



Delivering critical care via Project HOPE-supported ambulance in Dnipro © Project HOPE



4.47 M
In Need



1.47M
(1.27M)*
Targeted



\$90 M
(82 M)*
Required



259K
Reached

*This figure represents the reprioritized 2026 HNRP

HIGHLIGHTS

- According to the [UN HRMMU](#), civilian casualties in Ukraine remained high in February 2026, with at least 188 killed and 757 injured—similar to January 2026, but 31% higher than February 2025 and 83% higher than February 2024. Long-range attacks, including missiles and drones, accounted for 36% of casualties, mostly in cities and towns away from the frontline, while short-range drone attacks remained the primary cause of casualties near the frontline. Aerial bombings caused 47% more casualties than in January. The vast majority of casualties (97%) occurred in areas under the control of the Government of Ukraine, affecting 15 regions and Kyiv.
- As of February 2026, attacks on energy infrastructure continued amid extremely low temperatures, disrupting electricity, heating, and water supply and affecting health service delivery and humanitarian operations. Millions of consumers, particularly vulnerable groups, experienced repeated long-duration power outages, limiting access to health care and essential services. In response, 17 Health Cluster partners provided winter-specific assistance to 63,850 people under the [Winter Response Plan \(October 2025-March 2026\)](#), reaching 65.1% of the target of 98,058 despite infrastructure challenges.
- An updated joint [Rapid Damage and Needs Assessment](#) (RDNA5), released on 23 February 2026, estimates that total reconstruction and recovery costs in Ukraine will reach nearly USD 588 billion over the next decade. As of 31 December 2025, the health sector has sustained damage estimated at USD 1.8 billion (0.9%), losses of USD 23.1 billion (3.6%), and recovery needs of USD 23.6 billion (4.0%), reflecting significant impacts on health infrastructure, services, and access.
- According to [IOM DTM](#) Frontline Monitoring, approximately 20,000 individuals were displaced from frontline settlements in Ukraine during February. Displacement was primarily driven by Russian advances, intensified drone and shelling attacks, and mandatory evacuation orders, notably along the Kostiantynivka and Lyman axes in Donetska Oblast, Oskilska and Vovchansk areas in Kharkivska, Kushuhum and Preobrazhenska Hromadas in Zaporizka, Dniprovskiyi district in Khersonska, and in Dnipropetrovska Oblast.

HEALTH SECTOR



1219 health facilities supported as of 28 February 2026
Source: 5W



2,893 attacks on health care since 24 Feb 2022
Source: [WHO SSA](#)



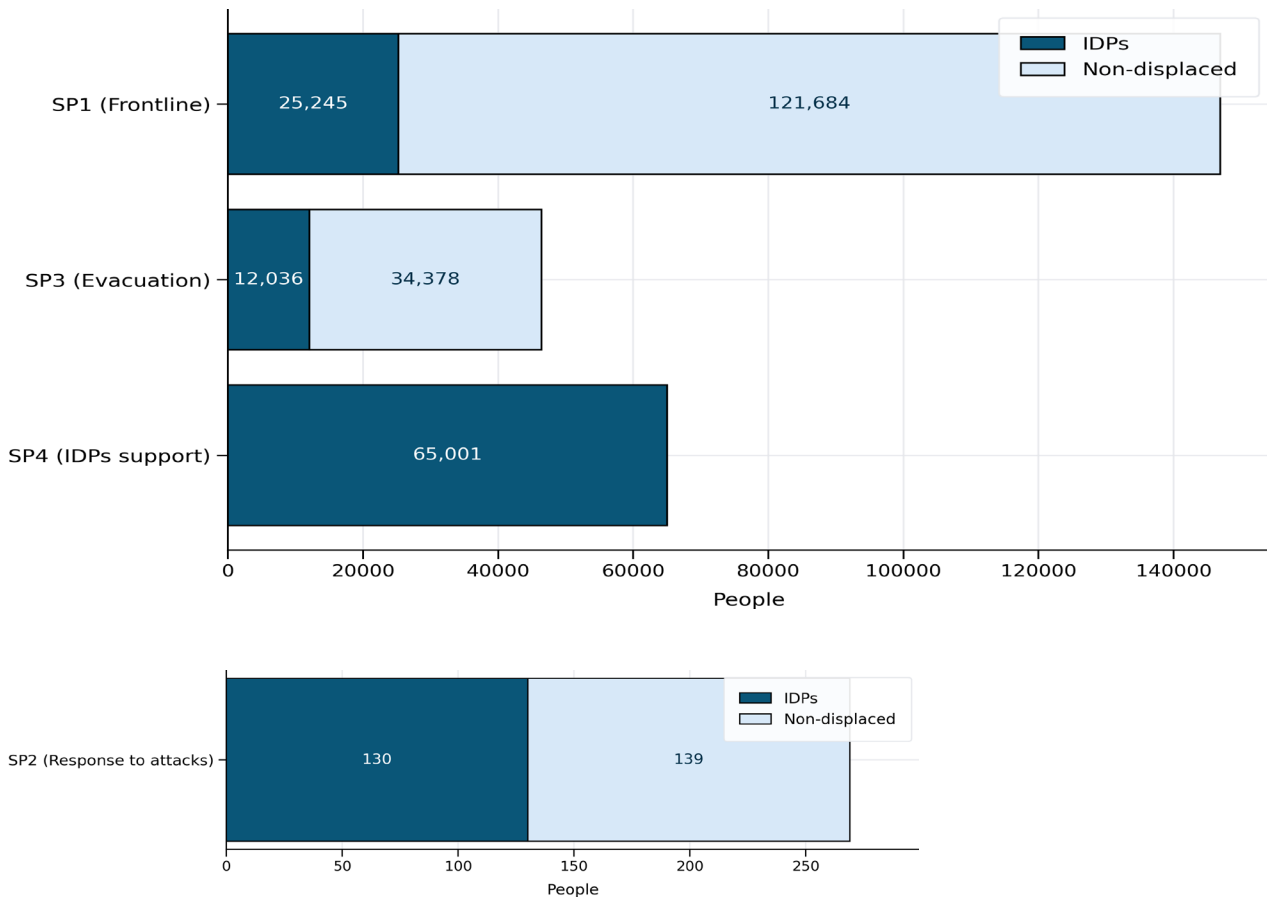
58 logged HRP submissions in 2026, as of 28 February 2026



