

Ukraine

Emergency type: Protracted Emergency

Reporting period: September-October-November, 2021

2021 HRP Overview



1.3 million people targeted by the Health Cluster in 2021



408 511 people benefited from health care services in the first three quarters of 2021 (January-September 2021)¹



20 projects approved for the 2021 HRP

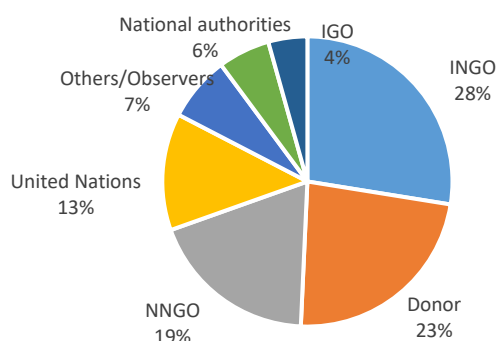


USD 28,7 million funds requested

USD 11 million funds received (39% of requested)

Health Cluster 2021

Number of partners: 69



Health Cluster – Summary

The Health Cluster finalized the Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP) for 2022. In 2022, Health Cluster partners will target 1.15 million out of an estimated 1.5 million people in need of humanitarian health care with a total requirement of US\$35.7 million, 59% of which will fund the response in NGCA.

The Public Health Situation Analysis (PHSA) for Donetsk and Luhansk Oblasts, GCA is being updated for 2022. The PHSA provides all health sector partners with a comprehensive understanding of the public health situation in a crisis, to inform evidence-based collective humanitarian health response planning. Highlights of the 2022 update are presented herein.

The Health Cluster completed a third cycle of quarterly reporting, covering activities under the 2021 Humanitarian Response Plan. Over 408 000 people benefited from health care services in the first three quarters of 2021 (31% of the total targeted people in need in 2021). Results are reflected in the updated HRP '5W' dashboard.

The Health Cluster continues to lead the COVID-19 '5W' IMS data collection. The fourth cycle of COVID-19 reporting and analysis in 2021, covering September and October activities, was completed in collaboration with the WASH and Protection Clusters. Results are reflected in the updated COVID-19 '5W' dashboard.

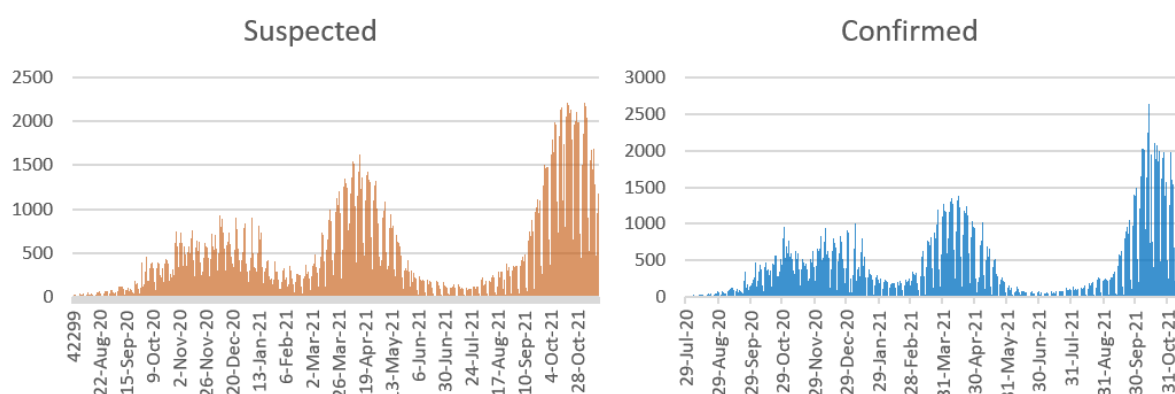
¹ This number represents reports from partners received as part of Q3 HRP reporting, collected during January-September 2021.

The Health Cluster held three field missions as part of a case study on the impact of Public Health and Social Measures to prevent COVID-19 related to the planning of local and municipal elections that took place in Ukraine between 25 October and 22 November, 2020. During the missions, election commission and local government representatives were interviewed. This qualitative study presents the impact of COVID-19 on decision making related to the planning of the local and municipal elections in Ukraine, including the process leading to the assessment of risks and to the identification of precautionary measures, the modalities of implementation of those measures, their acceptance by the public and their impact on the spread of the virus.

