of 28 August 2021, with a median of 751 beds) and a 95 per cent increase in the ICU bed occupancy rate out of the currently estimated 40 beds available (as of 28 August 2021, with a median of 75 beds) by end of October.

Model (2) Luhansk

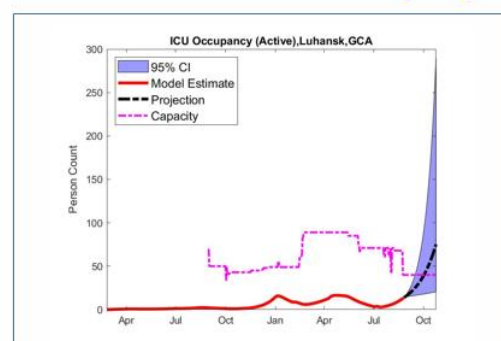
SEIR Model Forecast: Oxygen Bed Occupancy



End of October Projection: Median 751 95% [204-2891]
Current Capacity of O₂ Beds: **758** (as of Aug 28, 2021)

Model (2) Luhansk

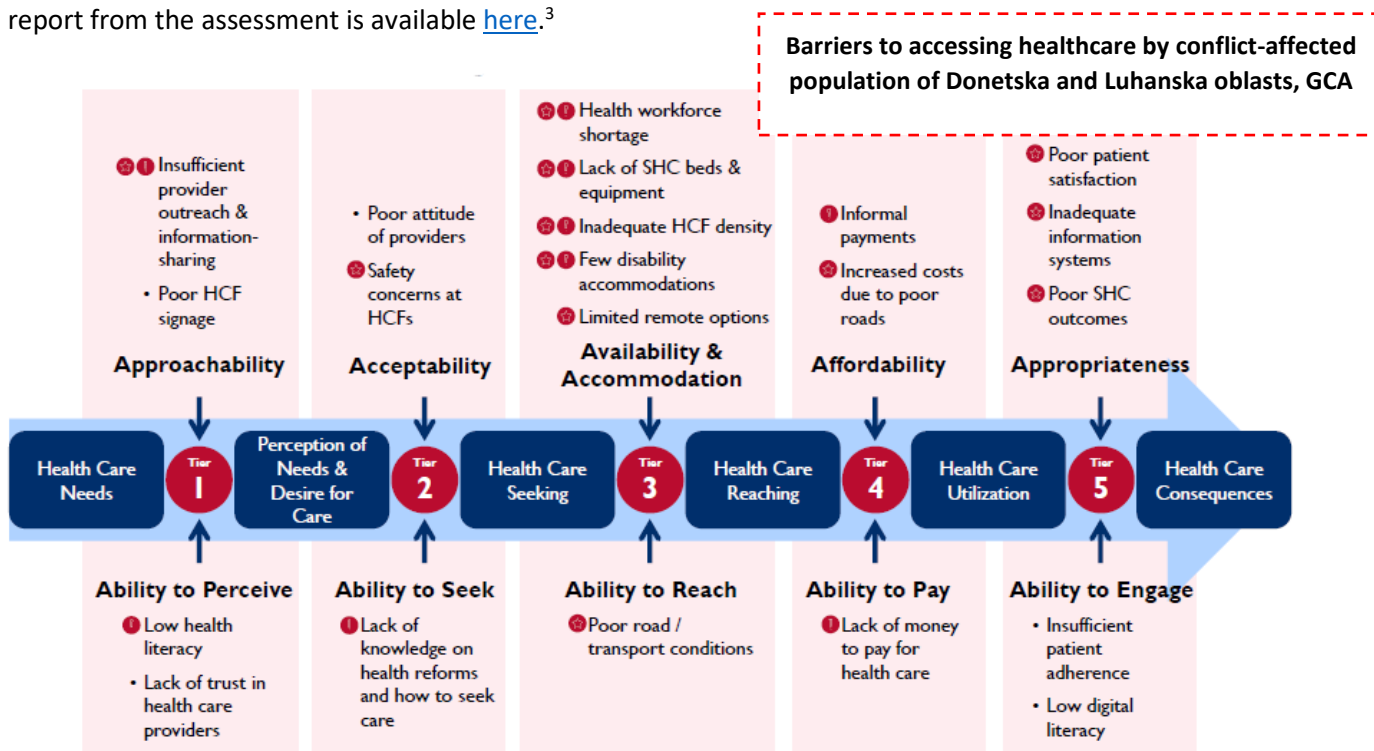
SEIR Model Forecast: ICU Occupancy



End of October Projection: Median 75 95% CI [20-289]
Current Capacity of ICU Beds: **40** (as of Aug 28, 2021)

Public Health Situation

The recent assessment of patient barriers to healthcare in the conflict-impacted areas of eastern Ukraine developed within the USAID Health Reform Support (HRS) project highlights a number of challenges faced by the population of Donetsk and Luhanska oblasts. The study identified several barriers which are structured around the five pillars of “Access Framework” presented below, as well as provided recommendations for action for relevant healthcare actors. The full report from the assessment is available [here](#).³



The analysis of secondary healthcare and emergency care service delivery in selected raions of Donetsk and Luhansk oblasts, GCA, developed within the USAID Health Reform Support (HRS) project, highlights changes in financial structure of healthcare facilities in line with the secondary level healthcare reform. While the changes in the system of HCF financing in 2020 resulted in changes in financial structure of healthcare facilities (among them - increased revenues in many HCFs, mismatch of revenues and expenditures, high