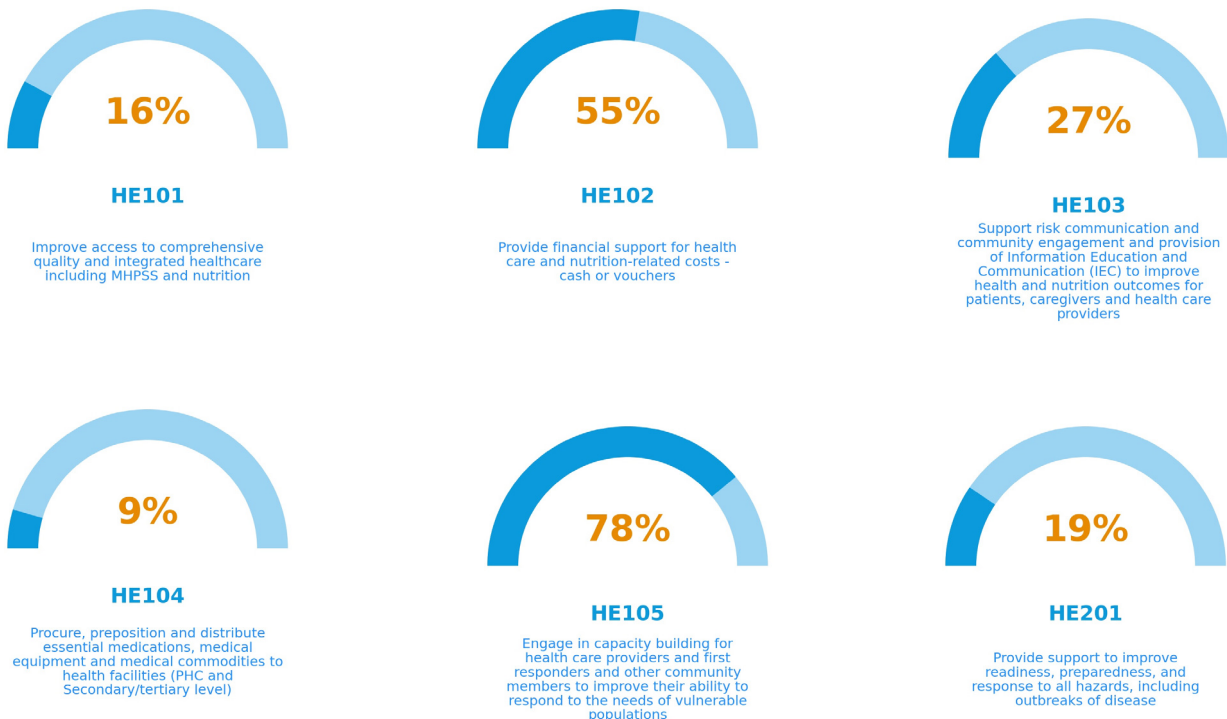
79 Partners reporting (cumulative) HRP activities in Activity Info, as of 28 February 2026

