Key updates

- On 13 April WHO hosted a webinar for pulmonologists in Poland to increase awareness and update them on the treatment approaches in Ukraine, especially on drug-resistant tuberculosis (TB).
- WHO has been providing technical support on aligning Ukraine’s clinical protocols on health services for survivors of sexual violence with WHO guidelines and developing training curricula for primary health care providers on the clinical management of rape in humanitarian settings.
- A case of diphtheria from the Ternopil oblast was reported in a 29-year-old female with unknown vaccination status. The case is an internally displaced person (IDP) from the Donetsk oblast. On 5 April *Corynebacterium diphtheriae* was confirmed by the district laboratory, and further testing is ongoing. As part of response measures, contacts have been identified and are currently under observation, and antibiotic prophylaxis and vaccination have been provided. WHO is closely monitoring the situation and continues to support response measures.

1. SITUATION UPDATE

**Figure 1. Distribution of IDPs and refugees in Ukraine and in refugee-hosting countries as of 13 April 2022**
1.1 Population displacement and refugees

The overall situation continues to deteriorate across Ukraine. According to government data compiled by the United Nations High Commissioner for Refugees (UNHCR), over four million refugees have left Ukraine for surrounding countries in the last six weeks of the conflict, with the highest proportion, 57%, in Poland, followed by 15% in Romania. According to the International Organization for Migration, as of 1 April approximately 7.1 million people have been internally displaced, which represents 16% of the country’s population. The City of Kyiv and the Chernihiv, Donetsk, Kharkiv and Kyiv oblasts remain the top five oblasts of origin of IDPs.

1.2 Access to health care in Ukraine

With the ongoing conflict and large-scale displacement of people into neighbouring countries, access to health care continues to pose a challenge, with limited or no access to medicines in some areas, severe disruptions in critical services and a lack of public transport restricting movement. Between 24 February and 13 April, a total of 119 attacks¹ on health care have been reported, resulting in 51 injuries and 73 deaths.² Further attacks are being verified.

1.3 Overall WHO response actions

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

- In coordination with the Ministry of Health (MoH) of Ukraine and refugee-hosting countries, WHO is supporting Emergency Medical Team (EMT) Coordination Cells (CCs) in Ukraine, Poland and the Republic of Moldova. More than 50 EMTs are currently in Ukraine and refugee-hosting countries.

- WHO is also coordinating with the MoH of Ukraine and refugee-hosting countries to ensure safe medical evacuation of patients in line with an agreed set of criteria. Three health hubs have been established in western Ukraine at which additional triaging is conducted before medical evacuation from Ukraine. 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. To date, 45 of 58 medical evacuations have been completed from Poland to other European countries and 10 patients have been transferred from Dnipro to facilities in Poland, for onward transfer to Germany. WHO continues to support the development of the referral and medical evacuation procedure, as well as information exchange between Ukraine and neighbouring countries.

Partners

- The GOARN function is being established in Ukraine and Poland in order to:
  - provide targeted support to affected and vulnerable populations;
  - coordinate with GOARN deployees working on acute response and refugee/IDP access to health services;
  - connect the needs of United Nations (UN) agencies or nongovernmental organizations (NGOs) to GOARN capacities; and
  - strengthen epidemic intelligence activities with partners.

¹ Attacks on health care include those against health facilities, transport, personnel, patients, supplies and warehouses.
² Surveillance System for Attacks on Health Care (SSA).
• Standby Partners continue to provide support and strengthen WHO capacity. Since the last update on 7 April, one additional expert has been confirmed to provide support to WHO for operations.
  o Roles mobilized through Standby Partners include: MHPSS, RCCE and prevention of sexual exploitation and abuse.
  o All these deployments are mobilized through the strong support provided by the following Standby Partners: NORCAP, UK-Med and Dutch Surge Support.

**Risk Communication and Community Engagement**

• An ad hoc meeting of the informal Technical Advisory Group on RCCE took place this week, featuring academics and RCCE experts with specific experience in conflict and refugee settings. The meeting discussed WHO’s recent mission to Poland and the Republic of Moldova and outcomes regarding information needs of refugees arriving from Ukraine and RCCE support needs in refugee-receiving countries; as well as advice on strengthening RCCE actions and materials currently being planned by the WHO Regional Office for Europe.

