

HeRAMS Ukraine Status Update Report

May - October 2023



A comprehensive mapping of
the operational status of health
facilities



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ACRONYMS

eHealth	Electronic Health Information System
EPI	Expanded Programme on Immunization
HeRAMS	The Health Resources and Services Availability Monitoring System
HIV/AIDS	Human immunodeficiency virus infection and acquired immunodeficiency syndrome
HSDU	Health Service Delivery Unit
ICU	Intensive care unit
MDRTB	Multidrug-resistant tuberculosis
MHPSS	Mental Health and Psychosocial Support
MOH	Ministry of Health
NCD	Non-Communicable Diseases
PHC	Primary Health Centre
PMTCT	Prevention of Mother to Child Transmission
STI	Sexually Transmitted Infections
WHO	World Health Organization

HeRAMS TEAM

Country team

ASSAF, Denise

Health Information Officer - Epidemiologist

YASHCHENKO, Mariia

National Professional Officer (Health Service Monitoring)

BYSTROV, Roman

National Consultant, Data Analyst

BRUNI, Emanuele

Incident Manager

AREGAY, Aron Kassahun

Health Information Management &
Risk Assessment Officer

HQ team

PETRAGALLO, Samuel

Health Information Systems Specialist

FUHRER, Caroline

Health Information Systems Specialist

BRECHARD, Raphael

Consultant

Feel free to contact our team if you have any questions:
eu_ukr_herams@who.int



Summary

The Health Resources Availability Mapping System (HeRAMS) is a World Health Organization (WHO)-initiated platform designed to support the collection, processing, and dissemination of information on the availability, accessibility, and functionality of health resources. In response to the complex emergency in Ukraine, HeRAMS has been deployed in coordination with the Ministry of Health (MoH) to assist in managing the health sector's requirements and the strategic coordination of health service delivery.

From November 2022 to May 2023, data was collated from 2,333 public health facilities, and this effort expanded to cover information from over 9,000 health service delivery units (HSDUs) between March and October 2023. HSDUs constitute distinct geographical points of care, such as first aid points, family medicine ambulatories, and polyclinics, falling under the jurisdiction of common legal entities, including primary healthcare centers, multiprofile hospitals, or territorial medical unions.

During the expansion of data collection, baseline records were revised and updated to ensure chronological data compatibility and consistency with the context of new data. The comprehensive report is built on 11,523 records, which include information on the functionality and condition of health facilities, availability of basic amenities, and the provision of services across various healthcare domains such as trauma and general services, child health and nutrition, communicable diseases, sexual and reproductive health, maternal and newborn care, non-communicable diseases (NCDs), mental health and psychosocial support (MHPSS).

Key findings

Structural damage

Current data indicates that 92% of health service delivery units are not damaged. In terms of health facility type, 90% of Primary Health Care (PHC) health facilities didn't sustain any damage. Among specialized health facilities, multiprofile health establishments report an intact rate of 89%, while monoprofile health facilities show a rate of 86%. Additionally, 93% of HSDUs, defined as geographically separate entities legally affiliated with a parent health facility, are operational and undamaged.

In the analysis of 864 health facilities with infrastructure damages in Ukraine, conflict-related incidents were the major factor, accounting for 88% of all damages, these damages are unevenly distributed with concentration of damages in North-East, East, South-East and South of the country. Additionally, 10% of the 864 health facilities that experienced damage were affected due to inadequate maintenance. It is the most common reason for sustained damages in Central and Western part of Ukraine.

Upon reviewing the health infrastructure across various oblasts in Ukraine, a distinct pattern in damages is observed. Most health facilities in each region maintains their structural integrity. When it comes to partial damage, regions like Kharkivska, Kyivska, and Mykolaivska stand out with higher numbers, having 132 (21%), 91 (15%), and 71 (18%) partially damaged health facilities respectively. As for full damages, while most regions reported the low count, some areas, notably Kharkivska and Donetska, have reported a concerning 38 (6%) and 39 (14%) fully damaged (132 (21%) and 101 (36%) partially damaged) health facilities, respectively. Lastly, in Khersonska, of 86 health facilities, 41 (48%) were reported as partially damaged and 8 (9%) as fully damaged.

Equipment damage

HeRAMS comprehensive dataset reflects that in 94% of health facilities across Ukraine equipment remains intact (93% of PHC health facilities, multiprofile and monoprofile health facilities, 95% of HSDUs). It is imperative to note that 642 (6%) of health facilities have recorded equipment as either partially or fully damaged.

In terms of causative factors, conflict-related incidents are predominant, accounting for 95% of equipment damages across the 642 health facilities with equipment that is either partially or fully damaged. The remaining 5% of equipment damage is attributable to lack of maintenance.

When analyzing equipment conditions at a regional level, specific oblasts in Ukraine display higher levels of equipment damage. Specifically, Kyivska oblast has documented 92 instances of equipment with partial damage, while Kharkivska oblast has reported 96 such instances. More critically, Kharkivska and Donetska oblasts have significant numbers of completely damaged equipment, with 57 and 58 cases reported, respectively. Furthermore, in Khersonska oblast, out of 86 health facilities, there are reports of 36 instances of partial equipment damage and 9 instances of total equipment destruction.

Functionality and accessibility

This comprehensive review of health facilities in Ukraine, yielded insights from data analysis focused on their functionality and accessibility.

It is essential to note that functionality is assessed only if a health facility is not fully damaged. Therefore, from a total of 11,421 health facilities, 96% were assessed as fully functional. A closer look at the oblast-level data reveals that Mykolaivska oblast has 364 fully functioning health facilities, alongside 19 that are partially functioning and 7 non-functioning. Kharkivska follows, with 527 fully functioning health facilities, 46 partially functioning, and 32 non-functioning. In Zaporizka, Khersonska, and Donetska oblasts, up to 80% of health

health facilities are fully functioning, with respective counts of 151, 53, and 140 fully functional health facilities. Donetsk, notably, has 58 partially functioning health facilities and 42 that are non-functioning.

Accessibility is assessed based on whether a health facility is at least partially functional, it should be noted that this assessment reflects the perspective of the health facilities. At oblast level, Mykolaivska stands out with 18 health facilities that are only partially accessible, while Kharkivska has 22 partially accessible health facilities and 8 that are completely inaccessible. This trend is notably pronounced in Poltavska, where 18 health facilities are partially accessible and another 18 completely inaccessible. Rivnenska oblast has 47 health facilities that are only partially accessible, demanding immediate attention to identify the bottlenecks. The situation in Zaporizka and Donetsk oblasts presents even more limited accessibility with 18 and 45 health facilities being partially accessible, respectively. At the same time, Donetsk oblast has 2 completely inaccessible health facilities. Lastly, Khersonska oblast reports 25 partially accessible health facilities and 2 that are completely inaccessible, indicating a need for focused interventions.

The main factors impacting functionality of health facilities are shortage of staff, accounting for 50% of the challenges, followed by damage to the health facility (35%), and security concerns (34%). On the accessibility front, security issues again are a major factor, affecting 46% of the health facilities. Other impediments to accessibility include infrastructural constraints not catering to those with limited mobility (36%), and physical barriers (20%).

This trend of limited accessibility and functionality, especially in the regions mentioned, underscores an urgent need for infrastructural and policy interventions. Despite the resilience shown by the majority of health facilities, there is a clear need to address the infrastructural concerns in specific regions, especially those with a higher count of damages, to ensure the continued provision of health services.

Water

In a comprehensive review of water availability in health facilities, it has been observed that out of 11,218 health facilities, 94% have consistent access to water. While most health facilities maintain consistent water access, there remain equipment and financial challenges that require strategic interventions to ensure optimal service delivery. Upon detailed examination of specific health facility types, some variances emerge. Emergency Medical Care Centers report a full 100% water availability. Conversely, PHC health facilities and HSDUs register minor deficiencies with 5% and 6% reporting limited availability, respectively.

A deeper investigation into the causes of water unavailability reveals a significant 74% of the affected health facilities attribute this to equipment-related challenges. Financial constraints are the second major factor, impacting 64% of these health facilities.

The destruction of the Kakhovka Dam on 6 June 2023 has drawn significant attention to water availability issues in the affected regions, particularly in the Khersonska, Mykolaivska, and Dnipropetrovska oblasts. Upon analyzing water accessibility data post-destruction, specific patterns emerge. In Khersonska oblast, out of a total of 72 health facilities, 51 have reported consistent water availability, while 20 experience limited access, and 1 has no water supply at all. At the same time, for Mykolaivska oblast, access to water is limited in 28 out of 383 operational health facilities.

This drastic shift in water accessibility, especially in the Khersonska oblast, can be directly attributed to the dual challenges of flooding and the subsequent scarcity of potable water.

Dnipropetrovska oblast, with a larger number of health facilities, highlights that out of 810 health facilities, 761 are fully operational in terms of water supply. Still, 49 have restricted access, and a significant portion of these may be situated in the southern regions impacted by the dam explosion.

Power

In a thorough assessment of power availability in health facilities across Ukraine, it's observed that out of 11,217 health facilities, 97% consistently have power. Despite this broad resilience in the health infrastructure regarding power availability, certain health facility types display gaps in power supply. For instance, PHC health facilities and HSDUs show slight variances with 5% and 3% respectively experiencing limited power availability.

When focusing on the reasons for power unavailability, a significant 88% of affected health facilities face challenges due to equipment inadequacies. Financial restrictions constitute a concern for 44% of these establishments, and supply disruptions affect 28% of health facilities.

The availability of power to health facilities varies significantly across Ukraine's regions. In the Khersonska oblast, out of 72 health facilities, 45 consistently have power supply, 26 experience partial availability, and 1 operates without any power. In Dnipropetrovska oblast, out of 810 health facilities, 30 experienced power shortages.

Similarly, in the Donetsk oblast, out of a total of 196 health facilities, 159 consistently have power supply, while 37 experience partial availability. Kharkivska oblast reports 522 of its 563 health facilities with consistent power supply, with the remaining 40 experience partial availability and 1 operates without any power. In Chernihivska oblast, out of 308 health facilities, 19 experience occasional interruptions. Lastly, Kyivska oblast reports that out of 603 health facilities, 80 experience partial availability of power.

Heating

In terms of heating availability, a significant 97% reported complete availability. However, 340 health facilities face challenges, namely 3% only have partial availability of heating, while less than 1% lack heating availability entirely.

A closer look at the causes of these shortages reveals that 86% of the affected health facilities attribute the lack of heating to insufficient equipment. Budgetary limitations are a significant barrier to 51% of the health facilities, while 21% struggle due to supply shortages.

Considering heating availability by oblasts, it becomes again evident that not all areas enjoy uniform access. In Sumska oblast, out of 527 health facilities, 513 have full heating availability, while 14 only have partial heating, suggesting challenges in consistent service delivery. In Dnipropetrovska oblast, out of 810 health facilities, 785 reported full heating availability, while 25 only have partial availability.

Kharkivska oblast presents a more diverse picture. Out of 563 health facilities, while 529 are fully available, 25 health facilities report only partial heating availability, whereas 9 health facilities reported unavailability of heating services. Zaporizka oblast has 168 operational health facilities, of which 7 reported partial availability of heating, and another 6 reported unavailability of this basic amenity. In Donetsk oblast, out of the 196 health facilities, 35 only have partial heating availability, and 9 pointed to a complete unavailability of heating services.

Lastly, data received from health facilities in Kyivska oblast, with 603 health facilities, paints a similar picture. 72 health facilities in this oblast only have partial heating, indicating inconsistencies in service delivery.

In understanding the reasons behind these service gaps, it's essential to consider factors such as financial constraints, lack of equipment or trained staff, and supply shortages. Addressing these barriers can pave the way for a more robust and reliable healthcare infrastructure across these oblasts.

In summary, while most Ukrainian health facilities report favorable heating availability, there are clear re-

gional disparities that need to be addressed. Addressing the core issues, primarily equipment shortages and financial constraints, will be paramount to ensuring uniform service provision across the board. The data underscores the overall resilience of Ukraine's health infrastructure, but it also sheds light on specific areas that warrant attention to ensure uniform basic amenities availability across all health facilities.

Connectivity and eHealth

HeRAMS further underscores the present state of digital connectivity in various health facilities across the country, emphasizing its importance for eHealth data entry and reporting. Of the 11,216 health facilities surveyed in Ukraine, a notable 83% have achieved full digital connectivity. However, 10% lack Internet access, and 7% have only partial connectivity. Concurrently, 76% possess fully available eHealth systems, 4% have partial availability, and 20% find eHealth either irrelevant to their operations or it's not available at the health facility. This data, therefore, implies that one in every five health facilities encounters challenges in eHealth availability.

Of the 1,851 health facilities with limited connectivity, 65% report that inadequate equipment is the primary obstacle to establishing or maintaining internet access. Financial constraints are also frequently reported, with 60% indicating insufficient funds as a significant barrier. Examining the reasons for limited eHealth availability in 484 health facilities, it's evident that the primary obstacles mirror those of internet access. A significant 85% of these health facilities attribute eHealth availability barriers to equipment scarcity. Simultaneously, 65% cite financial challenges. Other concerns include an 18% shortage of supplies, 11% reporting understaffing, and a crucial 5% highlighting a lack of appropriate training.

All 25 Emergency Medical Care Centers in Ukraine have reached 100% connectivity benchmark, though their eHealth availability stands at 92%. Out of 931 Primary Health Care Centers, 95% claim full connectivity, with a near-perfect 98% eHealth availability rate. Conversely, 20% of HSDUs still don't have digital connectivity fully available, with 71% achieving full eHealth availability. Both multiprofile (846 health facilities) and multiprofile health facilities (363 health facilities) exhibit a connectivity rate of 97%. A fraction of 3% in each category still don't have complete Internet access. Multiprofile hospitals report 98% eHealth availability, while multiprofile hospitals stand at 95%.

This assessment highlights the challenges posed by equipment and financial limitations in achieving comprehensive eHealth coverage. The need to streamline supplies, staffing, and training stands out as the next crucial step. Universal digital connectivity across all health facilities represents more than a mere technological milestone; it's the gateway to enhanced patient care, improved health outcomes, and fortifying the resilience of Ukraine's healthcare system.

Health service domains

In a comprehensive analysis of health service domains in Ukraine, the findings demonstrate widespread availability of service availability across various domains. Notably, Trauma and General Services see a commendable 92% of full-service availability, while only a minimal 7% and 1% respectively are partially available or not available.

Child Health services stand out with a remarkable 97% full availability. Only a small proportion of these services are either partially available (2%) or not available (1%).

For Communicable Diseases, the full availability rate is also notably high at 96%, with a mere 3% being partially available and 1% not available.

The domain of Sexual and Reproductive Health, however, presents a slightly more varied picture. While 87% of services in this domain are fully available, there's 7% partial availability and 5% non-availability.

Maternal and Newborn Care services, essential for safeguarding the health of mothers and infants, have an 86% full availability rate. However, there's an 11% partial availability and a 3% non-availability that needs addressing.

In Non-Communicable Diseases, 90% of services are fully available, with 7% partially available and 3% not available.

Lastly, the MHPSS domain indicates an 85% full-service availability, with 11% partially available and 4% not available.

Delving into barriers affecting service delivery, financial constraints and equipment shortages emerge as notable challenges. For example, in Trauma and General Services, 34% of barriers are due to medical equipment shortages and 18% to financial constraints. Child Health services face a 29% barrier due to equipment shortages. A significant challenge in the MHPSS domain is the 38% barrier due to lack of training, highlighting the need for enhanced capacity-building in this domain.

This report emphasizes the importance of continued investments and targeted strategies to address disparities and achieve universal health service coverage in Ukraine.

However, it is important to note the uneven distribution of service availability across the country. The report's all-country indicators present cumulative values of heavily, less, and indirectly affected oblasts, and only include operational health facilities that provide at least one service in a given domain. A closer look at the most affected oblasts, such as Donetsk and Khersonska, reveals a rather different scenario.

In Donetsk oblast, health services availability varies across domains. Trauma and general services are predominantly available at 80%, though challenges persist with financial constraints being the primary concern, followed by shortages in medical supplies and staff. Sexual and reproductive health services are only 48% available, with a substantial 41% of services being completely unavailable; the main challenge here is insufficient medical supplies provision. Maternal and newborn care services are just slightly higher in terms of availability at 51%, facing medical supply deficiencies and insufficient staff training as their top challenges. Data on Mental health and psychosocial support services in Donetsk appear to be rather concerning with only 42% availability and the most pressing challenge being inadequate training.

Contrastingly, in the Khersonska oblast, trauma and general services have 74% availability with the primary challenge stemming from equipment deficiencies. Communicable diseases services are 86% available, with unavailability triggered by staff shortages and a lack of equipment. Sexual and reproductive health services present a mixed picture with 63% availability, constrained by medical supplies and staff shortages. Maternal and newborn care in Khersonska is particularly concerning, with only 41% of services available and a significant 43% facing medical supply deficiencies. Non-communicable diseases services report 62% availability, with staff shortages and equipment deficiencies being major obstacles. Mental health and psychosocial support services in Khersonska echo a similar concern as in Donetsk, with 42% availability with staff shortages as the primary challenge.

In conclusion, while health services in both regions show relatively wide availability across domains, they face significant challenges primarily related to staff shortages, insufficient training, equipment deficiencies, and a lack of medical supplies.

Methodology

Since November 2022, the HeRAMS has comprehensively gathered data from 2,333 health facilities. This dataset encompasses almost all public health facilities across Ukraine's oblasts, excluding Luhanska oblast and Avtonomna Respublika Krym, and health facilities along the frontline. However, data from areas in the Donetsk, Khersonska, and Zaporizka oblasts that are under temporary military control by the Russian Federation were not included in this analysis. Additionally, private health facilities, representing a smaller segment of Ukraine's healthcare infrastructure, were not included in this data collection. However, future data collection efforts may consider incorporating them to provide a more holistic view of the healthcare landscape in Ukraine.

The data collection began in November 2022 and concluded in February 2023, focusing initially on the nine most conflict-affected oblasts: Odeska, Mykolaivska, Zaporizka, Kharkivska, Donetsk, Sumska, Chernihivska, Kyivska, Khersonska, and Dnipropetrovska oblasts. Except for Khersonska oblast, subnational focal points nominated by the oblasts' health departments were initially engaged in data collection. These focal points attended a two-day in-person training workshop to ensure familiarity with the questionnaire and ensure a common understanding of key concepts such as 'accessibility' and 'functionality' of a health facility.

In Khersonska oblast, due to the unstable security situation, data collection was initially facilitated by a third-party group specializing in health assessments. However, following the baseline data collection, the Khersonska oblast health department took responsibility for updating and expanding the data collection. The Round 1 of data collection resulted in a separate HeRAMS report "HeRAMS Ukraine First Round Results November 2022 - January 2023"¹.

In March 2023, data collection expanded to the remaining 13 oblasts of Ukraine and Kyiv city by subnational focal points who had been nominated by the local health departments (Zhytomyrska, Vinnytska, Cherkaska, Poltavska, Khmelnytska, Rivnenska, Kirovohradska, Volynska, Lvivska, Ternopil'ska, Chernivetska, Ivano-Frankivska, and Zakarpatska oblasts, and Kyiv city). The focal points had completed a standard two-day, in-person training prior to beginning data collection.

The questionnaire and training materials were adapted to the local context and translated into Ukrainian. All health facilities included in the master health facility list provided by the National Health Service of Ukraine were contacted. The overall response rate at the end of Round 1 was over 99%. For Round 2, the dataset was completed in accordance with the initial master health facility list. The data update for Round 1 was centrally initiated in mid-April, ensuring that data from the Round 1 regions are chronologically comparable with the data from other oblasts.

The findings of all-country baseline data collection complemented with the all-country interpretation workshop were published in the "HeRAMS Ukraine Baseline Report 2023: Operational status of the health system. November 2022 - May 2023"².

Between March and October 2023, the data collection effort was further expanded to include information about more than 9000 health service delivery units. HSDUs constitute distinct geographical points of care, such as first aid points, family medicine ambulatories, and polyclinics, falling under the jurisdiction of common legal entities, including primary healthcare centers, multiprofile hospitals, or territorial medical unions.

During the expansion, baseline data was continuously updated by contributors to ensure chronological consistency for the analysis.

1 <https://www.who.int/publications/m/item/herams-ukraine-first-round-results-nov-2022-jan-2023>

2 <https://www.who.int/publications/m/item/herams-ukraine-baseline-report-2023-operational-status-of-the-health-system-nov-2022-may-2023-en>

Basic cleaning and logic checks were performed on the raw data to meet quality standards. Additional quality assurance measures were implemented through a piloted project involving third-party on-site verification at 70 health facilities located within a 10 to 50 kilometers zone from either the state border or the frontline areas in Donetsk, Kharkivska, and Zaporizka oblasts. The findings of the verification revealed that the data variations between the HeRAMS platform and the observations of the monitoring group were only 6.37%. Notably, in half of the cases, the variations were due to changes in context and situation.

Following the insights gained from this pilot, a comprehensive 12-month third-party verification exercise is underway. This ongoing effort is designed to uphold high data quality standards and to promptly address any significant data variations.

HeRAMS usage and impact on response in Ukraine

The HeRAMS, launched in Ukraine in November 2022, has become a crucial tool for enhancing humanitarian response, especially during the ongoing conflict and the early stages of health system recovery. Initiated by the MOH and the WHO, HeRAMS's primary goal is to offer a detailed and accurate overview of the operational status of health facilities. This is particularly vital in regions heavily affected by the conflict.

HeRAMS emphasizes the significance of real-time data in addressing health-related challenges during emergencies. The system's data and analytical outputs are regularly shared with the MOH, serving as one of the sources for evidence-based policymaking. This information is not only critical for strategic decisions in humanitarian operations, but also ensures that the response is appropriately aligned with the current needs. For instance, in deploying Interagency convoys, HeRAMS provides a data-driven perspective of the health infrastructure, which is instrumental in directing aid efficiently to the most affected areas.

The collaboration with Health and WASH Cluster Partners fosters a culture of data-informed decision-making. The data collected by HeRAMS is also essential for the development of Health Cluster products, such as the People in Need (PiN) profiles, and the Humanitarian Needs Overview and Response Plan (HNRP).

In addition to emergency response, the data from HeRAMS has been instrumental for health system recovery. For instance, the Rapid Damage Needs Assessment (RDNA), conducted by the World Bank and Ministry of Health, utilizes HeRAMS data for estimating health facility damage. Similarly, the NCD program, leverages this data to evaluate the availability of cancer and other NCD services and to develop corresponding plans. Moreover, for assessing the availability of sexual and reproductive health services across various oblasts at both primary and specialised care health facilities.

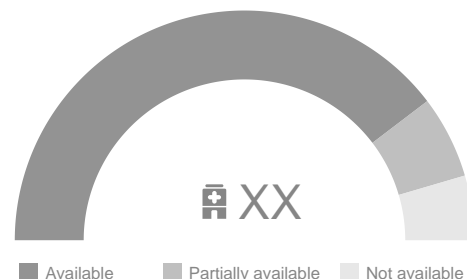
Furthermore, HeRAMS data is invaluable for external missions, aiding in accurate assessments and the effective allocation of resources. The comprehensive and robust nature of this dataset strengthens official communications, providing authoritative information that underscores the health challenges and the ongoing humanitarian efforts in Ukraine. This system not only enhances the response to immediate needs but also contributes to long-term planning and recovery efforts in Ukraine.

INTERPRETATION GUIDE

Indicator status

Arc charts

For each indicator, an arc chart provides an overview of the overall status (i.e. functionality, availability, sufficiency, etc.), hereafter referred to as “availability”. The total number of health facilities included in the analysis of an indicator is shown inside the arc chart. It is important to note that the total number of health facilities included in the analysis of an indicator can vary due to the exclusion of non-operational and non-reporting health facilities from subsequent analyses.



Column charts

Column charts display the status of an indicator by region. The number of health facilities in oblast is shown below the region's name.



Donut charts

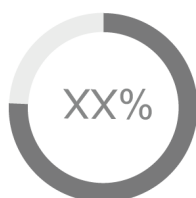
Each donut chart represents a type of health facility. The percentage of health facilities for which the indicators was available or partially available is shown inside the donut while the total number of health facilities included is shown at the bottom of the chart, below the health facility type name. If an indicator was not available in any health facility, the number inside the chart will display the percentage of health facilities for which the indicator was partially or not available.



Reasons of unavailability

If an indicator was not or only partially available, main reasons of unavailability (i.e. causes of damage, reasons for non-functionality, etc.) were collected. Similarly, indicators assessing availability and sufficiency of basic amenities may have a sub-question gathering additional information on the type of amenity available. Alike reasons of unavailability, types of amenities are only evaluated if the amenity was at least partially available. For simplicity reasons, causes of damage, non-functionality and inaccessibility, reasons of unavailability, types of basic amenities, and type of support provided by partners are hereafter commonly referred to as “reasons”.

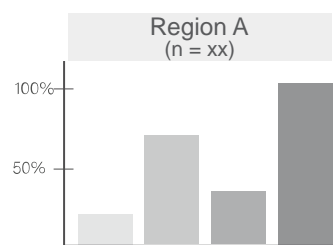
Donut charts



Each donut chart indicates the percentage of health facilities having reported a given reason. The total number of health facilities reporting at least one reasons is shown below the chart header.

Bar charts

Bar charts depicting reasons follow the same logic as donut charts and exclude health facilities where the indicator was fully available. The number of health facilities reporting at least one reason is displayed below the region's name.



Important: The denominators for reasons charts exclude health facilities where the indicator was fully available or in the case of basic amenities not available. It should further be noted that health facilities could report up to three reasons for each indicator. Thus, the sum of all reasons may exceed 100%.



OPERATIONAL STATUS OVERVIEW



OPERATIONAL STATUS OVERVIEW*, 20.10.23

11705 health facilities assessed

 Building condition



102 Fully damaged
762 Partially damaged

 Equipment condition



141 Fully damaged
502 Partially damaged

 Functionality

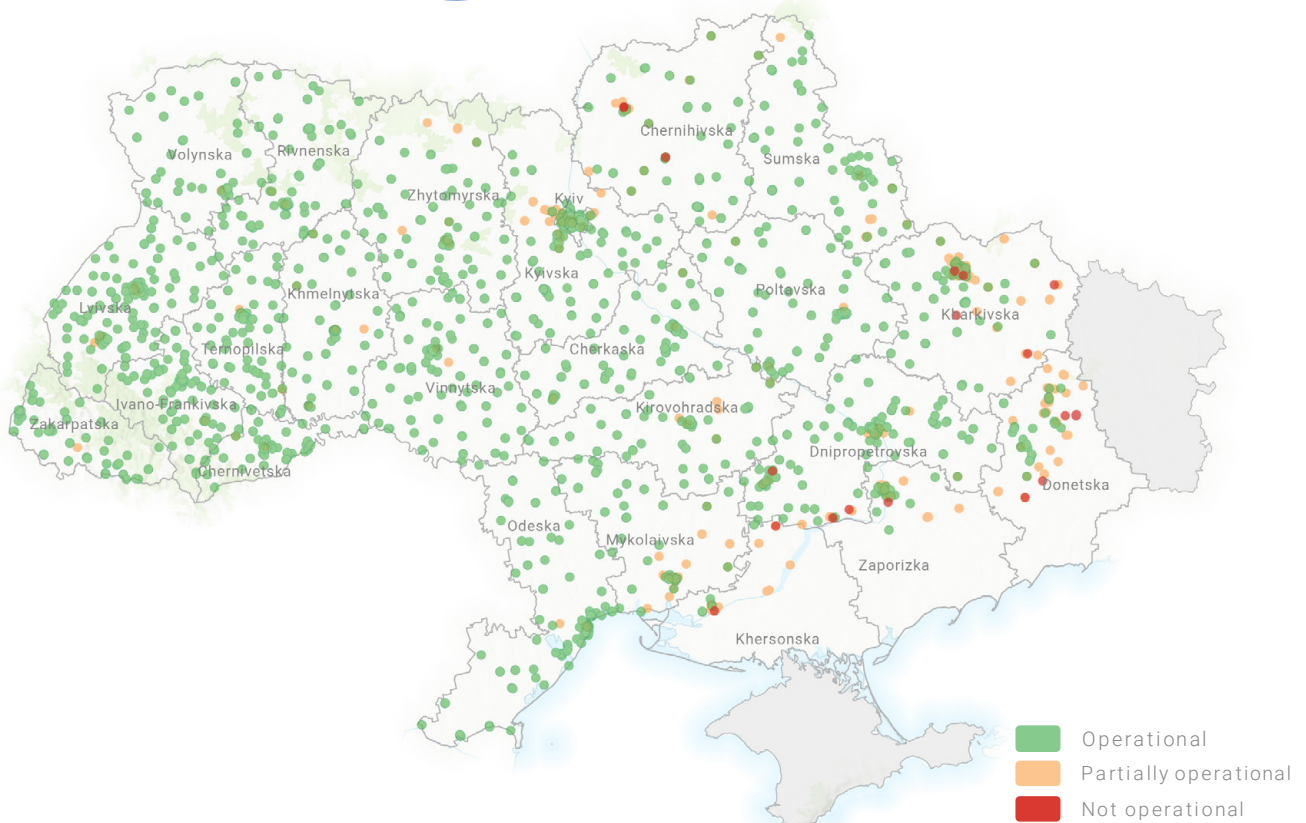
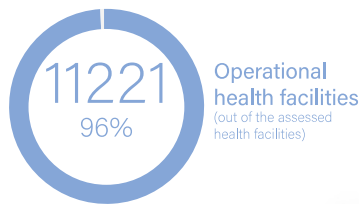


348 Not functioning, closed
265 Partially functioning

 Accessibility



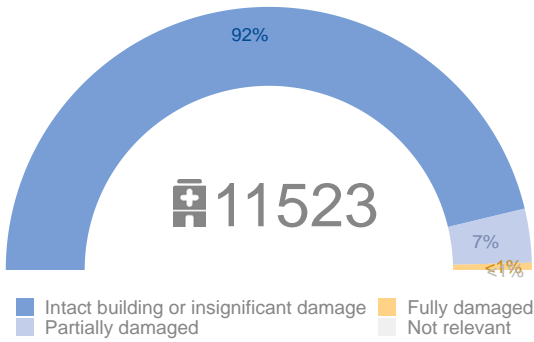
34 Not accessible
255 Partially accessible



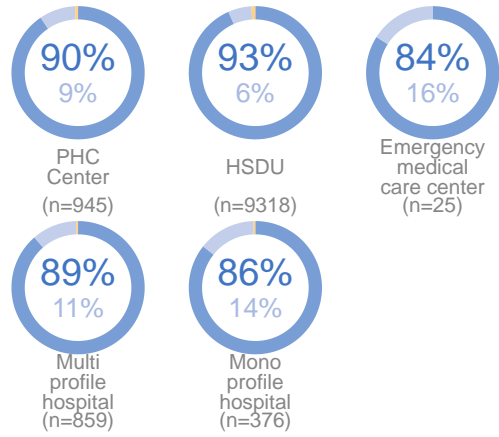
* HFs (Health Facilities) and HSDUs (Health Service Delivery Units) reported as destroyed, non-functioning, or inaccessible are deemed unable to provide any health services, hence categorized as non-operational. Consequently, reporting ends upon confirmation of an HSDU's non-operational status.

BUILDING CONDITION

Building condition overview

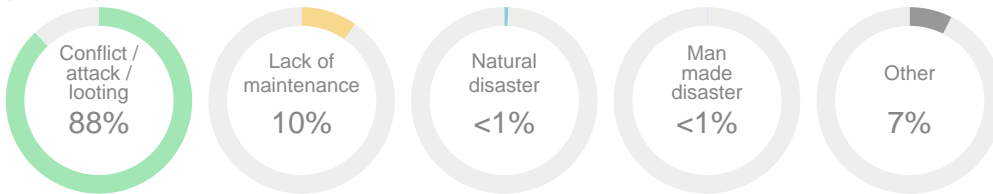


Building condition by health facility type



Main causes of damage

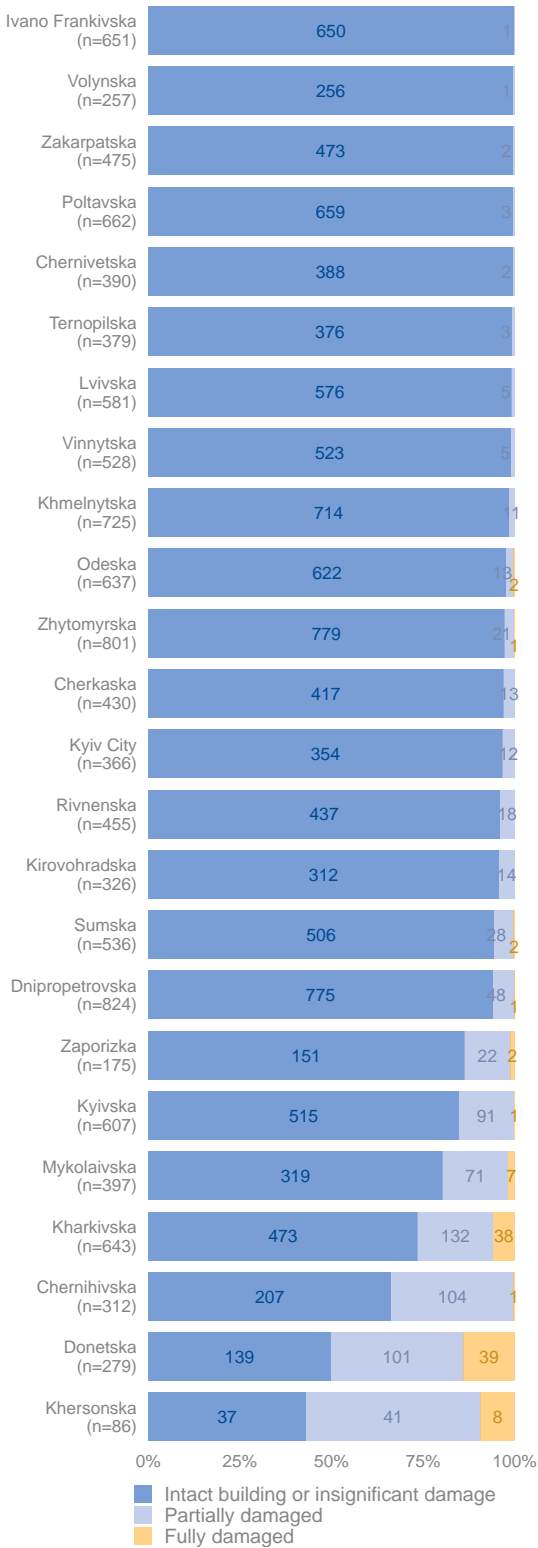
(n = 864)



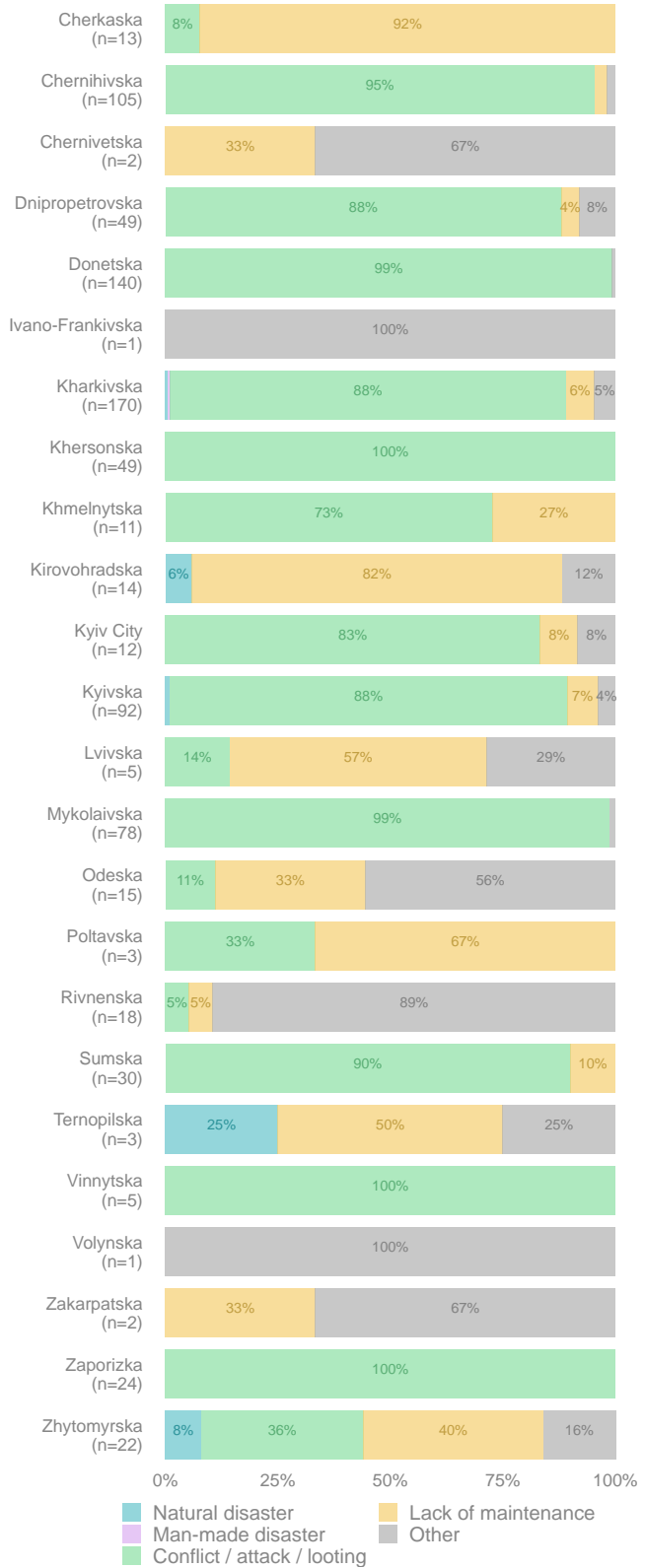
Map excludes HSDUs to avoid overlapping

BUILDING CONDITION

Building condition by oblast*



Main causes of damage by oblast**

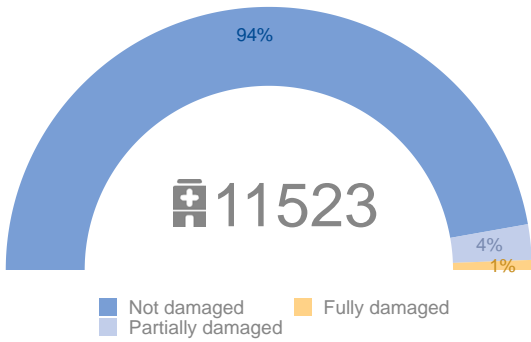


* Chart excludes health facilities without permanent structures

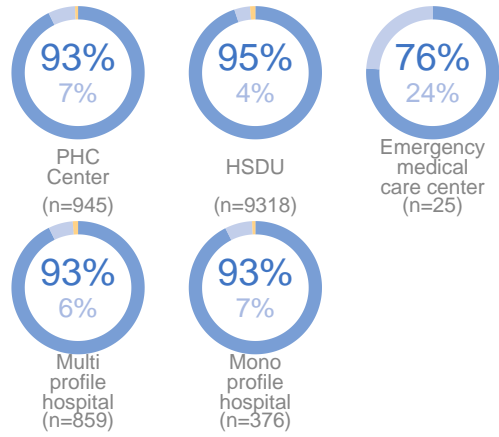
** Chart includes health facilities in which causes of damage were indicated