variability of revenues under PMG, low level of funding from local authorities, reduced utilities' expenditures, reduced number of health staff, variability of revenues per employee, slow wage growth etc.), the HCF management is often not ready to work in the new conditions. The [report](#) provides a set of recommendations for improving financial management at national and local levels.⁴

Access of conflict-affected population to essential healthcare in the Donetsk and Lugansk Oblasts, GCA, continuous to be hampered by the ongoing decentralization reform. Recent advocacy note on the role of decentralization reform published by Médecins du Monde Ukraine argues that while the reform may have varying levels of success in achieving its intended effects on the healthcare system, challenges remain, particularly with regard to long process of transferring the ownership of health and social facilities to the newly created raions and ATCs, lack of knowledge about new responsibilities in the healthcare section and organization of healthcare services, complicated process of establishing ATC at the 'contact line', as well as lack of comprehensive targeted health programmes.⁵

³ USAID, & UK Aid. (2021, June 25). *Assessment of Patient Barriers to Healthcare in the Conflict Impacted Areas of Eastern Ukraine*.

⁴ USAID, & UK Aid. (2021). *The analysis of secondary healthcare and emergency care service delivery in selected raions of Donetsk and Luhansk oblasts, GCA*. <https://www.humanitarianresponse.info/en/operations/ukraine/document/ukraine-analysis-shc-and-ec-delivery-selected-raions-donetsk-and-o>

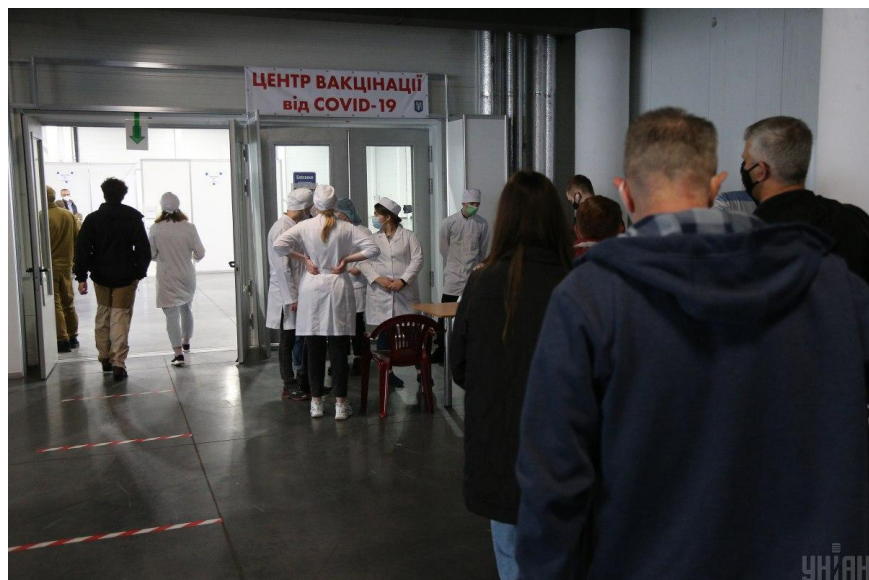
⁵ Médecins du Monde Ukraine. (2021). *Role of Decentralization*