• An initial coordination call was held with RCCE experts from the International Federation of Red Cross and Red Crescent Societies to discuss the sharing of listening data, coordination of community engagement efforts, and the broadly defined sharing of information.

**Funding**

• To support the response efforts, WHO has released US$ 10.2 million from its Contingency Fund for Emergencies.

• To date, WHO has received US$ 30.6 million (53%) against its appeal for US$ 57.5 million over the next three months.

• WHO thanks Canada, Ireland, Japan, Norway, the Novo Nordisk Foundation, Switzerland and the UN Central Emergency Response Fund for their timely contributions. Flexible funding remains critical to enable WHO to deliver urgent life-saving assistance where it is most needed.

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

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### 2. HEALTH PRIORITIES AND WHO ACTIONS IN UKRAINE TO DATE

#### 2.1 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).

<table>
<thead>
<tr>
<th>Priority public health concern</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Conflict-related trauma and injuries</strong></td>
<td>Between 24 February and 13 April 2022, the Office of the High Commissioner for Human Rights recorded at least 4577 civilian casualties in Ukraine, including 1964 deaths. 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, repurposing of multiple hospitals to care for wounds and closure of approximately half of the pharmacies in Ukraine.</td>
</tr>
<tr>
<td><strong>Maternal and newborn health</strong></td>
<td>While only limited data are available on the current situation of maternal and newborn health, there have been reports on disruptions to antenatal, childbirth and postnatal care.</td>
</tr>
<tr>
<td><strong>Food security and nutrition</strong></td>
<td>Ukraine is currently not classified as a nutrition emergency. Nonetheless, the World Food Programme reports significant concerns about the potential worsening of the nutritional status among vulnerable populations.</td>
</tr>
</tbody>
</table>
### Risk of emergence and spread of infectious diseases

The risk of disease outbreaks such as cholera, measles, diphtheria or COVID-19 have been exacerbated due to lack of access to water, sanitation and hygiene, crowded conditions in bomb shelters and collective centres, and suboptimal coverage for routine and childhood immunizations.

Between 7 and 13 April, a total of 10 892 new cases and 118 new deaths of COVID-19 have been reported. This represents a decrease of 22.8% and 19.7% compared to the previous week. These numbers should be interpreted carefully due to underreporting of COVID-19 cases and deaths.

Between 23 February and 12 April, the overall number of beds available and beds occupied by patients with COVID-19 has decreased by 41% and 88.6%, respectively, reflecting potential challenges in accessing hospitals, limited data reporting, and a potential decrease in actual hospitalizations following the peak of the COVID-19 Omicron variant wave earlier in February.

Last week one of the IDPs was diagnosed with diphtheria (details in the Key updates section).

### Management of chronic diseases and noncommunicable diseases (NCDs)

Provision of medicines and care for patients with chronic communicable diseases such as HIV and TB and NCDs remains challenging. More details can be found in the situation report published last week.

An estimated 140 000 people in Ukraine are diagnosed with cancer every year. The team is facilitating procurement of cancer medicines and the transfer of critically ill cancer patients out of Ukraine for treatment. The ongoing conflict will further increase delayed diagnoses beyond what is already being experienced as a result of the COVID-19 pandemic.

### Protection issues: risk of human trafficking and escalated risk of sexual and gender-based violence (GBV)

A Rapid Gender Analysis conducted by UN Women and CARE has raised concerns around protection, including increased risk of GBV. Increased need for MHPSS has also been reported.

### Mental health and psychosocial health (MHPSS)

### Technological hazards and health risks

**Potential nuclear hazards**

- 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.

- Occupation forces have withdrawn from the Chernobyl NPP and its Exclusion Zone, where laboratory facilities, equipment and communication lines were looted, damaged or destroyed. National authorities are assessing the consequences of the occupation of the Chernobyl NPP as well as nuclear security and the radiological situation in the Exclusion Zone, where regular monitoring of the radioactivity has not yet been restored.

- The Zaporizhzhya NPP, located in the southeast and in proximity to the military operations, has been 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, as underlined in the International Atomic Energy Agency’s daily updates.