EQUIPMENT CONDITION

Equipment condition overview

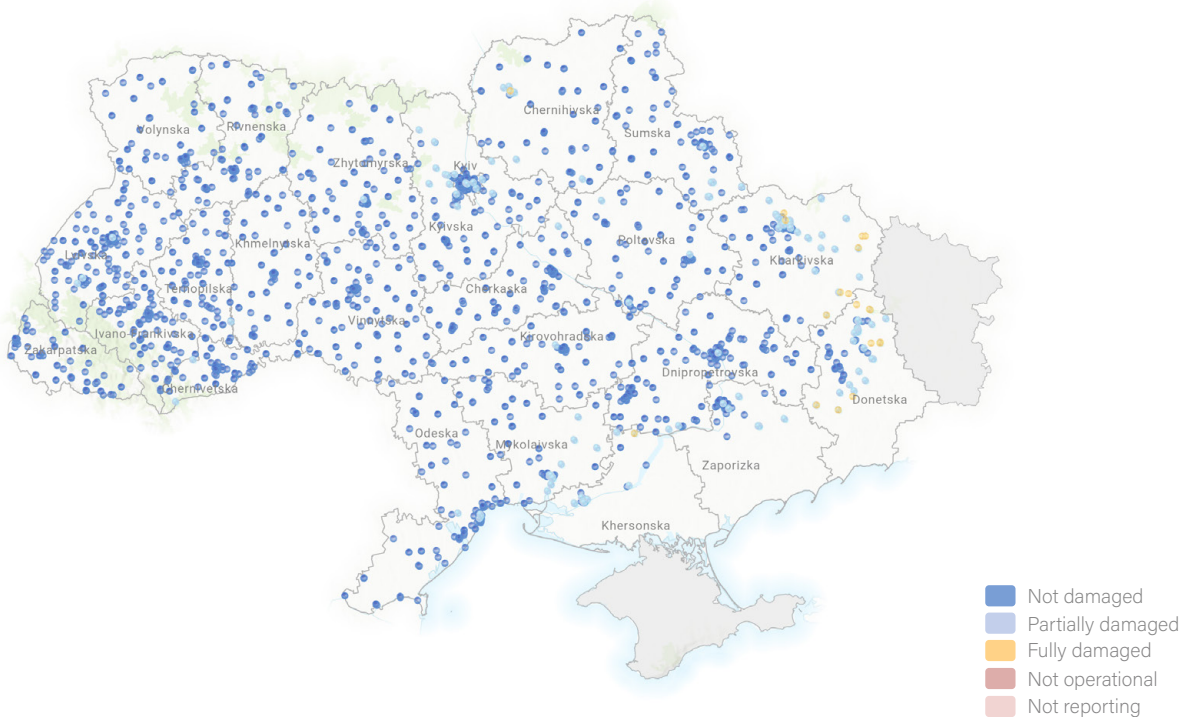


Equipment condition by health facility type



Main causes of damage

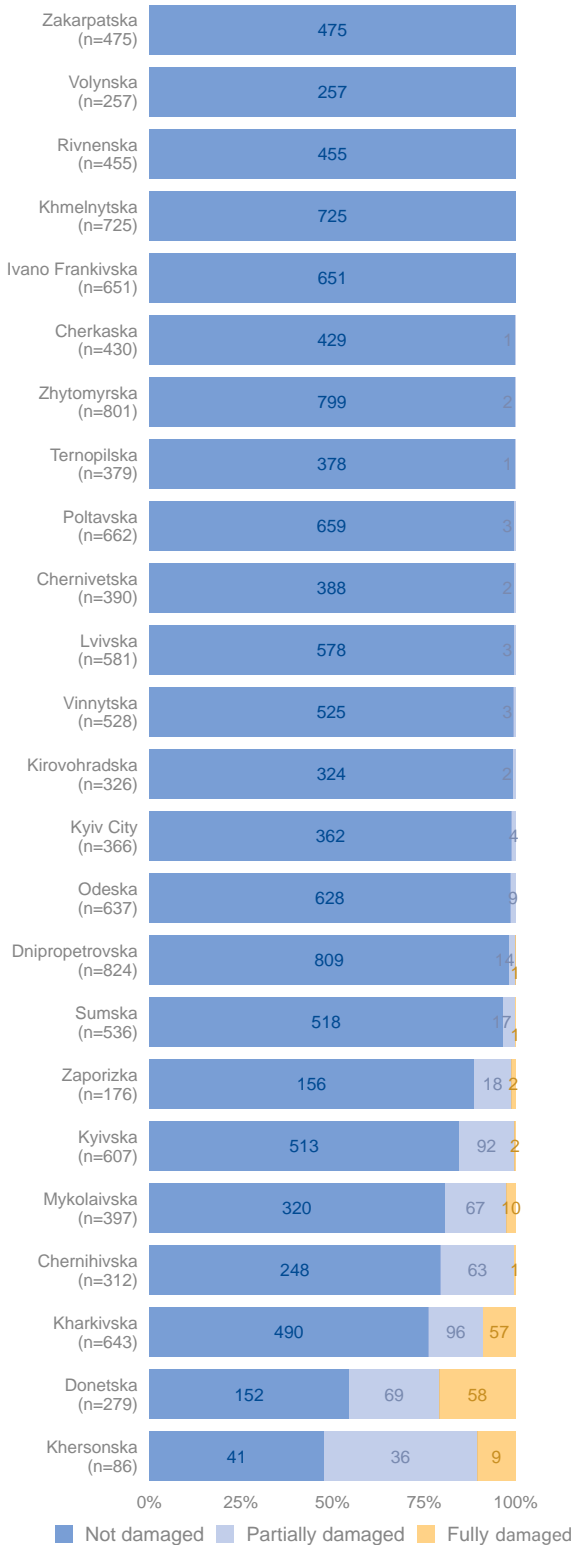
(n = 642)



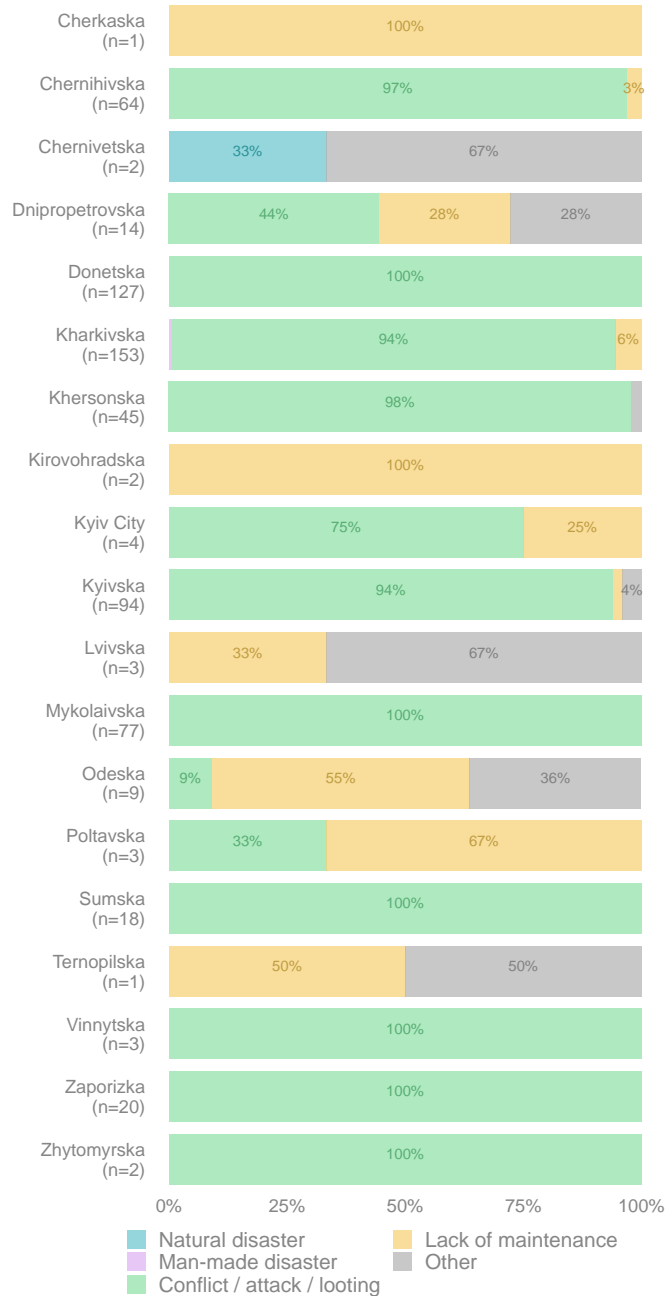
Map excludes HSDUs to avoid overlapping

EQUIPMENT CONDITION

Equipment condition by oblast



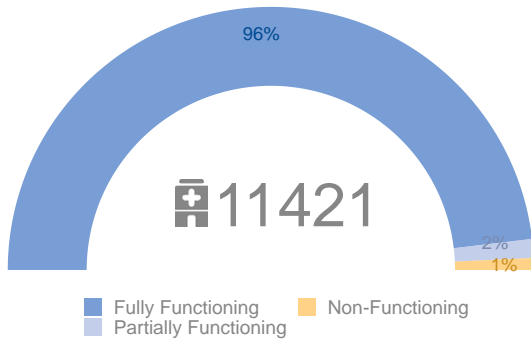
Main causes of damage by oblast*



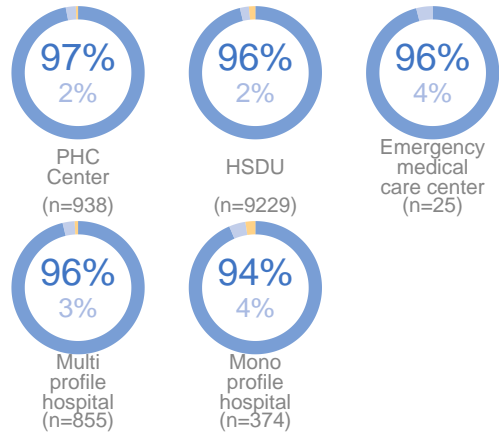
* Chart includes health facilities in which causes of damage were indicated

FUNCTIONALITY

Functionality overview

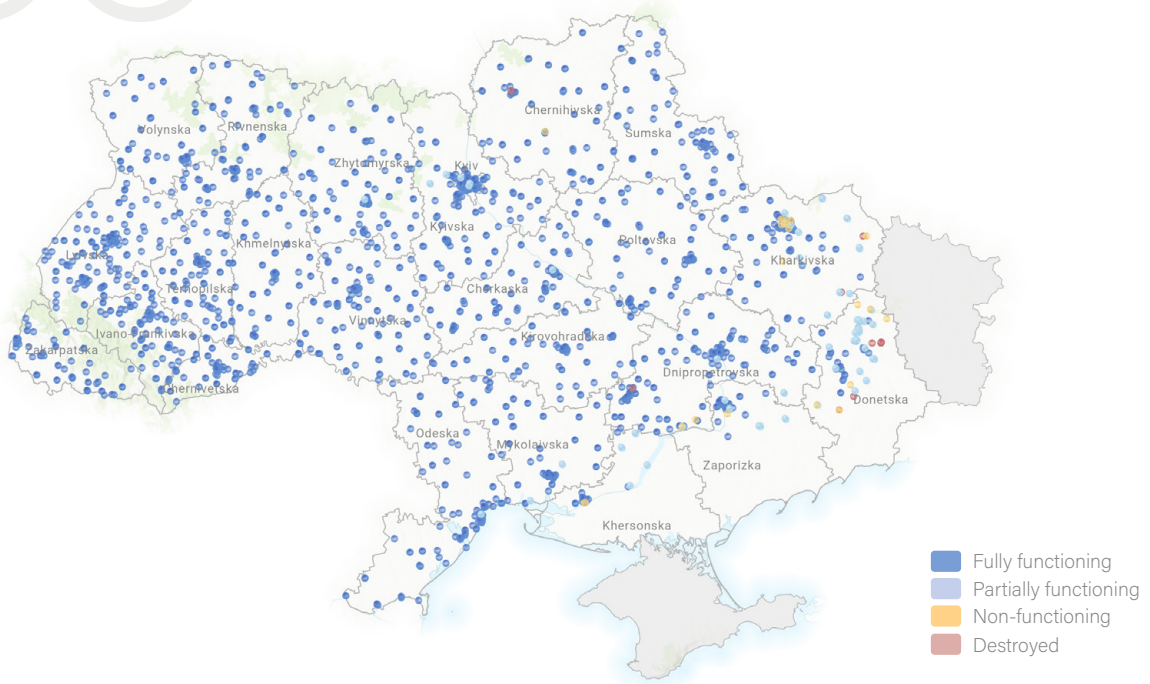
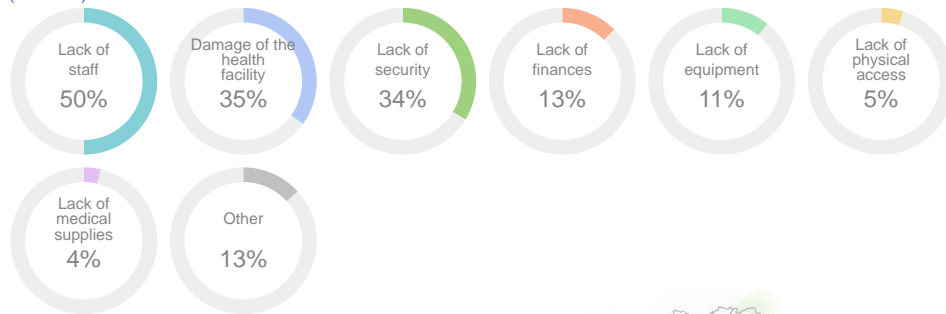


Functionality by health facility type



Main causes of non-functionality

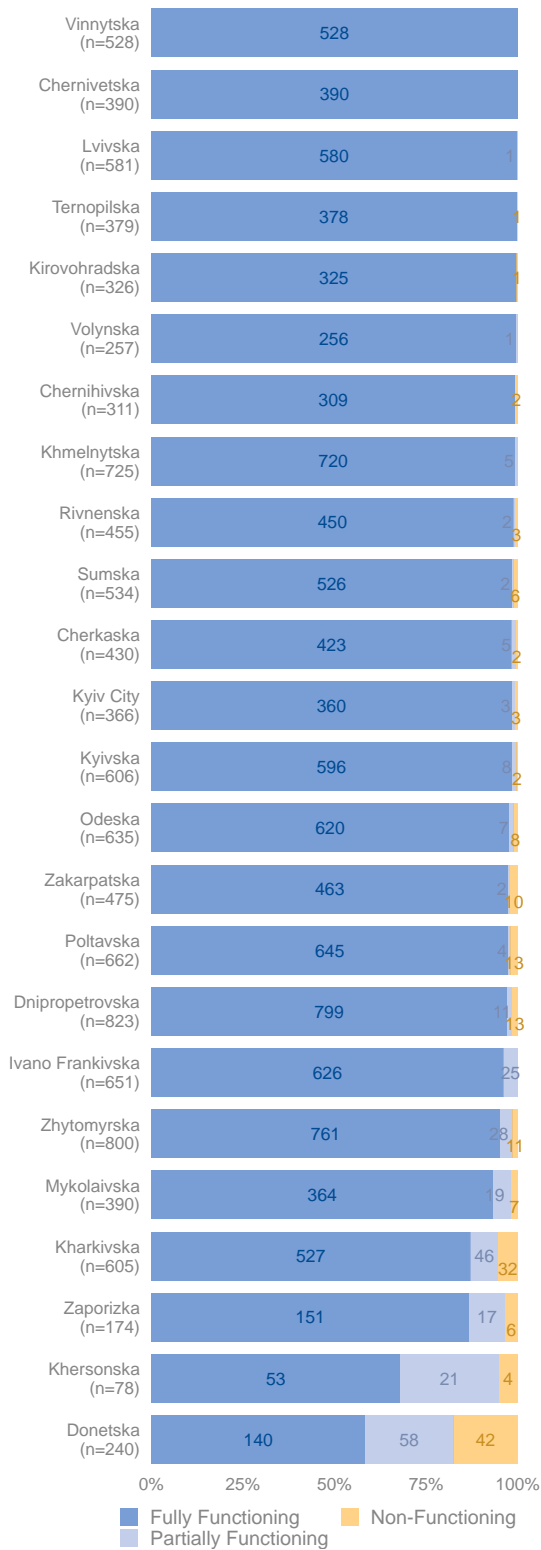
(n = 430)



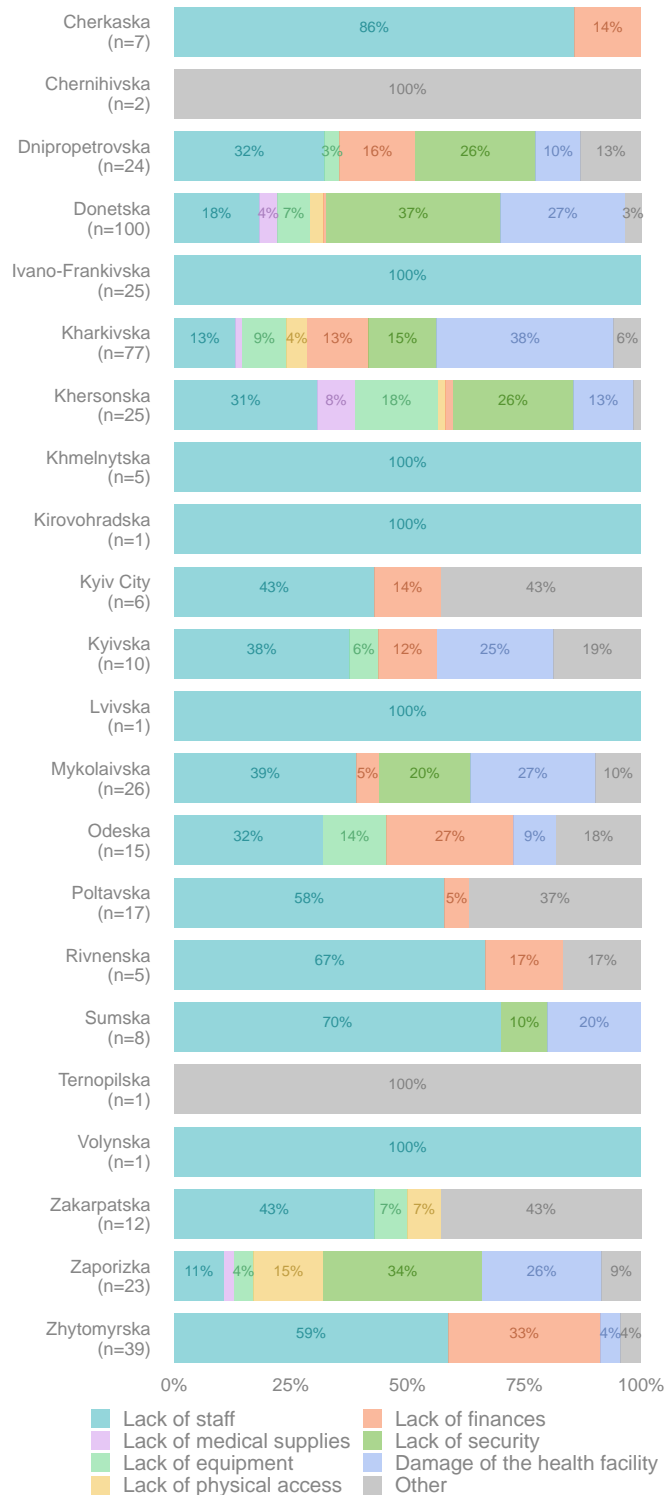
Map excludes HSDUs to avoid overlapping

FUNCTIONALITY

Functionality by oblast



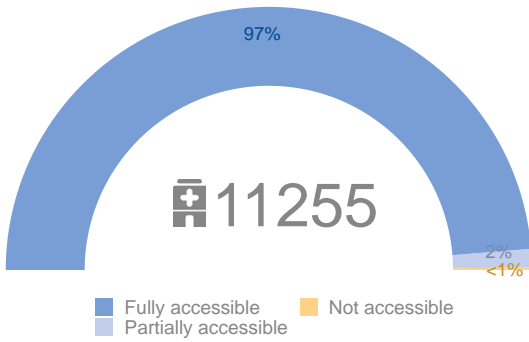
Main causes of non-functionality by oblast*



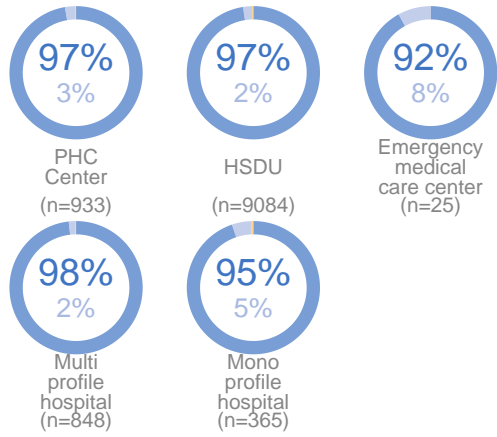
* Chart includes health facilities in which causes of non-functionality were indicated

ACCESSIBILITY

Accessibility overview

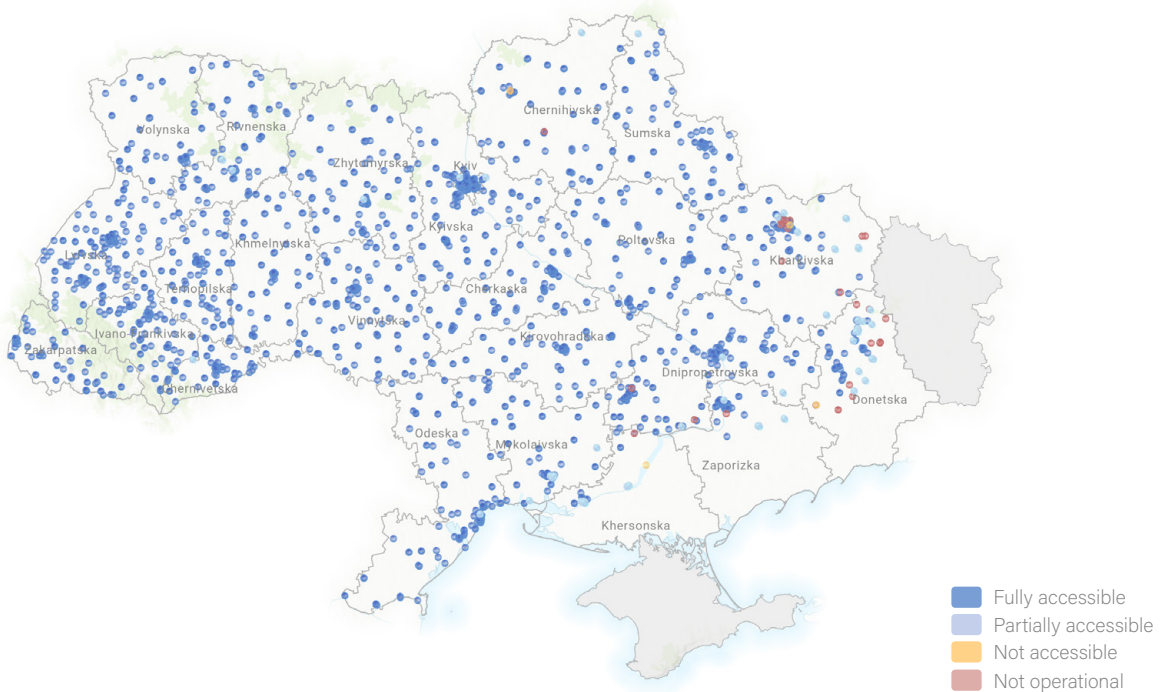
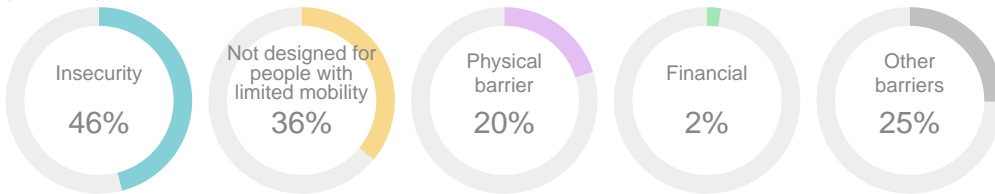


Accessibility by health facility type



Main causes of inaccessibility

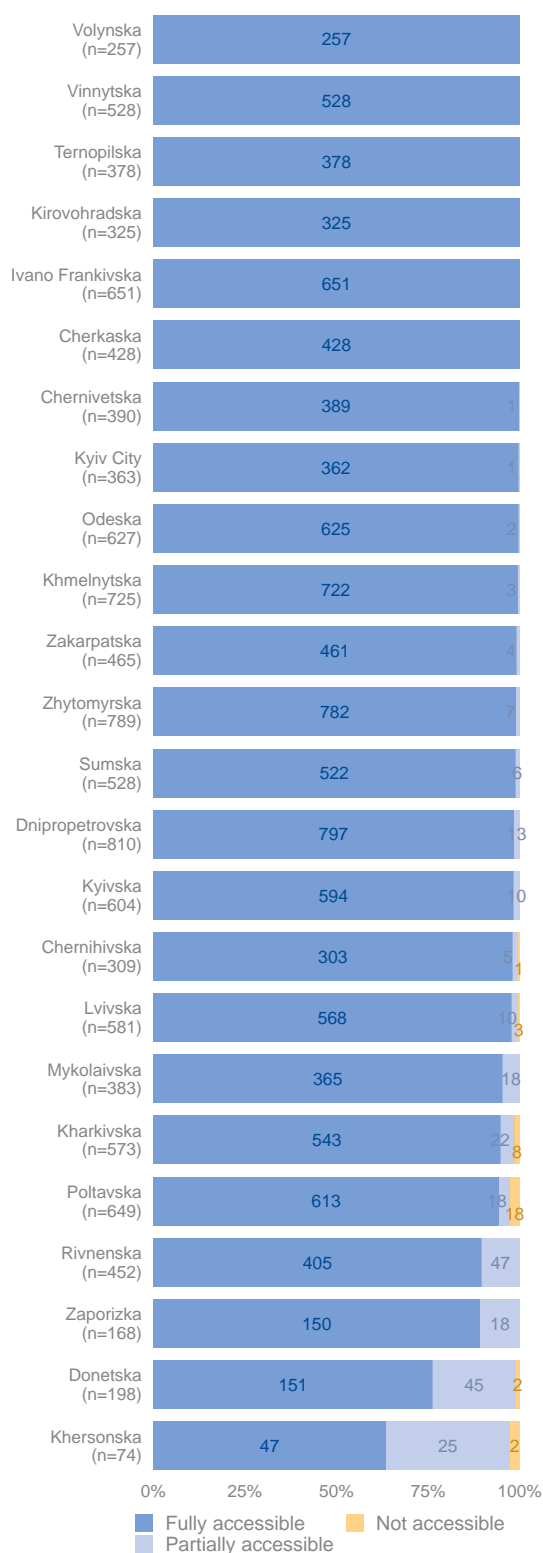
(n = 289)



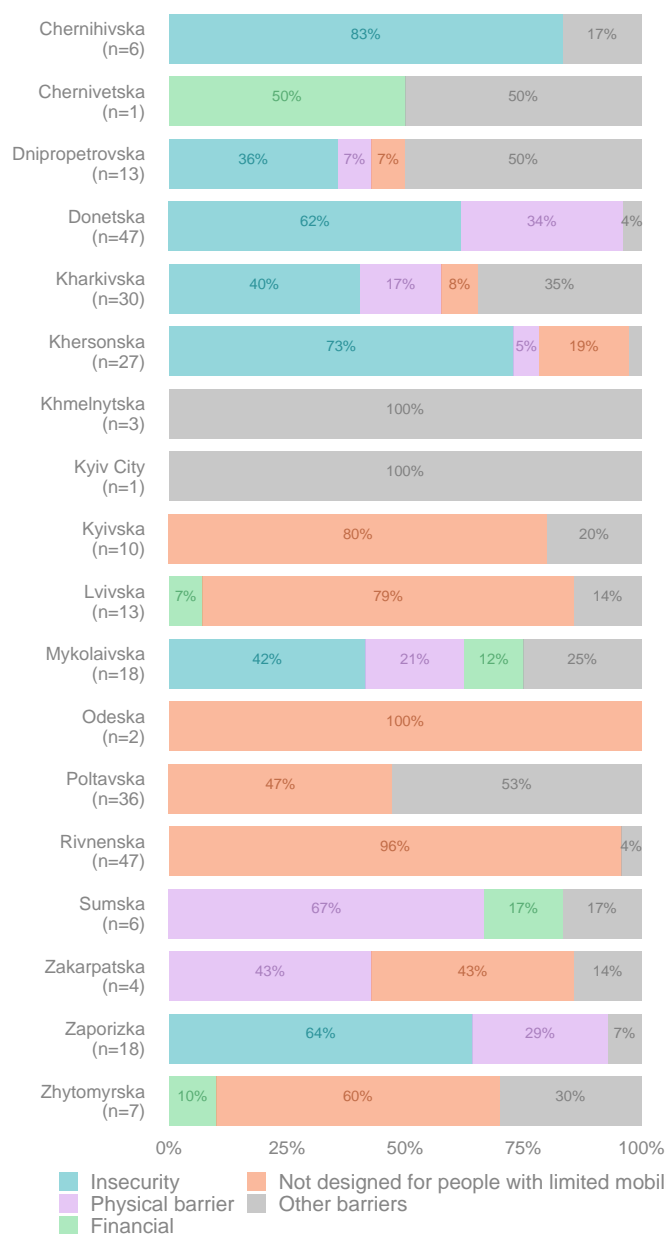
Map excludes HSDUs to avoid overlapping

ACCESSIBILITY

Accessibility by oblast



Main causes of inaccessibility by oblast*



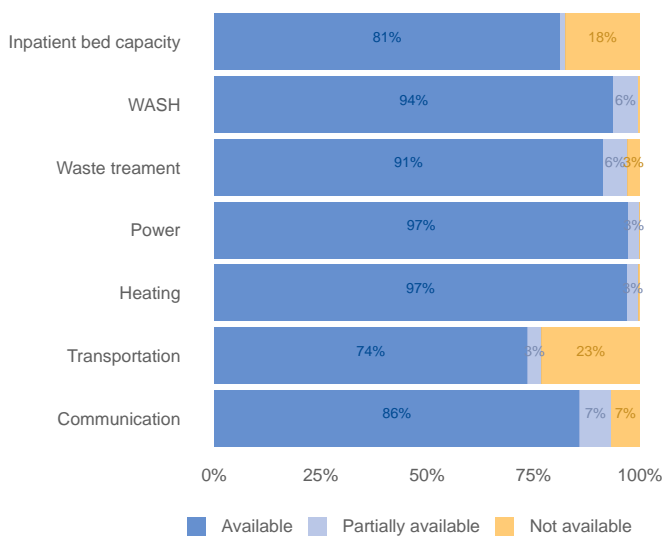
* Chart includes health facilities in which causes of inaccessibility were indicated

BASIC AMENITIES

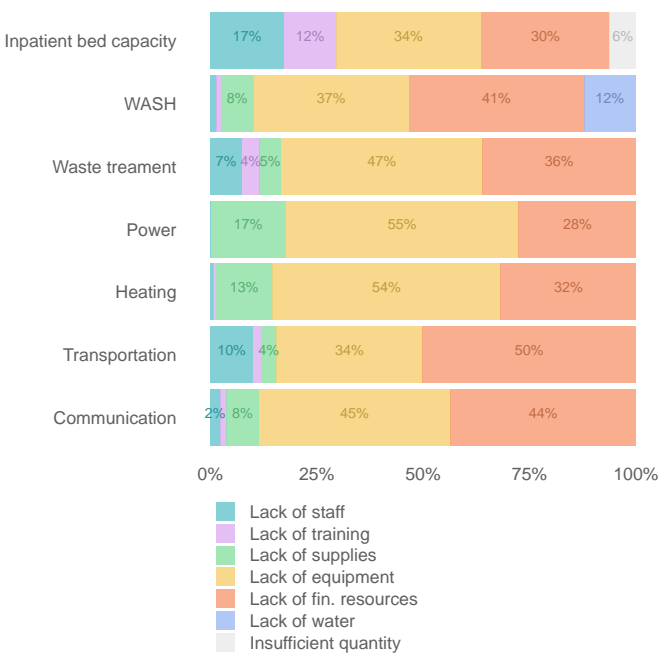


BASIC AMENITIES OVERVIEW*

Availability of basic amenities by groups



Main causes of unavailability

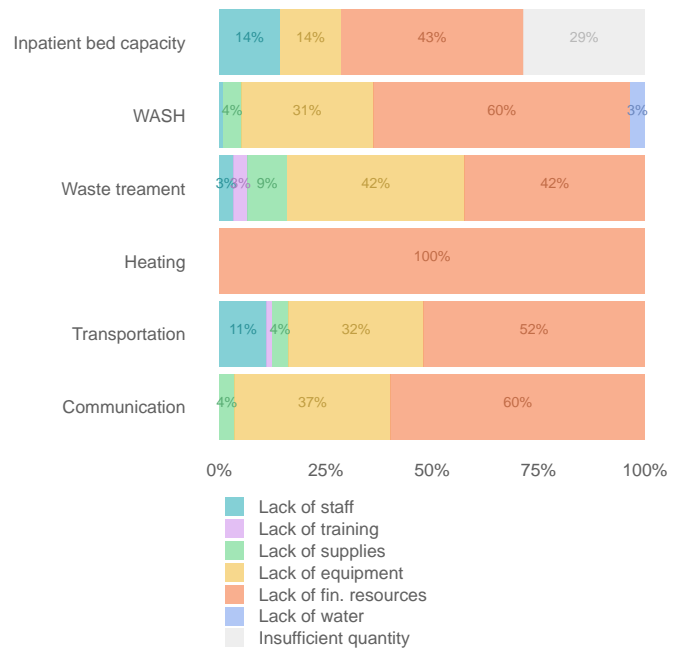
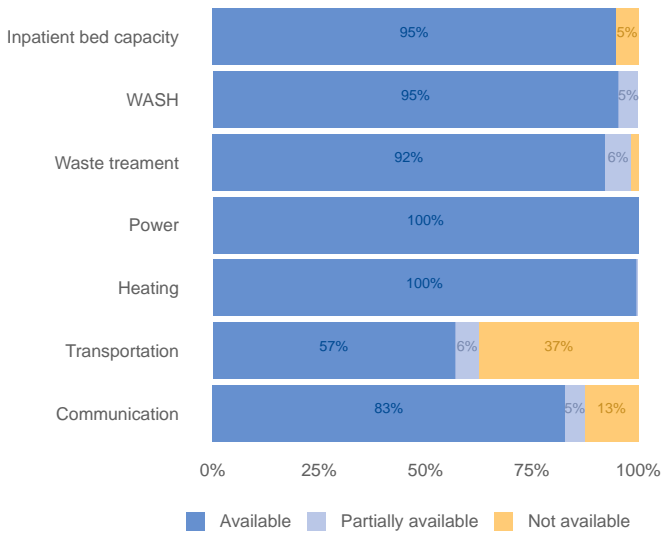


* Groups include the following indicators:

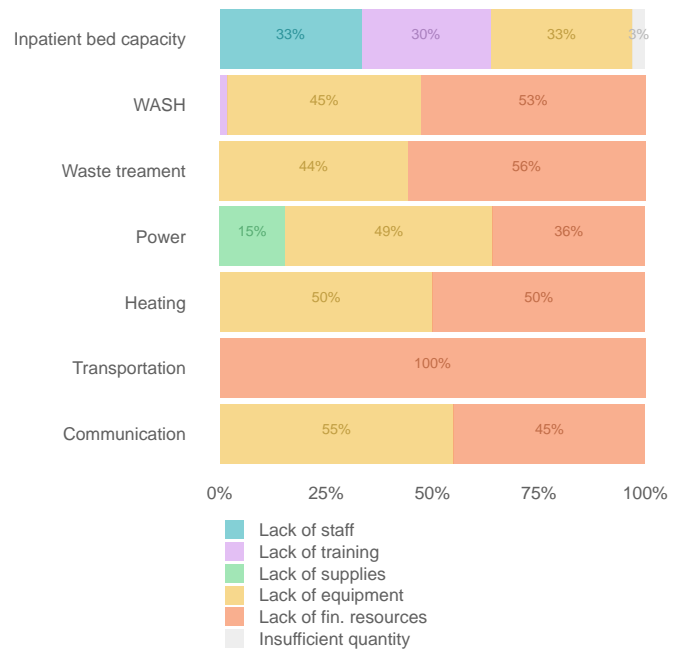
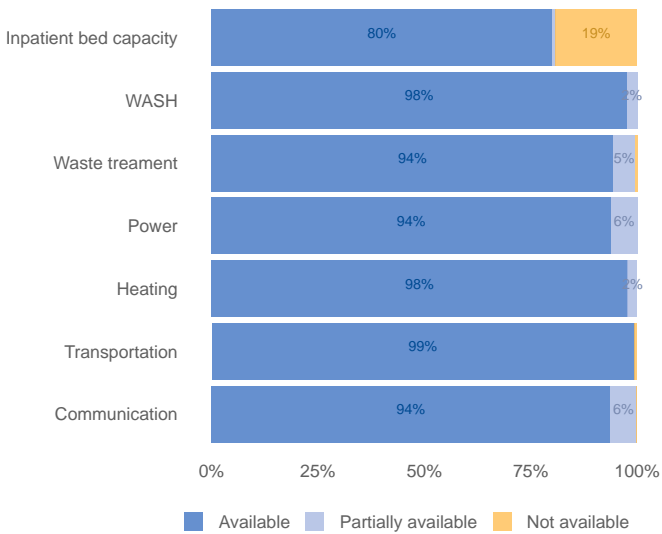
Group	Indicators
Inpatient bed capacity	ICU beds; Maternity beds; Other beds
WASH	Water availability; Availability of sanitation facilities; Availability of hand-hygiene facilities; Availability of cleaning equipment
Waste treatment	Waste segregation; Final disposal of sharps; Final disposal of infectious waste
Power	Power availability
Heating	Heating availability
Transportation	Transportation availability
Communication	Communications Equipment Sufficiency; Connectivity

BASIC AMENITIES OVERVIEW BY OBLASTS

Cherkaska

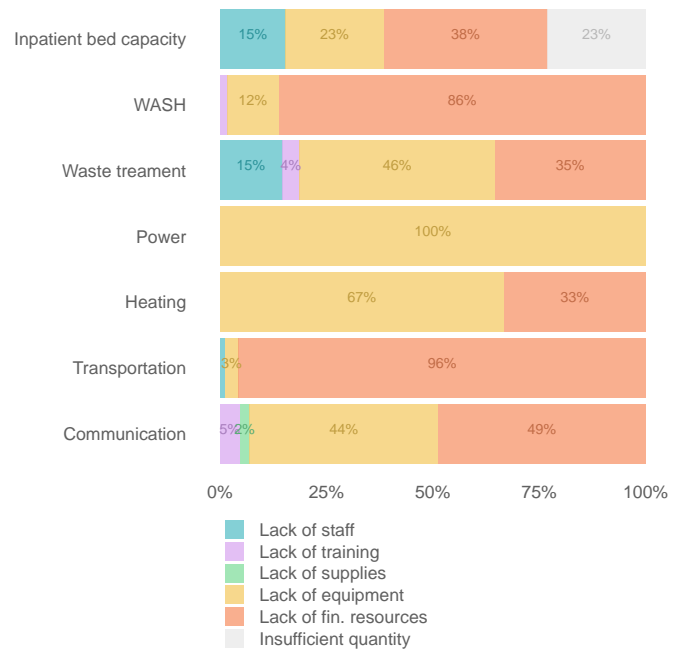
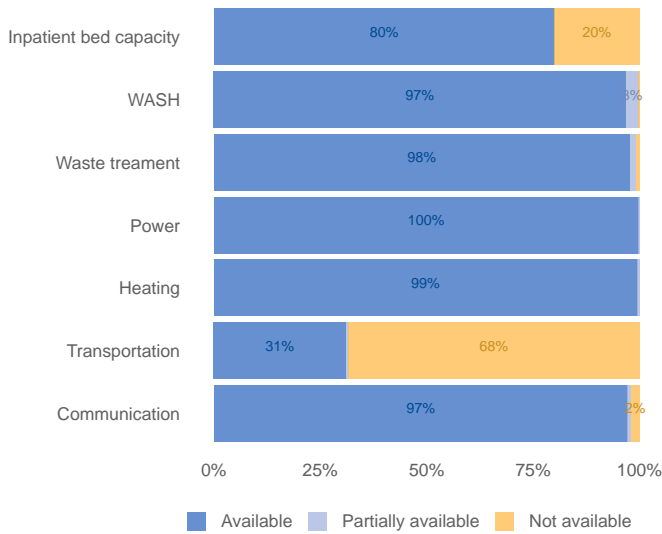