COVID-19 Situation Overview

Epidemiological situation in GCA

Government-Controlled Areas (GCA) are in the midst of a third wave of COVID-19. In **Donetska oblast**, 146 092 confirmed cases of COVID-19 have been reported as of 19 November, of which 126 968 recovered and 4229 died.. According to the UPHC, in Donetska oblast, the cumulative test positivity rate was 28.4%. Among health care workers, there have been 4,645 confirmed cases, of which 4226 recovered and 60 died (as of 17 November). In **Luhanska oblast**, 55 249 confirmed cases have been reported, of which 43 215 recovered and 1872 died. The cumulative test positivity rate was 12.7%. Among health care workers, there have been 2132 confirmed cases, of which 1868 recovered and 25 died (as of 17 November).



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
169 034	146 092	126 968	4229	14 895	723.6	2.9%	793.1	4061	67.4%

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

63 122 55 249 43 215 1872 10 162 119.1 3.4% 661.4 1632 46.5%

In Non-Government Controlled Area (NGCA) the situation is less clear than in GCA. In addition, no case-based data is being provided, limiting further analysis. In Donetsk oblast, 101 213 cases have been reported as of 19 November, of which 76 126 recovered and 7734 died. In Luhanska oblast, 20 248 cases have been reported as of 19 November, of which 16 177 recovered and 2808 died. The high infection rate among health care workers remains as one of the of the major concerns reported in NGCA.

Donetska oblast, NGCA²

Confirmed	Recovered	Deaths	Active	New cases including arrived from GCA	New cases including arrived from Russia	Case fatality rate	Cases among health care workers
101 213	76 126	7734	17 353	108*	16*	7.6%	135*

Luhanska oblast, NGCA³

Confirmed	Recovered	Deaths	Active	New cases, including arrived from GCA*	New cases, including arrived from Russia*	Case fatality rate	
20248	16 177	2808	1263	-	-	6.2%	-

Polio Outbreak in Ukraine

- On 6 October 2021, a cVDPV2 outbreak was confirmed in Ukraine. As of 25 November 2021, testing for cVDPV2 in specimens collected among contacts of the index case has been completed. A total of 20 individuals residing in two oblasts (Rivne and Zakarpattya) had positive isolation of cVDPV2 in stool specimens; all specimens closely related. In Rivne province, cVDPV2 was isolated in the index AFP case, 7 household contacts (siblings) and 8 community contacts (schoolmates). In Zakarpattya province cVDPV2 was isolated in samples from 4 children (cousins who have had contact with the siblings of the AFP case). Genetic sequencing has demonstrated that the cVDPV2 is linked with the PAK-GB-1 emergence and the closest match was to an environmental sample from Dushanbe, Tajikistan.
- The cVDPV2 outbreak has been declared as a public health emergency in Rivne and Zakarpattya. WHO has internally graded the outbreak as level 2.



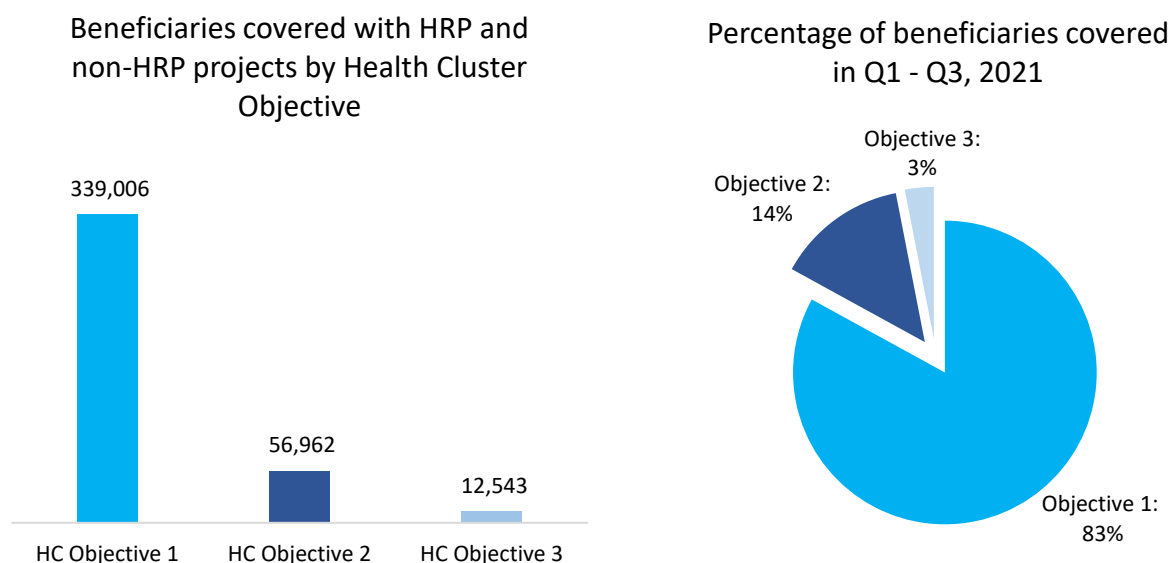
² * number may not be representative of the information available.