HEALTH CLUSTER RESPONSE PROGRESS

People Reached by Strategic Priorities, as of 28 February 2026



People Reached by Activity, as of 28 February 2026



NEEDS & GAPS

Winter Risk

As of February 2026, [attacks on Ukraine's energy infrastructure](#) continued to affect the delivery of health services during the winter period. Ongoing strikes and resulting blackouts during subzero temperatures disrupted heating, water supply, and access to care for millions of people. While some hospitals are able to maintain operations with generators during short outages, prolonged power cuts continued to affect supply chains, staff mobility, heating and water systems, and the functioning of critical medical and diagnostic equipment, highlighting gaps in the resilience of health facilities, particularly in frontline areas. [REACH Assessments](#) also indicated that risks related to extended energy disruptions may have been underestimated, and past challenges were not always fully incorporated into preparedness efforts. As a result, regional Departments of Health continued to request support to sustain the operational capacity of health facilities, including generators, heating solutions, and other essential resources. These gaps were of particular concern for displaced people, older persons, and individuals living with chronic conditions, who face increased health risks and barriers to accessing care during the winter months.

Availability of Medicines

Access to medicines remains a key gap in frontline and hard-to-reach areas, where damage to pharmacies and supply chains continues to disrupt availability. Findings from the [WHO Health Tracker Survey](#), Round 1 (Nov–Dec 2025) indicate that 70% of respondents needed medicines, and among them, 89% faced difficulties obtaining them, while 10% were unable to obtain the medicines they needed. The main barriers reported were increased medicine prices (81%), limited availability in pharmacies (34%), medicines not available (22%), and challenges obtaining prescription medicines (20%). Access constraints are more pronounced in frontline regions, where respondents reported higher levels of security concerns, pharmacy closures, and financial barriers. In addition, 34% of respondents reported using antibiotics in the previous three months, often for respiratory symptoms, with a significant proportion obtaining them without prescription or from informal channels, highlighting both access challenges and potential risks related to inappropriate use. These findings confirm ongoing gaps in the availability, affordability, and safe access to medicines, particularly for vulnerable populations in conflict-affected areas.

Availability of Services

According to the [WHO Health Tracker Survey](#), Round 1 (Nov–Dec 2025), access to health services in Ukraine remains constrained despite relatively high satisfaction with care once received. Among respondents who visited a family doctor in the past 12 months, 62% scheduled an appointment, with most being seen within one or two days; however, 30% still had to wait in line despite having an appointment, indicating pressure on primary health care (PHC) services. Overall, 74% of respondents in more vulnerable regions reported problems accessing PHC, compared to 62% elsewhere, highlighting geographic disparities. Demand for specialized care is also significant, with 34% reporting a need for specialist services; while most sought care, 27% received only partial services and 5% could not access care at all, largely due to affordability

constraints. Cardiovascular care needs were in demand, with 22% requiring services in the previous three months, and 72% of those seeking care reporting access barriers, mainly related to the cost of medicines and treatment. Access to surgical care remains uneven, particularly in frontline areas where 83% reported difficulties, and displaced populations were more likely to rely on private facilities. Overall, the findings highlight persistent gaps related to costs, waiting times, and uneven service availability, especially in frontline and high-vulnerability regions.

Mental Health and psychosocial Support

According to [IOM Ukraine – Vulnerability and Mobility in Front-line Areas](#) (February 2026), mental health needs remain significant in conflict-affected areas, with 38% of respondents nationwide estimated to be at high risk of depression, increasing to 43% in front-line areas. The risk is particularly high among IDPs (50% nationally; 51% in front-line areas) and recent displacement cases, indicating that displacement and ongoing insecurity continue to drive psychological distress. Certain oblasts show especially elevated needs, including Chernihivska (55%), Khersonska (52%), and Donetsk (48%). Vulnerability is also higher among women, single-parent households, households with persons with disabilities or chronic illness, and economically vulnerable groups, highlighting the intersection of mental health with socioeconomic hardship.

Trauma and Rehabilitation

Health facilities in conflict-affected areas continue to face a high influx of trauma patients while specialized rehabilitation capacity remains limited. The evolving nature of attacks, including drone strikes and close-range explosions, has led to more complex injuries such as polytrauma, burns, amputations, and brain and spinal injuries requiring long-term rehabilitation. According to the [MSNA 2025 \(IRC\)](#), conflict-related trauma is among the top four health concerns, with particularly high prevalence in Kharkivska (28.5%) and Mykolaivska (16.9%) oblasts. Despite the presence of rehabilitation services within the national network of capable hospitals, access remains uneven due to referral challenges, waiting lists of up to three months, shortages of specialized professionals, and limited awareness of available free services, especially at the primary care level.