**Potential chemical hazards**

Ukraine has a large basic chemicals industry, oil refineries and oil product storage facilities across the country. Any sites producing, storing or transporting hazardous chemicals that could be impacted during the conflict may be at risk of releasing toxic chemicals.
2.2 WHO actions in Ukraine to date

Leadership and coordination
WHO continues to work closely with the MoH of Ukraine to identify gaps and needs in the country’s health system, medical evacuations and support response activities.

Health information and operations
- WHO continues to support the MoH in detection, diagnosis and clinical management of infectious diseases. A risk assessment and response plan concerning infectious hazards and vaccine-preventable diseases is under development.
- An update to the previously published Public Health Situation Analysis for Ukraine is currently ongoing.
- Event-based surveillance activities continue for the various potential hazards. These include the use of Epidemic Intelligence from Open Sources.
- WHO has been providing technical support on health services for survivors of sexual violence and is developing training curricula for primary health care providers on the clinical management of rape in humanitarian settings.
- WHO, in collaboration with the MoH and partners, is preparing a rapid assessment of health status and needs, to be followed by a qualitative assessment of perceived health service needs and gaps, as well as barriers to and drivers of uptake of health services by refugees from Ukraine in refugee-hosting countries.
- WHO’s emergency cancer response team, supported by the American Society for Clinical Pathology Foundation, St Jude Children’s Research Hospital and the European Society for Medical Oncology, is working with oncologists from Ukraine’s National Cancer Institute to map cancer services and capacity gaps during the ongoing conflict and humanitarian crisis.

Supplies and logistics
- As of 11 April, WHO has delivered approximately 220 metric tonnes of medical and hospital supplies, comprising medicines, trauma and emergency surgery kits, and other essential supplies.
- Over the past week WHO has delivered in Lviv 15 generators with related spare parts and accessories, to be distributed to hospitals, pending security clearance. Additionally, two ambulance vehicles have been delivered and 20 ambulance vehicles have been procured and are being prepared for shipment.
- In Dnipro, WHO has delivered supplies to be distributed by UN convoys to other areas in eastern Ukraine affected by the conflict.
- The second round of deliveries (totalling 31 metric tonnes) have been made to several locations in the eastern part of Ukraine, including Kharkiv, Kyiv, the Kyiv oblast (newly liberated towns), Mykolaiv, Sumy and Zaporizhzhya.
- WHO has issued a Guidance Note for Medical Supply Donations to support the Ukraine emergency response, including a list of critical supplies for which support is urgently needed.

Operational partnerships

EMTs
EMT CCs and the Trauma and Rehabilitation Technical Working Group (TWG) continue to provide support with operations.
- There are 23 emergency teams, operating in the west (10 teams), east (eight), south (two), centre (one), and other locations (two), as reported by 11 organizations.
- Their activities involve:
  - organizing medical evacuation activities, with the CADUS EMT coordinating transfers between Lviv and facilities in Poland;
  - planning and delivering trainings for health-care workers on mass casualty, chemical, biological, radiological and nuclear (CBRN) response, and emergency first response;
developing and launching rehabilitation services plans for spinal cord injury and traumatic brain injuries, in close collaboration with the MoH; and

- coordinating closely with the Health Cluster and national WHO team to mobilize mobile NCD clinics in the central region.