Chernihivska

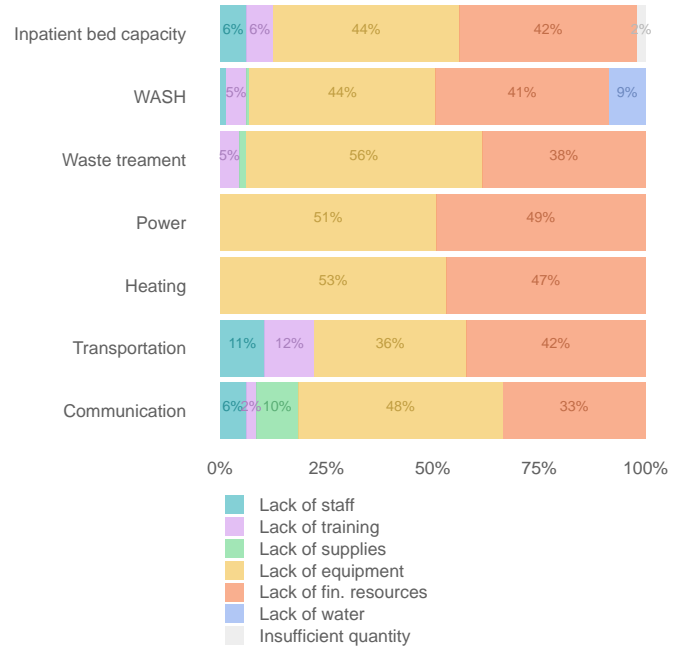
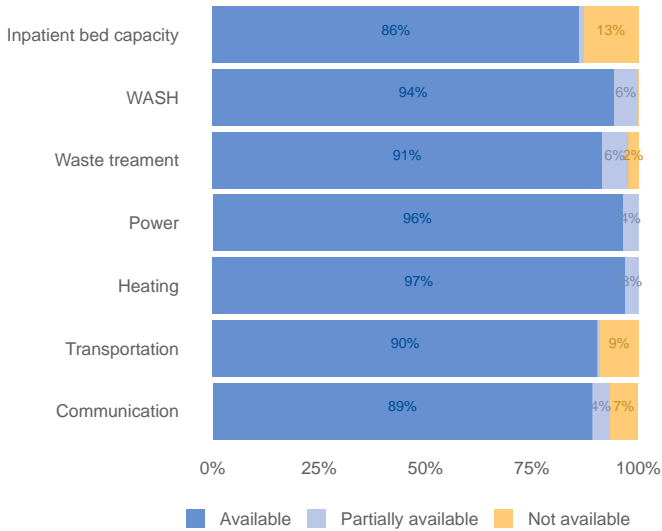


BASIC AMENITIES OVERVIEW BY OBLASTS

Chernivetska

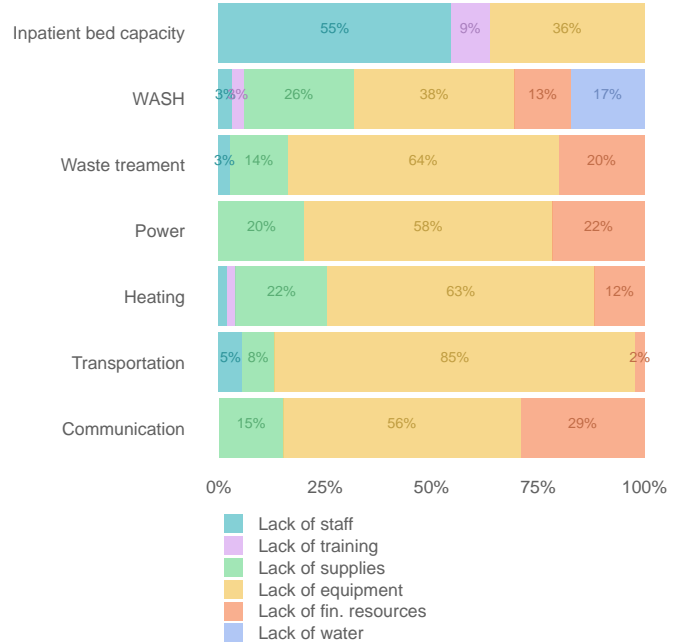
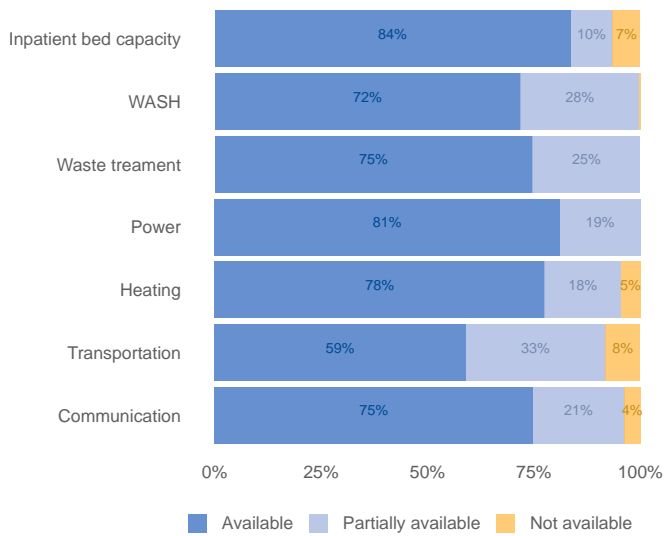


Dnipropetrovska

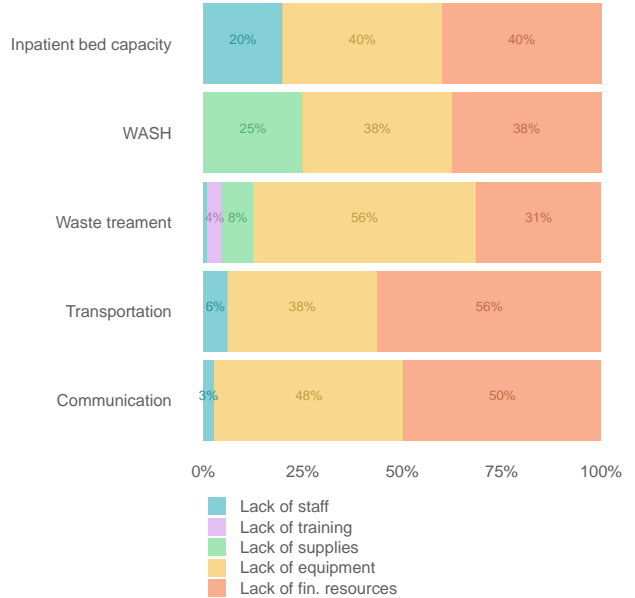
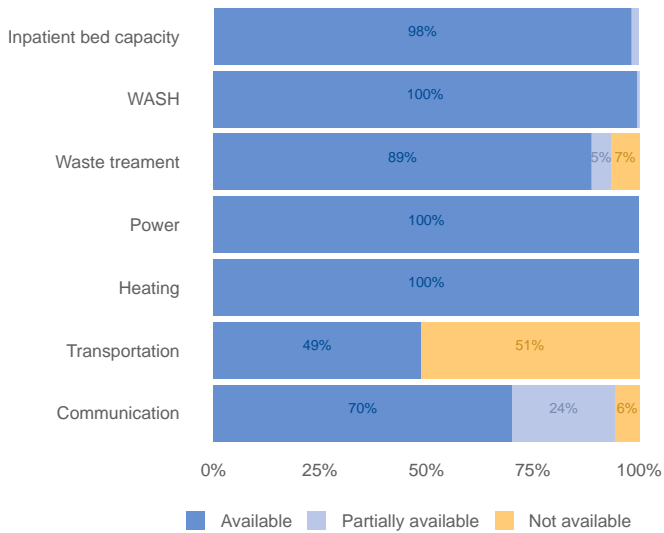


BASIC AMENITIES OVERVIEW BY OBLASTS

Donetska

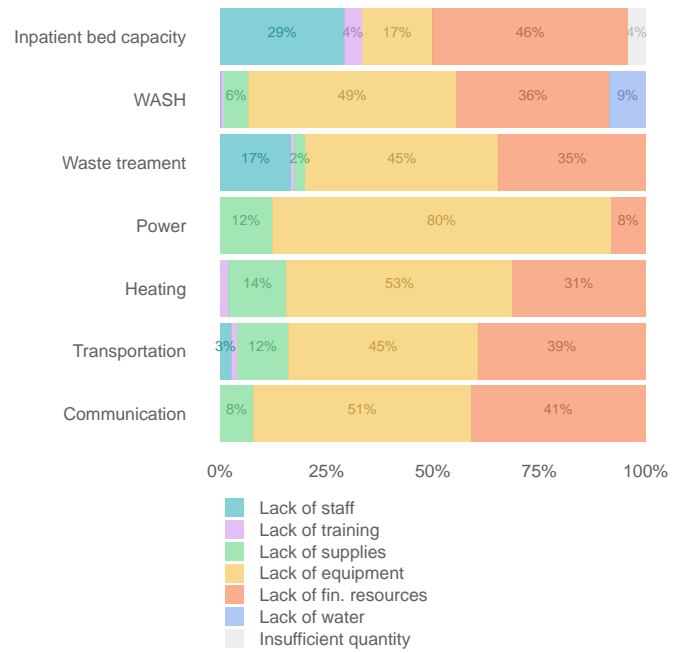
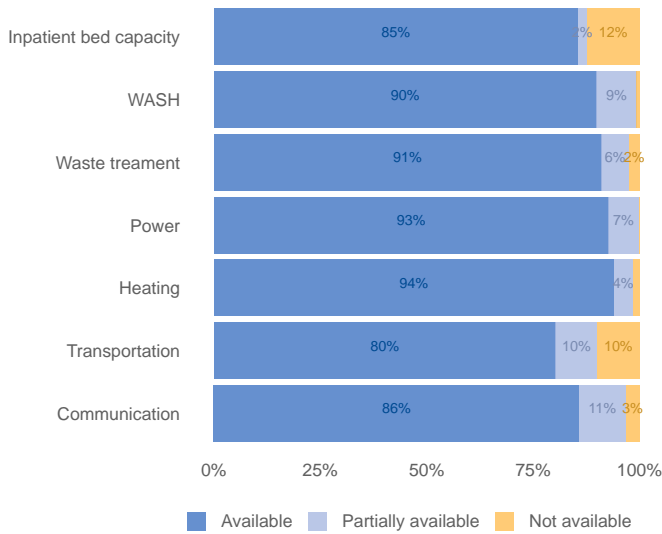


Ivano-Frankivska

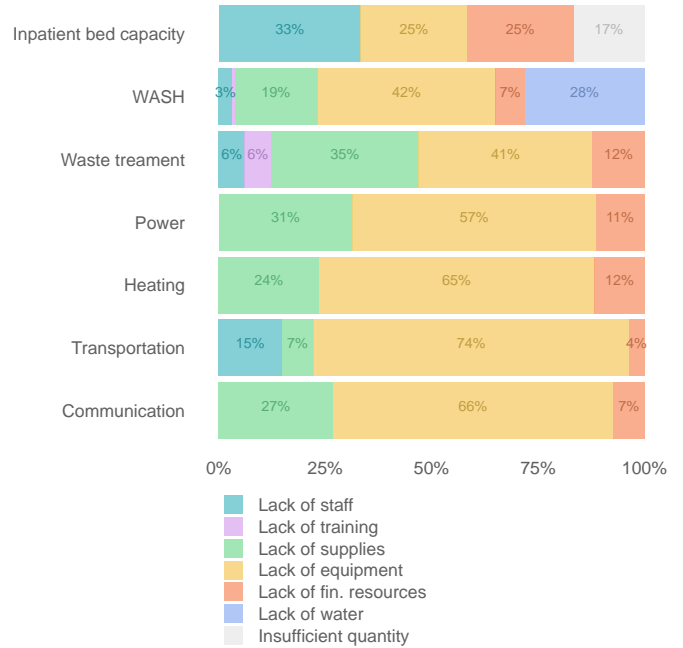
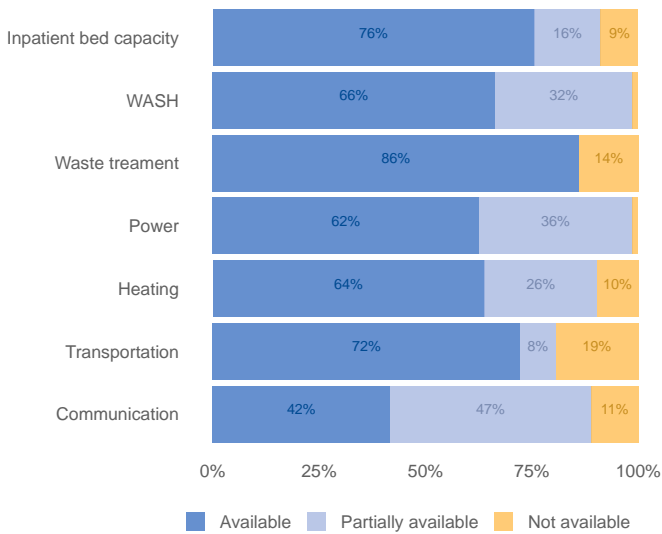


BASIC AMENITIES OVERVIEW BY OBLASTS

Kharkivska

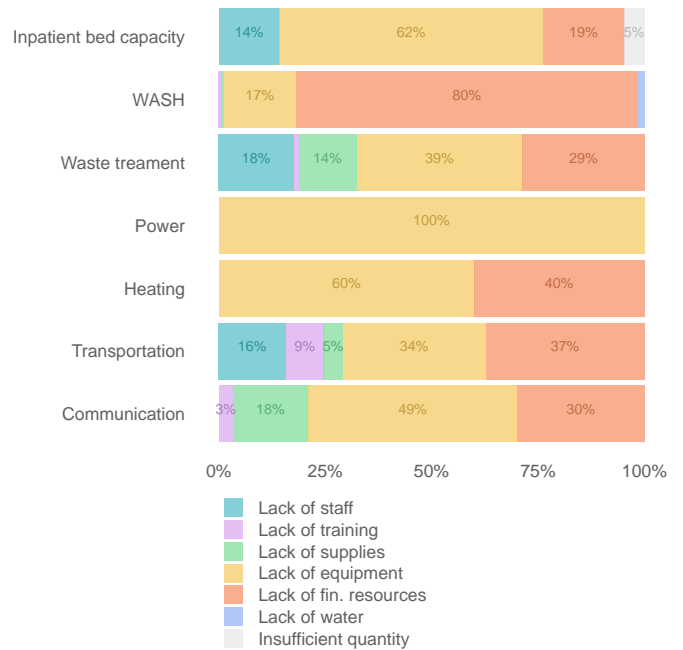
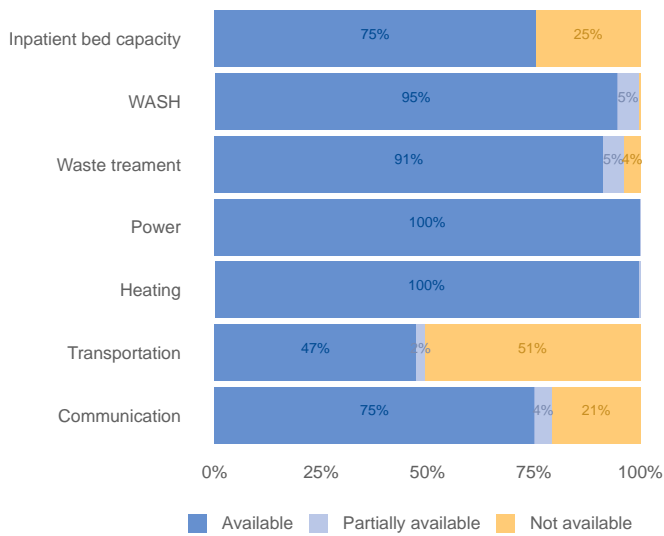


Khersonska

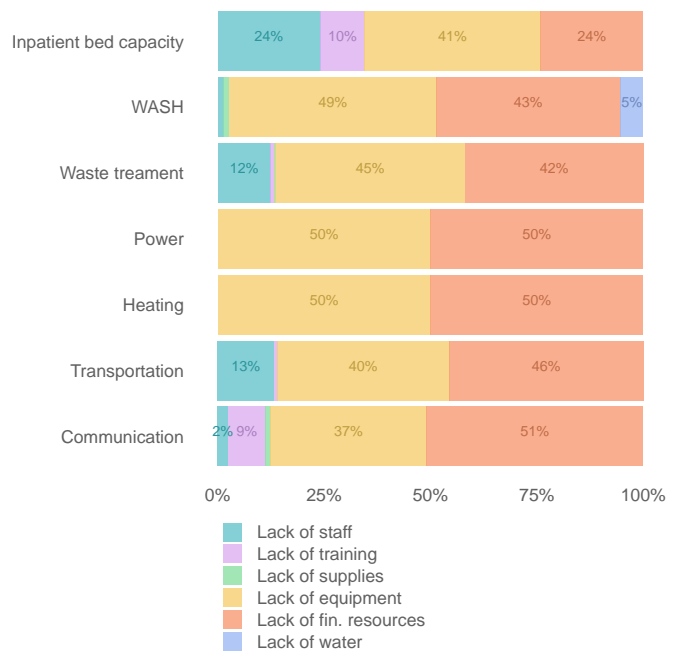
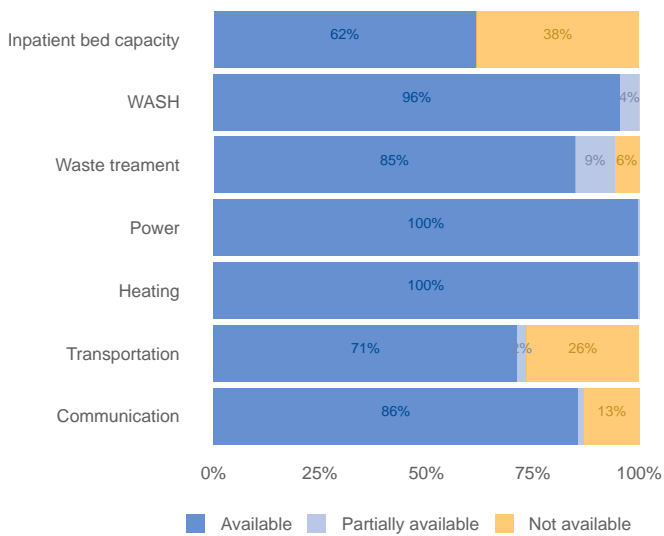


BASIC AMENITIES OVERVIEW BY OBLASTS

Khmelnyska

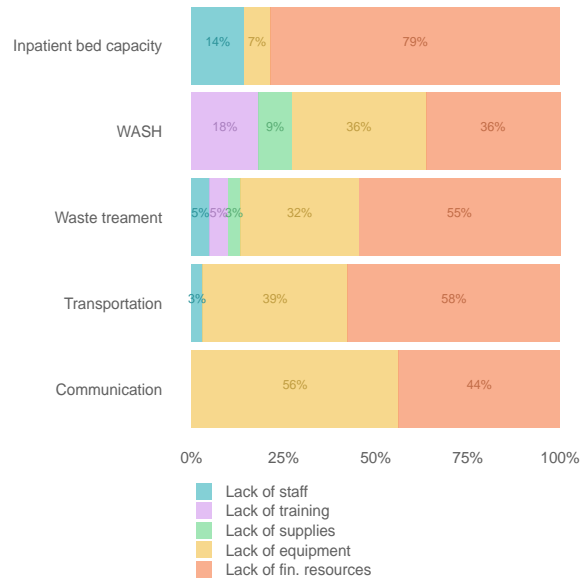
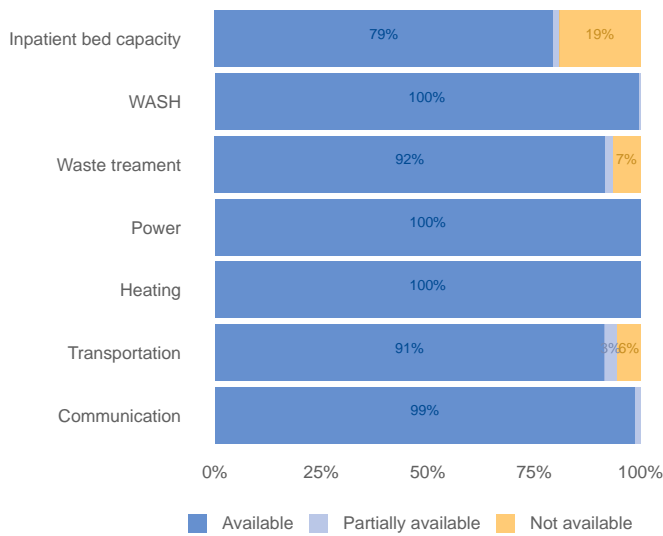


Kirovohradska

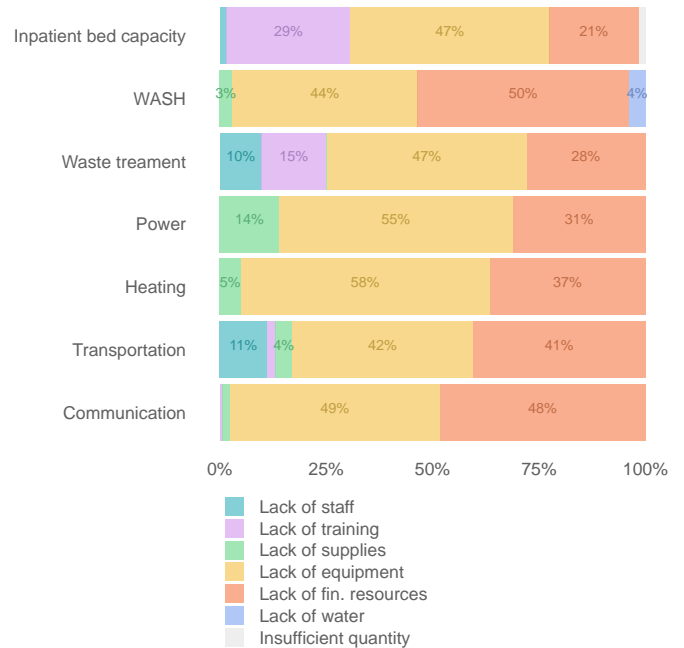
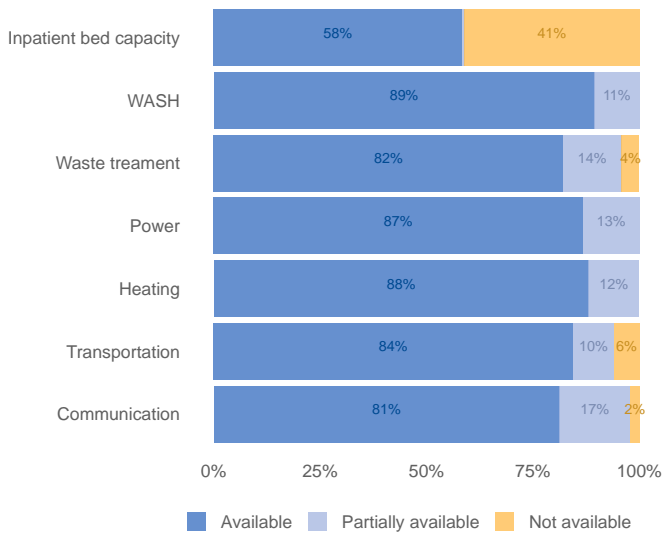


BASIC AMENITIES OVERVIEW BY OBLASTS

Kyiv City

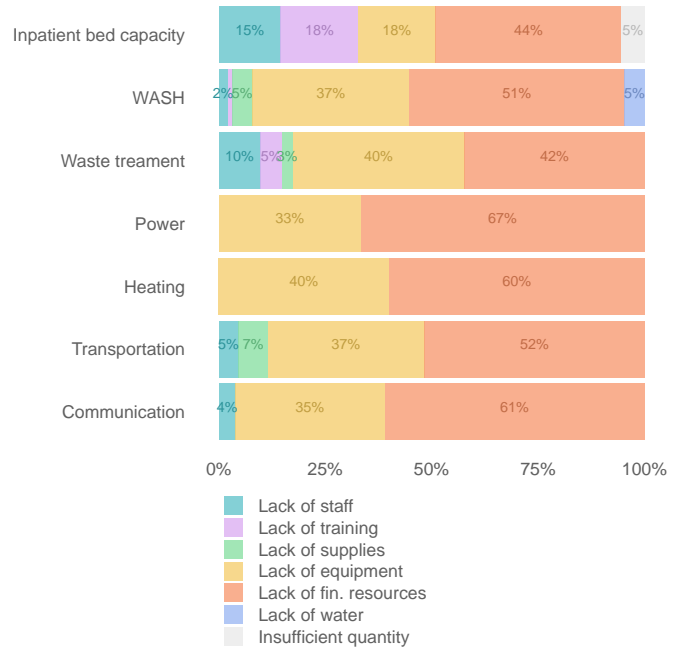
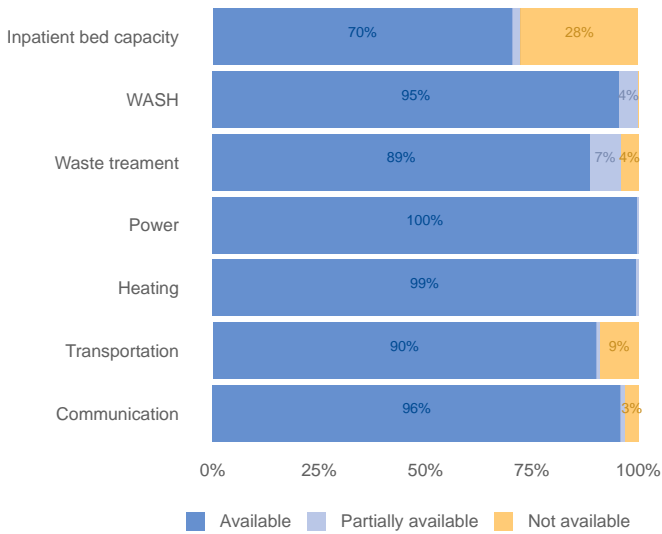


Kyivska

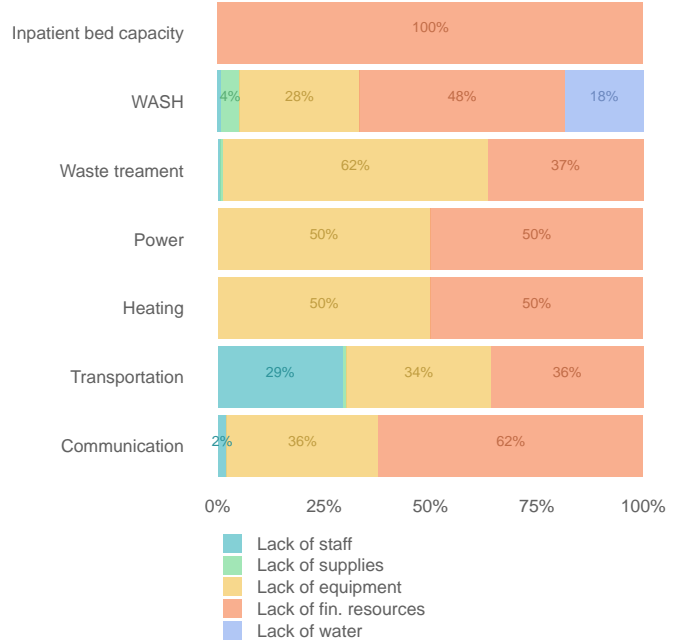
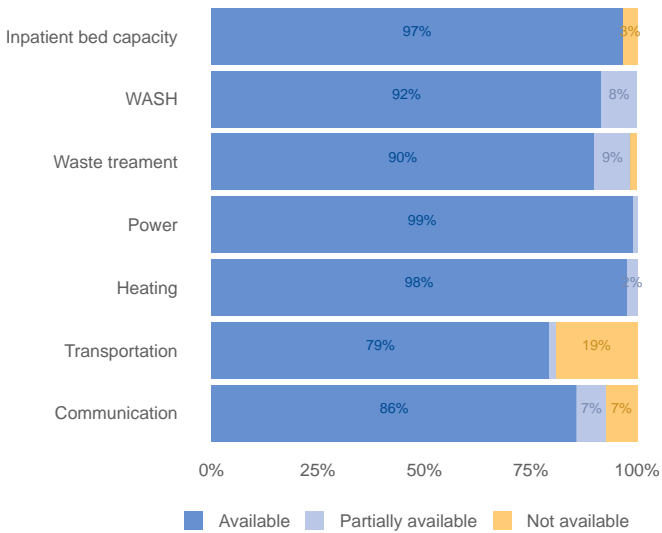


BASIC AMENITIES OVERVIEW BY OBLASTS

Lvivska

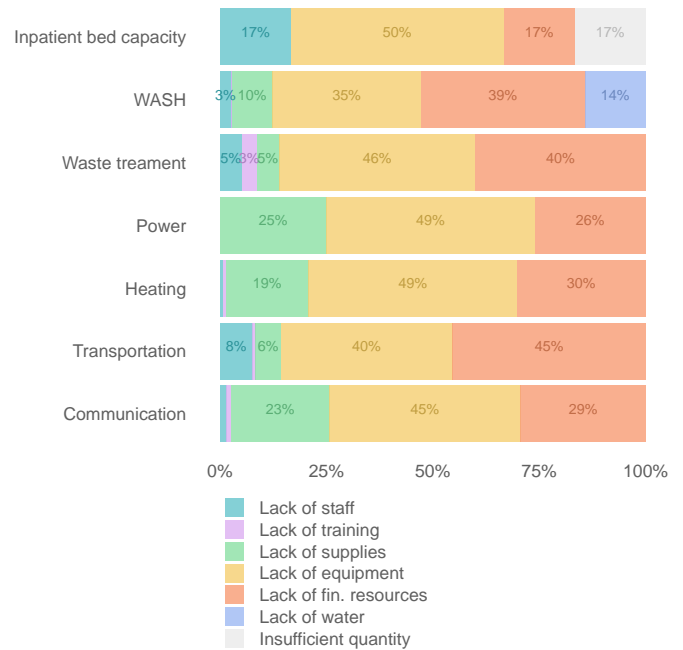
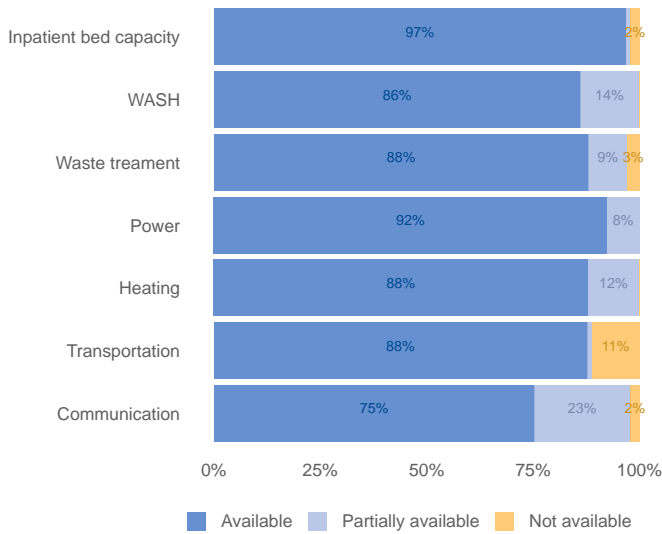


Mykolaivska

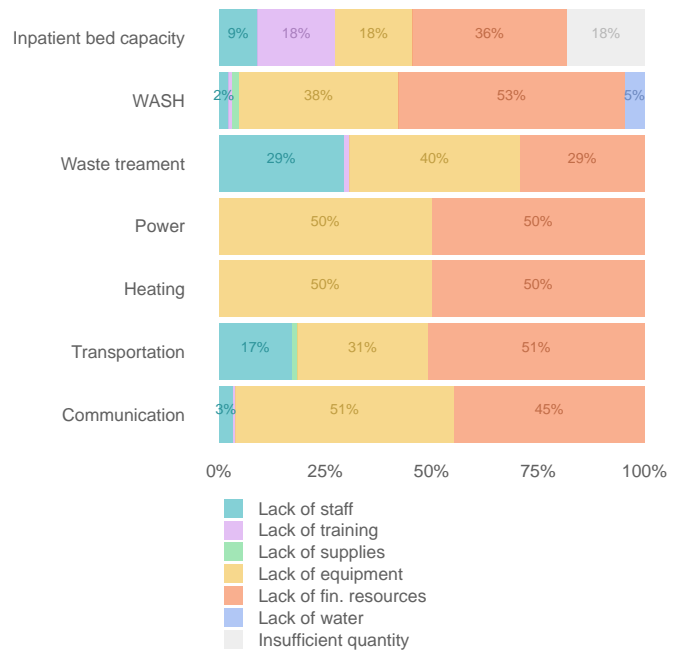
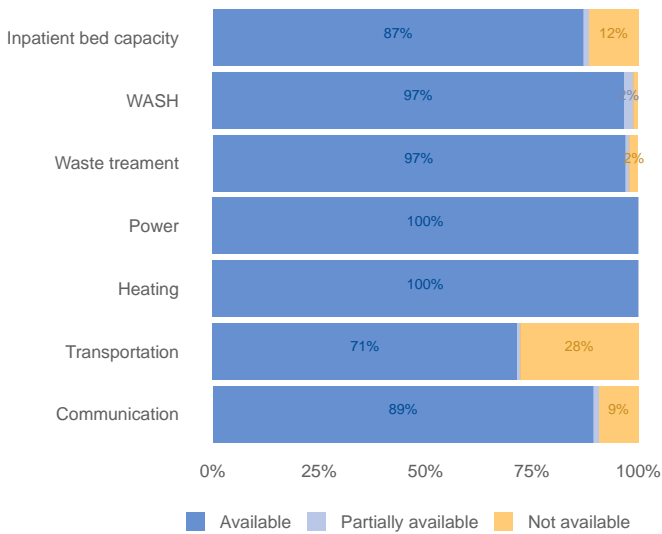


BASIC AMENITIES OVERVIEW BY OBLASTS

Odeska

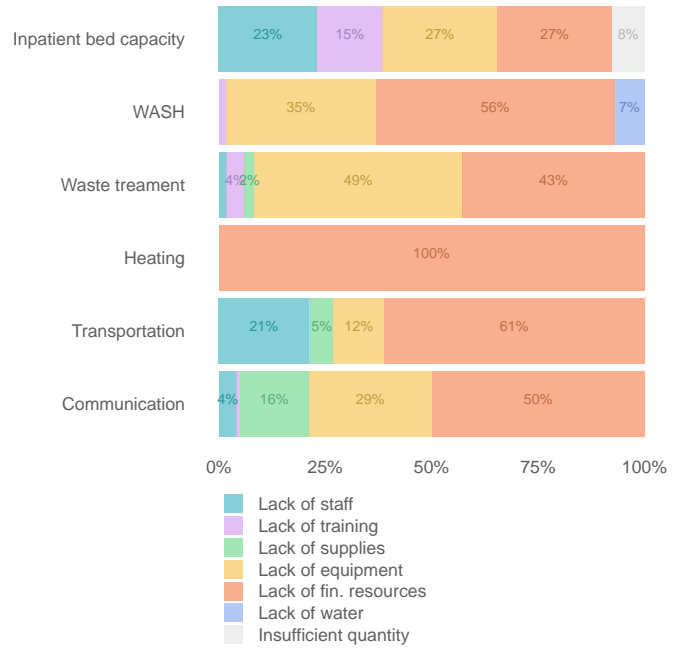
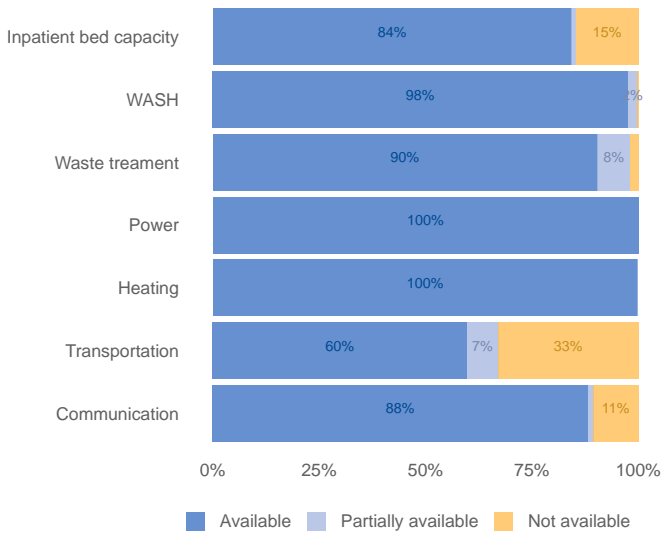


Poltavska

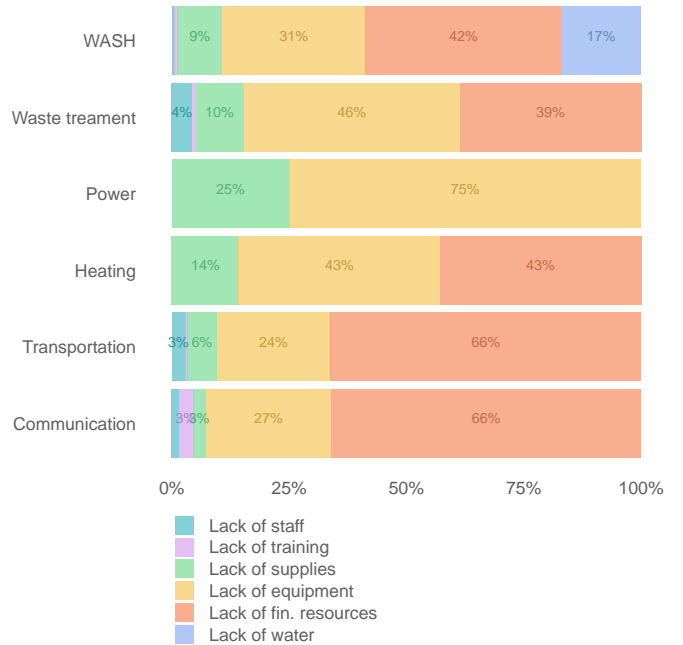
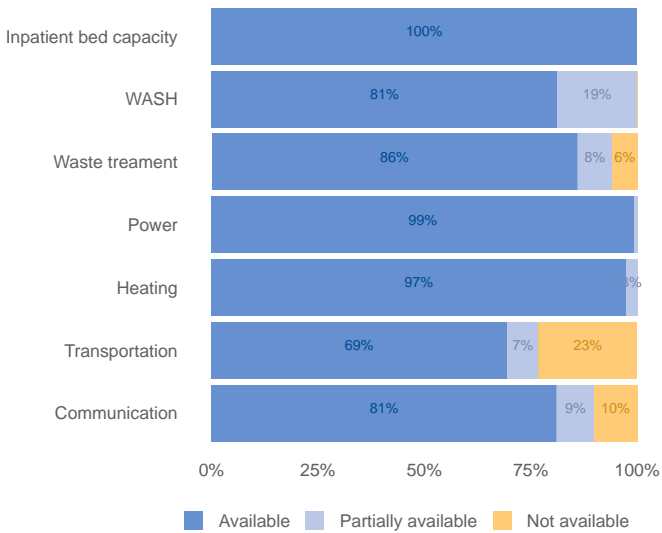


BASIC AMENITIES OVERVIEW BY OBLASTS

Rivnenska

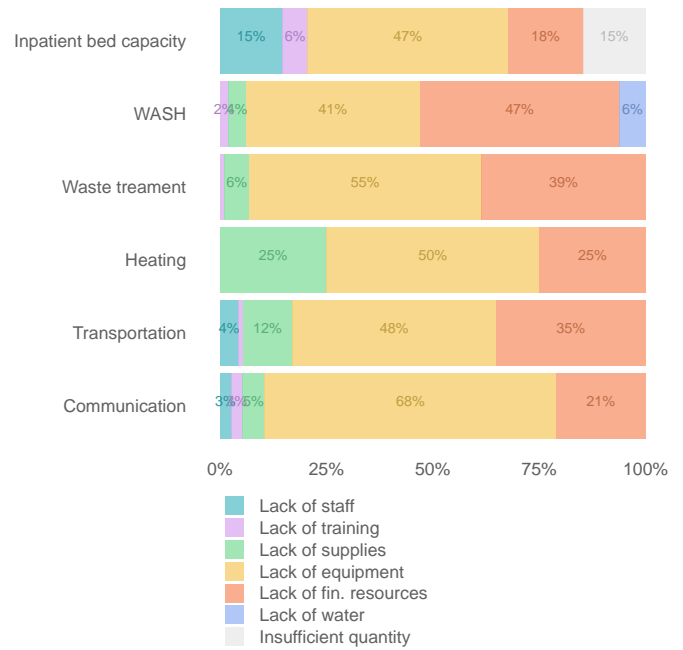
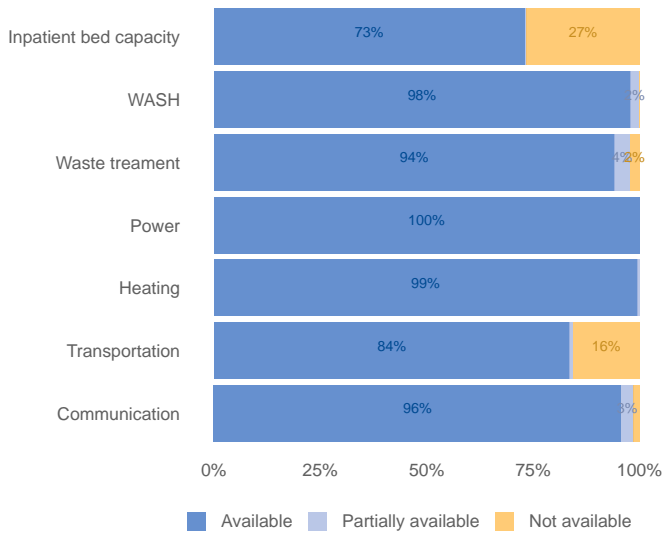


