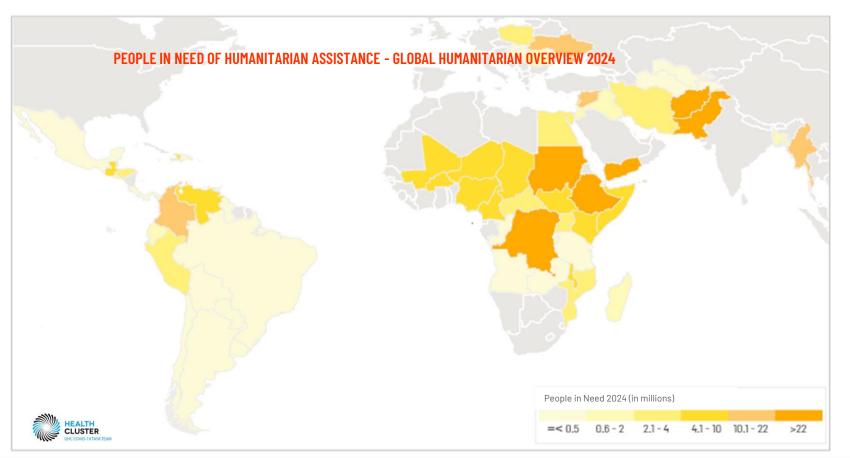
Technical update on WHO's humanitarian response in the occupied Palestinian territory, Sudan and Ukraine

EVENTS AND EMERGENCIES GLOBAL OVERVIEW

7 262* 9 7 13 11 4 0 4

NEW EVENTS ONGOING EVENTS GRADE 3 PROTRACTED 3 GRADE 2 PROTRACTED 2 GRADE 1 PROTRACTED 1 TOTAL GRADED EMERGENCIES







occupied Palestinian territory



Impact of the Conflict (As of 13 May 2024)

Casualties

Region	Fatalities	Injuries
Gaza Strip¹	35 173	79 061
West Bank and East Jerusalem ²	497	5 000
Total for oPt	35 670	84 061

Source: ¹Gaza MOH, ²OCHA





Number of attacks by involvement on health facilities

Displacement

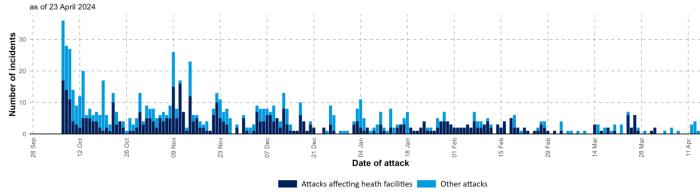
Location	Total IDPs ¹
Gaza Strip	1 700 000* UNRWA, 5 Feb 24
West Bank	3 009 OCHA, 30 Apr24

This data point subject to change; these numbers being estimates.

Over 350,000 displaced from Rafah since 8 May 2024 1,000,000 extremely vulnerable in Rafah, including 500,000 children

Attacks on health care

Location	Total attacks	Total killed	Total injured	# incidents impacting health facilities	# incidents impacting medical transport
Gaza	443	723	924	379	84
West Bank	446	12	95	94	271
Total	889	735	1019	473	355





^{*} Over 350,000 displaced from Rafah since 8 May 2024

Health System Capacities and Health Risks, including Impact of the Rafah Incursion and Evacuation Orders

Very high risk. Orange: High risk. Yellow: Moderate risk Low risk.

(As of 13 May 2024)



Impact of Rafah evacuation orders



Hospitals impacted in Rafah, including 2 field hospitals



PHC impacted, including 4 in the North and 3 in Rafah



35 Medical Points

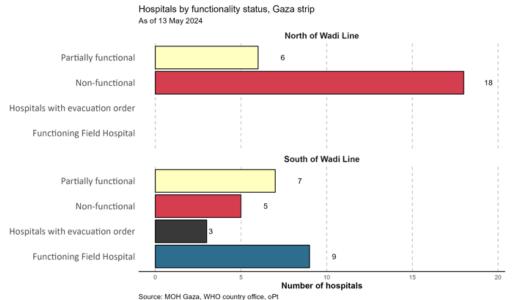
impacted in Rafah, including **16** in the North and 19 in Rafah