**Health Cluster**

- The Health Cluster for Ukraine currently has 97 partners, 73 of whom are operational partners, including international NGOs (19), international organizations (two), national NGOs (49) and UN (two). Partner activities span 76 unique settlements in 24 oblasts.
- Partners have delivered 45 729 medical supply items, 79 630 emergency and trauma supplies, and 570 metric tonnes of medicines, medical supplies and equipment.
- Stocks in the country: 9050 emergency and trauma supplies, 216 metric tonnes of medicines, medical supplies, equipment and kits, and 38 pallets of reproductive health supplies.
- Planned shipments: 126 metric tonnes of medicines, medical supplies and equipment; 13 641 sexual and reproductive health and emergency and trauma supplies; and US$ 111 753 worth of medical supplies, medicines and equipment.
- Preparations are ongoing to launch household- and community-level health needs assessments using KoBo toolbox. Information sessions for partners will be held on 14 and 15 April. The tools are expected to launch at the end of this week.
- Partners continue to report on and respond to the most urgent health-care needs, facilitated by the different TWGs.
  - The Health Logistics and Supply TWG was established to help health logisticians to collaborate on health supplies, transport, storage, developing guidelines, navigating customs and identifying gaps.
  - The Communicable Disease TWG has reviewed WHO’s standard operating procedures (SOPs) for vaccinating IDPs and for mobile clinics.
  - The Trauma and Rehabilitation TWG is focused on three areas of operation – trauma care, medical evacuations, and trainings. As part of rehabilitation, the TWG has created a list of 86 essential assistive technologies, which will be added to trauma care kits to be supplied to facilities. The group is coordinating delivery of assistive technology kits.
  - The Sexual, Reproductive, Maternal and Child Health TWG partners have been responding to referrals and working closely with the GBV Subcluster and the Logistics Cluster to provide post-exposure prophylaxis kits and psychosocial support.
  - The NCD TWG has prioritized medicines, specifically cancer medications, dialysis, and ambulance first aid medications. The group is also working on the referral service – how to link IDPs to the existing primary health care system and how to provide essential services, aside from essential medicines. Several partners are also conducting assessments.
  - The HIV/TB/Opioid Substitution Treatment TWG reports that the bulk of the procurements is either being made or about to be made; their main difficulty is delivery. The group is working with NGOs and WHO to ensure the delivery.
  - The MHPSS TWG is establishing regional working groups in Lviv and Chernivtsi, managing referrals and working with authorities on support for veterans.
  - The Health Cluster for Ukraine is establishing an RCCE TWG, which will be co-chaired by WHO. The first operational meeting is expected next week, with 93 partners invited.

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KoBo Toolbox is a toolkit for collecting and managing data in challenging environments. It is the most widely-used tool in humanitarian emergencies.
Standby Partners – Support to Ukraine (only)

Standby Partners continue to support and strengthen WHO’s capacity for this response by providing human resources support. So far eight positions have been confirmed to support operations in Ukraine. Of the eight experts, four have already been deployed and four are going through the pre-deployment process.

External communications

- Web stories this week include WHO records 100th attack on health care in Ukraine; health-care facilities in the firing line – the unacceptable reality of the war in Ukraine
- For World Health Day, WHO Regional Director for Europe Dr Hans Henri P. Kluge visited Lviv and spoke to the press – see the Regional Director’s statement, coverage and further details here.
- See social media output on the Ukraine response on the Twitter and Facebook/Instagram dashboards.

3. SITUATION AND ACTIVITIES IN REFUGEE-HOSTING COUNTRIES

3.1 Public health concerns in refugee-hosting countries

<table>
<thead>
<tr>
<th>Risk of emergence and spread of infectious diseases</th>
<th>Ongoing epidemics</th>
</tr>
</thead>
<tbody>
<tr>
<td>The incidence of COVID-19 continues to decrease among most refugee-hosting countries. COVID-19 vaccination uptake in refugee-hosting countries also varies, with a majority of countries having a vaccination rate of over 60% among the national population for the complete series of the vaccine. The lowest vaccine uptake of the complete series is reported in the Republic of Moldova (26.2% uptake among the national population) and Romania (41.9% uptake).</td>
<td></td>
</tr>
<tr>
<td>On 6 April the Chief of Sanitary Inspection of Przemyśl, Poland, reported 41 COVID-19 cases at refugee reception centres.</td>
<td></td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Epidemic risk</th>
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<tbody>
<tr>
<td>As of 12 April, approximately 69 cases of acute watery diarrhoea were reported, of whom 11 are children, at a refugee reception centre in the Republic of Moldova. These cases are currently being monitored by EMTs on site.</td>
</tr>
<tr>
<td>On 6 April the Chief of Sanitary Inspection of Przemyśl, Poland, reported confirmed cases of rotavirus (15 cases), norovirus (four cases) and influenza (two cases) at refugee reception centres.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Management of chronic diseases and NCDs</th>
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</thead>
<tbody>
<tr>
<td>As of 12 April, the MoH reported that 54 patients from Ukraine, mainly oncology and trauma patients, are hospitalized in Slovakia. In addition, 75 oncology patients are being treated in Slovakia, of whom 70 are adults and five are children.</td>
</tr>
</tbody>
</table>

3.2 Overall WHO actions in 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

- WHO is currently undertaking missions to Poland and the Republic of Moldova to assist in planning for the management of Ukrainian refugees with cancer.
- WHO released guidance on strengthening COVID-19 vaccine uptake in refugees and migrants, which can be accessed here.
- WHO is providing supplies and technical support for the assessment of urgent needs and capacity for cancer care for refugees. A rapid health facility assessment tool is being deployed in refugee-hosting countries to understand the current status of cancer care, with an initial focus on countries who have received the highest volume of refugees.
Operational partnerships

GOARN

In response to the assessment of support needs in refugee-receiving countries, GOARN deployments have been mobilized in Czechia, Poland, the Republic of Moldova, Romania, and Slovakia.