Sexual and Reproductive Health Needs

Access to SRH services remains constrained due to damaged facilities, pharmacy closures, and supply chain disruptions; since 2022, over [80 maternity](#) and neonatal facilities have been damaged or destroyed. Limited SRH capacity at the primary care level and reduced access to antenatal care – particularly for adolescents – have increased risks of maternal complications. Gaps also persist in HIV and syphilis testing among pregnant women, while regional disparities in teenage pregnancy, unsafe abortions, and sexually transmitted infections highlight the need to strengthen SRH services, contraception access, and clinical capacity, especially in frontline areas.

Risk Communication & Community Engagement

Reaching vulnerable populations with reliable health information remains challenging, especially in frontline oblasts where insecurity and service disruptions persist. Limited access to accurate information can reduce health-seeking behavior and increase public health risks. Strengthening coordination and aligning messaging with

Ministry of Health priorities, particularly on vaccination, disease prevention, and essential health practices, is critical, along with increased community engagement and feedback from affected areas. In response to a Norovirus alert, WHO circulated RCCE materials via the Health Cluster to inform partners and support community awareness efforts.

HEALTH CLUSTER COORDINATION UPDATES

Subnational Health Cluster Updates

North: In response to electricity and heating disruptions in densely populated areas of Kyiv, Health Cluster partners contributed to coordinated efforts to reduce public health risks, including support to heating points and relocation of vulnerable populations, helping to maintain access to essential health services during extreme cold. **Kharkiv:** In response to a large number of attacks in Kharkivska oblast, Health cluster partners provided support to more than 150 people. Focusing on frontline response, capacity assessment of partners ready to contribute to IACs was done.

Dnipro: Inter-cluster Transit center partners meeting focused on Assistive Technology provision and mandatory training using the [WHO TAP platform](#).

Joint HOCG and clusters meeting with Zaporizka Oblast based partners focusing on the role of health partners within the first 72 hours post-strike.

Launching the MMU handover process from one of the main partners to the others with capacity and resources to avoid gaps in the response.

South: Repeated attacks, infrastructure damage and energy disruptions across the South affected health service continuity, including damage to health facilities and operation on backup power. In Khersonska oblast, ABC and partner coordination focused on evacuation and transit center arrangements, referral pathways and service gaps for evacuees, while supporting continuity of care in high-risk areas, including OTC kit delivery to Antonivka.

Ukraine Humanitarian Fund 2026 Allocation Updates

The [Ukraine Humanitarian Fund](#) (UHF) launched its first Standard Allocation for 2026 on 13 January, allocating USD 75 million to support humanitarian activities aligned with the four strategic priorities of the 2026 [Humanitarian Needs and Response Plan](#) (HNRP). The Health Cluster supported the funding cycle by ensuring the technical quality and relevance of proposed health interventions. During this process, 29 technical consultations were provided to 49 partners, including 18 national organizations and 7 consortia. The Cluster and the Strategic Advisory Group (SAG) reviewed 25 multisectoral proposals, followed by joint review and scoring with UHF during the Strategic and Technical Review Committees (STRCs). Feedback was

shared with partners through the OCHA OneGMS platform. As part of the UHF Reserve Allocation, 11 eligible partners were preselected and contacted directly by UHF. The allocation, totaling USD 150 million, opened on 6 March 2026, and currently 10 partners are progressing with their applications in OneGMS, including 2 partners planning to include a health component in their proposals.

Winter response: February Updates

In line with the [Winter Response Plan](#), Health Cluster partners continued to implement health-specific winterization activities and ensure continuity of essential health services. Between October 2025 and February 2026, partners reached 63,850 people through winter response interventions aligned with Strategic Priority 1. A total of 1,434 medical consultations for winter-related illnesses were documented, reflecting increased demand during the winter period. Partners also supported the diagnosis and treatment of acute respiratory infections for 55,086 people and provided intensive case management for 7,668 patients with severe respiratory infections, exceeding initial targets due to elevated needs.

Operational support to health facilities remained critical. During the reporting period, 48 generators were installed, 27,612 liters of fuel and 58,500 fuel briquettes were provided to support generator operations, enabling 221 health facilities to maintain essential services despite electricity and heating disruptions. In total, 17 partners reported winter response activities, while local authorities continued to request additional support to sustain heating and power supply for emergency medical equipment and critical care services.