316 Hospital Beds lost, including 220 in Al Najjar hospitals



Impact on hospitals in Gaza





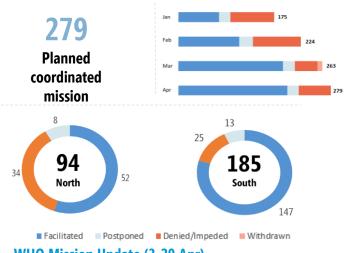
Public health risk	Oct	April
	2023	2024
Trauma and injury		
Non-communicable diseases (NCD)		
Maternal and neo-natal health		
Mental Health		
Acute respiratory infection (ARI) including COVID-19		
Acute diarrheal illness		
(including acute watery		
diarrhoea (AWD), shigella and		
rotavirus)		
Malnutrition		
Cholera		
Skin infections (including		
scabies)		
Gender-Based Violence (GBV)		
Measles		
Typhoid		
Acute Jaundice Syndrome (AJS)		
/Suspected hepatitis A		
Hepatitis E		
Meningococcal disease		
Polio (including acute flaccid		
paralysis (AFP))		
Chicken Pox		
Diphtheria		
Mumps		
		•





WHO and Partners' Operations — Gaza Strip (15 May 2024)





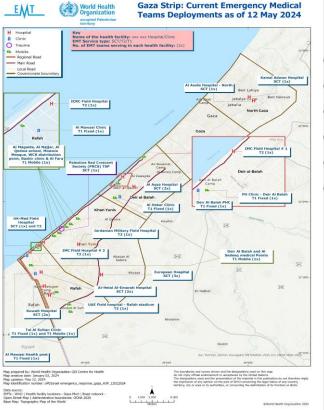
WHO Mission Update (3-20 Apr)

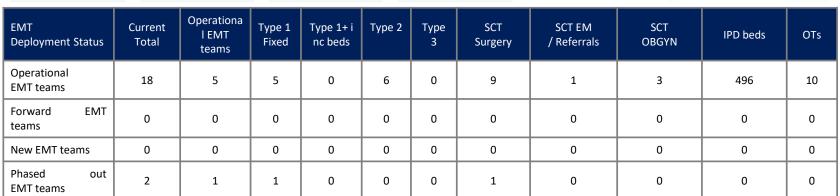












Health Service Points Hospitals Functionality PHCs Functionality Not functioning Partially funct... 24 (53%) Not functi.. 56 (62%) By Functionality By Classification Partially functional Minimal functional Hospitals Not functional Hospitals Fully functional field hospitals Medical points Availability Shelter type vs. Medical points coverage Not Available 265 (58%)





Challenges and Asks

Implement an immediate and sustained ceasefire.

Guaranteed safe, sustained and full operational space across Gaza and effective deconfliction. Ensure immediate, safe and unfettered humanitarian access and the provision of life-saving medical care throughout the Gaza Strip.

Adhere to international humanitarian law, including in particular, the prohibition against attacks against, and militarization of, health care.

Safeguard and restore the health system, including and restore the full functionality of hospitals, primary health care centres, laboratory facilities, the implementation of public health measures, comprehensive disease surveillance and outbreak response. Furthermore, allocate adequate resources for the recovery and reconstruction of health and other critical structures and infrastructures.

All actions needed to prevent famine and treat those already malnourished must be facilitated. The IPC report confirms what we, our UN partners and nongovernmental organizations (NGOs) have been witnessing and reporting for months. We must be able to find and treat all children and pregnant and lactating women safely over the entire period required for full recovery.

Ensure access to and provision of health care services without restriction to patients and health care workers throughout the occupied Palestinian territory. All conditions imposed on patients and companions requiring medical evacuation must be lifted.





Sudan



Sudan Conflict - One Year

- Conflict since 15 April 2023 WHO G3 (Sudan & neighbors) IASC SW Scale-up
- 14.7 million in need of health assistance
- >8.5 million displaced World's worst displacement crisis, incl:
 - Central African Republic: 23,286 refugees and 6,158 refugee returnees
 - Chad: 588,825 refugees
 - Ethiopia: 44,343 refugees and 9,580 refugee returnees
 - South Sudan: 139,673 refugees and 518,348 refugee returnees

Public health stand-still

Attacks on healthcare, severe access restrictions

Health facilities not/partially functional, public health functions impaired

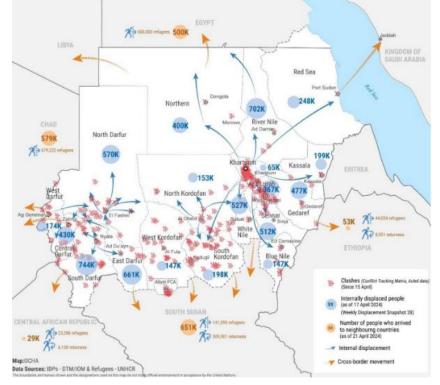
Unpaid health workers, shortages of medicines and medical supplies

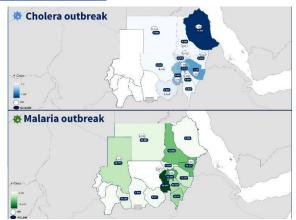
Looming famine – lean season imminent

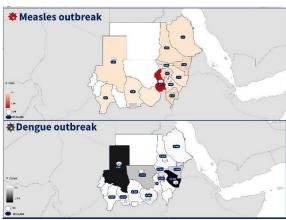
>35% in acute food insecurity (18 million in IPC3+)