Sumska

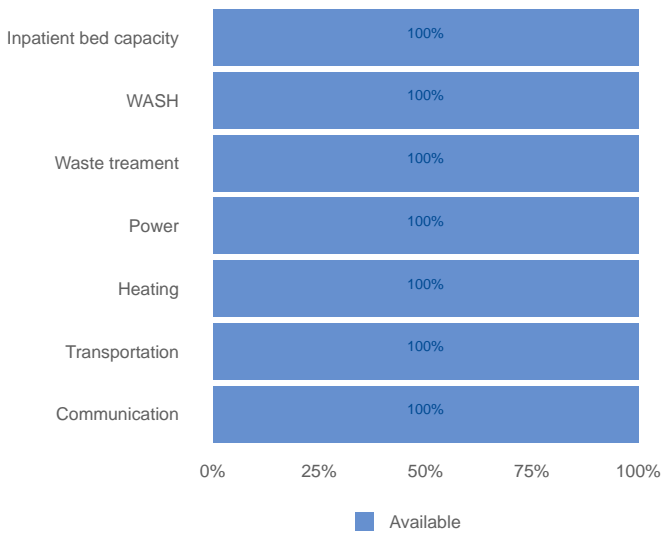


BASIC AMENITIES OVERVIEW BY OBLASTS

Ternopil'ska

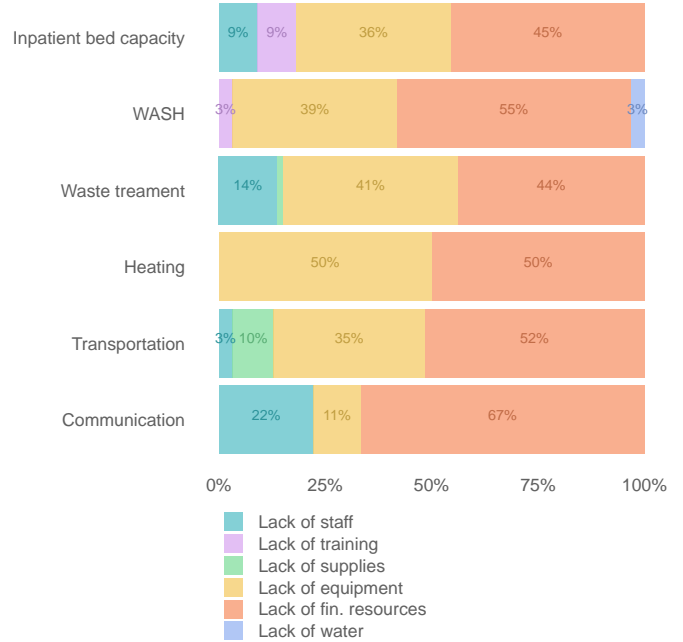
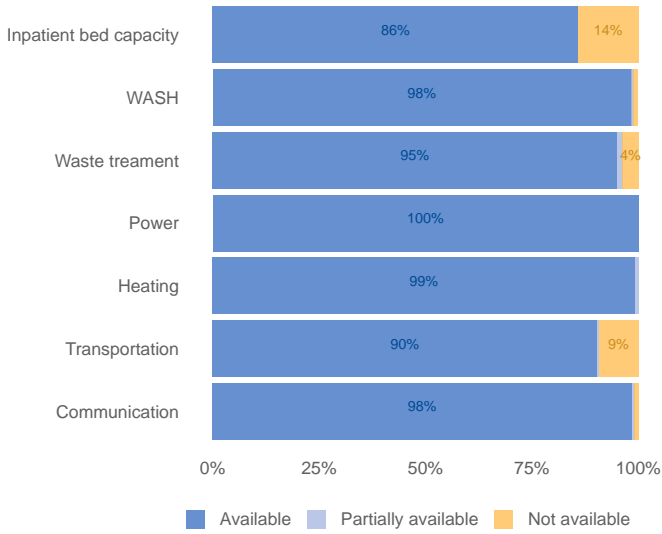


Vinnytska

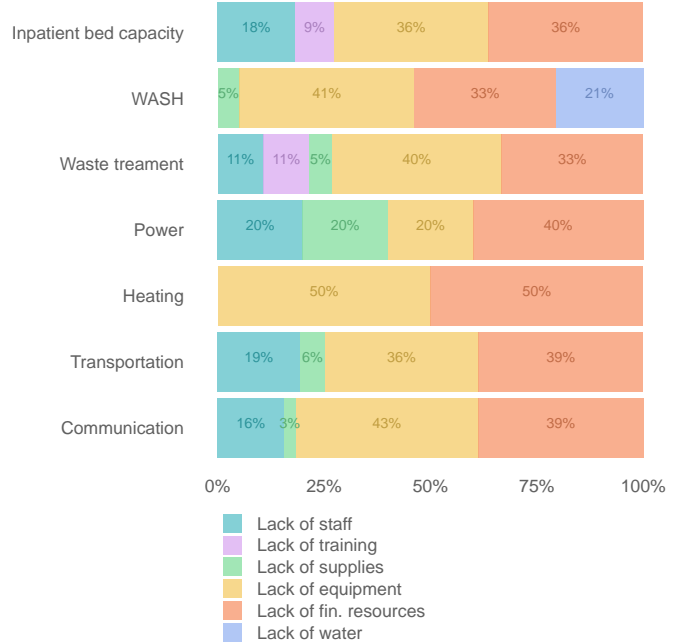
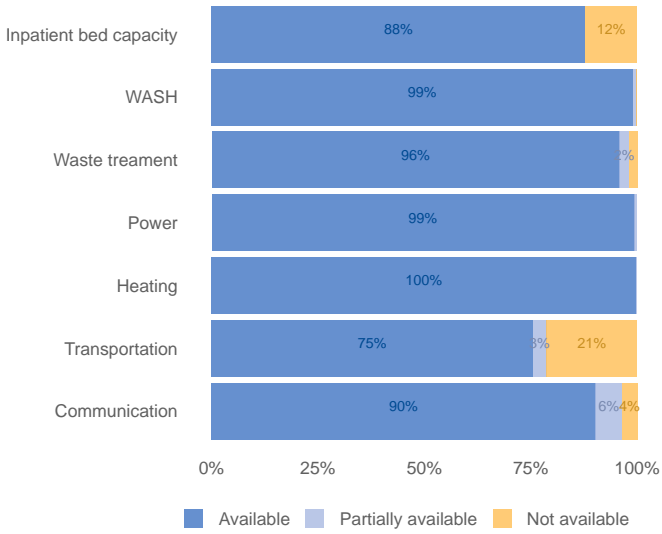


BASIC AMENITIES OVERVIEW BY OBLASTS

Volynska

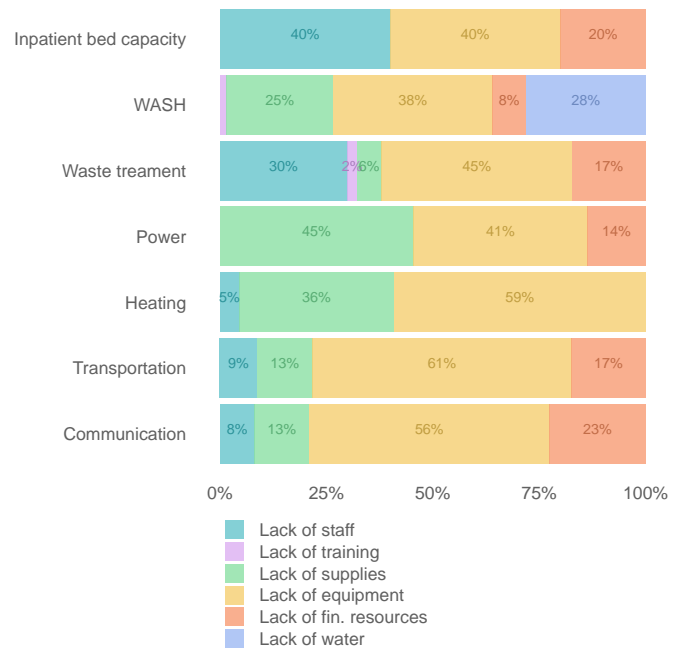
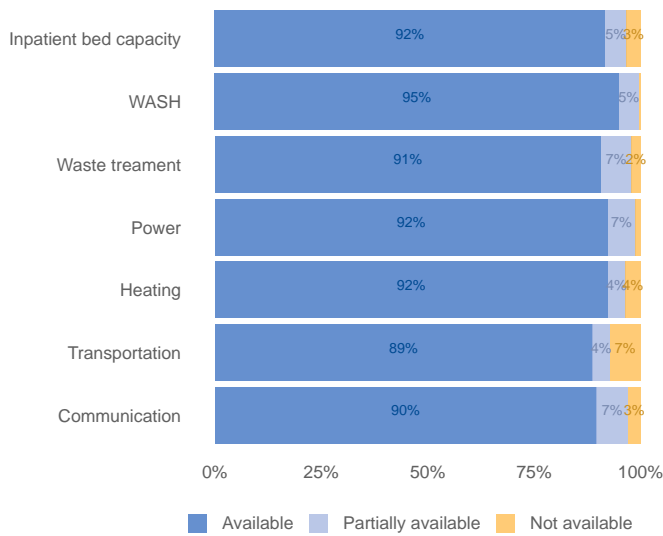


Zakarpatska

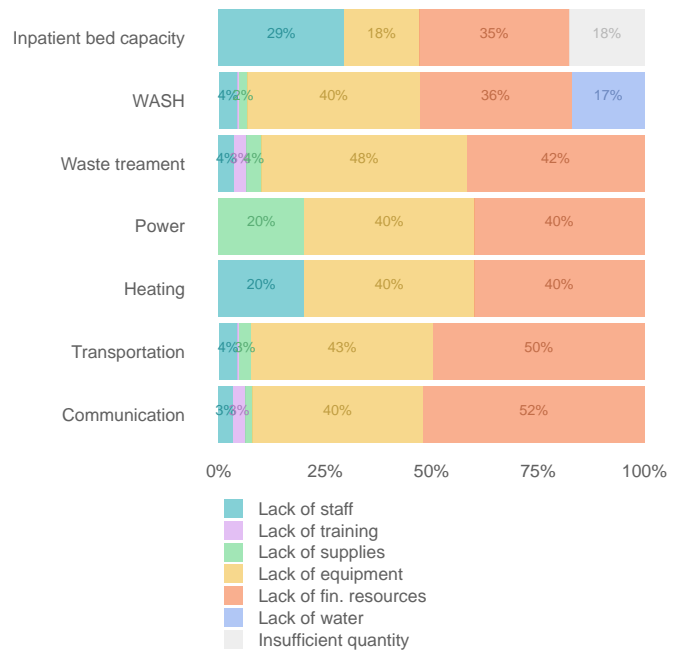
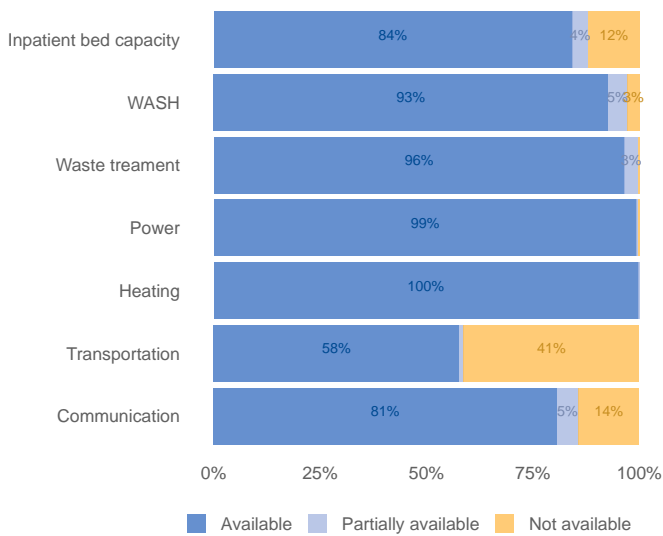


BASIC AMENITIES OVERVIEW BY OBLASTS

Zaporizka

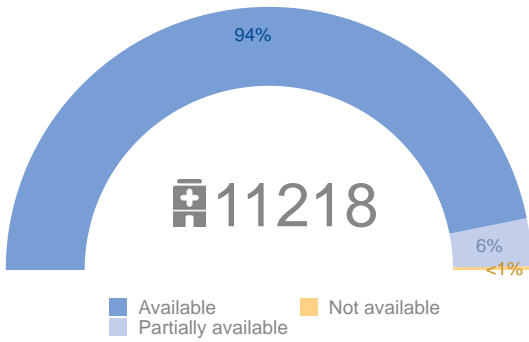


Zhytomyrska

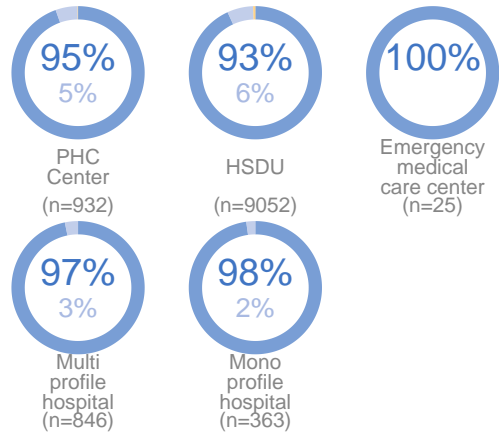


WATER

Water overview

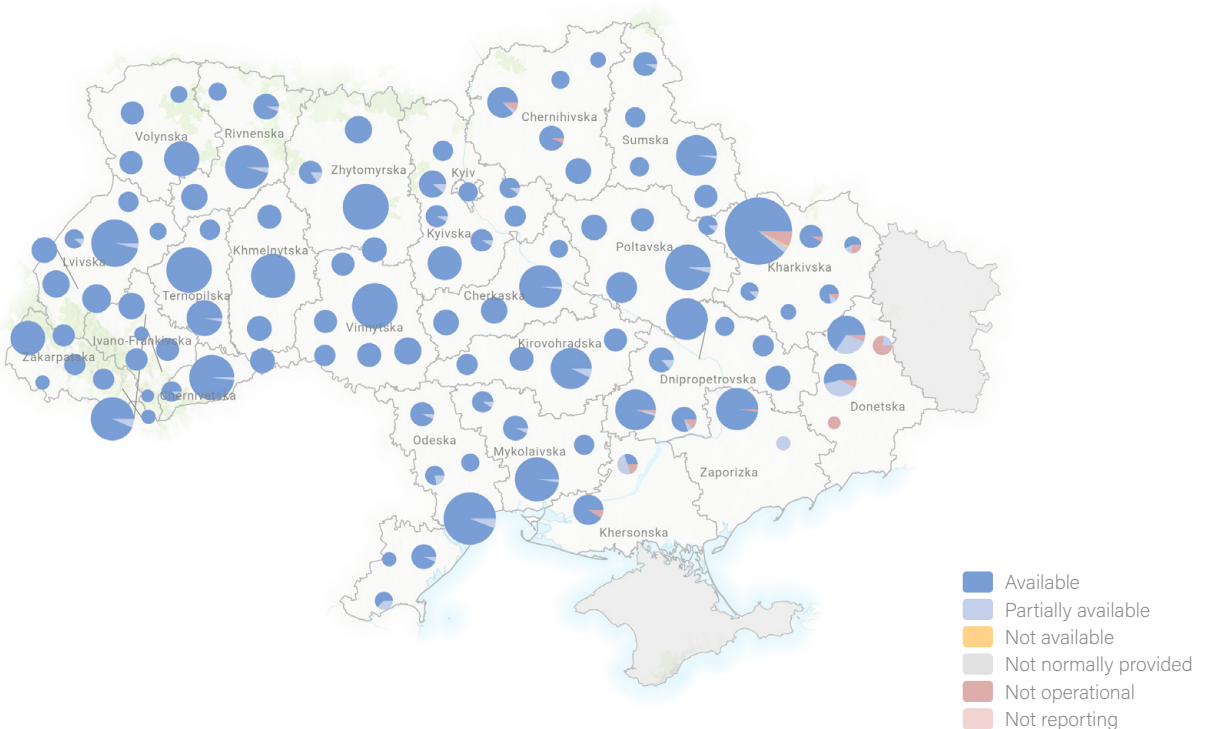
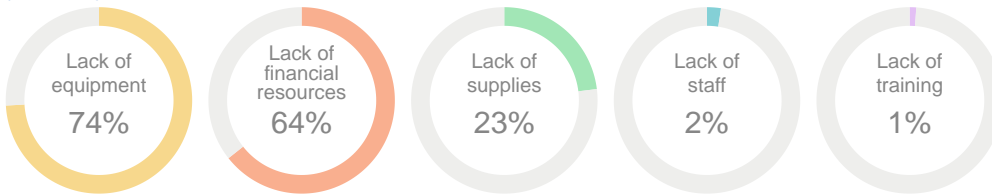


Availability by health facility type



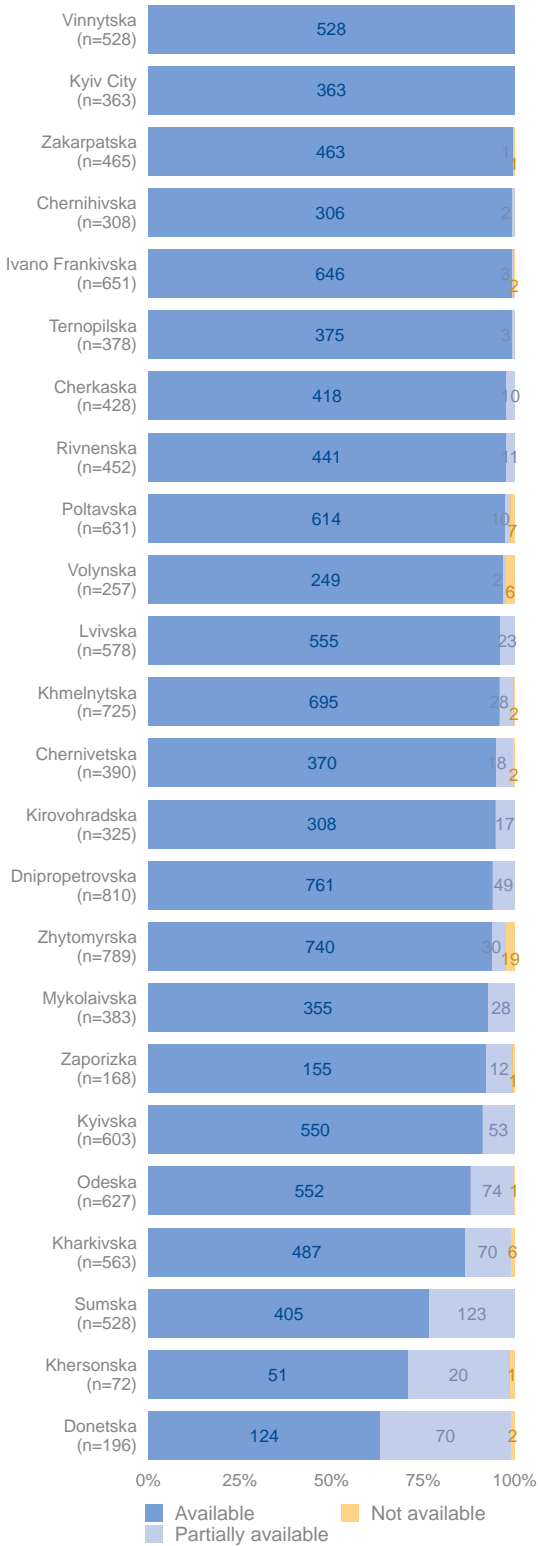
Main causes of unavailability

(n = 707)

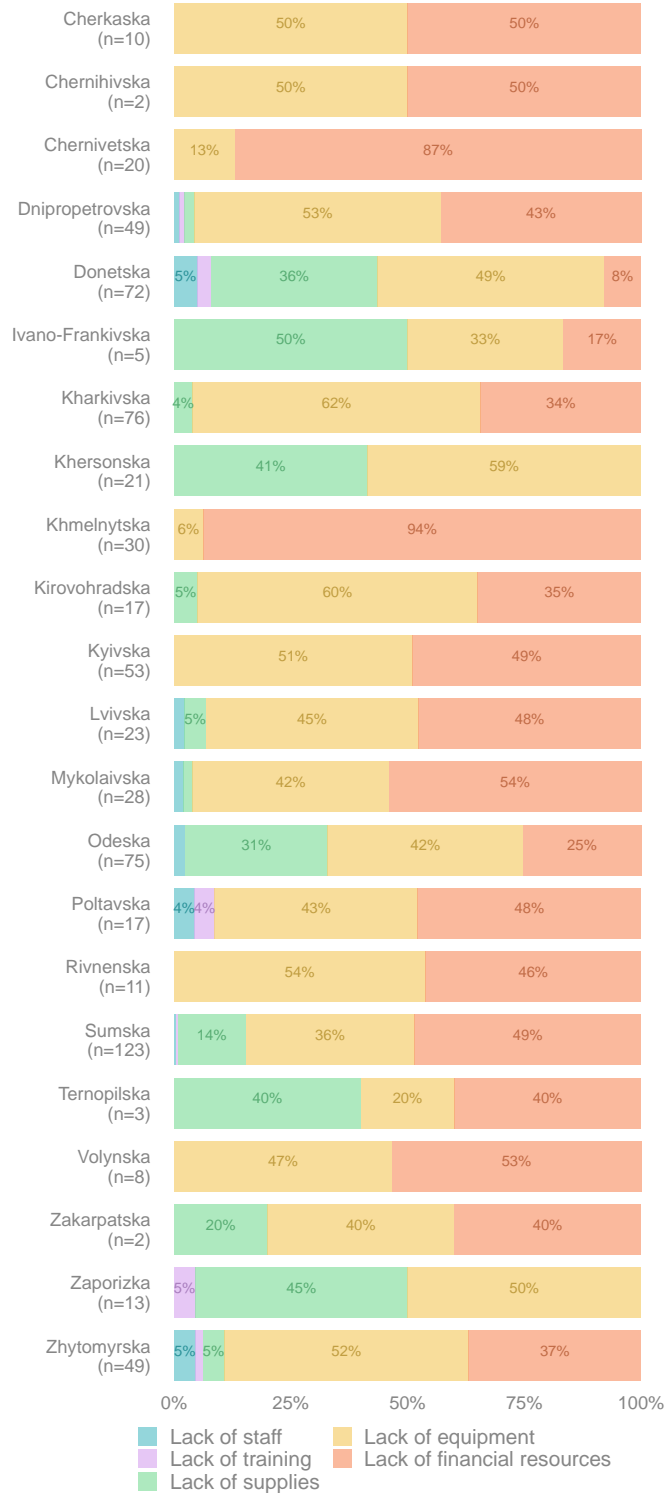


Map excludes HSDUs

Availability by oblast



Main causes of unavailability by oblast*

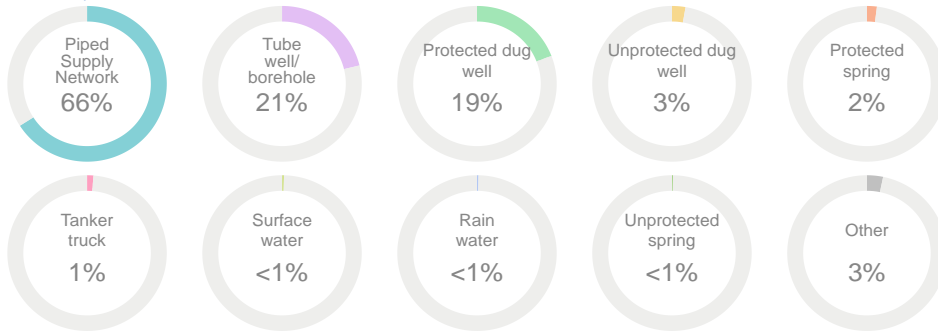


* Chart includes health facilities in which causes of unavailability were indicated

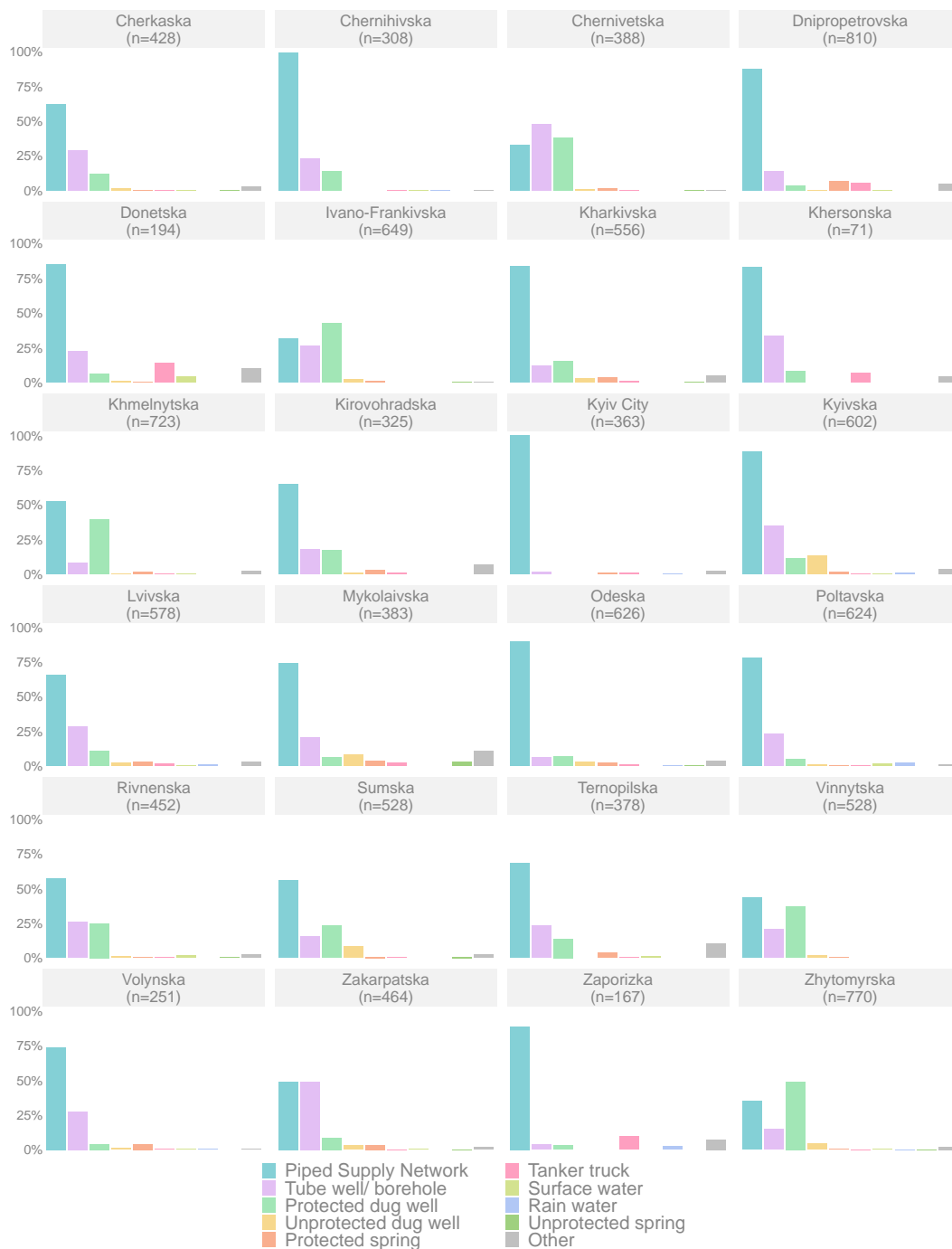
WATER. MAIN SOURCES

Main sources of water

n = 11166

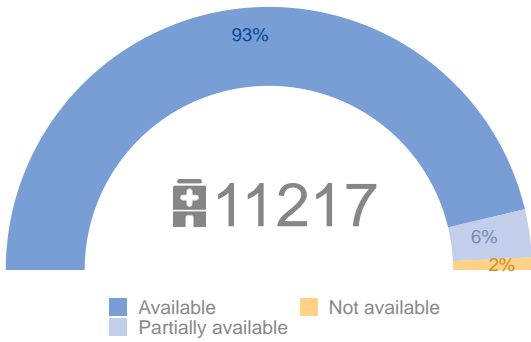


Main sources of water by oblast

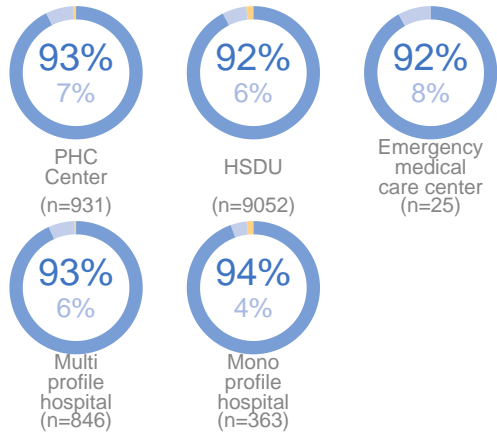


WASTE SEGREGATION

Waste segregation overview

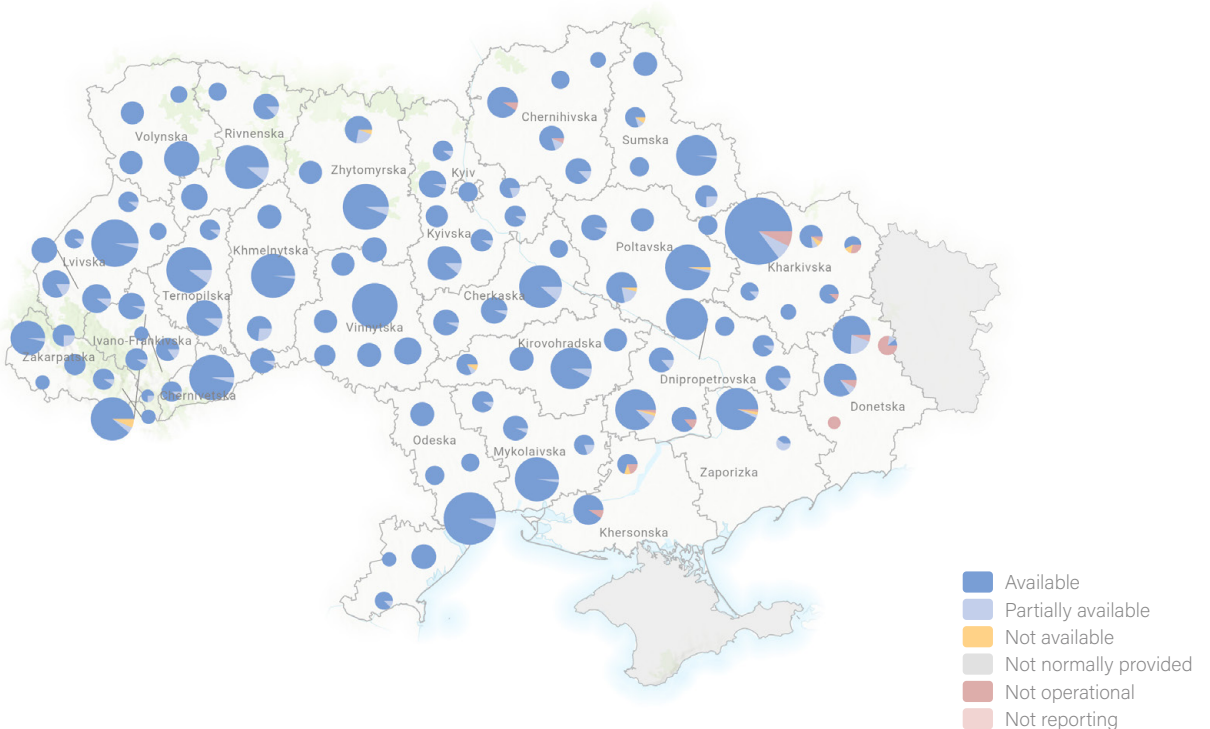
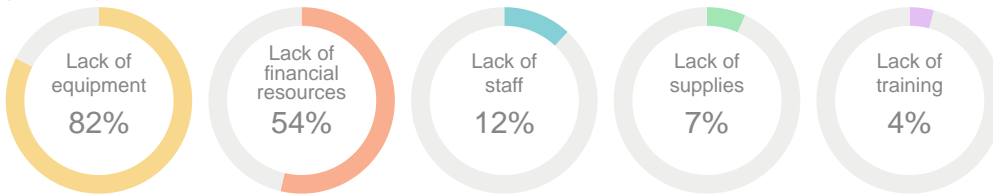


Availability by health facility type



Main causes of unavailability

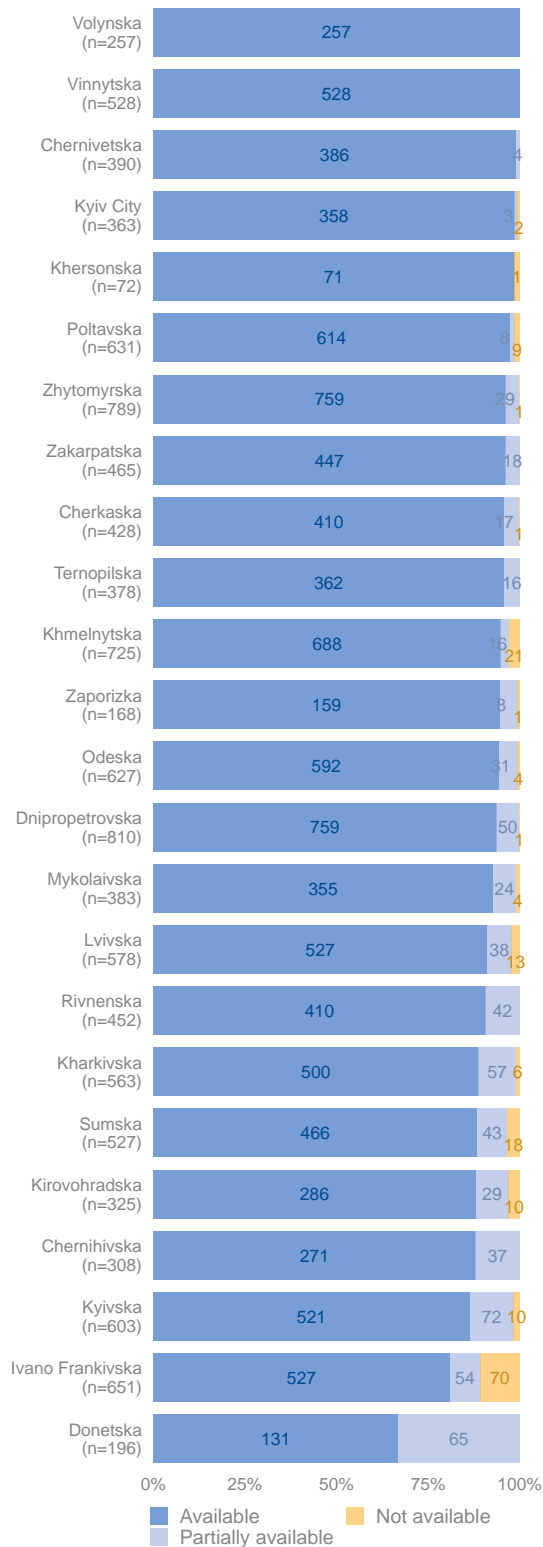
(n = 833)



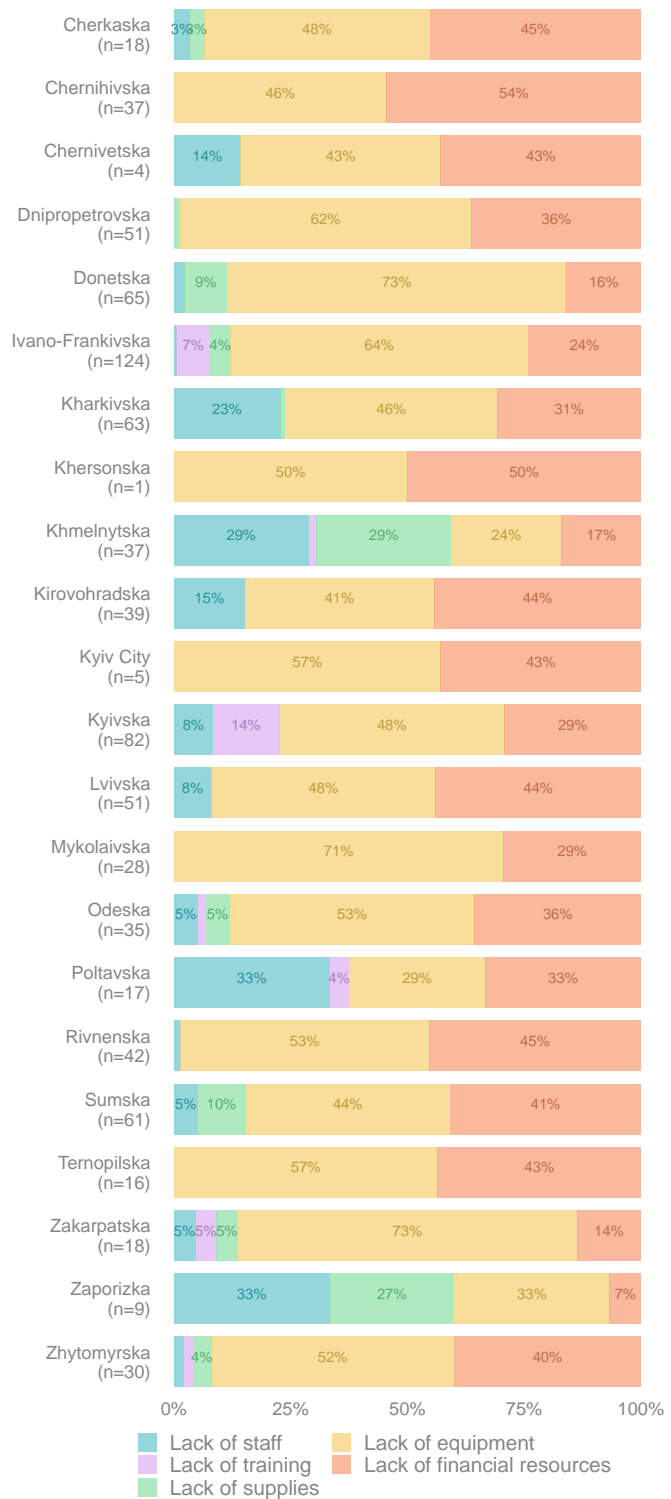
Map excludes HSDUs

WASTE SEGREGATION

Availability by oblast



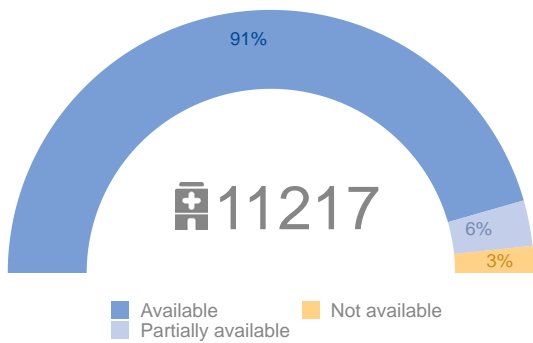
Main causes of unavailability by oblast*



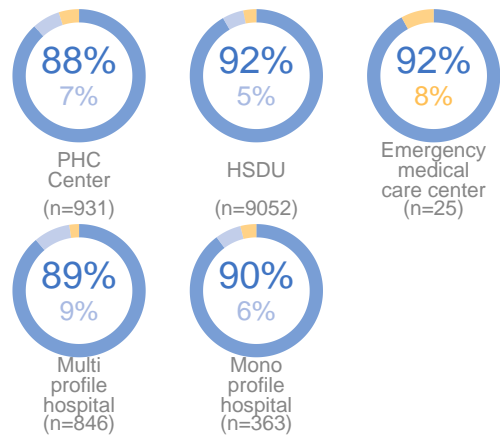
* Chart includes health facilities in which causes of unavailability were indicated