Despite these efforts, the winter response remains underfunded. As of February 2026, USD 2.9 million has been received against a target of USD 4.8 million (60% of requirements). Increased attacks on energy infrastructure and ongoing power outages have further expanded needs, particularly in urban areas and large cities. During the reporting period, 459 winter-related requests were received from oblast health departments in the most affected regions, of which 51 were addressed while 408 remain outstanding. These challenges highlight the importance of initiating winter response activities earlier to ensure timely and adequate support to health facilities and affected populations.

PARTNERS' ACHIEVEMENTS



Under the UHF project, “Enhancing access to multi-sectoral life-saving and essential humanitarian assistance to war-affected newly displaced and non-displaced people living near the frontline in Ukraine,” activities were implemented in frontline hromadas of Zaporizhzhia and Kharkiv regions. Four mobile teams, including psychologists, supported vulnerable households such as IDPs, older persons, large families, people with disabilities or serious illnesses, and families affected by the war. In February, financial support was also provided through cash voucher assistance for transportation and assistive devices.



In February, Artesans-ResQ Ukraine continued the implementation of the WHO-funded project, providing 24/7 critical care transfer services and coordination support to EMS and the MoH Medevac Coordination Unit. The project remained fully operational, ensuring uninterrupted transport of critically ill adult, pediatric, and neonatal patients from frontline and underserved areas. The ARQ team completed 25 missions, transporting 19 adult, 4 pediatric, and 2 neonatal patients. These operations covered 35,411 km, averaging 1,416.4 km per patient, with 96% of cases requiring intensive care support (ICU levels 2 and 3). In total, 11 burn patients were transported, including 9 evacuated through targeted missions in coordination with the MoH MCU, CDM, regional EMS, and partner hospitals.



In February, CADUS deployed three emergency teams based in Dnipro and Pavlohrad. The teams transferred 55 patients over a combined distance of more than 5,551 kilometers, averaging 101 kilometers per patient. Patients originated from Dnipropetrovska, Donetsk, Kharkivska, and Sumska oblasts and were transported to hospitals across Dnipropetrovska, Donetsk, Kharkivska, Kyivska, Kirovohradska, Lvivska, and Sumska oblasts. Intensive care support (ICU levels 2 and 3) was required for 20% of patients.



In February, the Charitable Organization “Medical Aid Committee in Zakarpattia,” together with partners, delivered humanitarian medical aid to healthcare facilities across multiple regions of Ukraine, including facilities relocated from frontline and temporarily occupied areas that are restoring their operational capacity. Assistance included medicines, medical equipment, consumables, hygiene supplies, and other essential items, as well as charging stations to support energy resilience in Kharkiv and Kherson regions. With support from terre des hommes Deutschland e.V. and funding from the German Federal Foreign Office, additional shipments of medicines, consumables, and medical equipment were delivered to selected health facilities in Kharkiv, Kherson, and Chernihiv regions.



In February, four mobile medical units of Dignitas Ukraine, supported by Caritas France and the city of Orléans, conducted 1,462 medical consultations in Kharkiv (1,164) and Sumy (298) oblasts. Among those assisted, 655 beneficiaries received care in IDP centres in Kharkiv city, while 807 vulnerable people, mostly elderly, received nursing and medical care at home in rural communities located 10–60 km from the frontline.



In February 2026, FHI 360 supported 10 mobile teams delivering integrated medical and psychosocial services across Dnipropetrovsk, Kharkiv, Mykolaiv, and Kherson oblasts, including diagnostics, specialist care, home visits, and medication provision. A total of 3,427 outpatient consultations were conducted, alongside 843 specialist consultations, mainly in endocrinology, gynecology, and neurology. Mental health support reached 1,446 people through individual and group sessions. In addition, 259 patients received rehabilitation services, 135 beneficiaries were provided with assistive devices, and 32 patients received cash support for medical transportation.



In February, FRIDA Ukraine continued operating Mobile Medical Units in six oblasts, providing 3,831 medical consultations and 1,170 psychological consultations, with 1,170 individuals receiving medications. Multidisciplinary teams—including general practitioners, gynecologists, dentists, cardiologists, neurologists, endocrinologists, surgeons, pediatricians, psychiatrists, psychologists, and other specialists—ensured comprehensive medical care.