Reform. <https://www.humanitarianresponse.info/en/operations/ukraine/document/ukraine-advocacy-note-role-decentralization-reform-mdm>

Places of detention in non-Government Controlled Areas (NGCA) have not been adequately assessed by international humanitarian organizations and lack appropriate healthcare. According to the recent OHCHR report, in both “Luhansk People's Republic (LPR)” and “Donetsk People's Republic (DPR)” detainees were not provided with adequate healthcare services and PPE in places of detention. Concerns were expressed with regards to lack of information about the health status of detainees and prisoners, significant shortage of essential medicines and healthcare staff in detention facilities, as well as lack of access to external medical specialists, even to detainees who are suffering from critical medical conditions.⁶

Women working in healthcare and patient care continue to face discrimination. Women make up more than 80 per cent of full-time health workers. However, salaries in the healthcare sector are one of the lowest among all industries (in 2018: UAH 5,723 per month for women, UAH 6,441 for men). The gender pay gap is estimated at 11.1 per cent. During the COVID-19 pandemic, women are exposed to the risk of disease while providing food, medicines, care for single elderly people, people with disabilities and so on. Due to the insufficient level of development of the social services system, women are the primary unpaid caregivers for patients and people with disabilities - children, parents and relatives, and the state provides them with very little support.⁷

Government response



The Ministry of Health of Ukraine adopted a new list of facilities for hospitalization of patients with COVID-19. According to new regulations adopted in June, the number of COVID-19 designated hospitals decreased from 525 to 257.⁸ As reported by the Ministry of Health, this decision came into force after a significant improvement in epidemiologic situation and decrease in bad occupancy rate (about 19 per cent as of May 2021)⁹. The government also adopted new requirements for COVID-19 designated facilities which remained in the list - to ensure continuity and improvement in the services provided.¹⁰

Ukraine launched 5th stage of vaccination against COVID-19 which opens vaccination to all citizens aged 18 and over. As stated by the Prime Minister Volodymyr Shmyhal, regions are fully provided with vaccines and can start vaccinating anyone.¹¹ Earlier, the Ministry of Health also reported about **some 200 plus mass vaccination centers operating in**

⁶ OHCHR, Impact of COVID-19 on Human Rights in Ukraine, December 2020, available at https://ukraine.un.org/sites/default/files/2020-12/Ukraine_COVID-19_HR_impact_EN.pdf

⁷ Kyseliyova Oksana, Гендерний вимір пандемії COVID-19 [Gender dimension of the COVID-19 pandemic], May 2020, available at https://mof.gov.ua/storage/files/covid_final.pdf.