FINAL DISPOSAL OF SHARPS

Final disposal of sharps overview

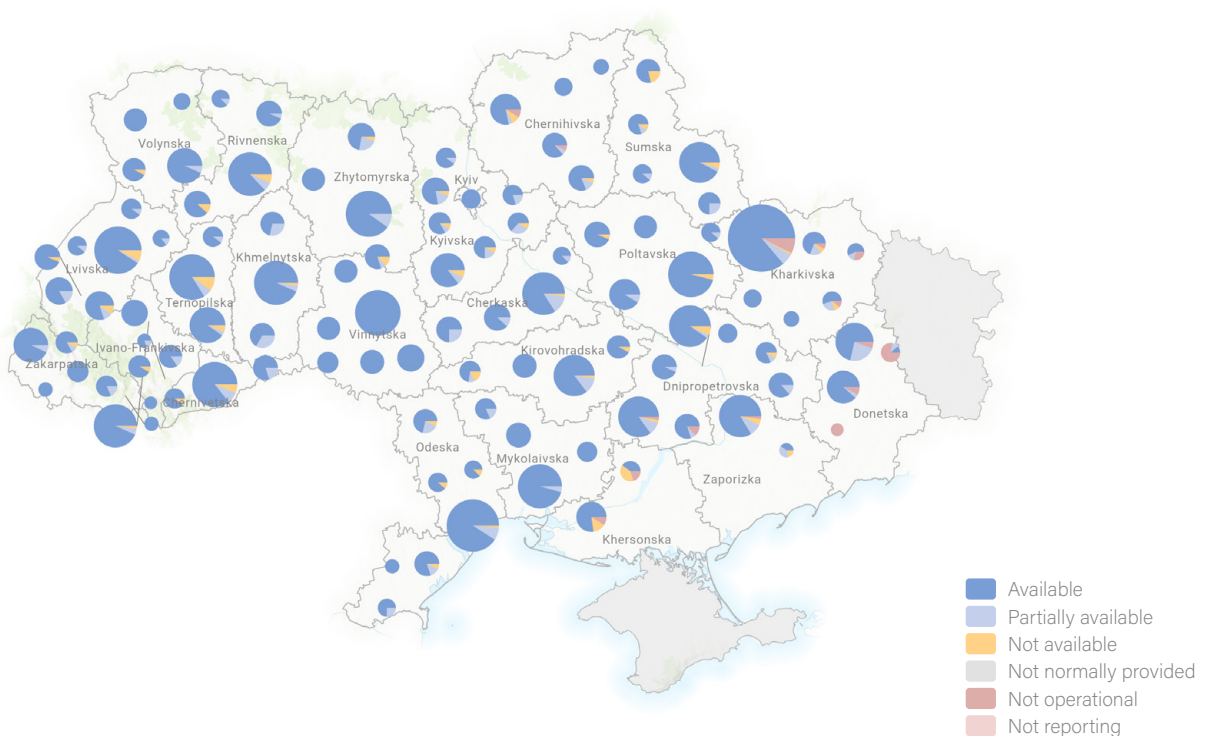
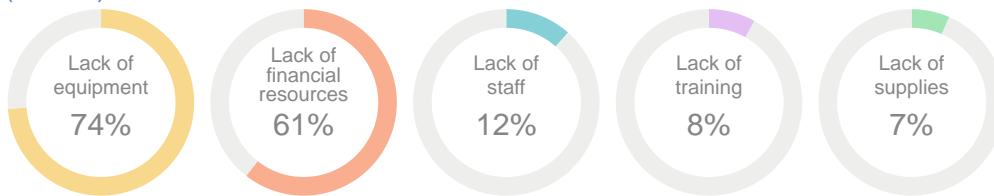


Availability by health facility type



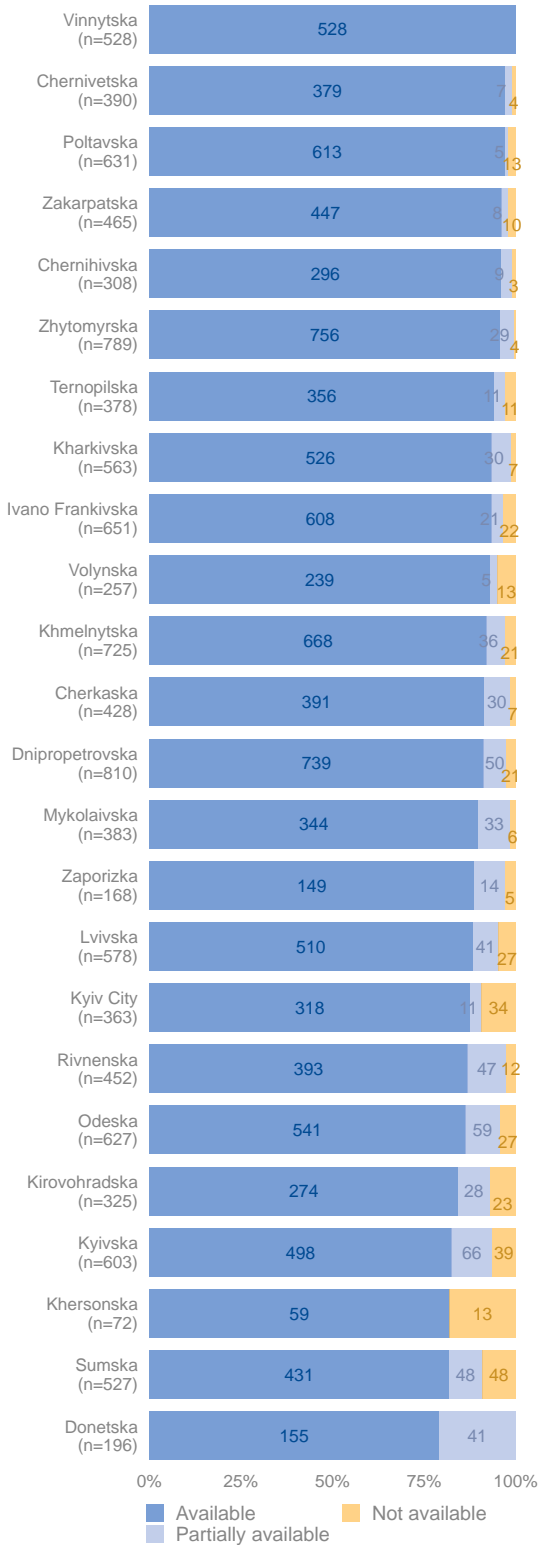
Main causes of unavailability

(n = 999)

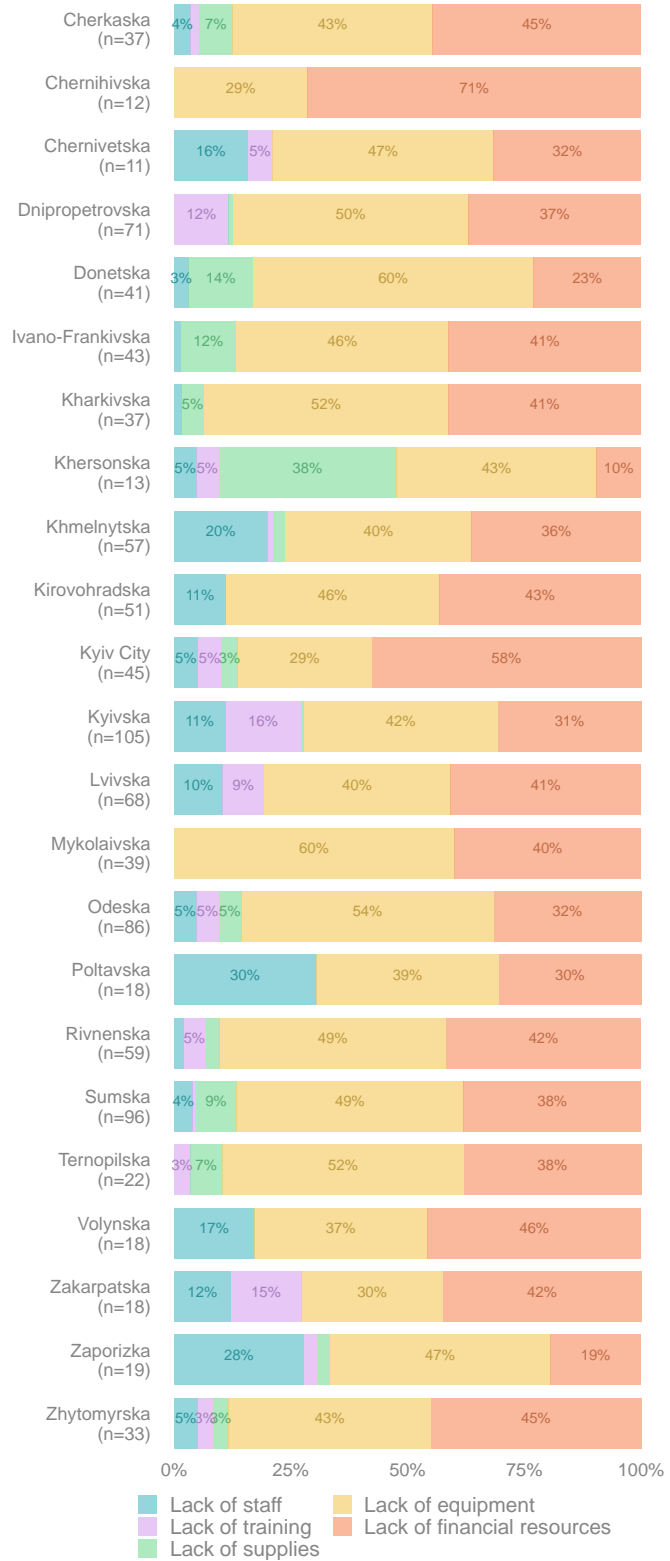


FINAL DISPOSAL OF SHARPS

Availability by oblast



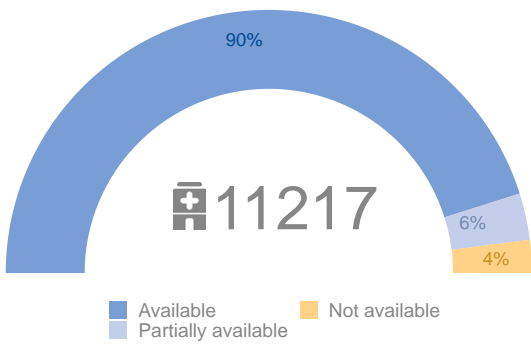
Main causes of unavailability by oblast*



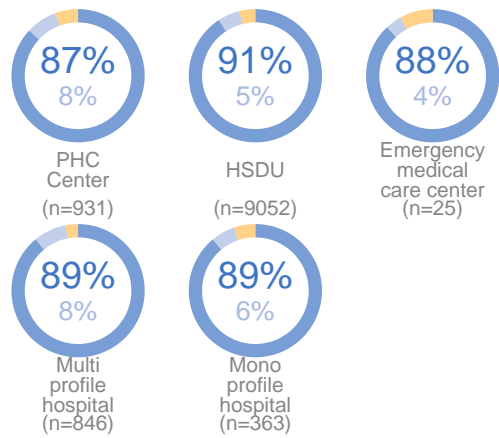
* Chart includes health facilities in which causes of unavailability were indicated

FINAL DISPOSAL OF INFECTIOUS WASTE

Final disposal of infectious waste overview

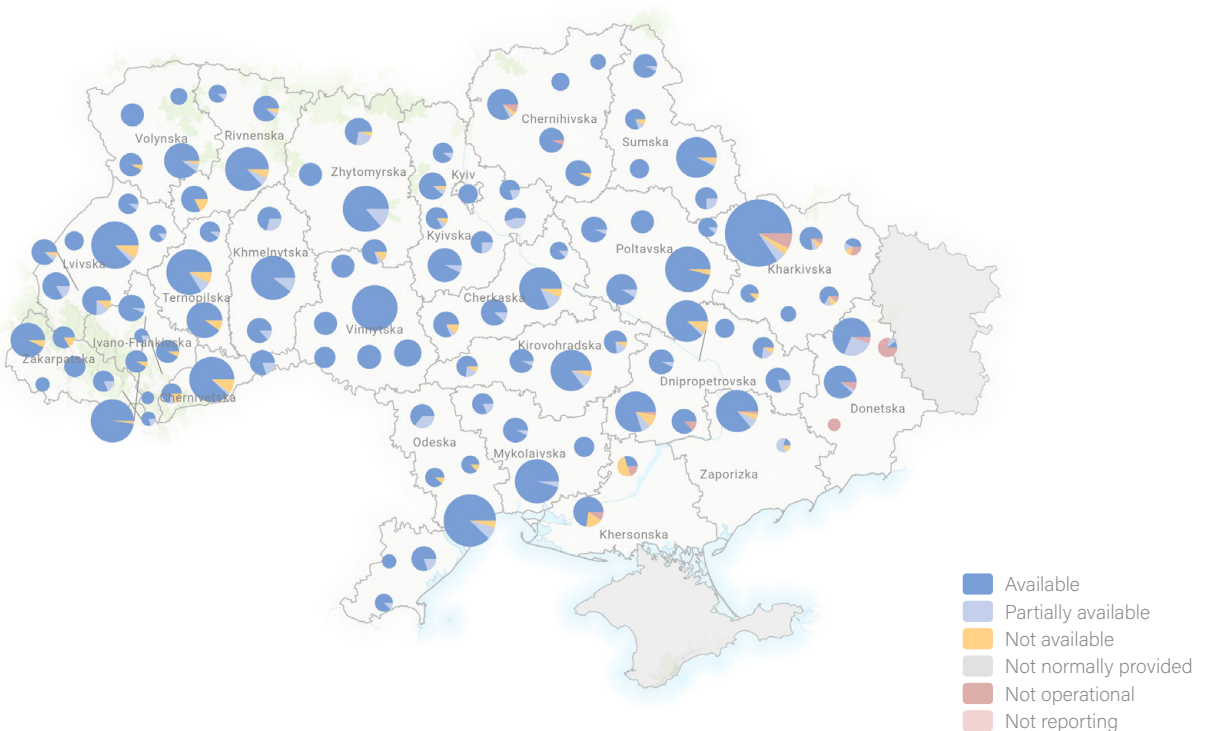
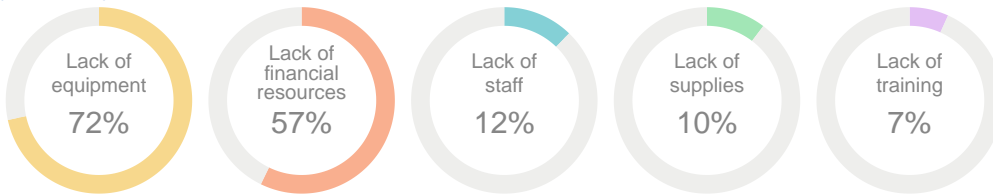


Availability by health facility type



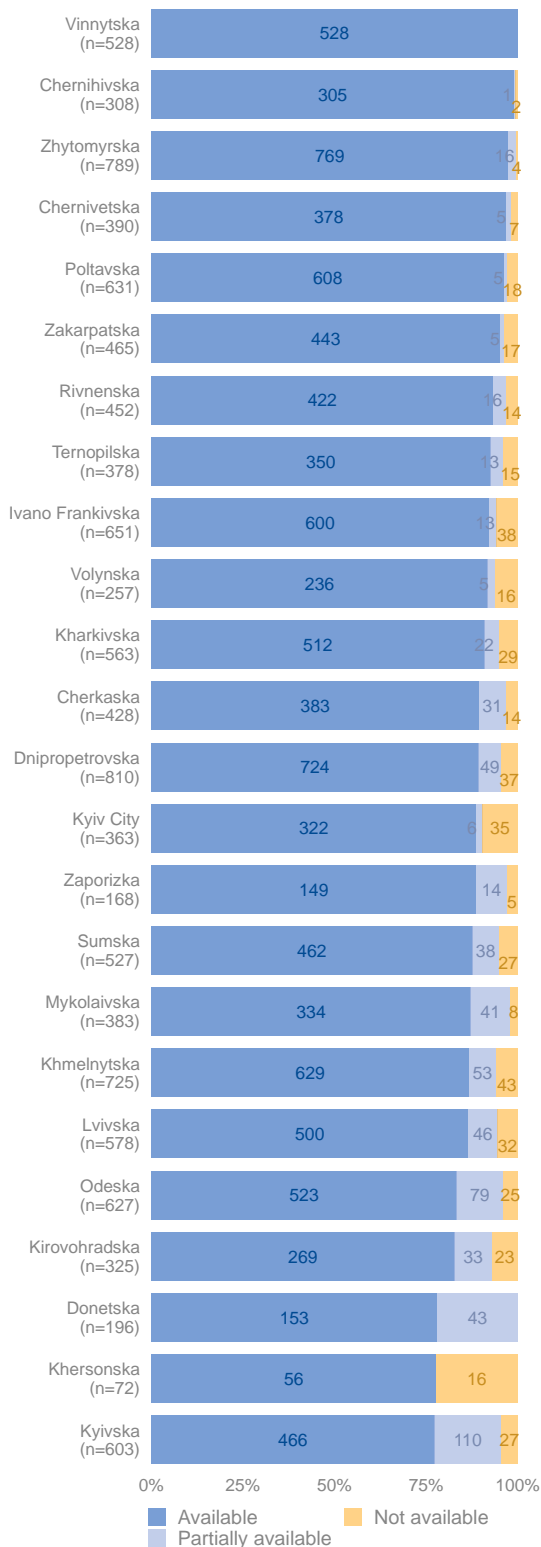
Main causes of unavailability

(n = 1096)

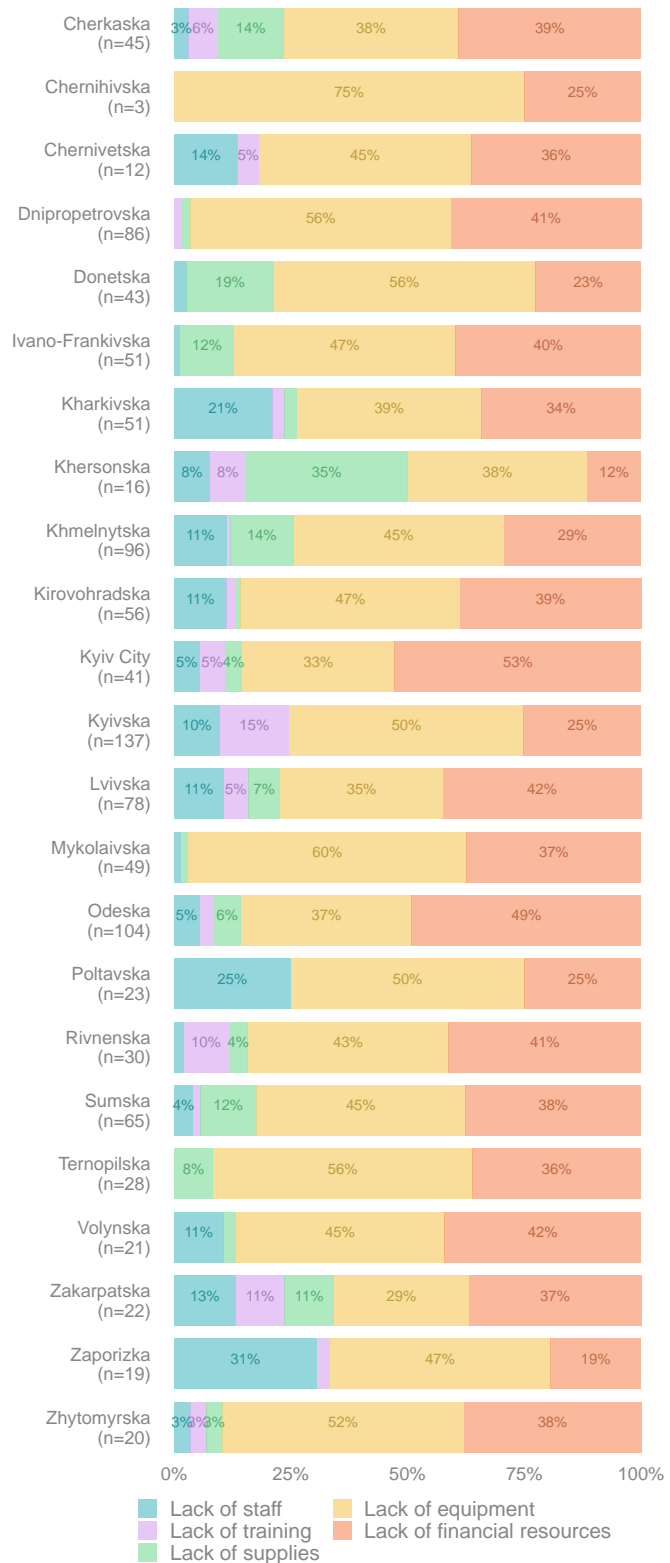


FINAL DISPOSAL OF INFECTIOUS WASTE

Availability by oblast



Main causes of unavailability by oblast*

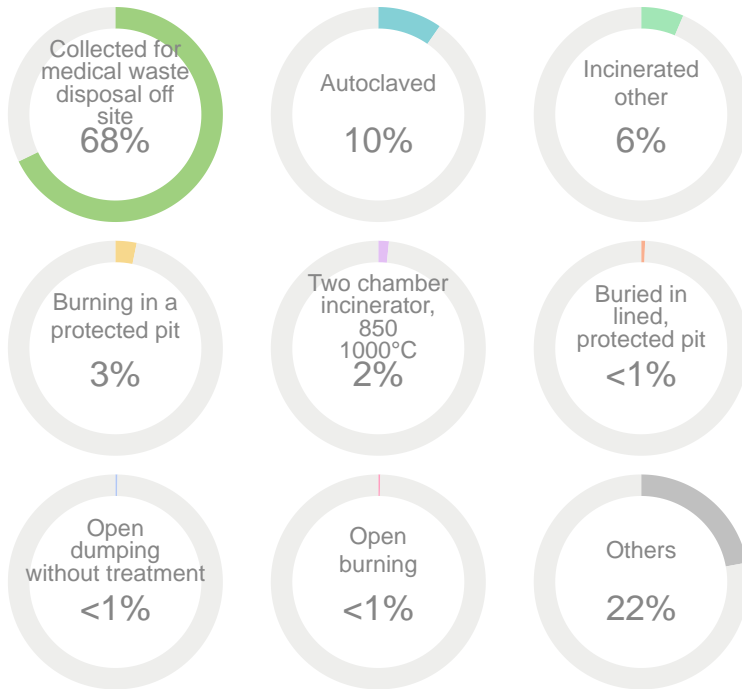


* Chart includes health facilities in which causes of unavailability were indicated

WASTE TREATMENT METHODS

Waste treatment methods

n = 10922)



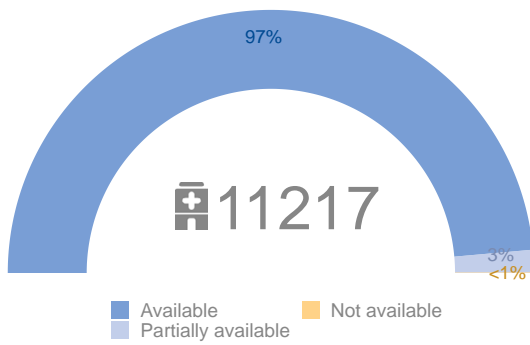
WASTE TREATMENT METHODS

Waste treatment methods by oblast

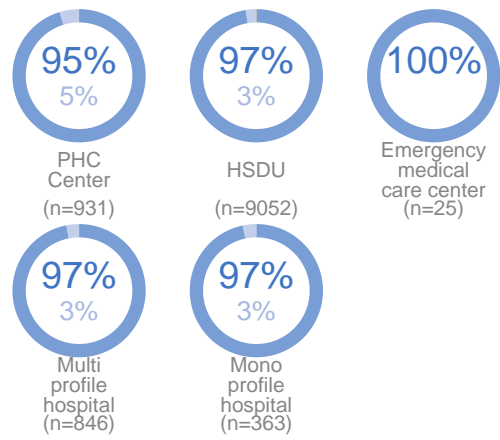


POWER

Power overview

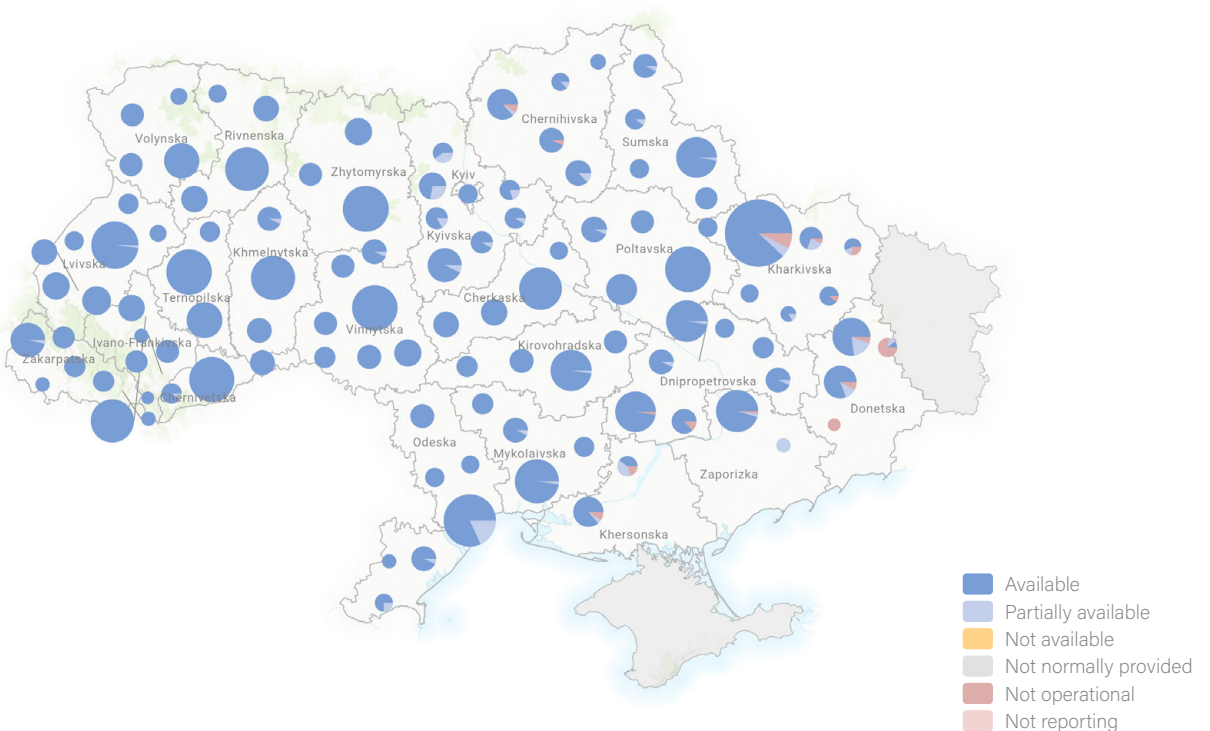
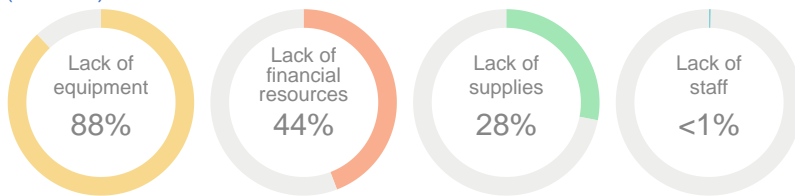


Availability by health facility type



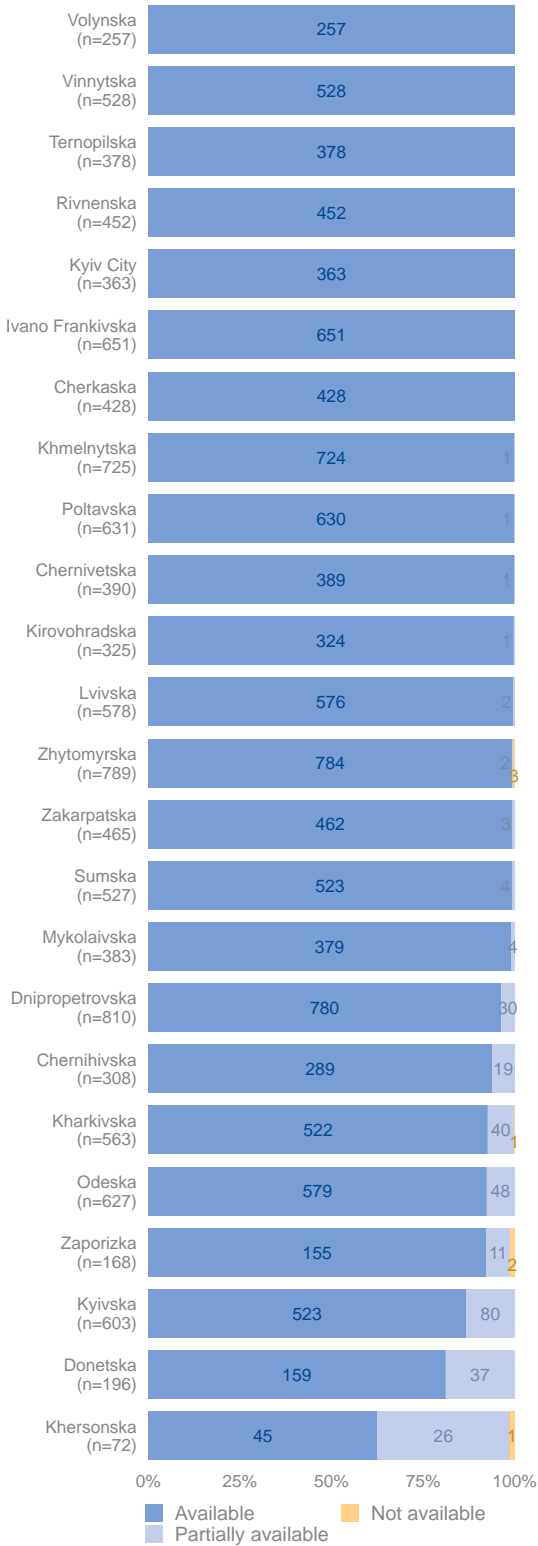
Main causes of unavailability

(n = 317)

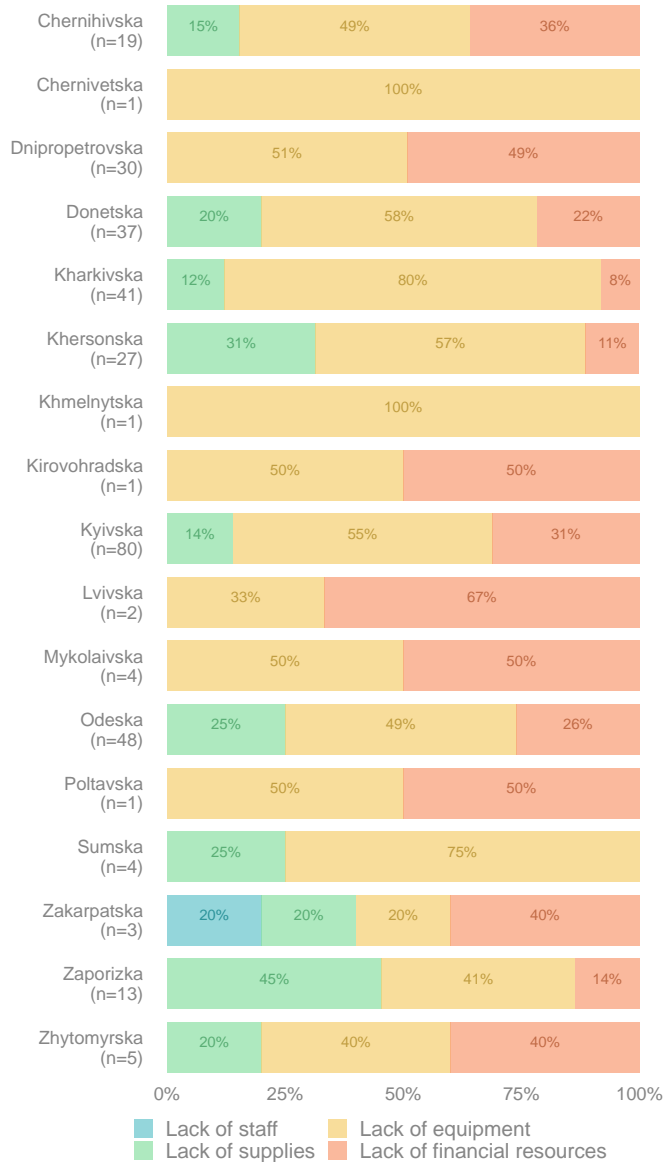


Map excludes HSDUs

Availability by oblast



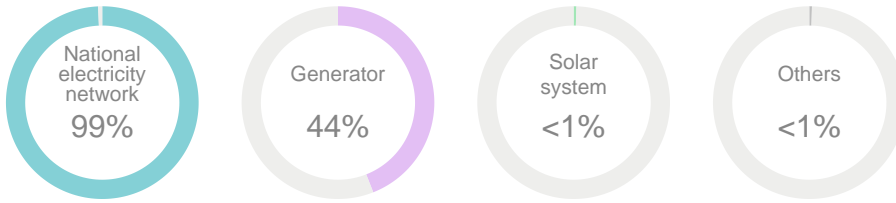
Main causes of unavailability by oblast*



* Chart includes health facilities in which causes of unavailability were indicated

POWER SOURCES

Main power sources
n = 11208

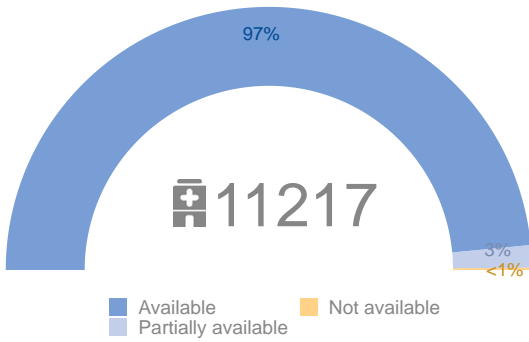


Main power sources by oblast

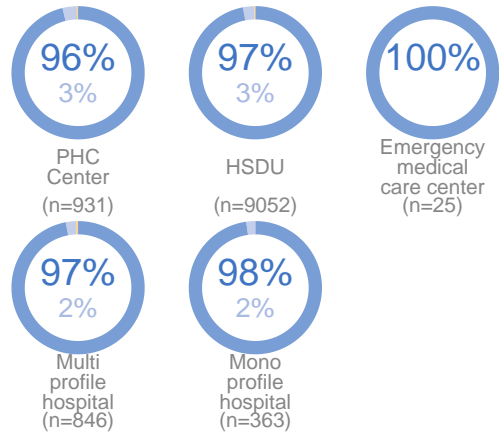


HEATING

Heating overview

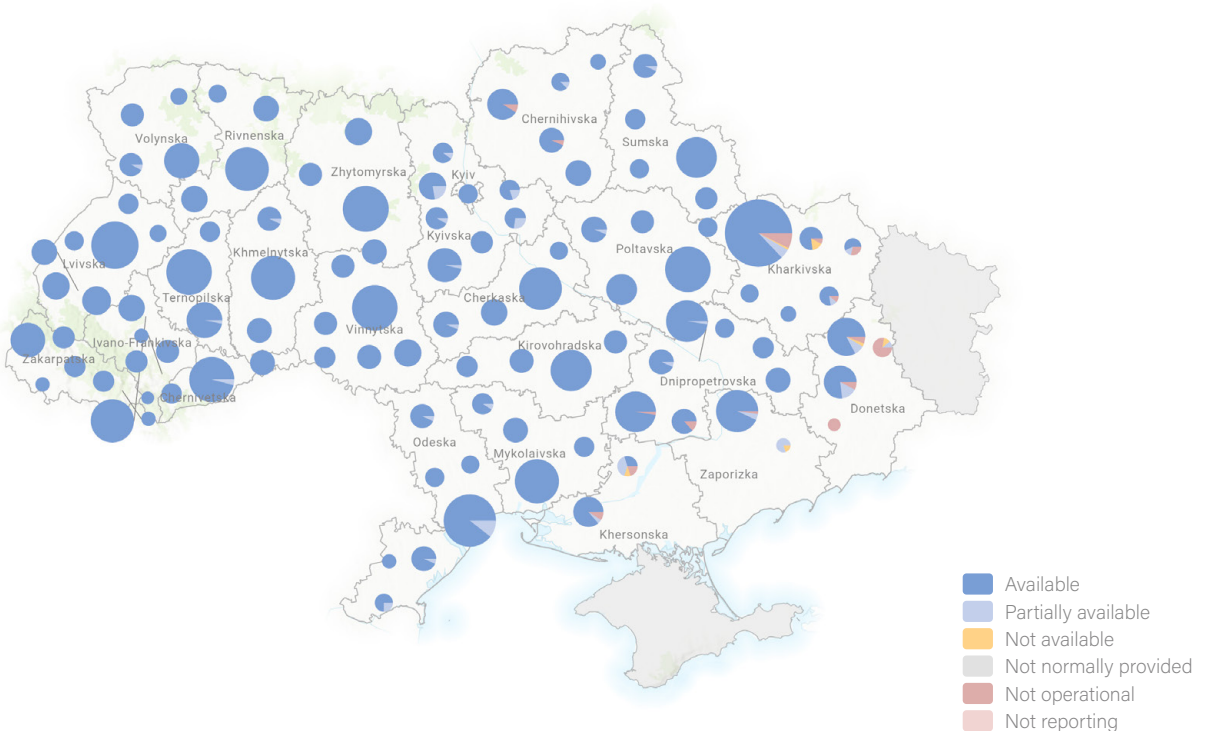
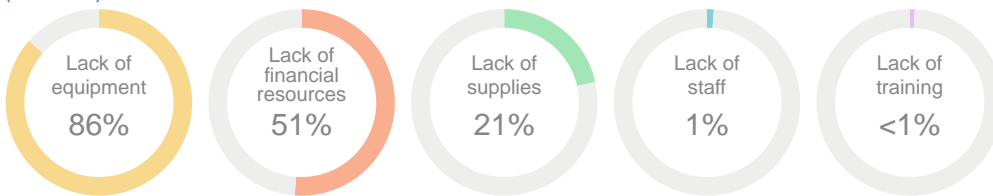


Availability by health facility type



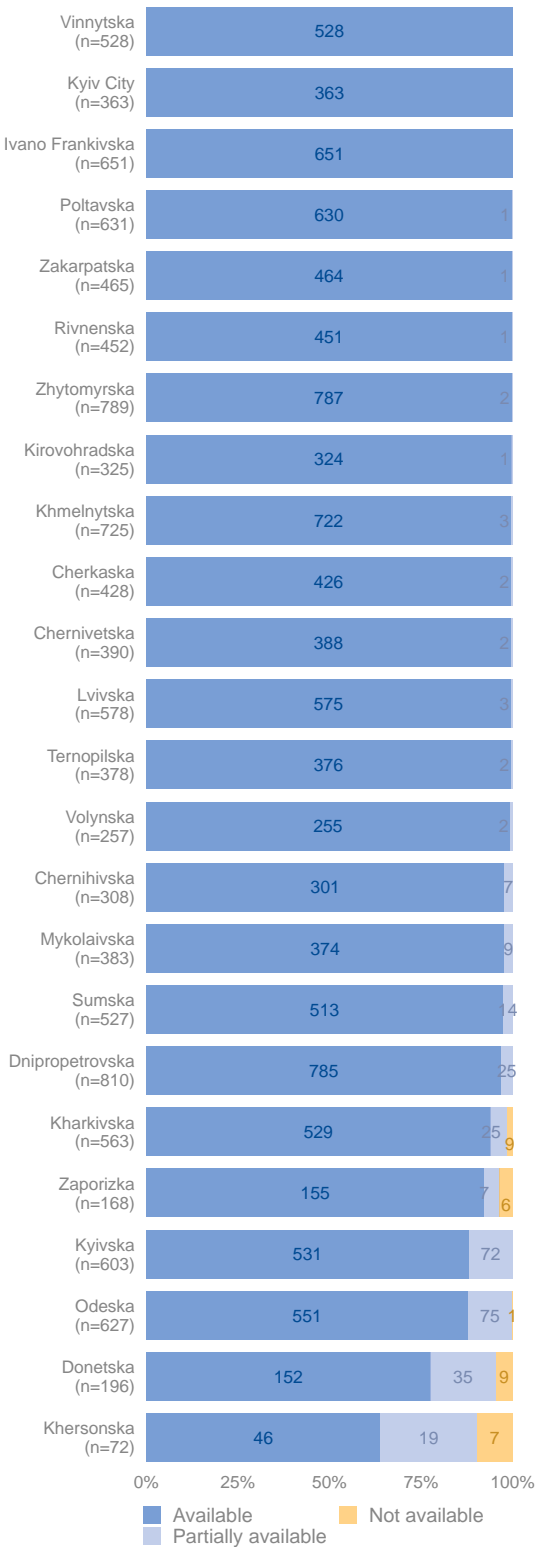
Main causes of unavailability

(n = 340)