In February, Humedica e.V., with support from the German Federal Foreign Office and the UHF, continued providing primary healthcare and MHPSS services through mobile medical units in hard-to-reach communities of Dnipropetrovska, Sumska, and Chernihivska oblasts, focusing on vulnerable groups including older people, people with disabilities, and internally displaced persons. MMUs conducted 545 family doctor consultations, 119 gynecological consultations, 198 midwife consultations (including 12 PAP smears and 59 ultrasounds), and 179 dental consultations, and referred 201 people for additional diagnostics and specialized care. Services were also provided at the transit centre for evacuees in Voloske, Dnipropetrovska Oblast, alongside the distribution of assistive devices for older people and persons with disabilities. Healthcare workers trained under mhGAP completed the first block of supervision sessions and received certificates.



In February, IMC sustained critical health support across frontline oblasts of Ukraine, ensuring uninterrupted access to essential services. Over 15,000 primary health care consultations were delivered, responding to high needs among affected populations. At the same time, IMC strengthened local capacity through a Family Planning training for specialists in Dnipropetrovska and Zaporizhzhia oblasts, and conducted 5 ASRH sessions reaching more than 150 adolescents. Support to HFs remained a key priority: 10 facilities were equipped with medicines, fuel, and basic medical supplies, helping maintain continuity of care in challenging operational environments.



In February 2026, INTERSONS, in collaboration with Light of Hope, continued supporting conflict-affected populations in the Kharkiv and Sumy regions by addressing critical healthcare gaps. Through Mobile Medical Units, the teams delivered 1,690 medical consultations, providing primary care and diagnostics, including ECG and ultrasound examinations, to vulnerable residents and newly arrived evacuees at the Lozova transit center. To support patients with complex conditions, 38 specialized referrals in cardiology and neurology were arranged. In addition, 1,976 Health Education and Awareness sessions were conducted, helping communities manage non-communicable diseases and maintain mental well-being. To improve access to specialized care, Cash and Voucher Assistance for health transportation enabled 99 highly vulnerable patients across seven hromadas to reach regional hospitals for treatment, including oncology and pediatric care. The distribution of 93 over-the-counter kits also supported underserved households with essential medical supplies.



IDPs receive life-saving medicines at the Your City Charity Fund's medication assistance center. © Your City Charity Fund



Artesans-ResQ Ukraine team conducting medical evacuation of patient with 95% body surface burns. © Artesans-ResQ



A FRIDA mobile medical team provides assistance to evacuated residents at the Transit Center in Kharkiv. © FRIDA



Operation of Project HOPE mobile medical unit in Khersonskyi raion, Khersonska oblast. © Project HOPE



In February, IRC and local partners, through Mobile Medical Units, delivered 16,297 primary and specialized consultations across 110 locations in Sumska, Kharkivska, Dnipropetrovska, Khersonska, and Mykolaivska oblasts, along with 731 MHPSS services for vulnerable populations. At the request of the Health Cluster, IRC supported newly established “Invincibility Points” in hospitals in Sumska Oblast by providing essential heating items and refreshments, ensuring daily functionality. IRC also organized a Health Program Management Training for four local partners, strengthening their capacity in health programming, assessments, resource management, and protection, with a significant rise in participants’ self-assessed confidence.



In February, IVY Japan, in partnership with STEP-IN, continued a joint project supporting vulnerable populations with limited access to healthcare in Zaporizhzhia City, funded by the Government of Japan and private companies through the Japan Platform. Through a mobile medical unit with integrated mental health services, 637 patients received care during the reporting period



In February 2026, 9 Inner Strengths Program (ISP) workshops were conducted in Sumy, reaching 152 participants and promoting resilience, coping skills, and peer support. MdM-Greece is currently collaborating with WHO to include ISP in the Roadmap for the Roll-Out of Manualized Psychological Interventions in Ukraine. Data collection for the “Assessment of mental health needs among young people in communities in the Sumy, Kharkiv, Chernivtsi and Khmelnytskyi regions of Ukraine” was completed, including 20 focus group discussions and 36 key informant interviews with adolescents, caregivers, professionals, and local authorities. The MdM-Greece-supported helpline in Sumy received 446 calls, with one-third related to health issues, the majority linked to mental health. The Medical Mobile Unit reached 330 individuals, delivering 1,015 services, including 489 PHC/SRH consultations and 526 MHPSS consultations in remote areas of Okhtyrka raion.



In February 2026, Médicos del Mundo continued to expand access to essential health services for conflict-affected populations in Kharkiv and Zaporizhzhia oblasts, delivering integrated PHC, SRH, and MHPSS support through mobile teams and local partnerships in hard-to-reach areas. A total of 895 PHC consultations were provided to 856 patients, alongside 234 SRH consultations for 229 patients. Mental health remained a core component of the response, with 836 individual consultations delivered to 766 beneficiaries and 46 group sessions reaching 198 participants. Community engagement was also strengthened through 255 health awareness sessions reaching 1,328 people, and 94 outreach sessions engaging 639 individuals on key health topics.