Potential catastrophe (IPC5) in West Darfur, Khartoum, among displaced

13.6% acute malnutrition and 36.4% chronic malnutrition







Outbreaks wherever they can be detected (/18 states)

Cholera > 11 000 cases in 12 states – Malaria in 14 states

Dengue in 12 states - Measles/rubella in 12 states

Susp Pertussis in 5 states – Hepatitis E in Chad among refugees

Sudan Conflict – Health Operations

Collaborative surveillance and response

Development and negotiation on Early Warning Alert and Response and training (>500 surveillance officers) with Cluster partners Establishment public health laboratory in Port Sudan Vaccination campaigns (measles, OCV)

Water quality testing

Essential Healthcare Services and Supplies

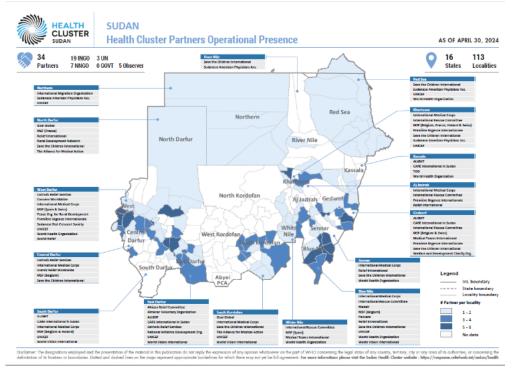
>1200 metric tons of medical supplies to partner facilities
(incl 99 MT cross border into Sudan from Chad and South-Sudan)

>USD 14 million in medicines in stock and pipeline this includes
IEHKs, RH Kits, PED-SAM Kits, Cholera Kits, Trauma Kits,
Diagnostic Supplies, Hospital Equipment, Dialysis, etc.

Functionality mapping and monitoring of health services in accessible areas through HeRAMS

Support to hospitals, stabilization centres, mobile clinics and cholera treatment centers: 21 PHC, 11 hospitals

Capacity building SAM management, mental health, SGBV, case management



Health Partner Coordination – Health Cluster Lead Agency

34 Partners (incl 7 NNGOs, 5 observers)
Supporting >500 health facilities in hard to reach areas
850 000 OPD consultations Q1-24

Cross-border support ongoing by partners, despite challenges
Co-chairing national cholera Task-Force with FMoH
Multisectoral famine prevention/response plan includes OCHA /
interagency operational hubs in El Fasher, Geneina, Kadugli, Kosti,
Ed Damazine, Kassala, Port Sudan

Challenges and Asks

Health system buckling under pressure of one year of conflict, especially in the hard-to-reach areas, with health facilities destroyed, looted or struggling with acute shortages of staff, medicines, vaccines, equipment and supplies:

- (1) ACCESS AND CAPACITIES IN THE RIGHT PLACE Making lifesaving healthcare accessible to the most vulnerable people is our first priority. We ask for unimpeded access to populations in need.
- (2) FUNDING We need sufficient funding to address the dire situation the population of Sudan is currently facing. WHO requires US\$ 86 million to support emergency response in Sudan, and still faces a funding gap in US\$ 59 million.
- (3) STOP ATTACKS ON HEALTHCARE We call for the safety of healthcare staff and the protection of health facilities.







Ukraine



Current Situation and Impact on Health



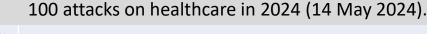
32,100 civilian casualties including children and women, comprising 10,946 deaths and 21,154 injured, as of 1 May 2024



An estimated 9.6 million people in Ukraine with mental health risks, 3.9 million with moderate to severe symptoms.



1,773 attacks on healthcare, resulting in 136 deaths and 311 injuries, 700 damaged health facilities serving approximately 500k people.

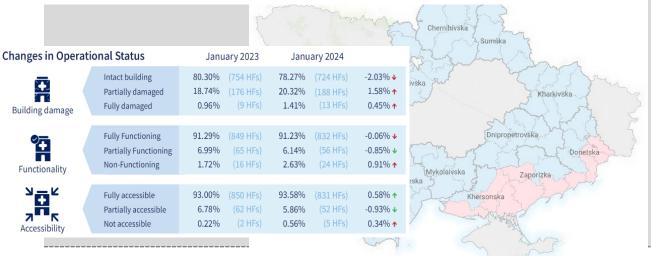




Estimated 3.7 million internally displaced persons (IDPs) and 6.4 million global refugees from Ukraine.