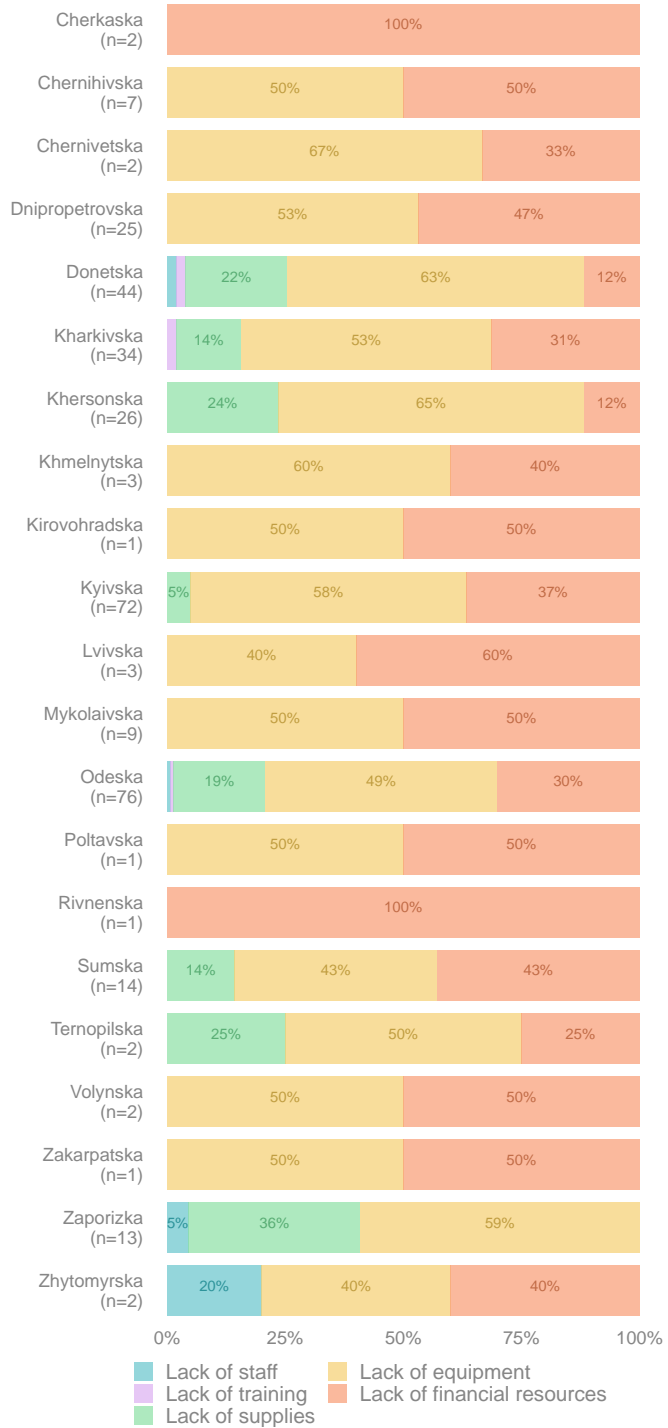


HEATING

Availability by oblast



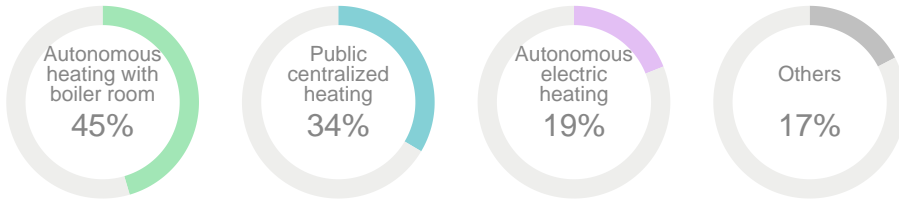
Main causes of unavailability by oblast*



* Chart includes health facilities in which causes of unavailability were indicated

HEATING SOURCES

n = 11183

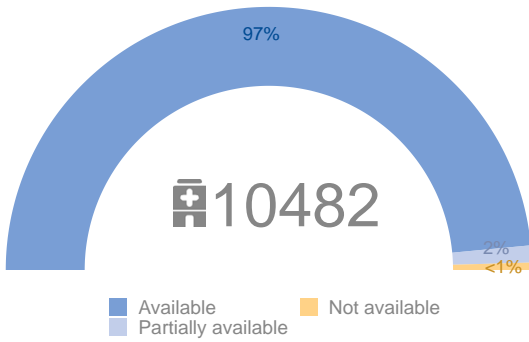


Main heating sources by oblast

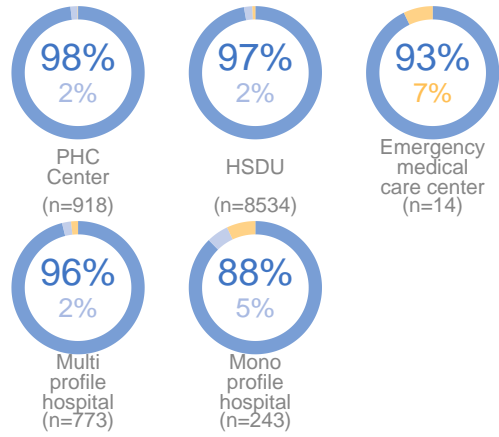


COLD CHAIN

Cold chain overview

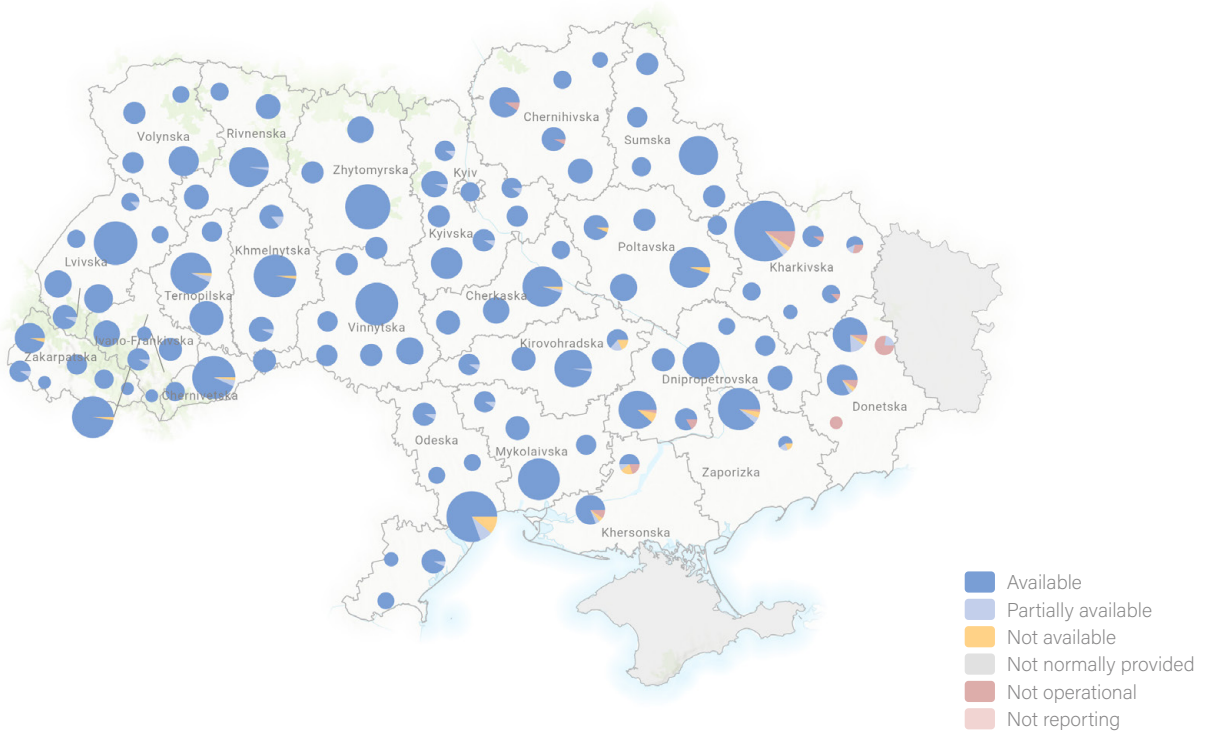
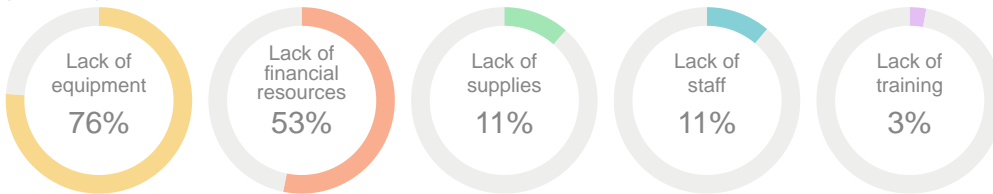


Availability by health facility type



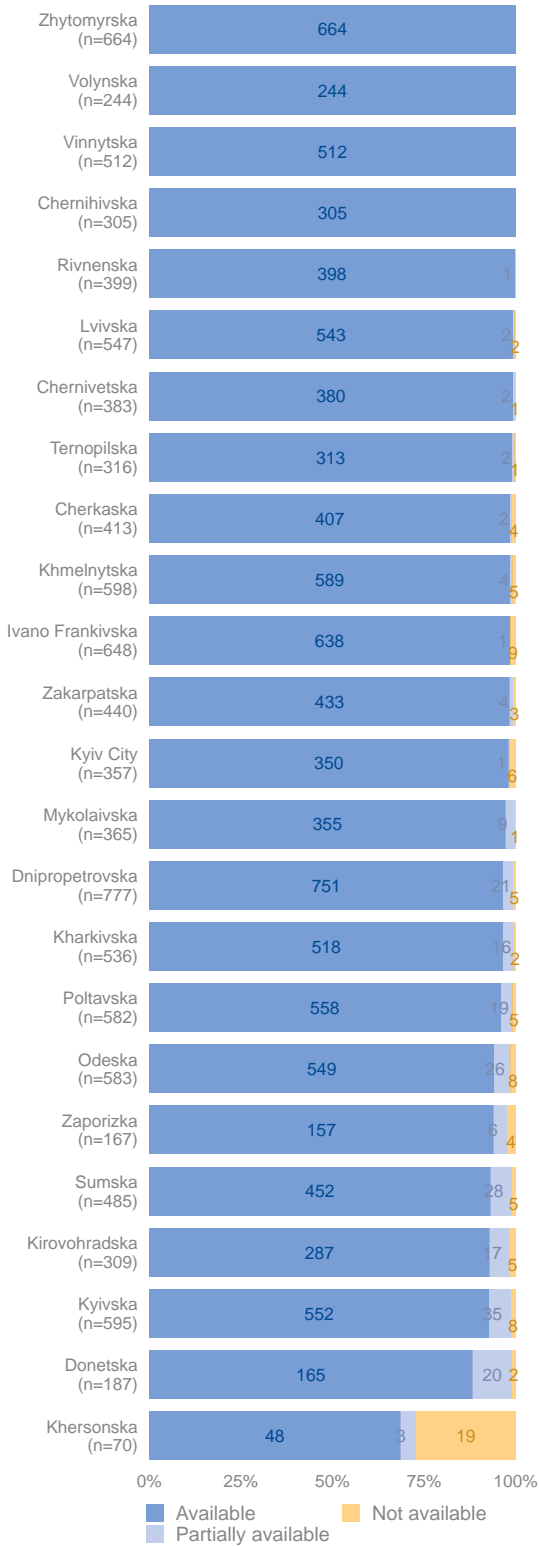
Main causes of unavailability

(n = 314)

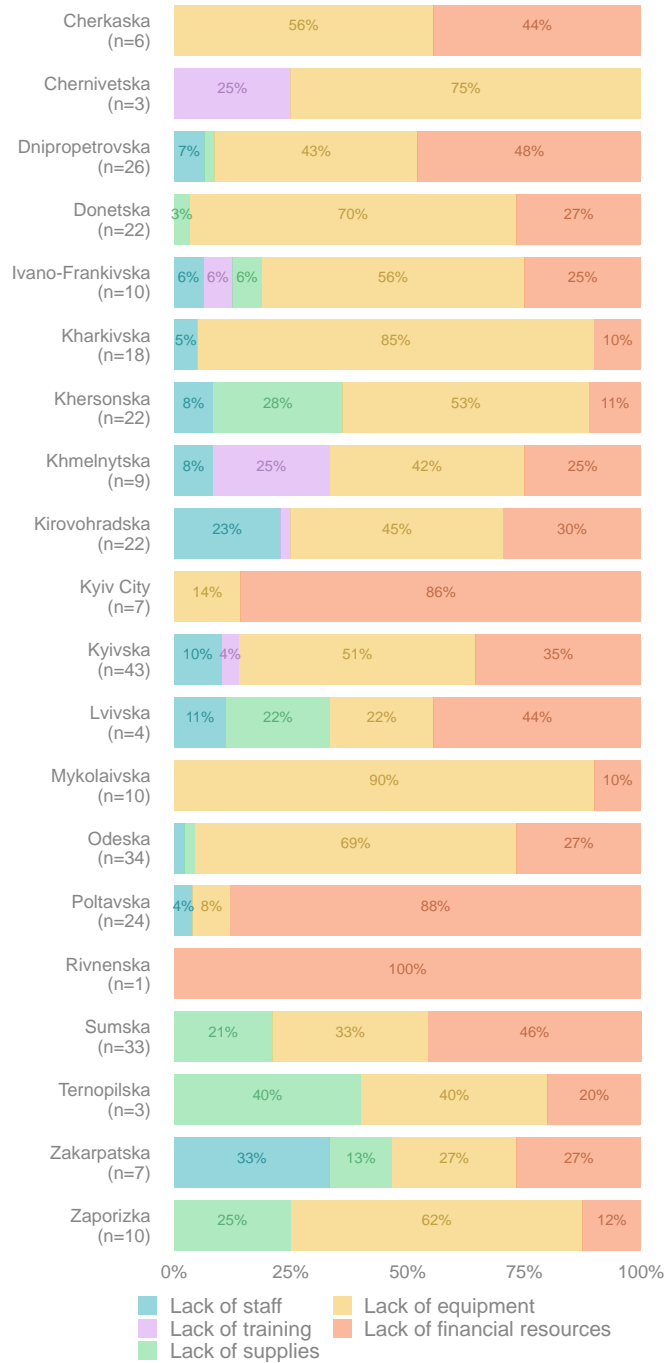


COLD CHAIN

Availability by oblast



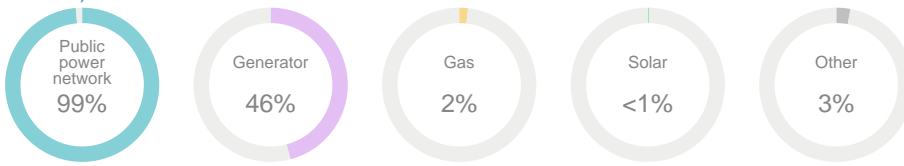
Main causes of unavailability by oblast*



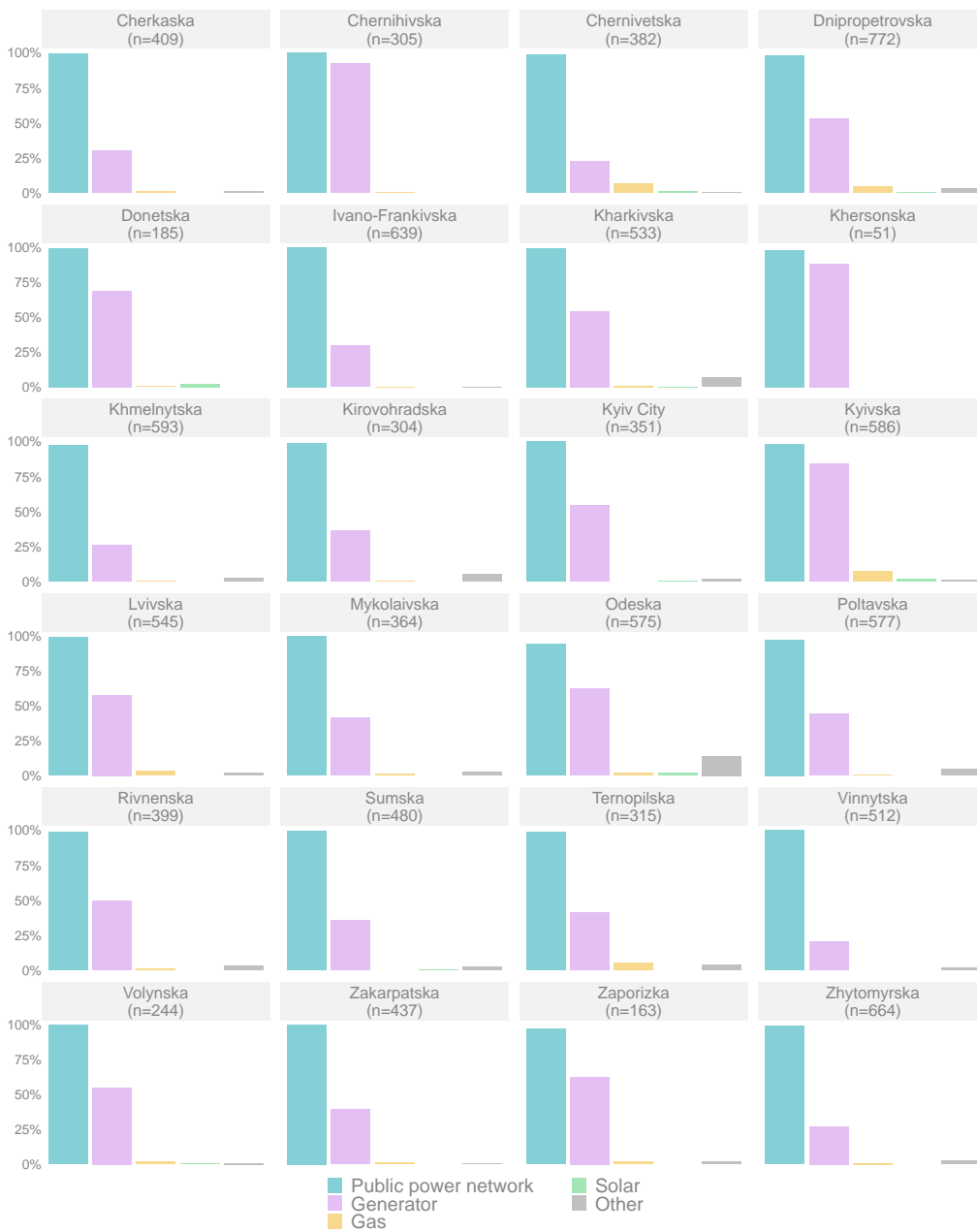
* Chart includes health facilities in which causes of unavailability were indicated

COLD CHAIN POWER SOURCES

Main power sources
n = 10385

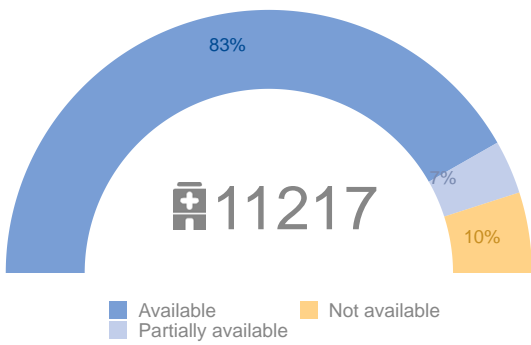


Main power sources by oblast

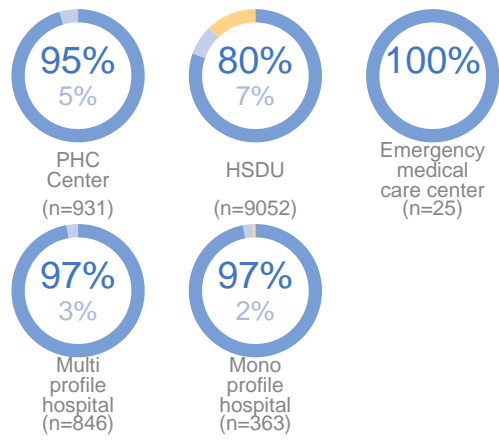


CONNECTIVITY

Connectivity overview

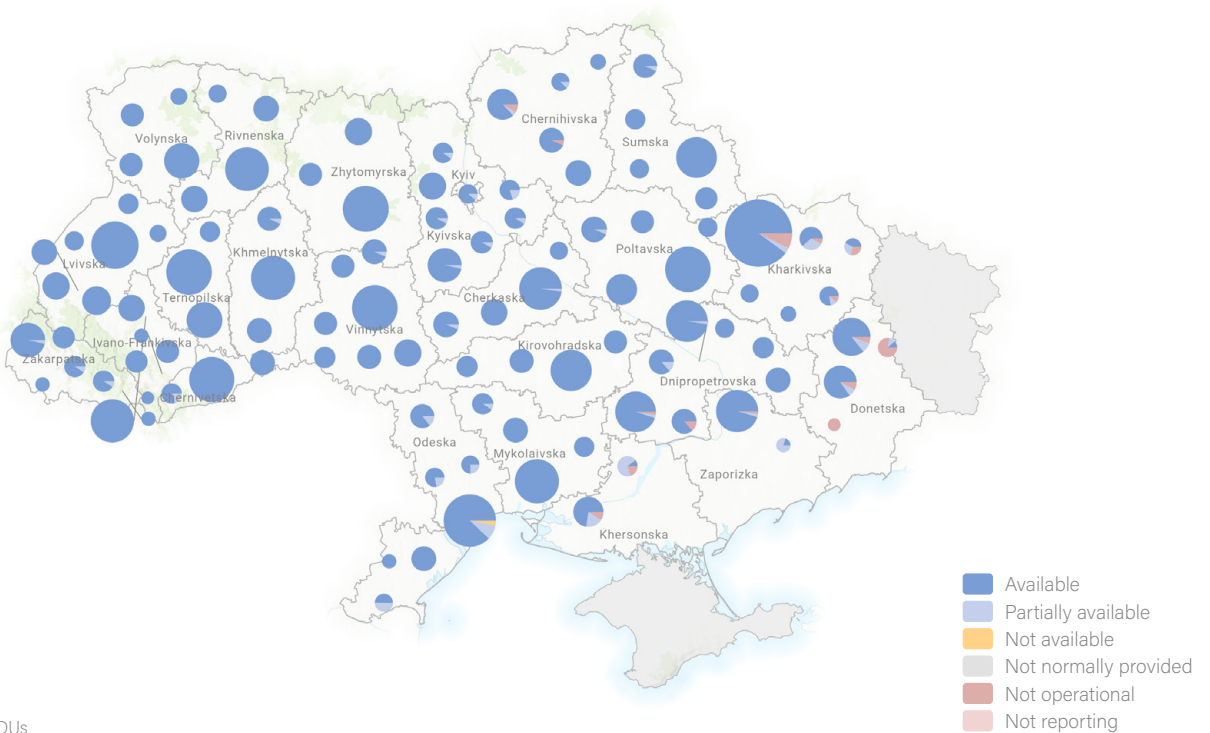
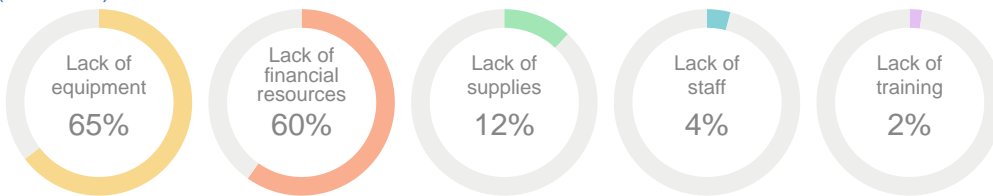


Availability by health facility type

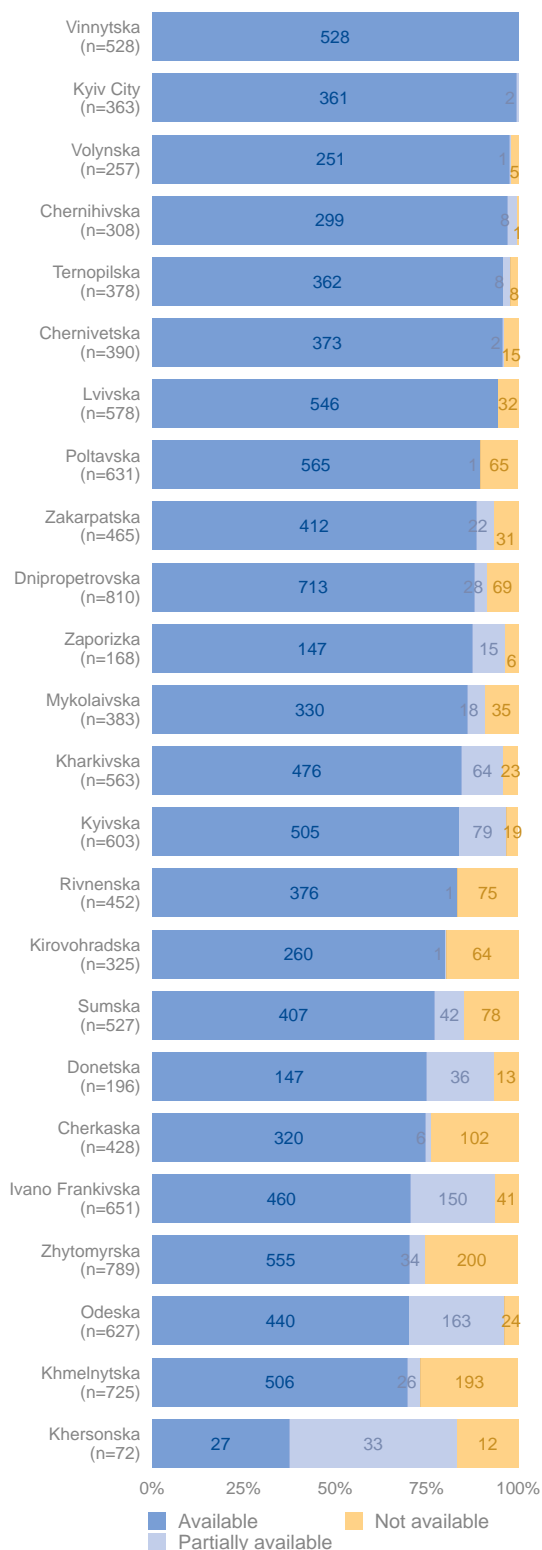


Main causes of unavailability

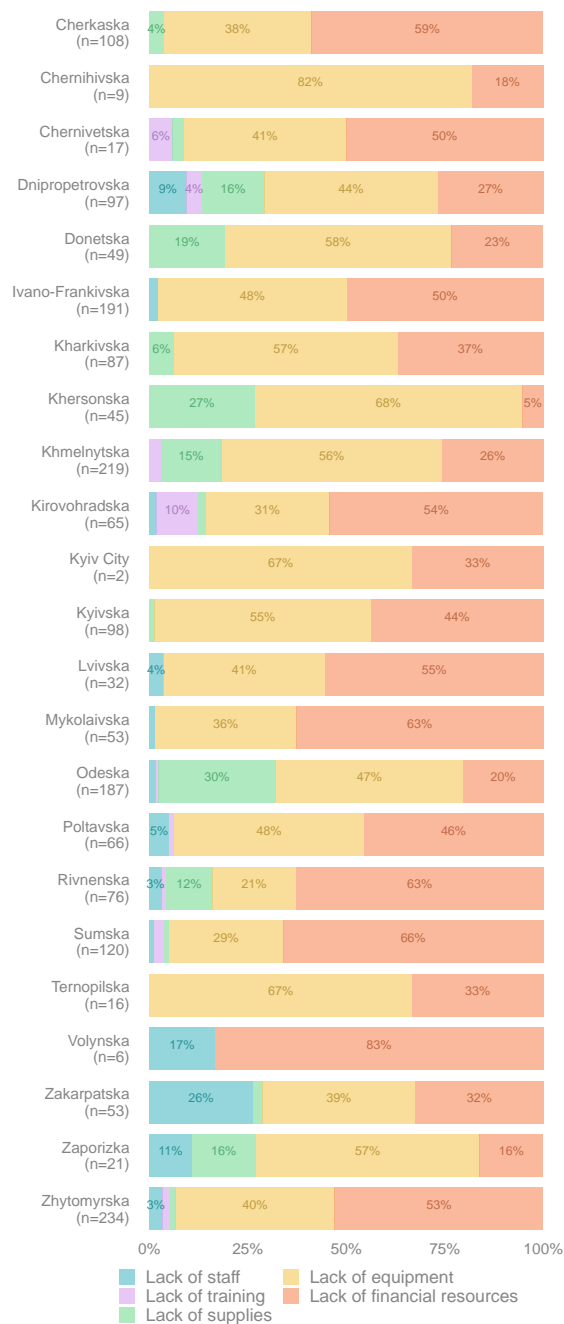
(n = 1851)



Availability by oblast



Main causes of unavailability by oblast**



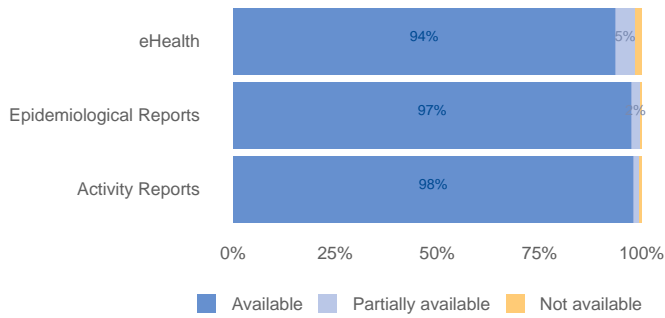
* Chart includes health facilities in which causes of unavailability were indicated

HEALTH INFORMATION MANAGEMENT SYSTEMS

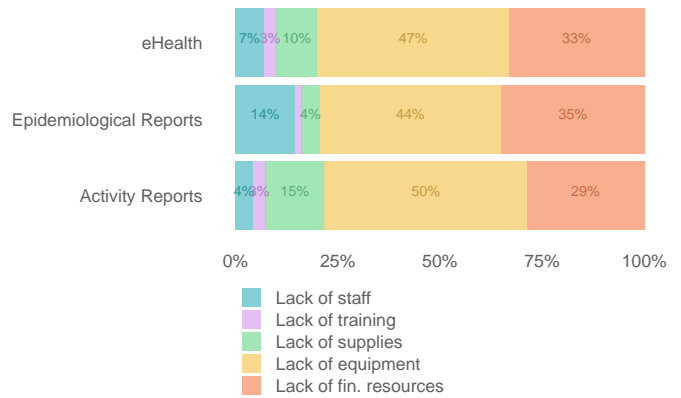


HEALTH INFORMATION MANAGEMENT SYSTEMS OVERVIEW*

Availability of health information management systems



Main causes of unavailability

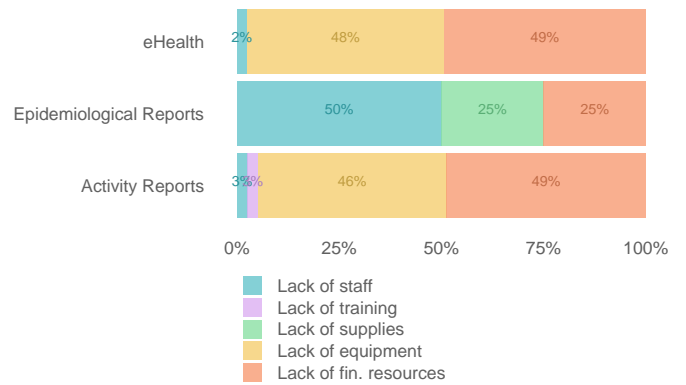
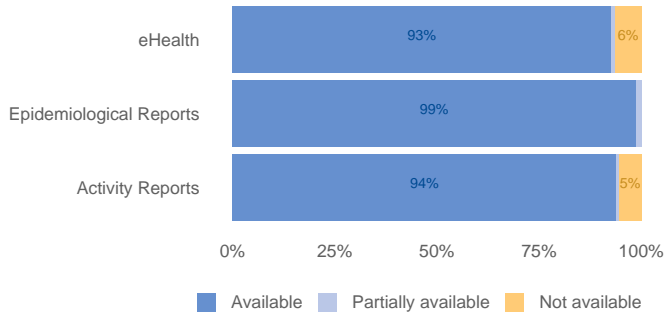


* Groups include the following indicators:

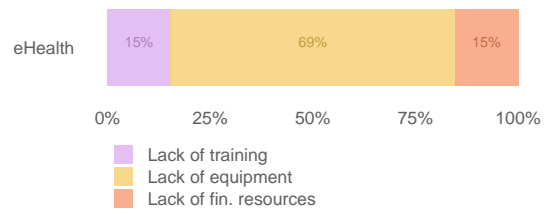
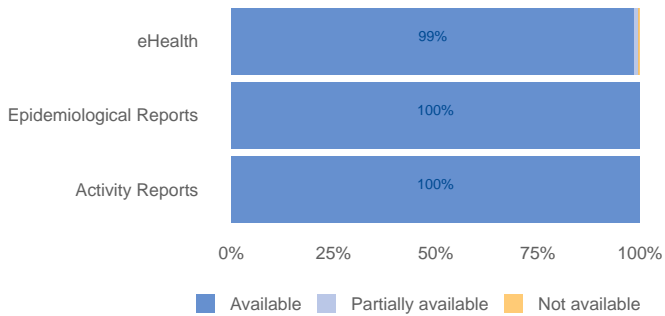
Group	Indicators
eHealth	Availability of the eHealth; Availability of data entrance into the eHealth
Epidemiological Reports	Availability of Epidemiological Reports (e.g., emergency notifications) to the local CDC
Activity Reports	Availability of Activity Reports: Availability and functionality of activity reports.(monthly reports sent to NHSU)

HEALTH INFORMATION MANAGEMENT SYSTEMS OVERVIEW BY OBLASTS

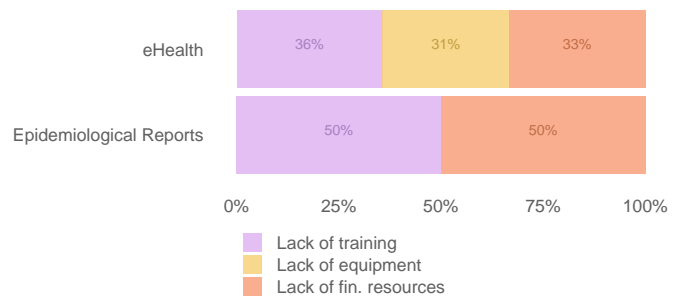
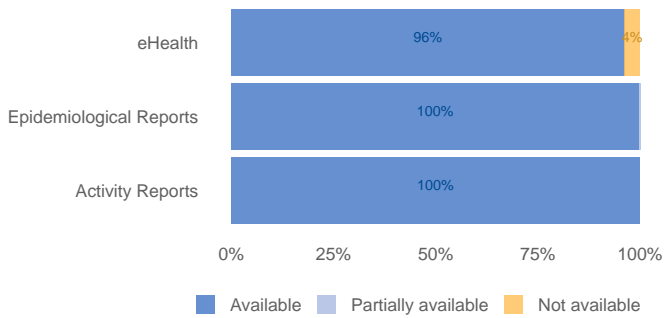
Cherkaska



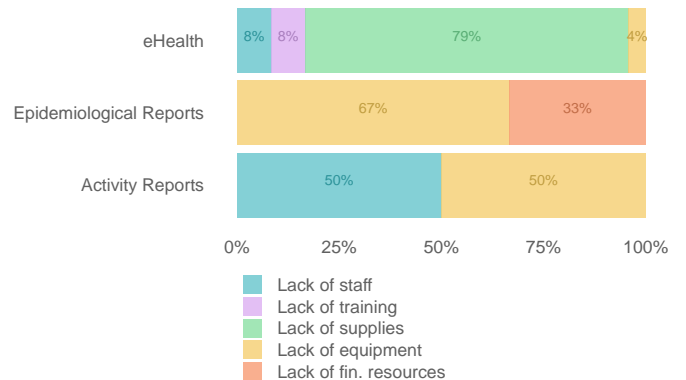
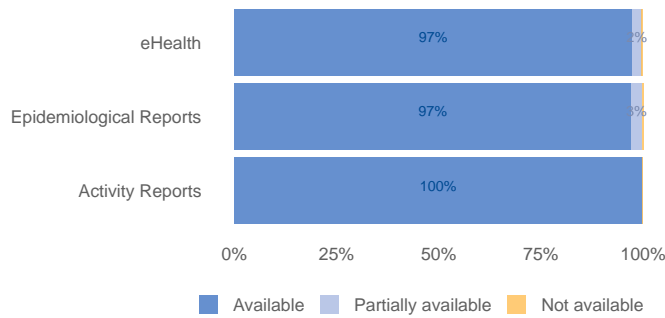
Chernihivska



Chernivetska

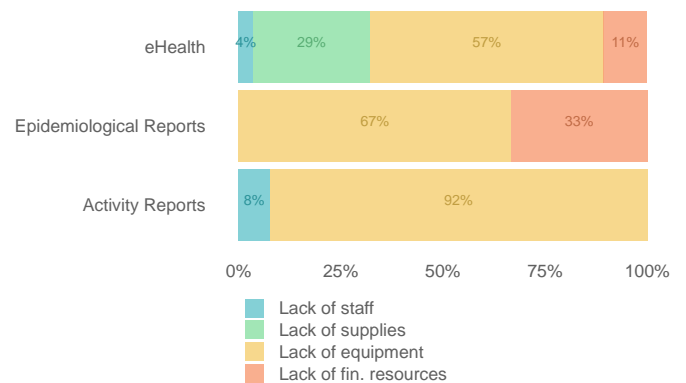
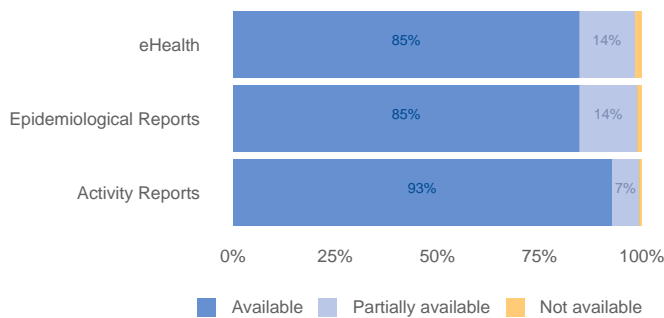


Dnipropetrovska

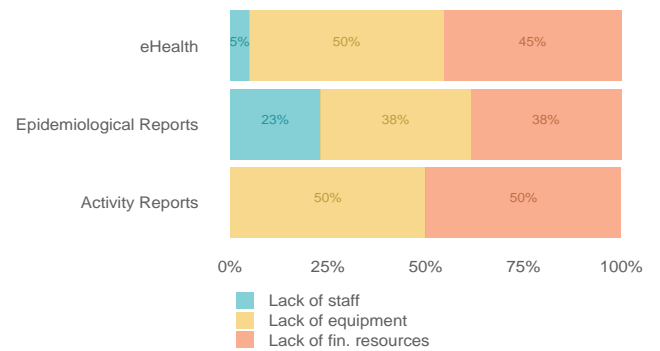
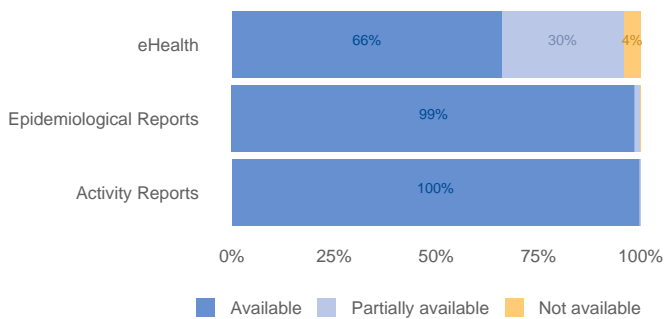