In February 2026, Medair continued its efforts to strengthen health services across Ukraine. In Kharkiv oblast, renovations, furnishing, and equipping of various health facilities were successfully completed, while partnership with Dobra Fabryka enabled the distribution of vouchers to improve access to essential medicines for local communities. In Sumy oblast, a new intersectoral project was launched in collaboration with three partners, focusing on strengthening health facilities, training health and social service workers, expanding voucher assistance for IDPs, ensuring reliable energy solutions, and delivering a range of MHPSS activities.



In February, under the “Resilience through Medical and Cash Assistance” project (UHF), mobile medical teams conducted outreach in frontline Valkivska and Barvinkivska Hromadas, Kharkiv oblast. In Valkivska, 116 people received medical care (85 IDPs, 35 persons with disabilities) and 72 received psychological support (12 IDPs). In Barvinkivska, 315 people received medical care (21 IDPs, 19 persons with disabilities) and 92 received psychological support (14 IDPs). The teams provided individual consultations and basic medical examinations to improve access to healthcare and psychosocial services in frontline communities.



In February 2026, Nova Ukraine delivered 278 units of medical equipment and 4,800 units of medical consumables through in-kind donations, with support from international partners including Firefighter Aid Ukraine, MedWish, SOS International, FIGS, and Medical Bridges. The supplies were distributed to healthcare institutions across multiple regions of Ukraine, including hospitals in Mykolaiv, Sumy, Chernihiv, Rivne, Kharkiv, and Lviv, and included diagnostic equipment such as ultrasound scanners to enhance medical services. Specialized support included cardiology supplies delivered to the Children’s Cardiac Center, and 1,450 units of adaptive clothing were donated to support patients undergoing recovery and rehabilitation. Nova Ukraine continues collaborating with international partners to expand the delivery of essential medical supplies and equipment to healthcare institutions throughout Ukraine.



In February, the mobile teams continued their work in the Sumy and Kharkiv regions. The mobile teams provided more than 300 consultations and distributed over 500 packages of medicines. The project is currently in the active preparation phase for the launch of the “Neonatal Care” project, which will cover 27 neonatology departments across Ukraine. Within the framework of the project, medical equipment will be procured and training activities conducted.



Throughout February 2026, Project HOPE continued ensuring access to essential healthcare, safe water, and humanitarian assistance for people in conflict-affected and hard-to-reach communities. During the month, 42 mobile medical units delivered 58,443 consultations to 18,931 beneficiaries (39% male, 61% female), while two ambulances conducted 273 medical evacuations and patient transports for wounded and critically ill individuals across three frontline oblasts. Project HOPE also supported 33 hospitals with financial incentives to retain and recruit staff; these local medical units provided 55,585 consultations to 17,607 beneficiaries (38% male, 62% female). To strengthen healthcare capacity, 236 healthcare workers were trained, including 205 in nursing and 31 in psychosocial support, while 14 mobile medical units and 27 local medical units delivered 6,216 mental health consultations for individuals affected by conflict..



PWJ continues to provide physical rehabilitation services in three collective housing facilities in Dnipro city for IDPs, particularly older people and persons with disabilities, supporting both their physical and mental health with funding from the Japan Platform. During the reporting period, 70 people (64 women and 6 men, including 12 persons with disabilities) participated in group sessions, while 70 individuals (37 women and 33 men, including 38 persons with disabilities) received individual therapy sessions.



Operation of the Kharkiv MMT by the Polish Medical Mission in Tsyркunу Hromada, Kharkiv Region. © PMM



Medical consultation by IRC Team, February 2026© IRC



PUI registers beneficiaries for medicine vouchers in Okhtyrka hromada, Sumy oblast© PUI



Medical professionals participate in Mass Casualty Management training by the SAMS Ukraine© SAMS Ukraine