EMTs

- EMT CCs in Poland – activities
  - Mapping existing emergency teams on ground, currently 20 operational teams, four assessment teams, and one team on standby.
  - Assessing needs, with both MHPSS and disability care service identified as a priority.
  - Supporting rehabilitation activities in Ukraine.
- EMT CCs in the Republic of Moldova
  - Nine teams are currently operational in nine facilities across four regions, with 12 teams on standby.
  - Activities:
    - Teams are providing outpatient care and facilitating access to universal health coverage.
    - The EMT CC is managing governance of incoming requests for assistance.
    - Jointly with the MoH and the WHO Country Office, the EMT CC developed an SOP for EMTs for vaccination among refugees to promote vaccination and disease prevention.

Standby Partners support for the refugee response

Standby Partners have strengthened WHO’s capacity for this response by confirming support for five positions to operations supporting the refugee response in Hungary and Poland. Of the five experts, two have already been deployed and three are completing pre-deployment formalities.

Lviv, Ukraine - WHO Regional Director for Europe Dr Hans Henri P. Kluge visits health care workers in Ukraine on World Health Day 2022 © WHO / Cheppel Volodymyr
3.3 Specific WHO actions in refugee-receiving countries

**Czechia**

**Situation update**
- Between 24 February and 13 April 2022 over 300 000 Ukrainian refugees have entered Czechia.
- As of 13 April the Czech General Health Insurance issued 282 524 insurance policies free of charge to refugees who hold a temporary protection visa, a 6% increase compared to the previous week.
- The Central Crisis Committee discussed measures related to refugees from Ukraine, taking into consideration possible scenarios for refugees staying in the country long-term. A strategy will be proposed to the Government and the Parliament regarding the further integration of refugees.
- As of 11 April 162 000 refugees have requested the humanitarian cash allowance of US$ 220 from the state. So far 95% of these requests have been processed.

**WHO actions to date**
- On 11 April WHO visited a reception centre and spoke to the head of Emergency Medical Services for the City of Prague, who provided a descriptive update on the medical conditions and needs of Ukrainian refugees. The majority of patients presented with diabetes, hypertension, weakness, dehydration and initial respiratory infection.
- On 12 April WHO visited a “UA point” or low-threshold outpatient clinic that has been open for two weeks at the Motol University Hospital in Prague, and spoke to the representative of the Deputy Director, who reported that approximately 80 Ukrainian refugees visit the facility daily, with 5–10 visits per day relating to obtaining health certificates for school.
- The WHO emergency coordinator conducted a mission to Czechia on 11–13 April. During the mission, the coordinator met with representatives of the General Health Insurance Company, the Regional Assistance Centre, the City of Prague, and the Ministry of Interior to provide further support.

**Hungary**

**Situation update**
Between 24 February and 13 April 2022 approximately 440 083 Ukrainian refugees entered Hungary.

**WHO actions to date**
- WHO continues to engage with the Government across multiple sectors, including health, foreign affairs, the interior, and the National Emergency Command Centre.
- WHO is working to secure HIV medication for Ukrainian refugees.
- WHO is working with the Government on immunization programmes.