³ * number may not be representative of the information available.

- Country level coordination is ongoing between Ministry of Health Public Health Center, and GPEI partners including WHO, UNICEF and CDC-Atlanta. The Global Polio Eradication Initiative (GPEI) is providing support to Ukraine with deployment of RRT to support initial OBR activities (WHO, UNICEF, CDC); the 6-month outbreak surge budget was approved.
- A training for 30 Field Epidemiology Training Program (FETP) trainees was conducted from 15-17 November by GPEI and UPHC experts (the total of 30 participants). After the training, FETP members will visit several regions considered to be at high risk for a polio outbreak to conduct assessments of gaps in AFP and environmental surveillance for poliovirus.
- Experts from the GPEI are working with experts from the Ukraine Public Health Center (UPHC) to develop an Outbreak Response Action Plan. The latest cVDPV2 situation report is available [here](#).

2021 HRP Q3 analysis – Health Cluster

Achievement of Cluster Objectives

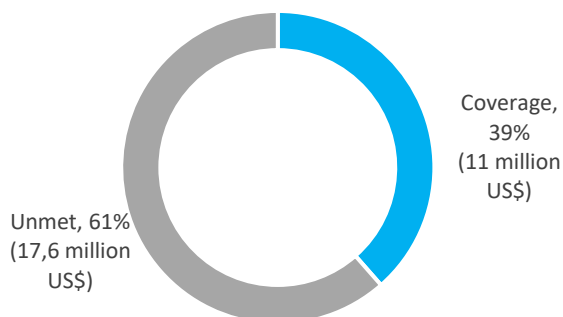


Health Objective 1. Reduce infectious disease transmission and hospitalization rate by supporting healthcare system, including laboratories and immunization, and COVID-19 incident management system (Surveillance, Infection Prevention and Control, Case Management, EECPS, Risk Communication and Community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

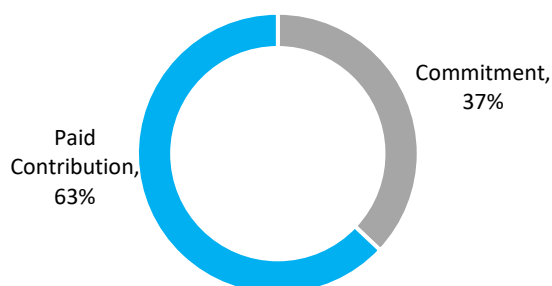
Health Objective 2. Improve access of conflict-affected population, exacerbated by COVID-19, to essential healthcare services, including HIV/TB and MHPSS.

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.

Health Cluster Funding progress*

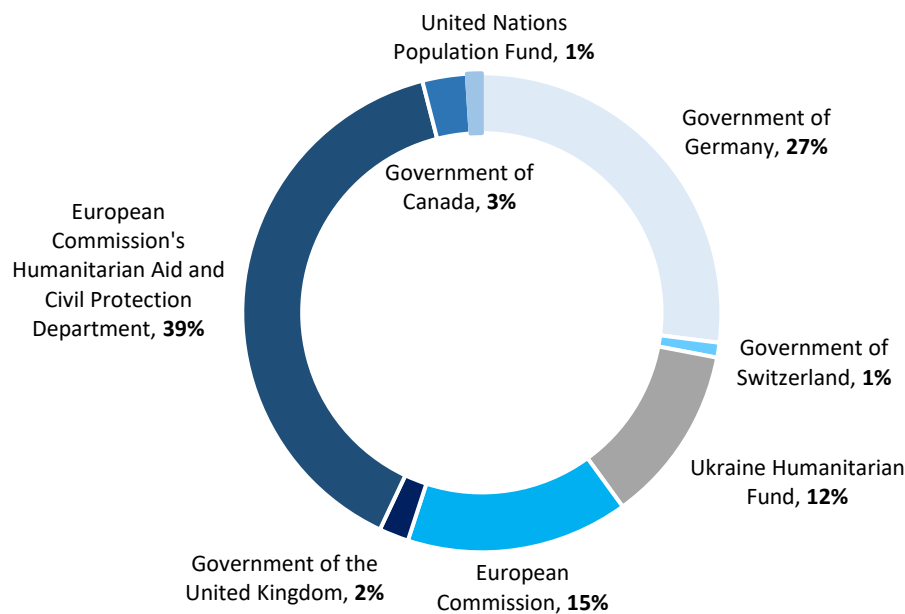


HRP Health Cluster Activities by funding status



*Total financial requirement for 2021: 28.7 million US\$

Funding by Organization Source (including committed and paid contributions)