⁸ National Health Service of Ukraine. (2021, June 3). *A new list of facilities for hospitalization of patients with COVID-19 has been approved*. Cabinet of Ministers of Ukraine. <https://www.kmu.gov.ua/news/zatverdzheno-novij-perelik-zakladiv-dlya-gospitalizaciyi-paciyentiv-z-covid-19>

⁹ Ukrainska Pravda. (2021, May 31). *The situation with COVID-19 in Ukraine is improving, Zelensky instructed to give a forecast for the fall*. <https://www.pravda.com.ua/news/2021/05/31/7295508/>

¹⁰ *Ukraine is closing down COVID hospitals, at least until the fall*. (2021, June 3). Ukrinform. <https://www.ukrinform.ua/rubric-society/3257989-ukraina-zgortae-kovidlikarni-prinajmni-do-oseni.html>

¹¹ Ministry of Healthcare of Ukraine. (2021, July 20). *Ukraine opens vaccination against COVID-19 for everyone*. Cabinet of Ministers of Ukraine. <https://www.kmu.gov.ua/en/news/ukrayina-vidkrivaye-vakcinaciyu-proti-covid-19-dlya-vsih-ohochih>

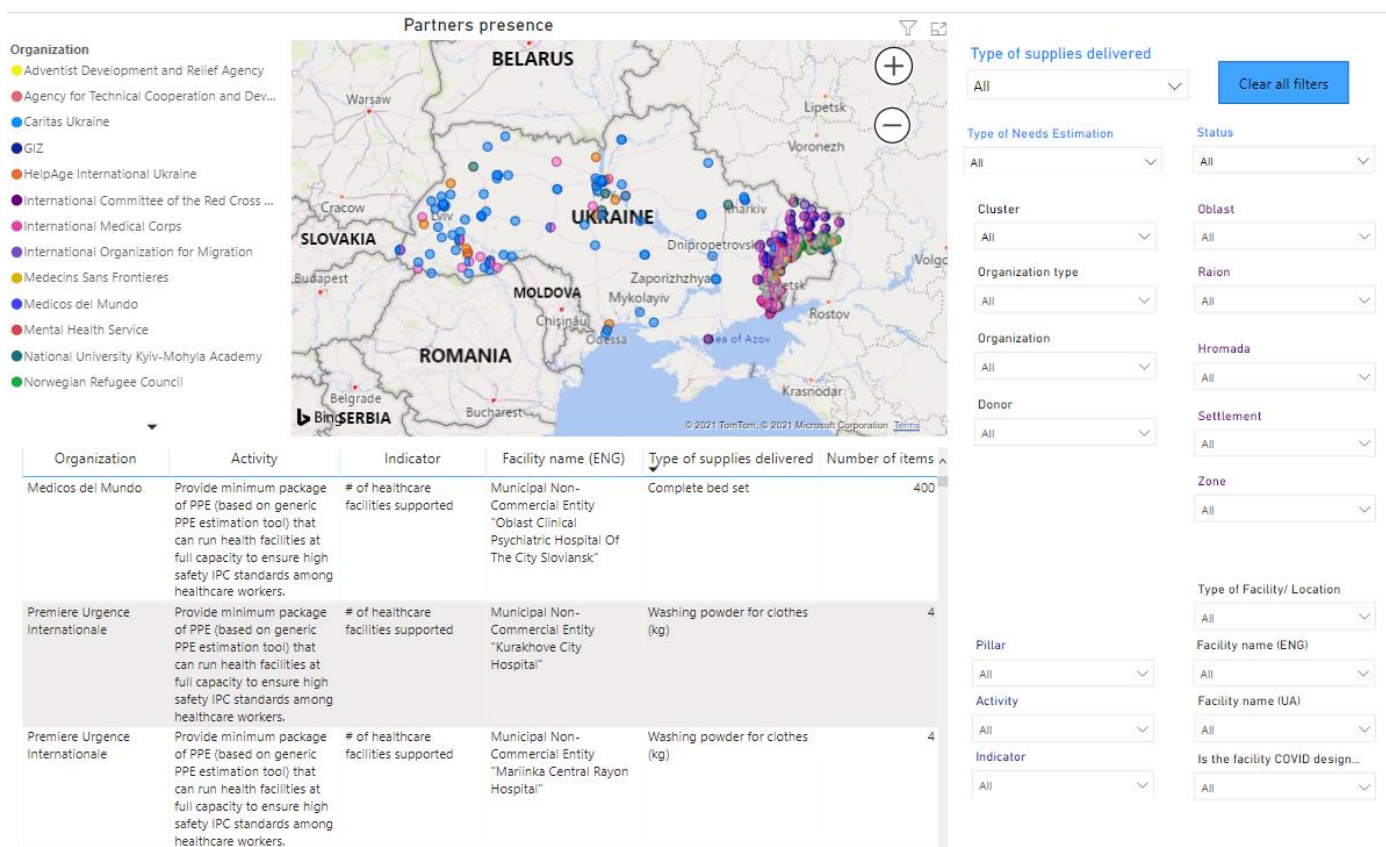
Ukraine, including 12 centers in Donetsk oblast and 5 in Luhanska oblast, GCA. The full list of vaccination centers is available [here](#) while detailed information about availability of vaccines in all oblasts can be found on the MOH [dashboard](#).