**Poland**

**Situation update**
- Between 24 February and 13 April 2022 approximately 2 694 090 Ukrainian refugees entered Poland, accounting for 57% of the total refugee population. The age distribution of the refugee population according to the Universal Electronic System for Registration of the Population is: 49.1% children, 44.4% women aged 18–65, 3.2% men aged 18–65 and 3.2% elderly persons over 65 years of age.
- A national ordinance was issued to offer vaccination against measles, diphtheria, pertussis, poliomyelitis (polio), and hepatitis A for all Ukrainian refugees, as part of a nationwide vaccination campaign in Poland.
- The Polish Government has made 7000 hospital beds available for the sick and wounded from Ukraine, of which only 20% are currently in use.
WHO actions to date

- The WHO Regional Director for Europe visited Poland on 6–7 April, holding meetings with the MoH, the Deputy Minister of Finance, Deputy Minister of Foreign Affairs and the Director of the National Institute of Public Health to discuss the humanitarian crisis in Ukraine, including the EU referral system for Ukrainian refugee patients, procurement and donation of HIV medicines and vaccines (for measles and polio) and WHO’s response.
- WHO has developed health leaflets (with telephone numbers of medical and emergency services) for Ukrainian refugees in Gdańsk/Gdynia/Sopot, Łódź, Poznań, Warsaw and Wrocław.
- WHO is working on establishing an emergency stock of medicines, including for multidrug-resistant TB.
- On 13 April WHO hosted a webinar for pulmonologists in Poland to increase awareness and update them on the treatment approaches in Ukraine, especially on drug-resistant TB. The webinar was organized with great support from some of the partners (i.e. Médecins Sans Frontières and the National Tuberculosis Programme).

Republic of Moldova

Situation update

- Between 24 February and 13 April 2022 an estimated 417,650 refugees entered the Republic of Moldova.
- As of 7 April over 1500 refugees have received medical care.

WHO actions to date

- On 6 April the fourth national catch-up training for health-care workers on immunization campaigns was conducted in Edinet for all general practitioners from Briceni, Dondușeni, Edinet and Ocnița.
- On 7 April a field visit was carried out to the Patria Lukoil Refugee Accommodation Centre, the largest municipal refugee camp in the Republic of Moldova.
- WHO has delivered a batch of personal protective equipment to ensure infection prevention and control measures against COVID-19 and other infectious pathogens among laboratory health-care workers within the National Public Health Agency (NPHA).
- Leaflets and posters on health and immunization were developed by the NPHA with support from WHO, including public health measures and the COVID-19 pandemic. The leaflets were distributed nationwide and disseminated in refugee temporary centres and communities by the NPHA.
- Jointly with the MoH, WHO chaired the Eighth Interagency Health Working Group Meeting, with a focus on public health, CBRN risk assessment and management.

Romania

Situation update

- Between 24 February and 13 April 2022 an estimated 716,797 Ukrainian refugees entered Romania. However, most are in transit to other countries, primarily to Hungary (40%) and Bulgaria (21%).
- The MoH published the Government’s draft bill on collecting and reporting data for communicable disease surveillance, other than TB, HIV and SARS-CoV-2. The bill stipulates that providers of medical services, including laboratories, in the public and private system, as well as those belonging to the health networks of ministries other than the MoH, have an obligation to report communicable diseases in accordance with the provisions of the bill.
- Border monitoring of refugees arriving from Ukraine to Romania continues to be carried out by UNHCR and operational partner REACH.
**WHO actions to date**

- On 6–8 April WHO conducted a field mission to Târgu Mureș in connection with World Health Day. WHO met with the local health leadership and donated toys, which were then shared with Ukrainian children staying in Târgu Mureș.
- WHO is working closely with the MoH to help to coordinate the local health system response and interagency working group and to support adaptation of Romania’s response to the demands of the situation in Ukraine.
- WHO is working closely with UNICEF to hire refugee health mediators for the MoH and main municipalities hosting large numbers of refugees, to further adapt Romania’s response to the crisis.

**Slovakia**

**Situation update**

- Between 24 February and 13 April 2022 an estimated 326 244 Ukrainian refugees entered Slovakia.
- Three specialized health centres for refugees from Ukraine are currently operating in Slovakia – one in Košice and two in Bratislava. Specialized health centres should be established in other hospitals: in Banská Bystrica, Bratislava, Košice, Prešov and Žilina. One of them, the L. Pasteur Ukraine Care Centre in Košice, has provided medical care to more than 320 patients in the past six weeks.
- An evacuation centre for the temporary accommodation for refugees from Ukraine opened in Bratislava on 9–10 April.

**WHO actions to date**

- WHO continues to engage with the national health authorities and UNHCR on the overall UN coordination mechanism.
- WHO continues to lead the Health TWG in Slovakia.
- WHO will be expanding to work more closely with the MoH and support Slovakia’s response to the refugee crisis.

**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)