COVID-19 Response

The Health Cluster continues to lead the COVID-19 '5W' IMS data collection. The fourth cycle of COVID-19 reporting and analysis in 2021, covering September and October activities, was completed in collaboration with the WASH and Protection Clusters. Results are reflected in the updated COVID-19 '5W' dashboard.

Summary figures

29

Partners reporting

686

Health Facilities ...

347

Settlements cov...

2M

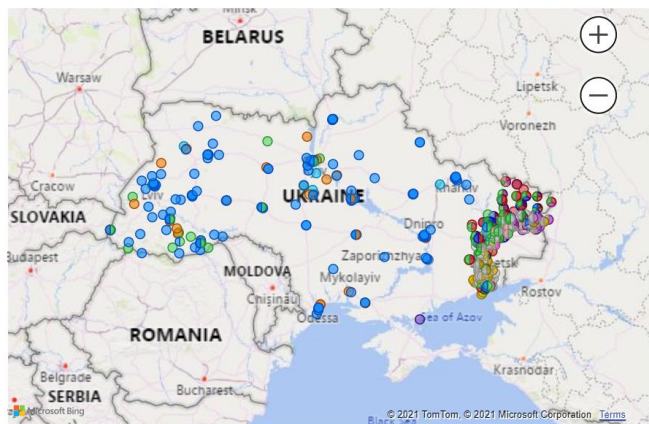
Supplies provided

Clear all filters

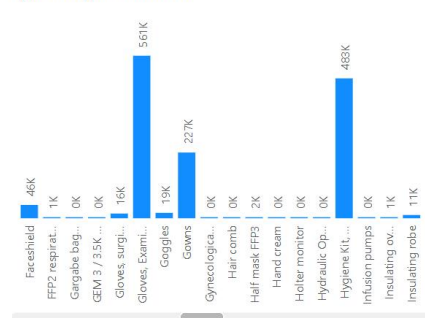
Partner Presence Map

Organization

- Adventist Development and Relief Agency
- Agency for Technical Cooperation and De...
- Alliance for Public Health
- Caritas Ukraine
- Family Nurses Association
- GIZ
- HelpAge International Ukraine
- International Committee of the Red Cross ...
- International Medical Corps
- International Organization for Migration
- Medecins Sans Frontieres
- Medicos del Mundo
- Mental Health Service
- National University Kyiv-Mohyla Academy



Type of supplies delivered



Available Filters

Status of activity

Oblast

2022 Humanitarian Needs Overview and Response Plan

In 2022, Health Cluster partners will target 1.15 million people out of the estimated 1.52 million in need of humanitarian health care, including 151 494 children (13%), 648 277 adults (56%) and 350 229 elderly (30%). More than half (54%) of the response will be focused on women and girls, and 13% (or 150 846 people) on people with disabilities. Partner activities have a total requirement of US\$35.7 million, 59% of which will fund the response in NGCA.

PEOPLE IN NEED
1 520 478

PEOPLE TARGETED
1 150 000



\$35 696 159

24% increase compared to 2021

Fin. Req for
GCA 41%

Fin. Req for
NGCA 59%



54% FEMALE



46% MALE



13% CHILDREN



56% ADULTS



30% ELDERLY



13% PwD

Breakdown of targets by oblast and by GCA/NGCA (people)

Donetsk GCA	Donetsk NGCA	Luhansk GCA	Luhansk NGCA
456 982	307 881	228 418	156 719

The objectives of the Health Cluster response are to:

- 1) reduce infectious disease transmission and hospitalization rates by supporting the healthcare system, including laboratories and immunization, and the COVID-19 incident management system (Surveillance, Infection Prevention and Control, Case Management, EECs, Risk Communication and Community Engagement);
- 2) improve access of the conflict-affected population, exacerbated by COVID-19, to essential healthcare services, including HIV, TB and mental health and psychosocial support;
- 3) improve the capacity, sustainability and quality of healthcare services provided at different levels of care for the conflict-affected population and ensure the implementation of the humanitarian exit strategy in GCA from 2021-2023 and working towards the HDP NEXUS approach.