On 28 July, the Government announced the reinstatement of app-monitored self-quarantine for people crossing international borders and the “contact line”. Travelers vaccinated with WHO-approved vaccines will be exempt from self-quarantine, however NGCA residents vaccinated with Sputnik vaccines, will be required to provide a negative COVID-19 test result and/or self-quarantine. Furthermore, NGCA residents transiting through the Russian Federation (RF) to enter GCA may be affected by a new mandatory 14-day self-quarantine without the possibility to cancel it for all travelers who spent over seven days in COVID-19 Delta strain high exposure areas, which includes the RF. Travelers spending less than seven days in the RF will be required to provide a negative COVID-19 test, which might further increase processing times and lead to longer queues at the border crossing points.¹²

Preparations for the possible spike in COVID-19 infections are ongoing. On 16 August the Ministry of Health called on local authorities to inspect hospitals on the subject of their readiness for a new spike in COVID-19 (to be potentially caused by the Delta variant). The Ministry also announced additional purchase of 14,790 oxygen concentrators to be delivered to all hromadas. In addition, 63 hospitals will receive support with oxygen supply systems.¹³

COVID-19 response

Health Cluster continuous to provide the lead on the COVID-19 ‘5W’ IMS data collection. Together with WASH and Protection Cluster we completed the third cycle of COVID-19 reporting and analysis in 2021. The results of this work are reflected in the updated [COVID-19 ‘5W’ dashboard](#).



¹² The Government has changed the border crossing rules to counter the Delta coronavirus strain. (2021, July 28). Ministry of Healthcare of Ukraine. <https://moz.gov.ua/article/news/uriad-zminiv-pravila-peretinu-kordonu-dlia-protidii-delta-shtamu-koronavirusu>

¹³ The Ministry of Health called on local authorities to inspect hospitals for readiness for a new wave. (2021, August 16). Ministry of Healthcare of Ukraine. <https://moz.gov.ua/article/news/moz-zaklikalo-miscevu-vladu-proinspektuvati-likarni-na-gotovnist-do-novoi-hvili->

Nexus and Health System Strengthening

Under the umbrella of the Health Cluster Ukraine, with the aim of reinforcing of essential health services affected by COVID-19 and health emergency situations, WHO works in collaboration with Medicos Del Mundo to increase resilience of communities and of the local health system in Donetsk and Luhansk region (GCA) by improving availability and access to quality healthcare services in selected communities affected both by COVID-19 and by the armed conflict in this region of Ukraine. The Health Cluster and WHO will provide technical advice to Medicos del Mundo to manage this important aspect of the response through a specialized consultant in health financing.



The program is implemented around three main components: 1) **direct delivery of services through multidisciplinary mobile units** (including primary healthcare services (PHC), sexual and reproductive health (SRH), and Mental Health and Psychosocial support services (MHPSS) and to gender-based violence (GBV) response services); 2) **strengthening of local health system** (with a specific focus on PHC, SRH, MHPSS and GBV) through capacity building of health and non-health staff, awareness raising and advocacy; 3) **support to the health system in response to COVID-19** pandemics in eastern Ukraine.