Première Urgence Internationale (PUI) continues to provide humanitarian assistance across Kharkivska, Sumska, Donetsk, Dnipropetrovska, and Zaporizka oblasts. Mobile teams delivered primary health care and MHPSS services, conducting 1,777 consultations, while the DETACH team, composed of a psychologist and a social worker, rapidly deployed to sites of shelling in Kharkiv to provide immediate psychosocial support. In total, 75 MHPSS and RCCE/IEC group sessions were conducted, reaching 599 participants. A certified trainings for medical personnel in Sexual and Reproductive Health and Basic Life Support/Stop Bleeding continued. In Sumy oblast, Self-Help+ groups and short-term psychotherapeutic support were provided through Primary Health Care Centers. The “Girls Shine” program continued through Resilience Centers in Kehychivka, Valky, Balakliia, Pischyn, Petrykivka, and Zaporizhzhia. Through the voucher programme, 1,892 vulnerable individuals accessed essential medicines, medical supplies, and hygiene items in Okhtyrka, Shakhtarsk, and Izium, while 80 people received transportation assistance to reach health services. In collaboration with evacuation partners – White Angels, Rose on Hand, and the Community of the Old Town – more than 175 over-the-counter kits were distributed to frontline households in February. PUI also supported health facilities by providing fuel and donating medicines, equipment, and medical commodities, including SRH consumables and trauma kits, to eight frontline Primary Health Care Centers.



On 26–27 February, the Ukrainian office of the SAMS Foundation organized a Mass Casualty Management (MCM) training in Dnipro to strengthen the preparedness of medical professionals to respond to mass casualty incidents. A series of MCM trainings for medical professionals is planned in Dnipropetrovska, Zaporizka, and Kharkivska oblasts from December 2025 to July 2026. Participant feedback highlighted the strong practical relevance of the course, the value of interactive teamwork and scenario-based simulations, and the high-quality facilitation that enabled participants to engage in complex operational tasks.



In February, frontline medical facilities received dressing materials, medications, consumables, kits—including the SV Emergency Response Medical Intervention Kit—and other essential supplies. A total of 5,167 items were delivered across 11 oblasts, reaching an estimated 112,359 beneficiaries. As part of heating support for hospitals, 200 tons of fuel briquettes were delivered to a hospital in Kherson to support winter needs, with an estimated reach of 3,500 people. In addition, SV, in collaboration with local partners, provided 200 outpatient individual MHPSS consultations in Novyi Buh to strengthen access to mental health services.



In February 2026, UK-MED, with the support of the UHF, continued delivering essential healthcare services in Kharkiv and Zaporizhzhia regions. Mobile medical units provided 1,416 primary health care consultations to residents near the frontline and evacuees in shelters and transit centres. Psychologists conducted 197 individual consultations and 18 group sessions for 144 participants. Risk communication and community engagement sessions reached 307 participants. In addition, 44 training sessions on first aid, psychological support, infection prevention and control, and wound care enhanced the capacity of healthcare workers, first responders, and communities, reaching 853 participants. UK-MED continues to support frontline communities, strengthening access to health services and emergency preparedness.



In February, the team of the Charity Fund “Your City” continued providing comprehensive medical and psychological assistance to people affected by the war in Odesa region, combining humanitarian support with state healthcare mechanisms. A total of 1,138 people received life-saving medicines, including 120 individuals who were provided with high-cost drugs essential for treating chronic and severe conditions, while 275 patients received medical services such as primary check-ups, consultations, laboratory tests, ultrasound screenings, diagnostics, and referrals. Through the eHealth and Helsi systems, the Fund’s specialists continued issuing official electronic prescriptions and referrals, integrating humanitarian assistance into the national healthcare system. Around 50 people referred to the Fund’s medical and psychological centers after shelling continued to receive care and treatment. Psychological support remained a key focus, with 216 individuals participating in 18 group sessions, alongside 34 individual psychological consultations and 18 psychiatric appointments. Additionally, 17 high-capacity generators were delivered to healthcare facilities, critical infrastructure, and social institutions across Odesa and the region, helping ensure uninterrupted operations during power outages.



Throughout February, with support from GlobalGiving, ZDOROVİ delivered diagnostic equipment to medical facilities in the Zaporizhzhia and Dnipropetrovsk regions and conducted the eighth wave of the “Barometer” survey among medical leaders to assess the current state of the healthcare system. With support from the Eastern Europe Foundation, a new educational initiative was launched in five communities in the Sumy region under the “Capable and Strong: Sumy” project, focusing on accessibility, conflict management, and work with veterans. In partnership with Polish Humanitarian Action (PAH), 173 medical and social workers received support to strengthen inclusivity and psychosocial resilience. The online course “First Psychological Aid for Medical Professionals and Combating Burnout” on the NHSU Academy platform reached 2,910 participants, including 1,873 who received certificates.



HEALTH CLUSTER RESOURCES & CONTACTS

KEY CONTACTS

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KEY PUBLICATIONS, February 2026

- [Health Cluster Ukraine: Health Partner Memoirs on the Health Response in 4 years of the War](#)
- [Health Cluster Annual Report 2025](#)
- [Rapid Damage and Needs Assessment](#)

KEY RESOURCES