79% of refugees are women and children, 76% want to return with main barriers being safety/security and access to services in Ukraine

January 2023 vs January 2024 for 10 most affected oblasts





Gender-based violence (GBV): 26% of ever-partnered women aged 18-74 years experienced intimate partner physical and/or sexual violence at least once in their lifetime since age 15 prior to February 2022



High risk of infectious diseases and outbreaks of vaccinepreventable diseases and food and water-borne diseases such as Hepatitis A, measles...)



Significant disruption of water availability in health care facilities in Dnipropetrovsk, Kherson and Mykolaiv oblasts following the Nova Kakhovka dam destruction in June.



The risk of a CBRN emergency has significantly increased due to potential collateral damage near active military combat zones such as Zaporizhzhia Nuclear Power Plant.



WHO Response

MHPSS

22 partners trained over 5,700 primary healthcare workers. 516 trainers trained using the Self-Help Plus course and 32 community mental health teams supported to deliver over 107,000 consultations to 3,618 individuals with severe mental disorders.

CRN risks

Established an RN expert unit for CBRN material supply and monitoring. Conducted 45 chemical response and 20 radiation preparedness trainings, enhancing skills of over 2,643 clinicians and responders.

Infrastructure & ambulances

Donated 115 ambulances and established 15 fullyequipped prefabricated modular structures for primary healthcare serving a population of 73,000.

Capacity building

- Trained 2453 workers in NCD, mass casualty management, trauma care and critical patient management
- Training of trainers in GBV and Advanced Life support.

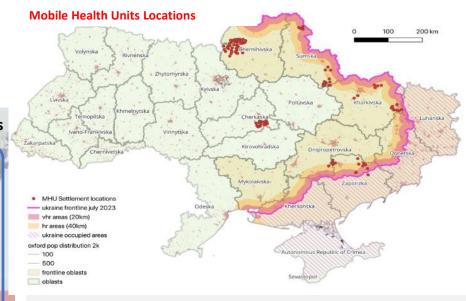
Medical Evacuations

Provided technical assistance to MOH, supporting 3,785 medical evacuations, including 2,800 facilitated through the EU Medevac system and an additional return of approximately 300 via the same system.

Health Cluster

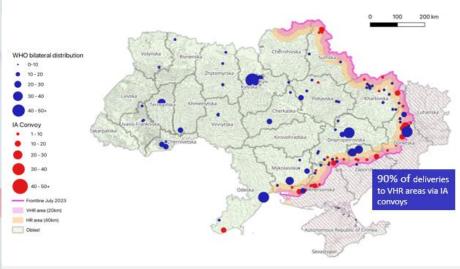
active.
0.87 M (23%) people
reached health services for
the period Jan – March 2024
Priority services: MHPSS,
Trauma/Rehab, SRH, Access
to medicines

196 partners of which 105



43 MHUs operational in six oblasts, and 76 PHC doctors completing 735 field visits, which led to 22,393 consultations.

Interagency Convoys and Bilateral Kits/Supplies



Participated in 106 interagency convoys reaching 200,000 people and distributed supplies worth US\$ 109 million.

WHO Response in Refugee-hosting Countries

WHO Impact to improve access to health services in refugee-hosting countries

- Conducted Behavioural and Cultural Insights studies, Multi-Sector Needs Assessments with UNHCR, and other assessments to understand health needs and access barriers among refugees and to inform WHO response.
- Supported **10 333 mental health and psychosocial support consultations** in Bulgaria, Czechia, Poland, and Romania. In Slovakia, WHO supported the **institutionalization of the MHPSS Technical Working Group** into a permanent committee of the National Commission for Mental Health.
- In Poland, WHO supported **12 121 people in accessing services for tuberculosis, HIV and sexually transmitted infections** and reached **69 052 people with healthy behaviour messaging** on disease prevention, vaccination, chronic disease management, and access to health care.
- In the Republic of Moldova, WHO supported the Government in a review of the **national health benefits package and expansion to enable free access for refugees** to a comprehensive package of essential health services and medicines for both inpatient and outpatient services.

Challenges and Asks

- We should not forget the ongoing conflict in Ukraine as the situation is deteriorating and the number of casualties increasing.
- As the frontline moves, more and more people find themselves in areas not accessible by humanitarian aid. Humanitarian corridors are needed. We call on all parties to allow safe and unhindered humanitarian access, in particular in areas close to the front line and those under the temporary military control of the Russian Federation, to meet people's health needs.
- The energy capacity of hospitals continues to dramatically deteriorate, impacting health support and water supply. Urgent support is needed to increase hospitals energy autonomy and avoid potential outbreaks and negative impact on treatment of NCDs.
- **The conflict must stop.** We call on all parties to protect health care, stop all forms of attacks, and support the full resumption of essential health services.





Thank you