A humanitarian, development, peace nexus approach will be implemented, linking Health partners humanitarian assistance with transitional aid/development activities and peacebuilding efforts, thereby resulting in sustainable access to health services in the area, in line with the phase 3 of the WHO/EU-NEAR Solidarity Programme for the Eastern Partnership - Health. The overall objective is to strengthen the resilience of people and local structures to the effects and consequences of both COVID-19 and conflict crises.

Update from the MHPSS TWG

MHPSS TWG Ukraine in cooperation with Ukrainian Red Cross Society conducted online PFA training and respective webinar focusing on PFA in the settings of COVID-19 pandemic. The focus was on an online psychological first aid was identified as one of the needs of MHPSS TWG partners. These events were aimed to refresh the knowledge on PFA and focus on the new approaches and skills to provide it via online and telephone modes, based on the experience gained by Ukrainian Red Cross Society in their operational response during COVID-19 pandemic.

MHPSS TWG Ukraine has completed the round of updates on the service map, covering the MHPSS and GBV services all over the country. Two workshops at the regional level meetings were organised to present the user guide of the map as well as to collect the feedback from partners to improve the referral capabilities of it.

The tool is being improved for referral purposes and being updated the contact information for referrals. The service map is available following the [link](#).

MHPSS TWG with partners collaboratively finalized the indicators for the data collection from the group to have a clearer picture on the services and beneficiaries receiving the psychosocial support. The data collection process is ongoing. The results will be analyzed with next month.

With partners active participation the TWG released the MHPSS COVID-19 toolkit in Ukrainian language, where the most important and relevant guidance on the COVID-19 response in MHPSS are stored. Partner organizations submitted the materials that have been adapted, translated, or developed in Ukrainian context during COVID-19 response in MHPSS to the group. The product has the first version and undergoing partners' feedback. The final version will be stored at mhpss.net in a [dedicated group for Ukraine](#).

Useful Links and Resources

- [Updated Health Cluster Page on Humanitarian Response Info website](#)
- [WHO Coronavirus \(COVID-19\) Dashboard](#)
- [Health Cluster COVID-19 '5W' IMS Dashboard](#)
- [Ukraine Humanitarian Fund 1st Reserve Allocation 2021 \(as of 31 August 2021\)](#)
- [Holding gatherings during the COVID-19 pandemic: WHO policy brief, 2 August 2021](#)
- [WHO Guideline on self-care interventions for health and well-being, 13 July 2021](#)
- [Conducting community engagement for COVID-19 vaccines: Interim guidance, January 2021](#)
- [Community needs, perceptions and demand: community assessment tool for COVID-19](#)
- [Monitoring COVID-19 vaccination: Considerations for the collection and use of vaccination data](#)
- [COVID-19 vaccine checklist: for frontline health workers planning a COVID-19 vaccination session.](#)
- [COVID-19 vaccination: supply and logistics guidance](#)
- [Definition and categorization of the timing of mother-to-child transmission of SARS-CoV-2](#)
- [COVID-19: Occupational health and safety for health workers](#)
- [Interim Guidance on Public Health and Social Measures for COVID-19 Preparedness and Response Operations in Low Capacity and Humanitarian Settings](#)
- [Ukraine: Harmonized Rapid Health Facilities Assessment Tool](#)

Contacts

Health Cluster

Emanuele Bruni
Health Cluster Coordinator
brunie@who.int

Iryna Koval
Partnerships Coordination, Planning and M&E
Consultant
kovali@who.int

Oleksandra Abrosimova
National Consultant Information Manager
abrosimovao@who.int

MHPSS Working Group

Alisa Ladyk-Bryzgalova
MHPSS Working Group
ladykbryzghalovaa@who.int

Oksana Dmytriak
MHPSS Working Group
dmytriako@who.int

TB/HIV Working Group

Martin Donoghue
TB/HIV Working Group
donoghoem@who.int