Public Health Situation Analysis (PHSA) – 2021-22 Update

The PHSA for Donetsk & Luhansk Oblasts, GCA has been updated for 2022! As part of the Public Health Information Services (PHIS) Toolkit developed by the Global Health Cluster, the PHSA provides all health sector partners with a comprehensive understanding of the public health situation in a crisis in order to inform evidence-based collective humanitarian health response planning.

The PHSA is a synthesis of the currently available data on the:

- i. epidemiologic conditions;
- ii. existing health needs;
- iii. possible health threats faced by the crisis-affected population;
- iv. humanitarian response.

Highlights from the report

- COVID-19 is the highest priority health threat; TB, HIV, non-communicable diseases (NCDs), and vaccine-preventable diseases are also priority health threats.
 - COVID-19-related restrictions have impacted TB and HIV programmes, evidenced by lower case-reporting, potentially delaying treatment of unreported infections and risking further disease transmission.
 - Despite childhood vaccination coverage reportedly being close to WHO targets in 2020, disruptions to immunization programmes due to insecurity and the pandemic place the population in Eastern Ukraine, especially children, at risk.

NCDs, such as cardiovascular disease, are the leading cause of death in Donetsk and Luhansk GCA. Reduced access to health care and medicines due to hostilities and the pandemic is likely to increase the burden.



Workshops on Gender-Sensitive Programming

Despite the importance, humanitarian programming still lacks a gender perspective and risks being off-target, not reaching the most excluded. Health Cluster team in Ukraine aims to fill those gaps by initiating a series of interventions to reach a concrete level of gender mainstreaming in humanitarian assistance. In order to ensure that gender-based injustices and inequalities are not exacerbated by humanitarian interventions and that where possible greater equality and justice in gender relations are promoted.



In this regard, Health Cluster team held two offline **Workshops on Strengthening Gender-Sensitive Programming in Severodonetsk (22-23 November) and Kramatorsk (25-26 November)**. The purpose of the workshops was to equip participants with the relevant knowledge, skills and values that allow them to better reflect and mainstream gender in their projects and programmes, thereby improving the overall quality and effectiveness of their response. Before workshops, a Focus Group with partners organizations was held to adjust the program to the needs of participants. As result, 18 participants took part in the workshops.

Post-training follow-up and individual project support to partners is available from 26 November to 20 December.

Update from the MHPSS TWG

The Ukrainian **MHPSS COVID-19 toolkit version 2.0** is available in Ukrainian on mhpss.net in the Ukraine Group.

Ukraine is a pilot country for the [Mental Health and Psychosocial Support Minimum Service Package](#) (MHPSS MSP). The **MHPSS (MSP)** will be an open-source resource that outlines a series of specific, costed activities that must be implemented to meet the immediate, common, and critical needs of the emergency affected populations, based on existing global guidelines and evidence. These minimum core activities should serve as the foundation for more comprehensive and sustainable services. The MSP will help ensure that humanitarian responses to mental health needs are better informed by existing guidelines and will be more predictable, equitable, and efficient. This should ultimately lead to improved quality, scale, and coordination of MHPSS programming. A call for proposals from partners has been launched. Proposals will be selected in November 2021; partners whose proposals were selected will then be issued a grant to initiate, strengthen or scale up MHPSS activities listed in the MSP focused on **Health and Protection over the next 10 months (December 2021- September 2022)**.



My Hero is You: How kids can hope with COVID-19! ([link](#)) now available in [Ukrainian](#).

The content of the book drew from survey responses from more than 5000 children, parents, caregivers and teachers from around the world on the challenges they continue to face in the second year of the pandemic. The book provides a vivid illustration of the impact of COVID-19 on the mental health and well-being of children.

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](#)
- [Holding gatherings during the COVID-19 pandemic: WHO policy brief, 2 August 2021](#)
- [COVID-19 vaccine checklist: for frontline health workers planning a COVID-19 vaccination session.](#)
- [COVID-19 vaccination: supply and logistics guidance](#)
- [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](#)
- [Open WHO Course catalogue](#)
- [Strengthening health response to gender-based violence in humanitarian emergencies](#)
- [Clinical management of rape and intimate partner violence survivors](#)

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