HEALTH INFORMATION MANAGEMENT SYSTEMS OVERVIEW BY OBLASTS

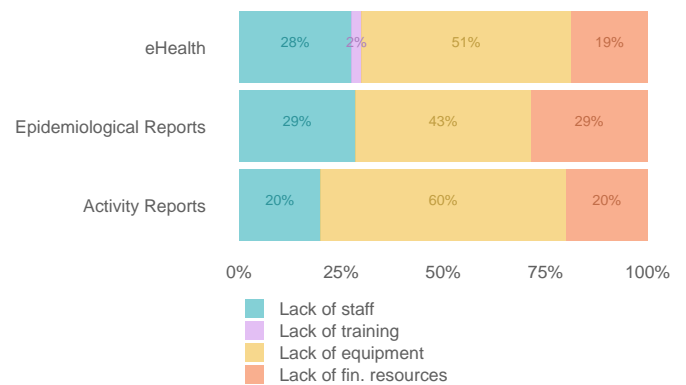
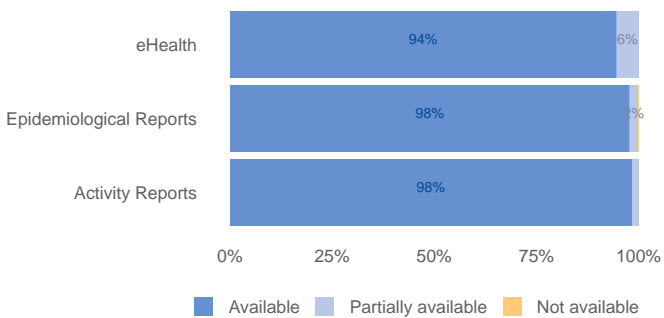
Donetska



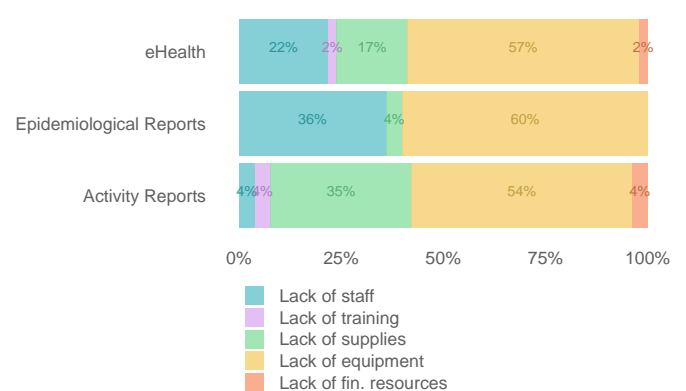
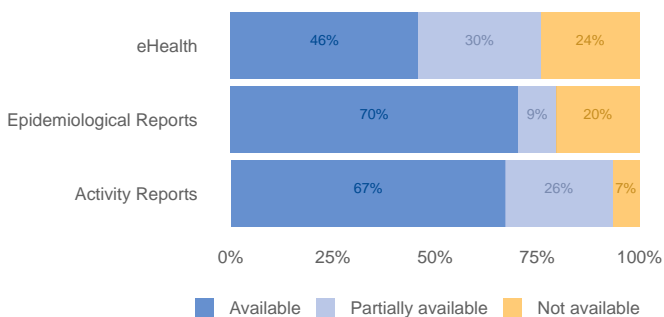
Ivano-Frankivska



Kharkivska

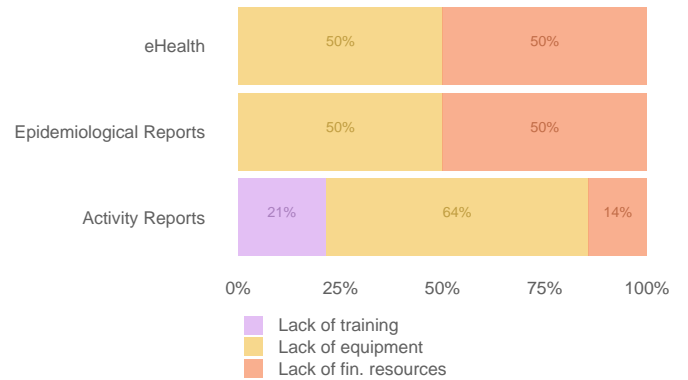
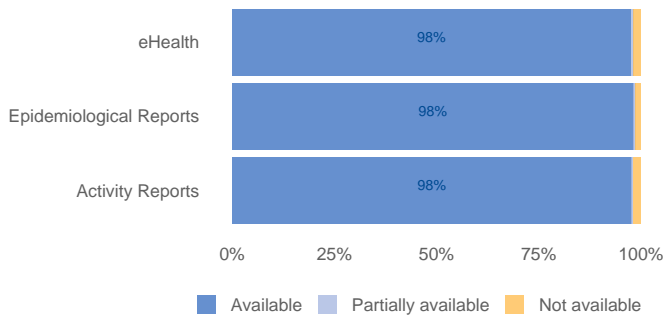


Khersonska

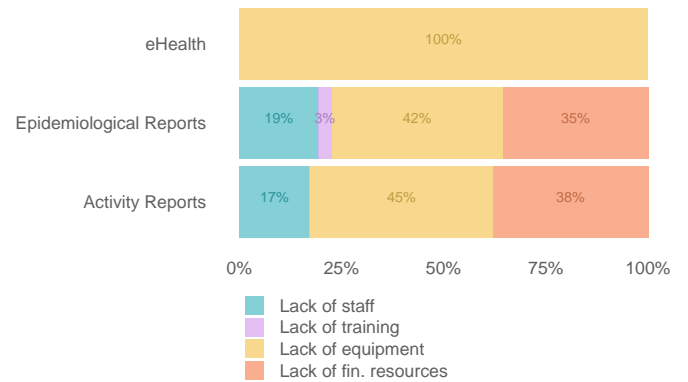
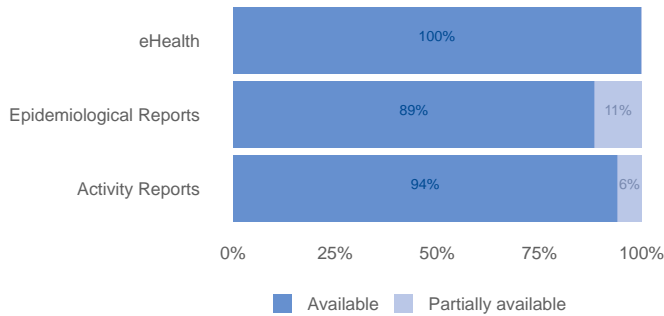


HEALTH INFORMATION MANAGEMENT SYSTEMS OVERVIEW BY OBLASTS

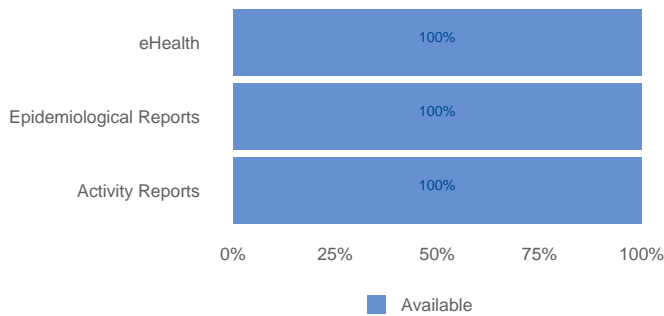
Khmelnyska



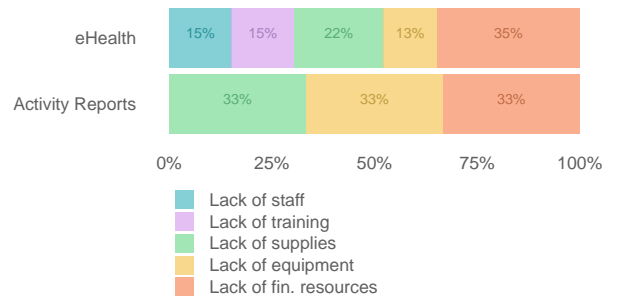
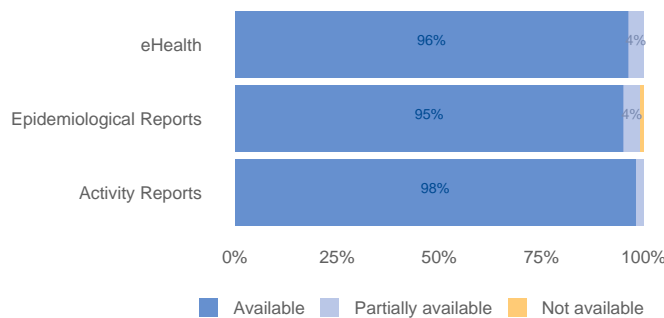
Kirovohradka



Kyiv City

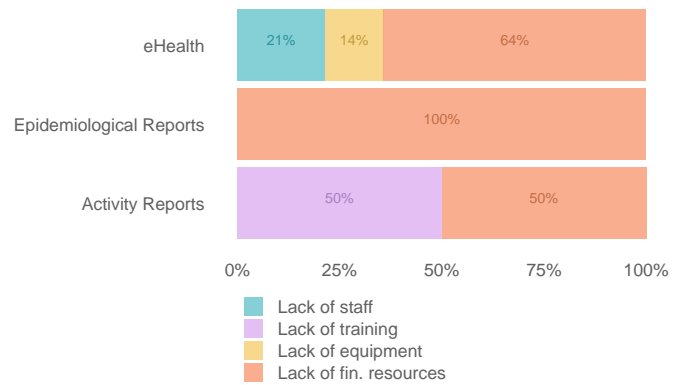
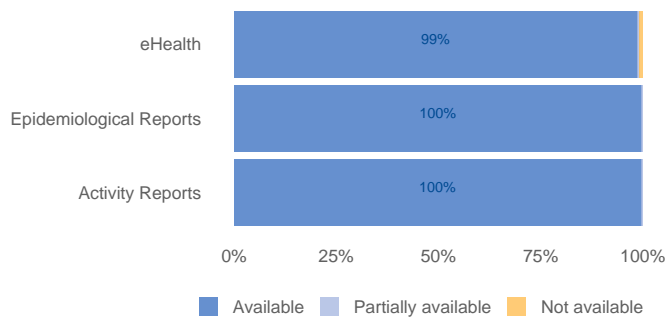


Kyivska

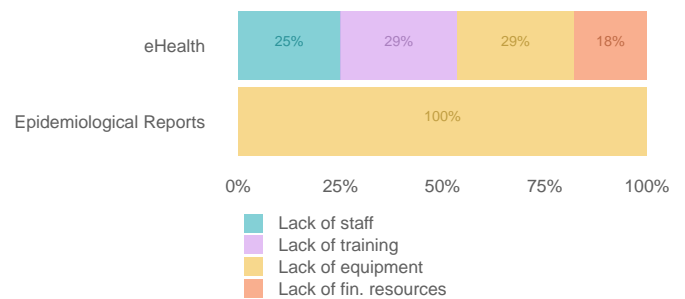
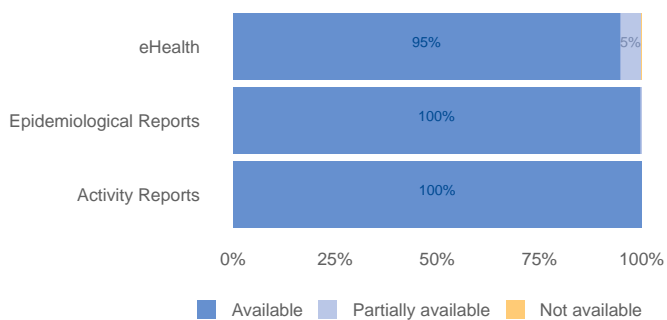


HEALTH INFORMATION MANAGEMENT SYSTEMS OVERVIEW BY OBLASTS

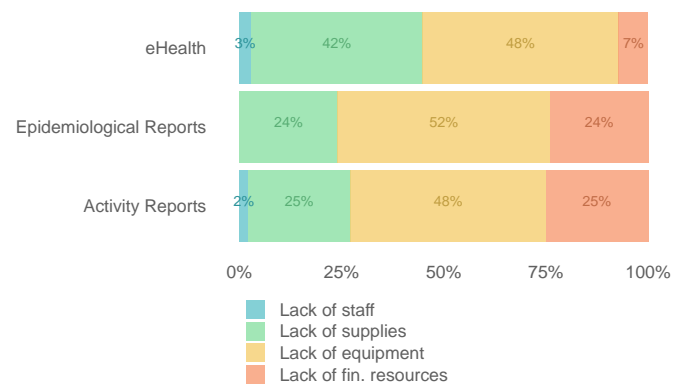
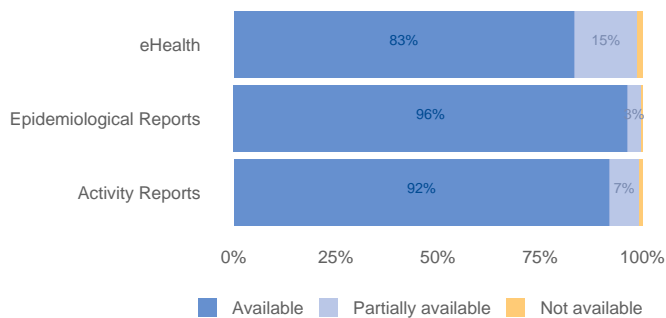
Lvivska



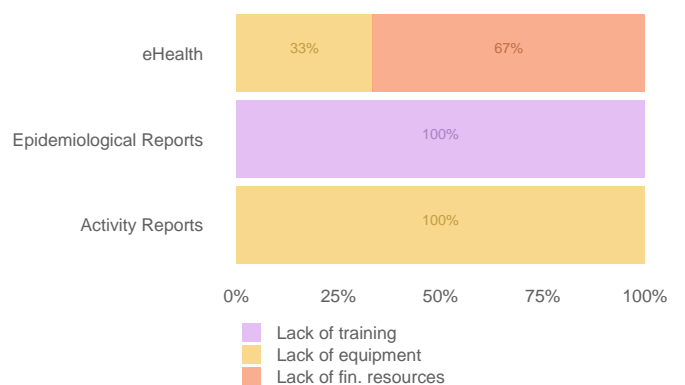
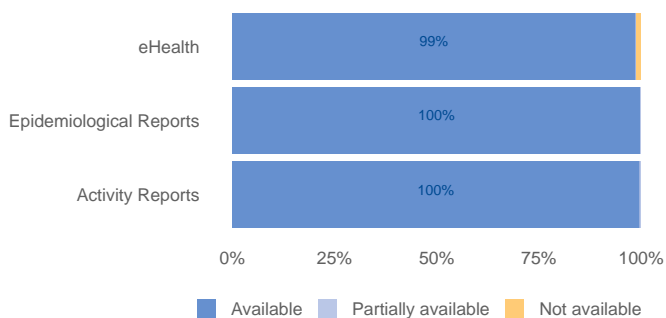
Mykolaivska



Odeska

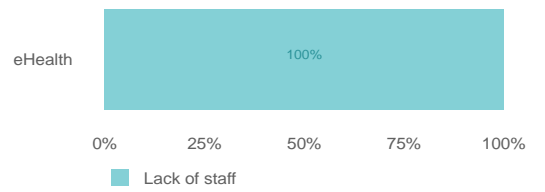
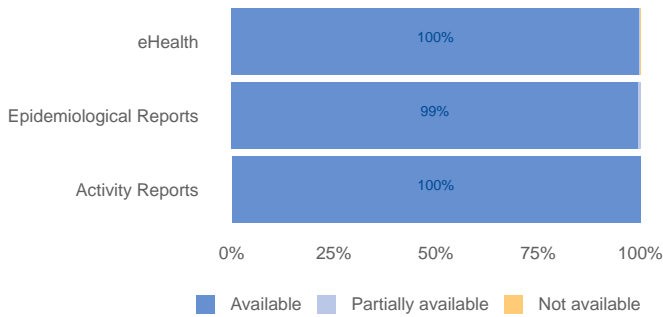


Poltavska

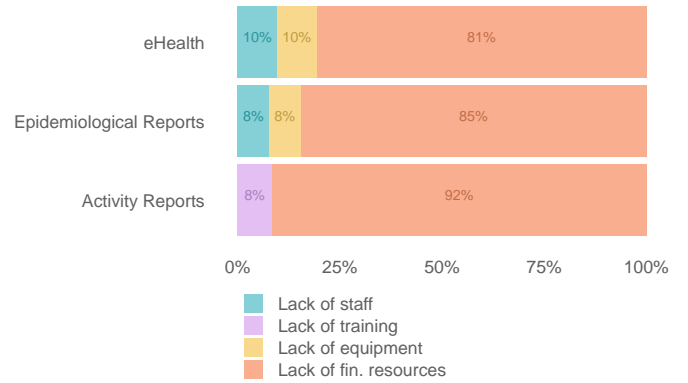
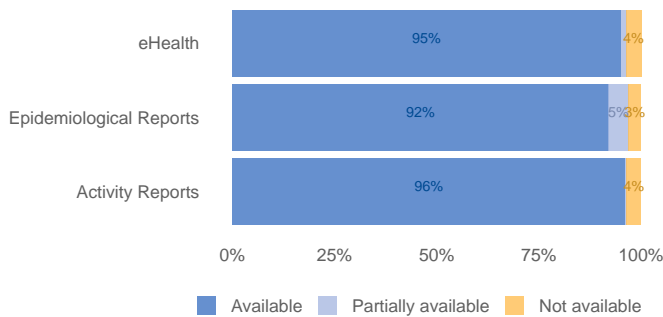


HEALTH INFORMATION MANAGEMENT SYSTEMS OVERVIEW BY OBLASTS

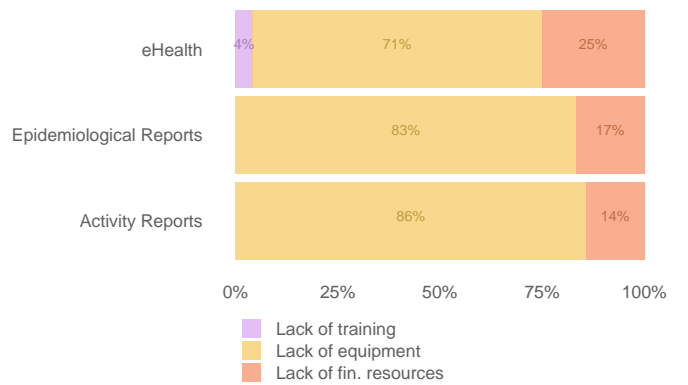
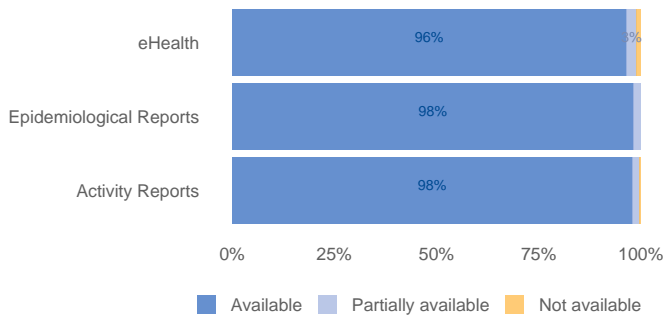
Rivnenska



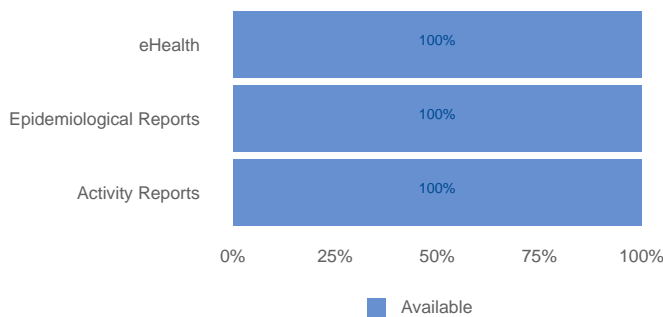
Sumska



Ternopil'ska

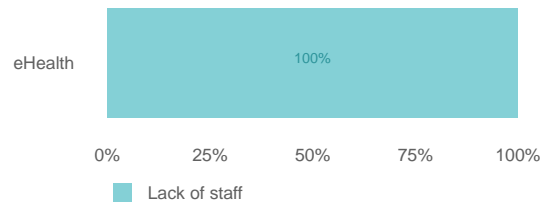
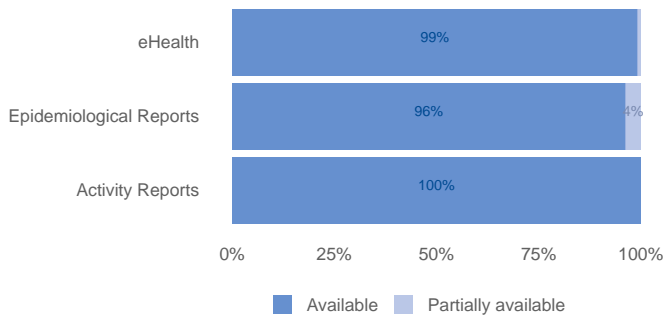


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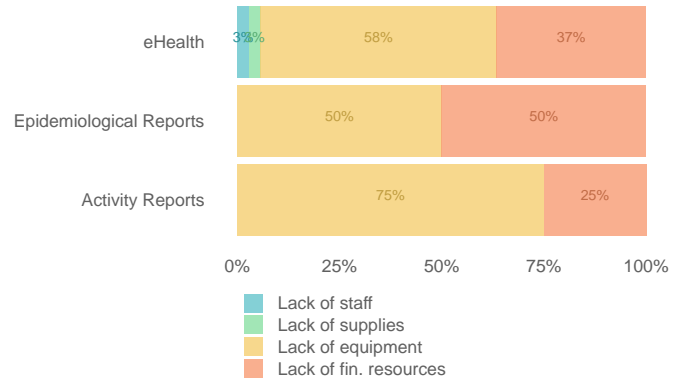
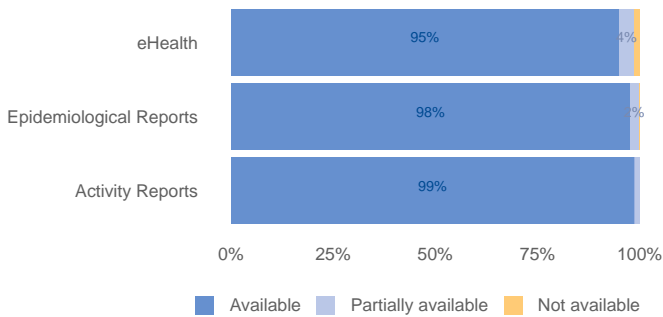


HEALTH INFORMATION MANAGEMENT SYSTEMS OVERVIEW BY OBLASTS

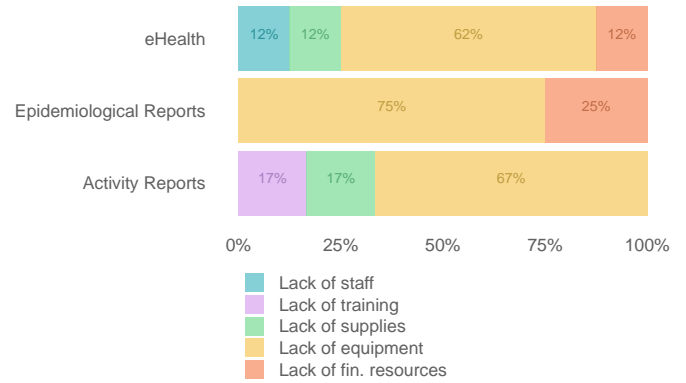
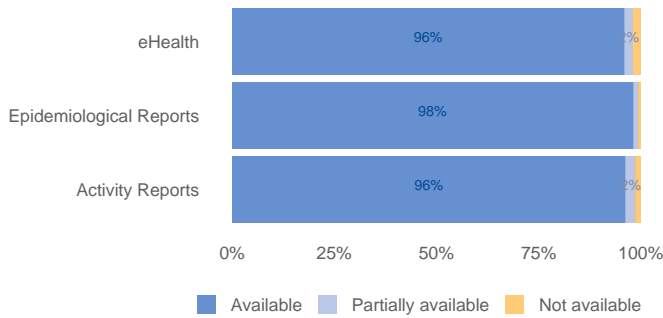
Volynska



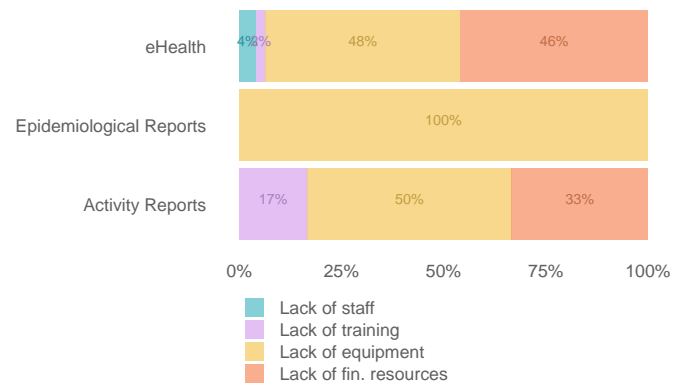
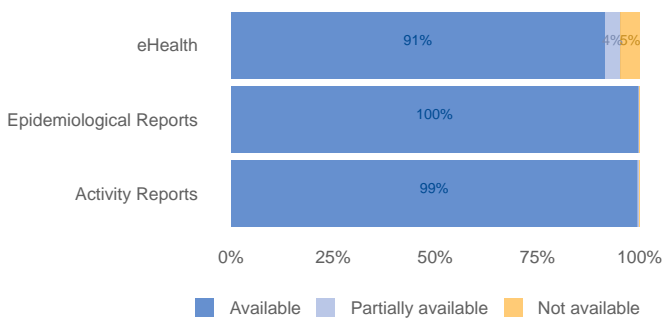
Zakarpatska



Zaporizka

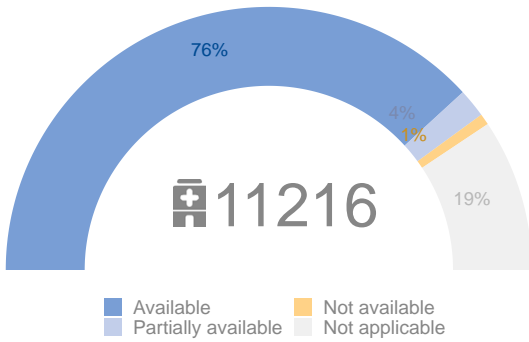


Zhytomyrska

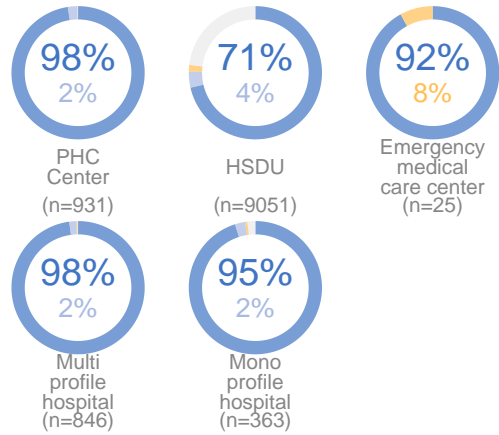


AVAILABILITY OF THE eHEALTH

Availability of the eHealth overview

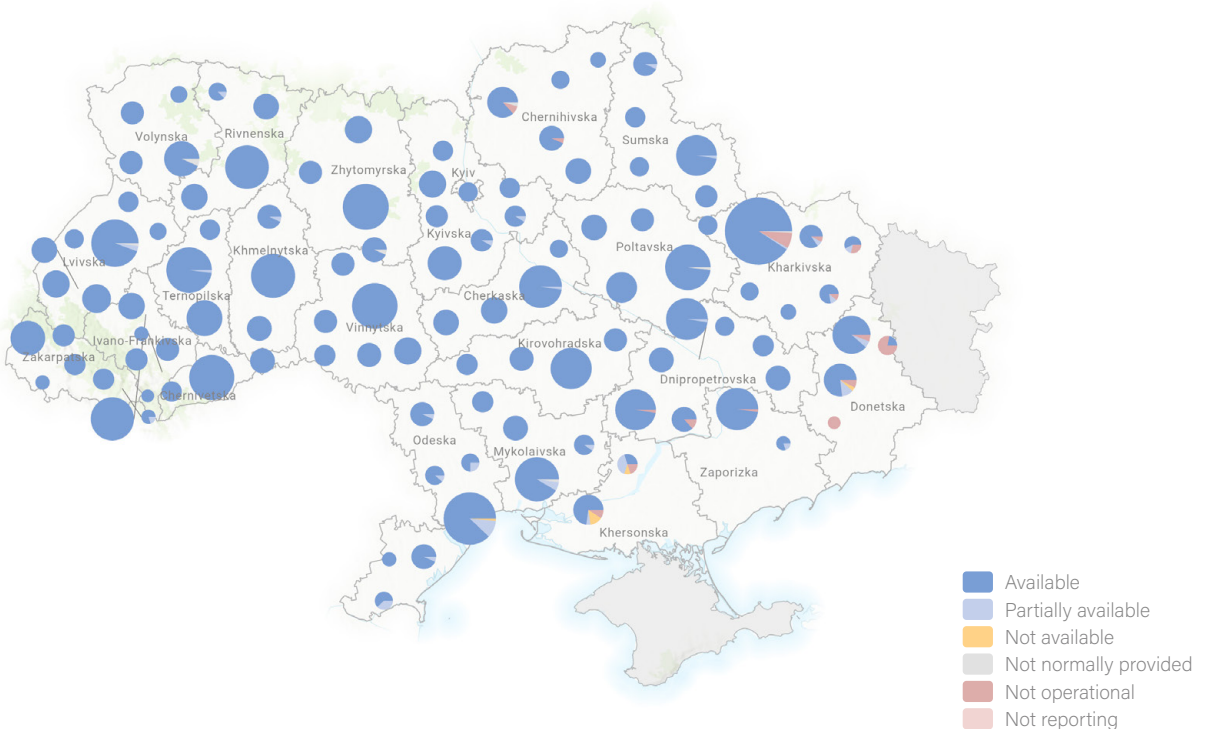
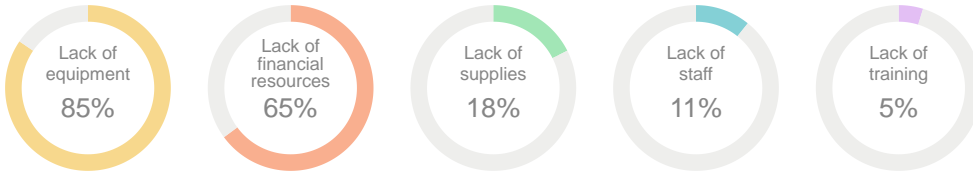


Availability by health facility type

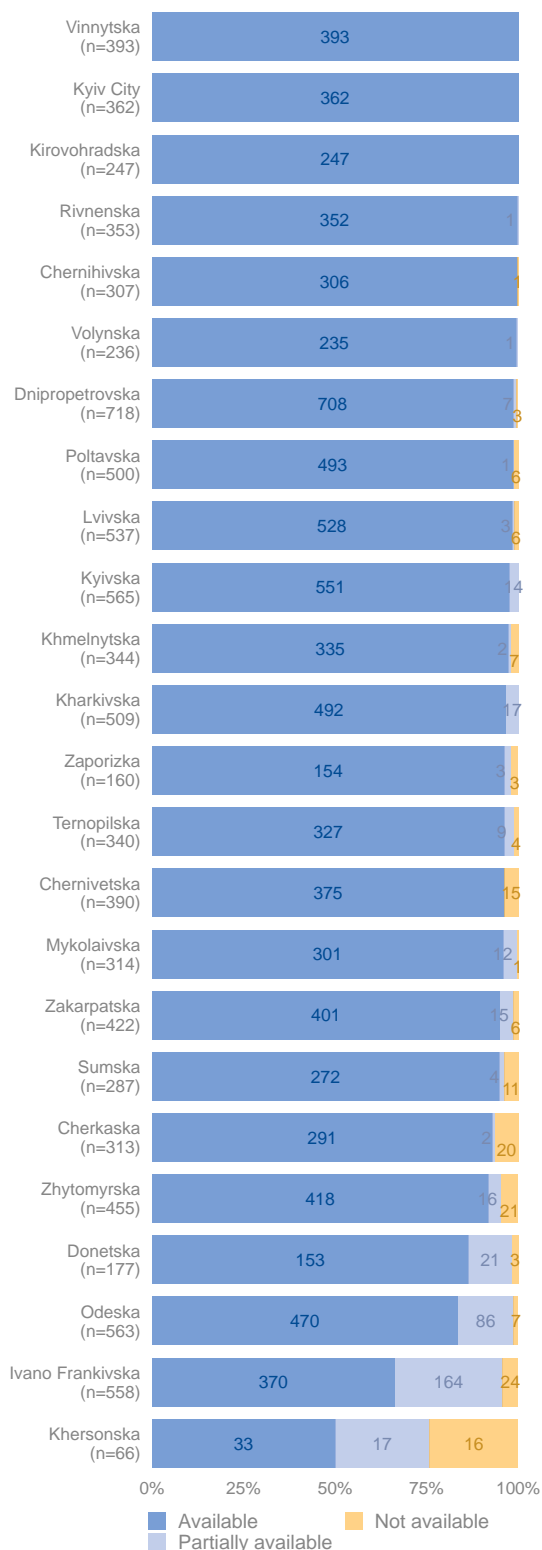


Main causes of unavailability

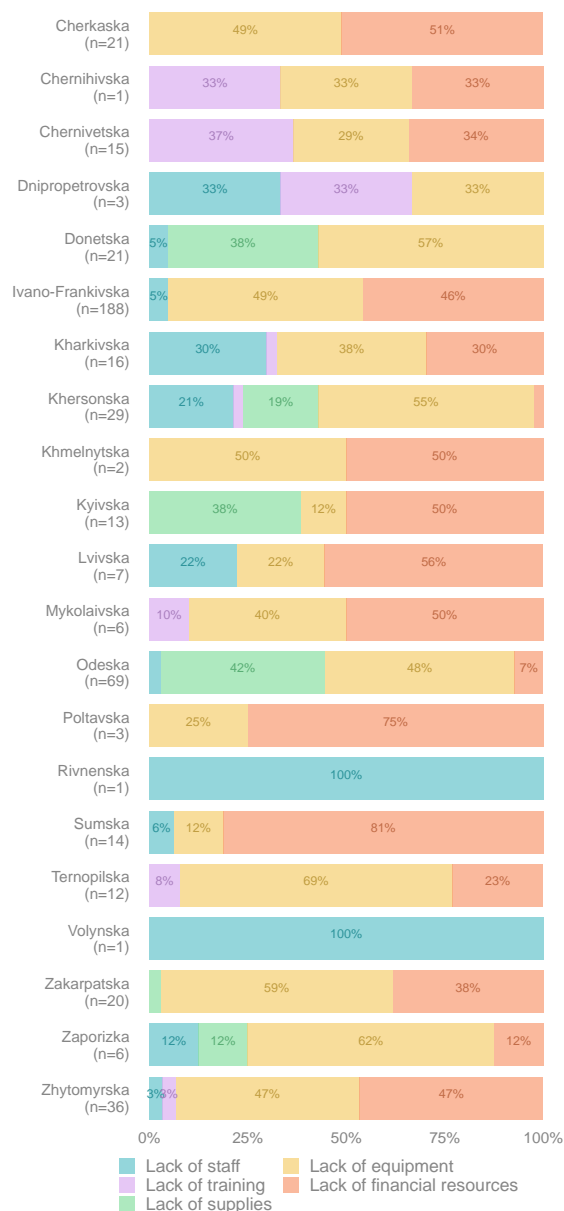
(n = 484)



Availability by oblast



Main causes of unavailability by oblast*



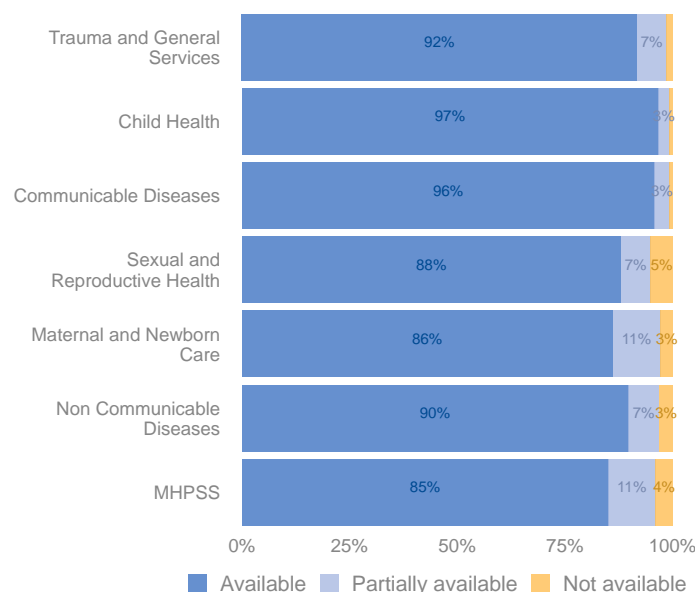
* Chart includes health facilities in which causes of unavailability were indicated

HEALTH SERVICE DOMAINS OVERVIEW

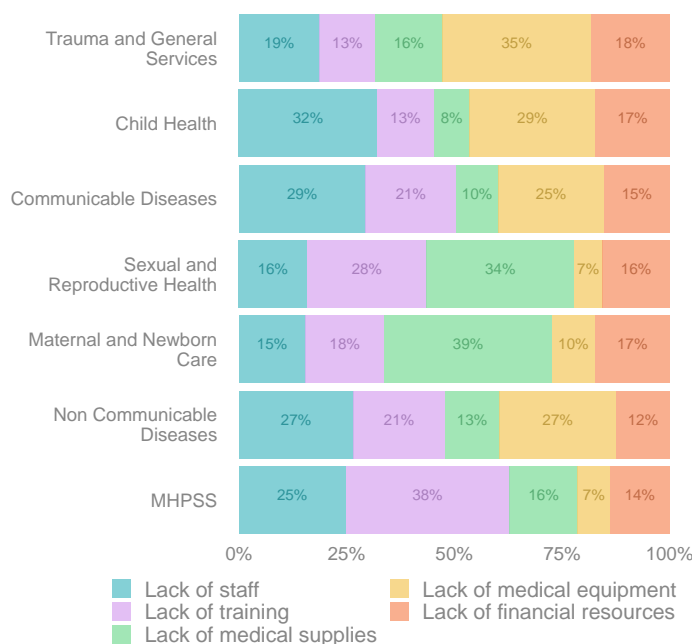


HEALTH SERVICE DOMAINS OVERVIEW*

Availability of services by domains



Barriers to service domains delivery

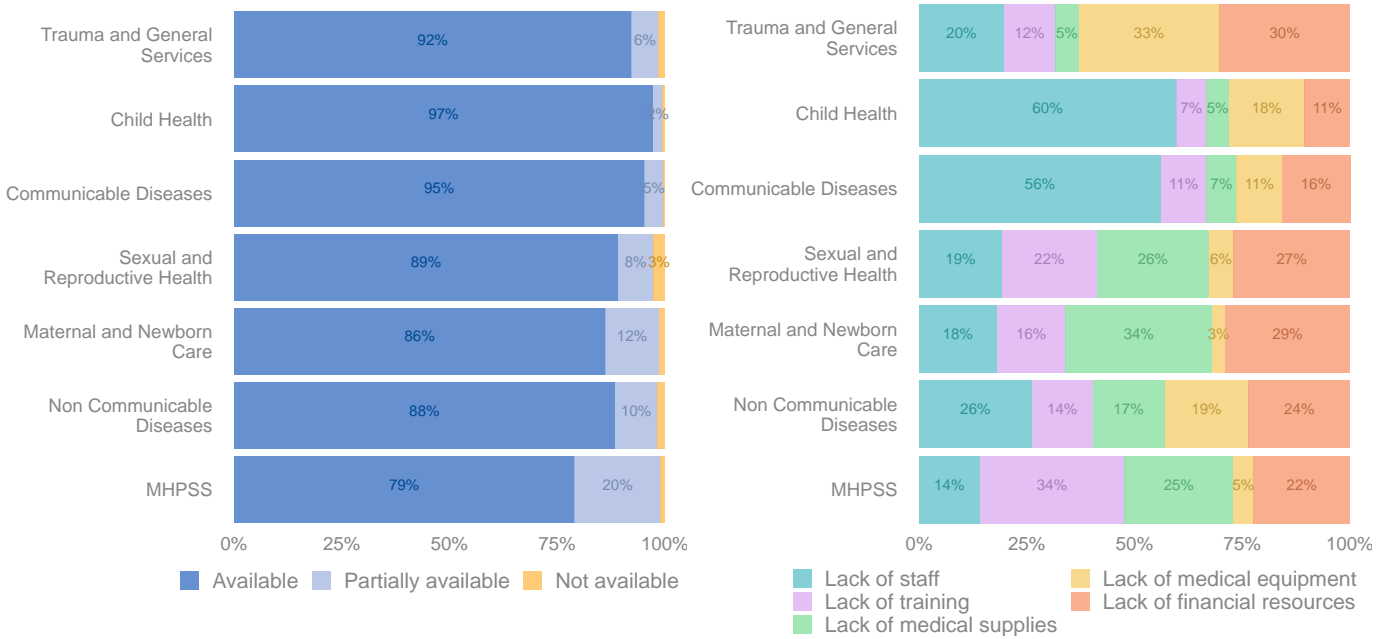


* Services domains include the following services:

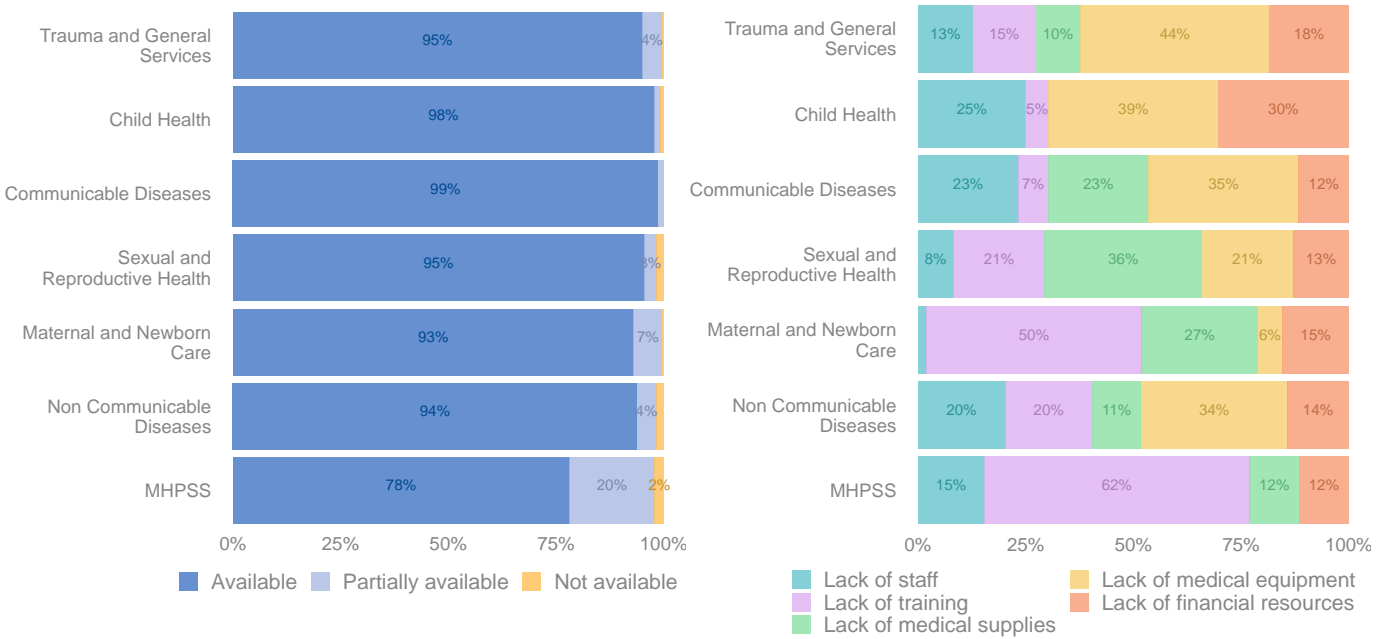
Domain	Services
Trauma and General Services	Request for ambulance services by the patient; Recognition of danger signs; Acuity-based formal triage; Basic emergency care by prehospital provider; Basic Emergency Care; Advanced Syndrome-based management; Referral capacity without the need of specific transportation; Monitored referral with transportation; Acceptance of referrals; Acceptance of complex referrals; Outpatient services for primary care; Remote consultations telemedicine; Outpatient department for specialized care; Home visits; Minor trauma definitive management; Emergency and elective surgery; Burns treatment; Emergency and elective surgery with at least two operating theatres; Orthopedic/trauma ward; Short hospitalization capacity; Basic inpatient bed capacity; Advanced inpatient bed capacity; Inpatient critical care management; Basic laboratory; Laboratory services for specialized care; Blood bank services; Hemodialysis/Peritoneal dialysis; Basic X-ray service; Radiology unit; Early discharge of post-operative patients in mass casualty scenarios
Child Health	Outpatient services; Inpatient surgical care; Inpatient non-surgical care; Management of children classified as severe or very severe diseases; Community mobilization for EPI; EPI; Breastfeeding practices; Growth monitoring
Communicable Diseases	Syndromic surveillance; Event-based surveillance; Tuberculosis; MDRTB; IEC on local priority diseases; Local priority diseases; Management of severe and/or complicated communicable diseases; Isolation unit or room; Readiness of epidemic and emergency situations
Sexual and Reproductive Health	Free access to condoms; IEC on STI/HIV; Syndromic management of STIs; HIV testing and counseling; Pre-exposure prophylaxis; PMTCT; Antiretroviral treatment; Clinical management of rape survivors; Emergency contraception; Post-exposure prophylaxis
Maternal and Newborn Care	Family planning; Antenatal care; Skilled care during childbirth; Basic Emergency Obstetric Care; Comprehensive Emergency Obstetric Care; Postpartum care; Comprehensive abortion care
Non-Communicable Diseases	Promote self-care; NCD Clinic; Asthma and Chronic Obstructive Pulmonary Disease; Availability of cancer diagnostics services; Primary cancer screening (non-instrumental methods); Mammography; Hysteroscopy; Esophagogastroduodenoscopy; Colonoscopy; Cystoscopy; Bronchoscopy; Prostate biopsy; Availability of cancer treatment services; Chemotherapy treatment and follow-up; Radiotherapy treatment and follow-up; Hematological and oncohematological diseases; Hypertension; Medical assistance in acute cerebral stroke; Medical assistance for acute myocardial infarction; Diabetes; Inpatient acute rehabilitation; Outpatient or community level rehabilitation services; Prosthetics and Orthotics; Oral health and dental care
MHPSS	Psychological first aid; Outpatient management of mental disorders; Management of opioid drugs abuse; Inpatient care for mental disorders by specialists

HEALTH SERVICE DOMAINS BY OBLAST

Cherkaska

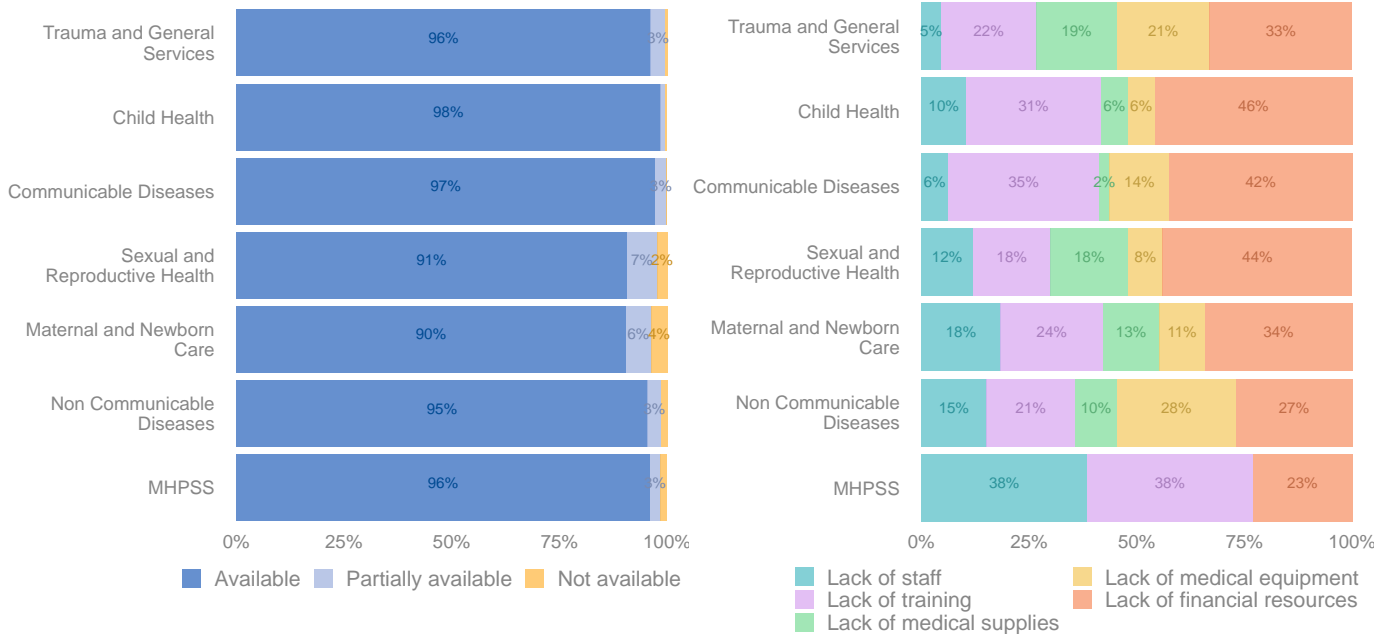


Chernihivska

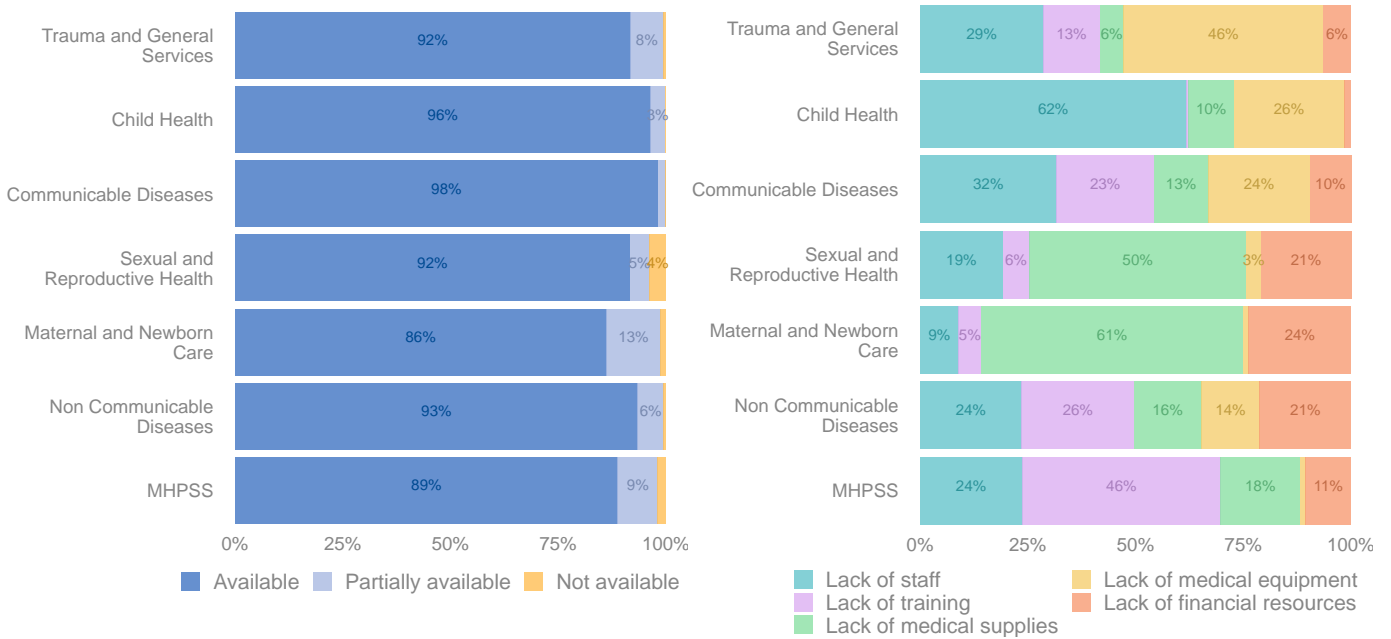


HEALTH SERVICE DOMAINS BY OBLAST

Chernivetska

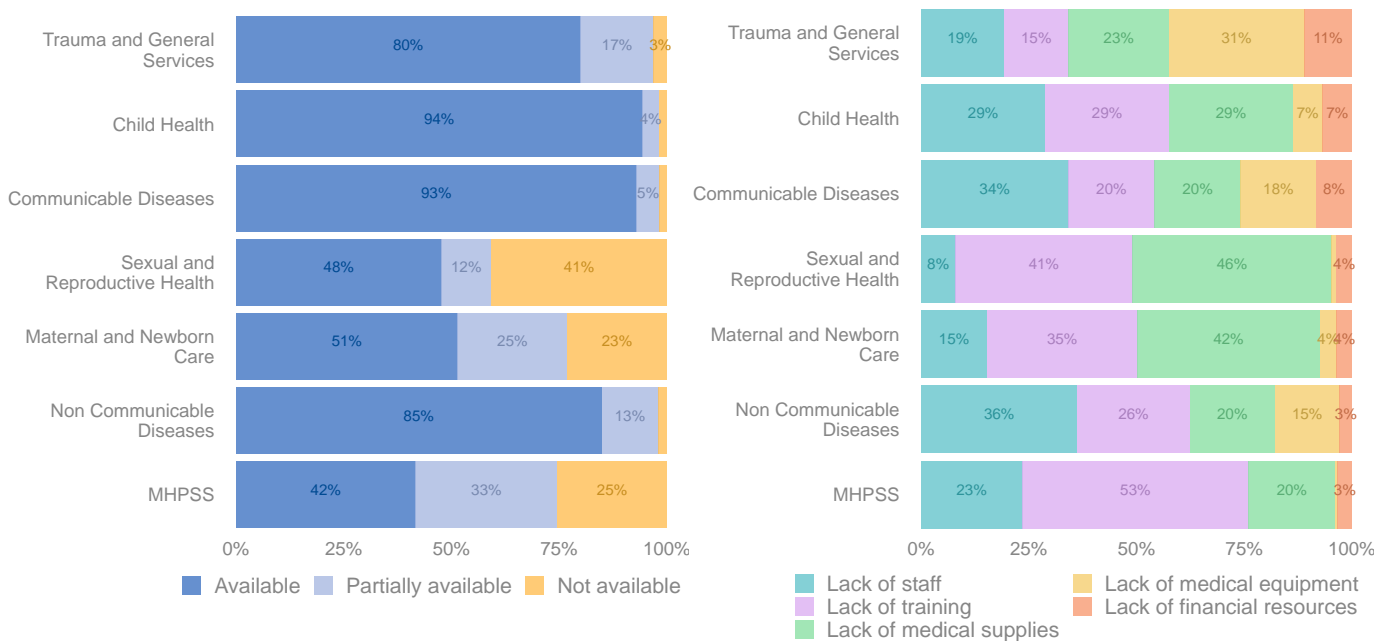


Dnipropetrovska

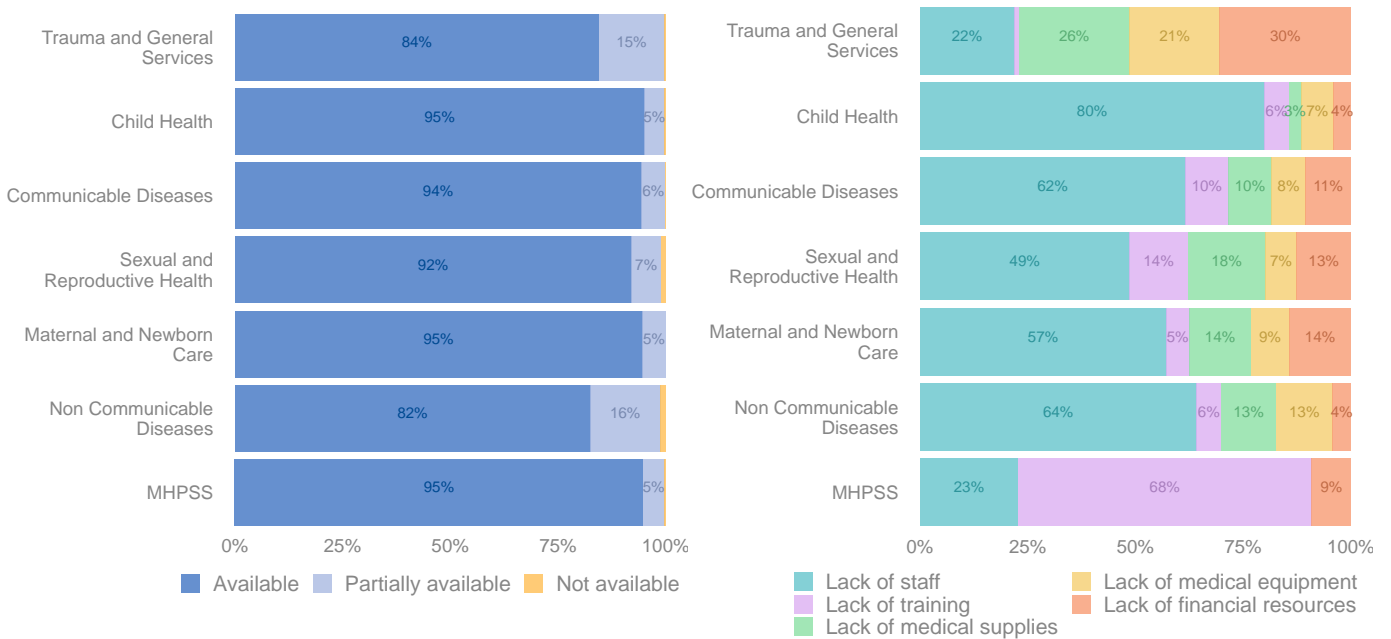


HEALTH SERVICE DOMAINS BY OBLAST

Donetska

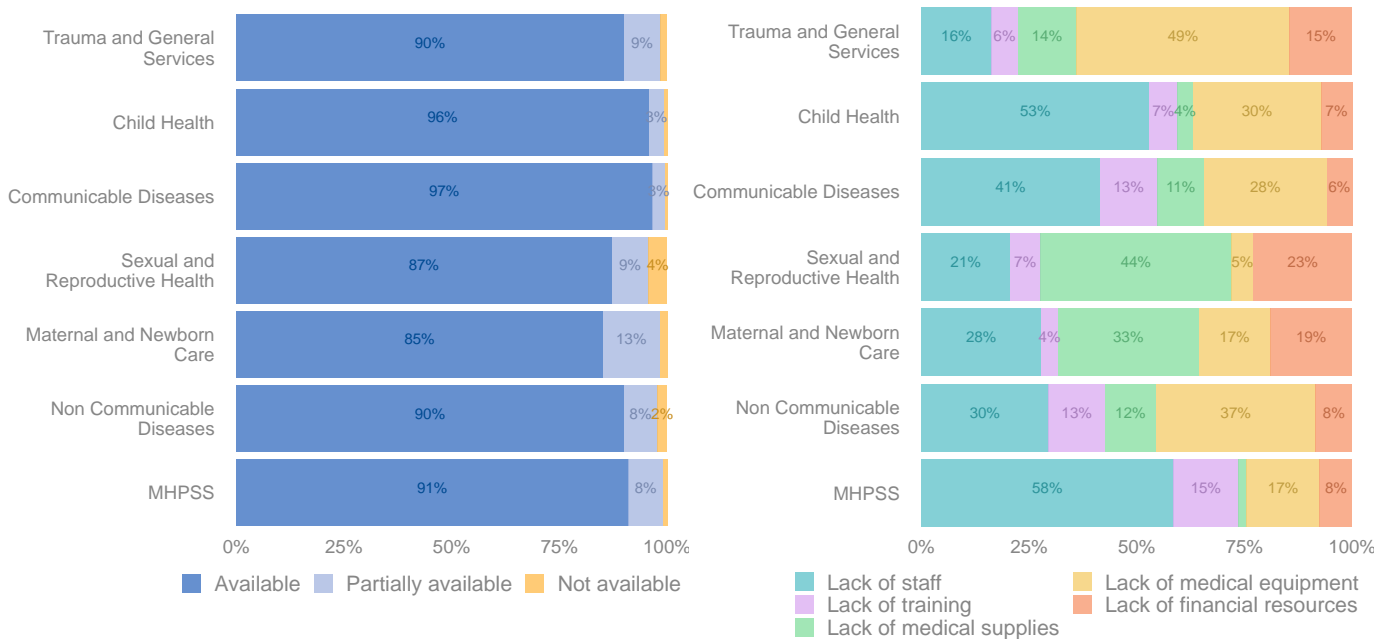


Ivano-Frankivska

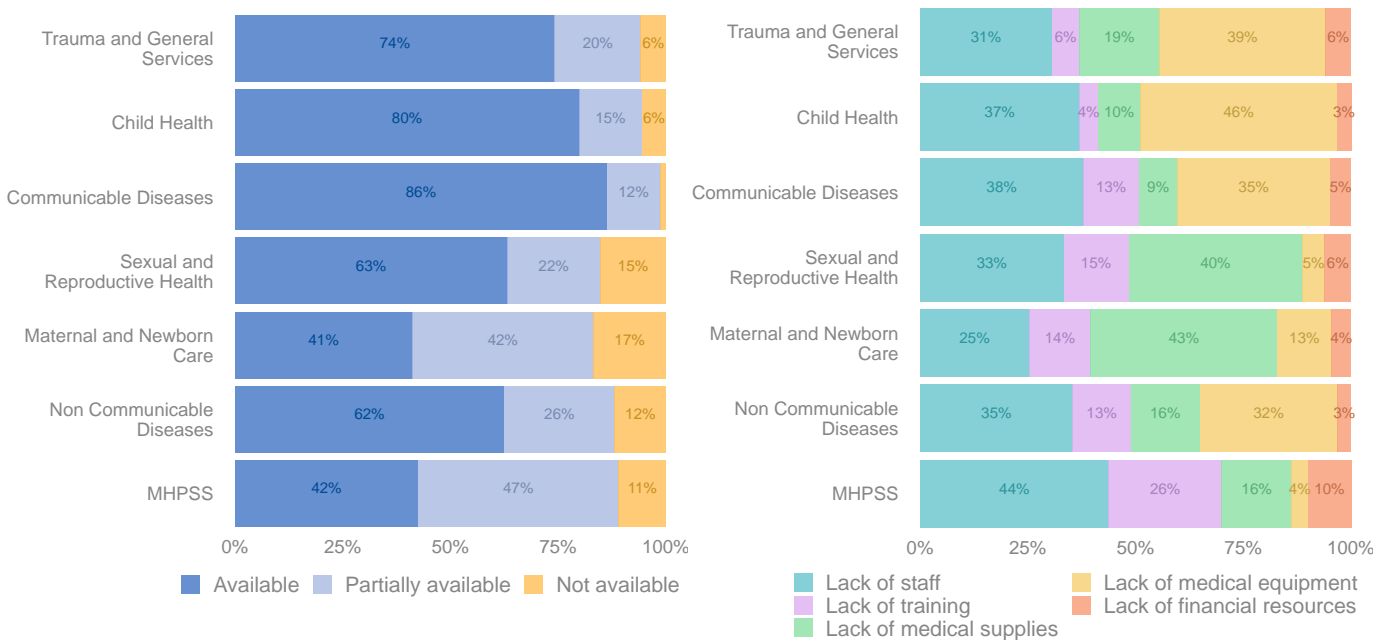


HEALTH SERVICE DOMAINS BY OBLAST

Kharkivska

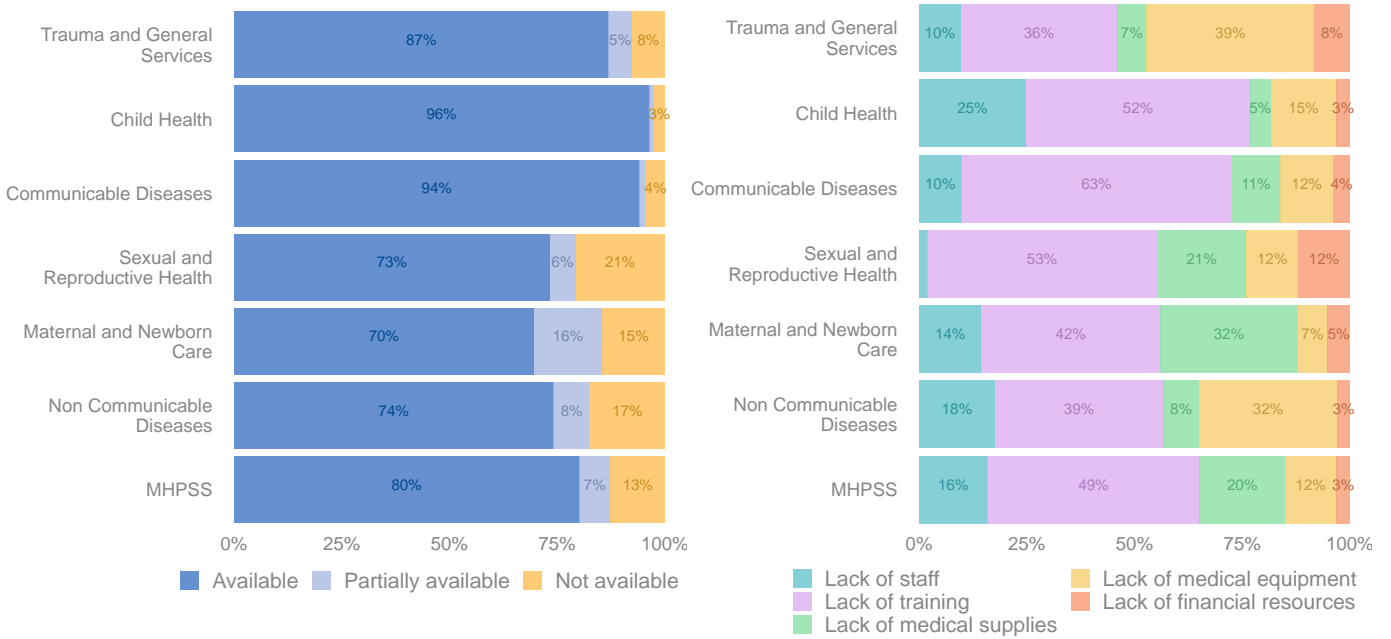


Khersonska

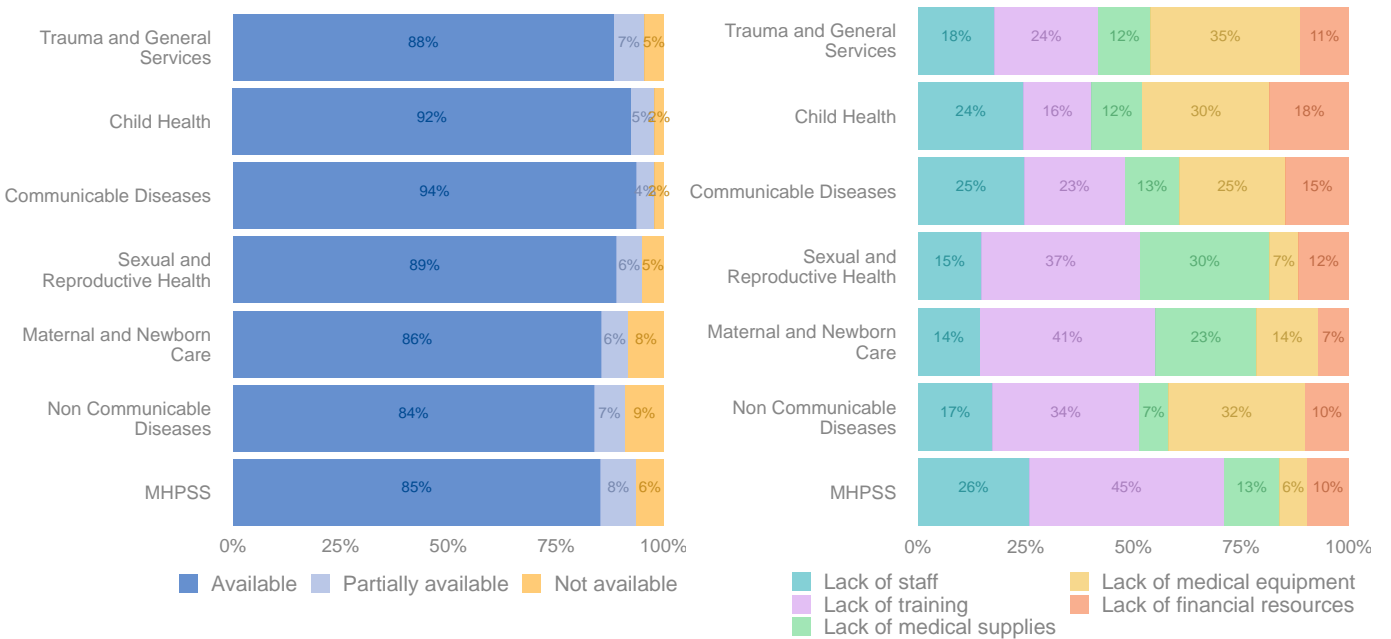


HEALTH SERVICE DOMAINS BY OBLAST

Khmelnyska

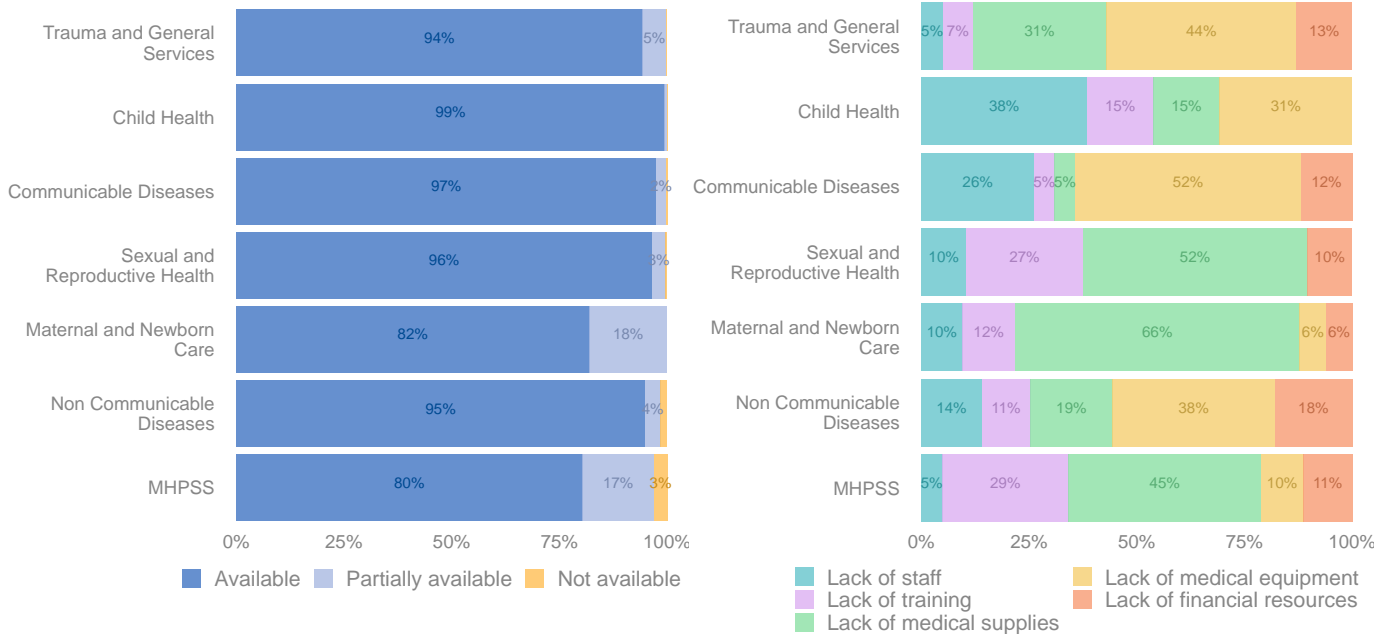


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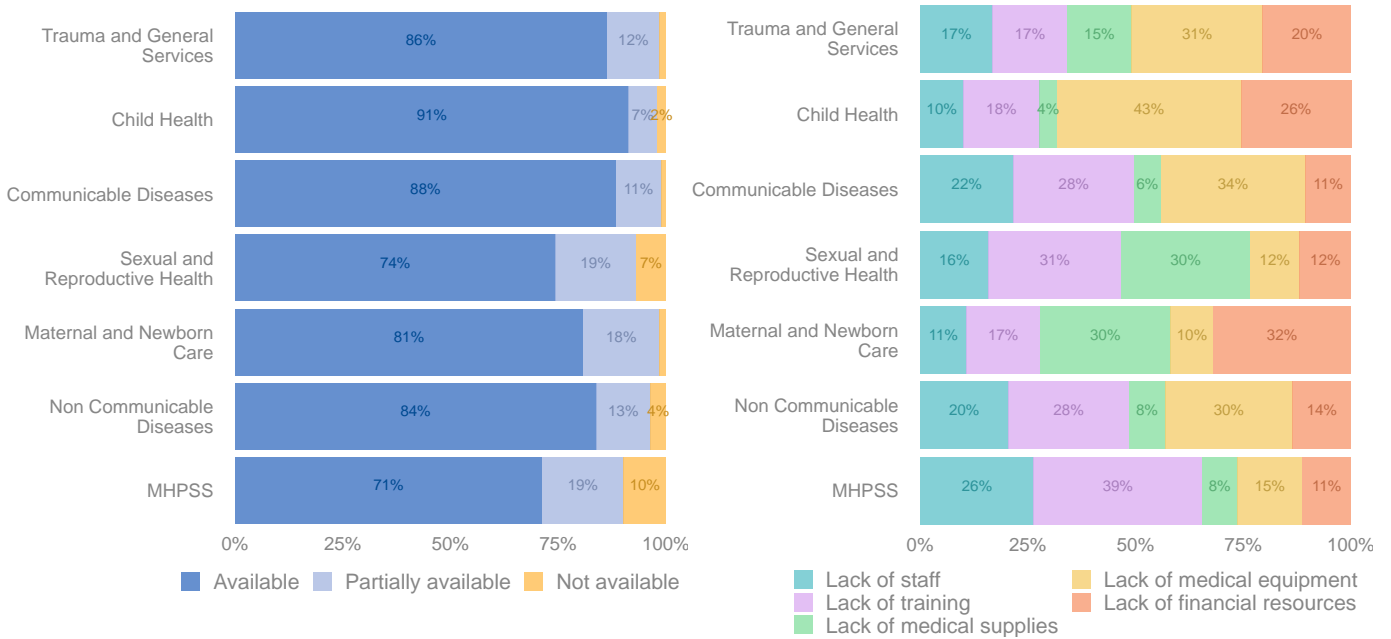


HEALTH SERVICE DOMAINS BY OBLAST

Kyiv City

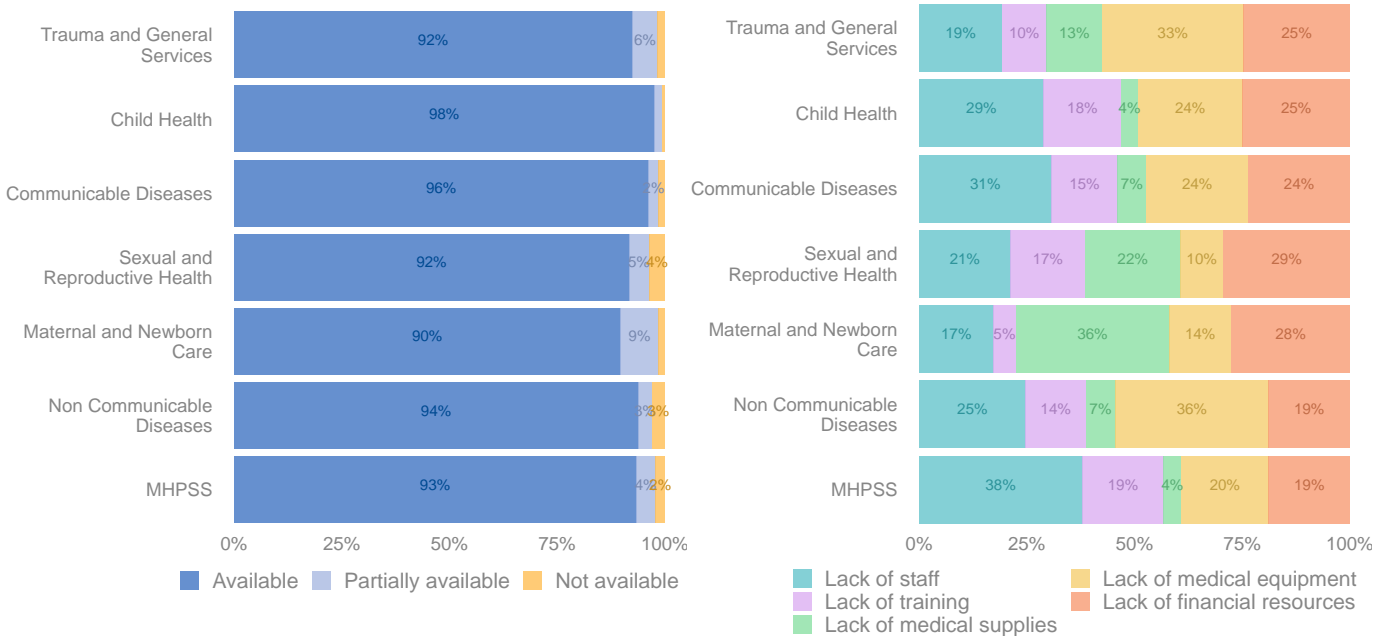


Kyivska

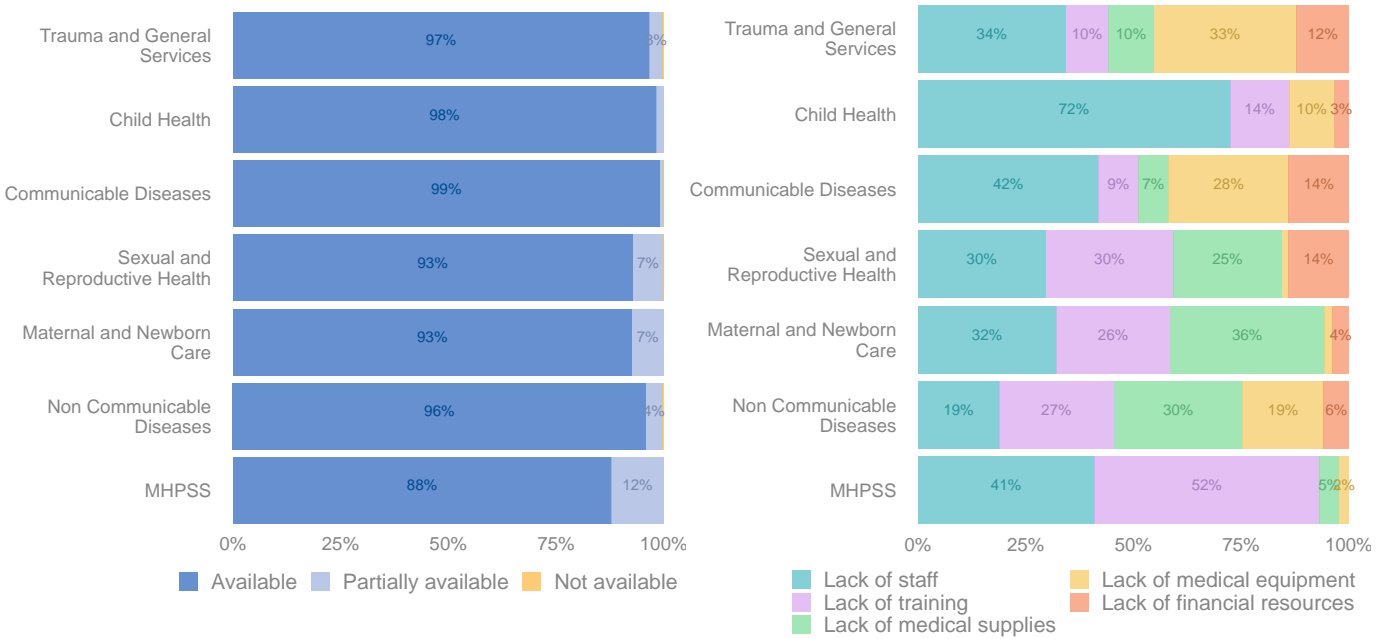


HEALTH SERVICE DOMAINS BY OBLAST

Lvivska

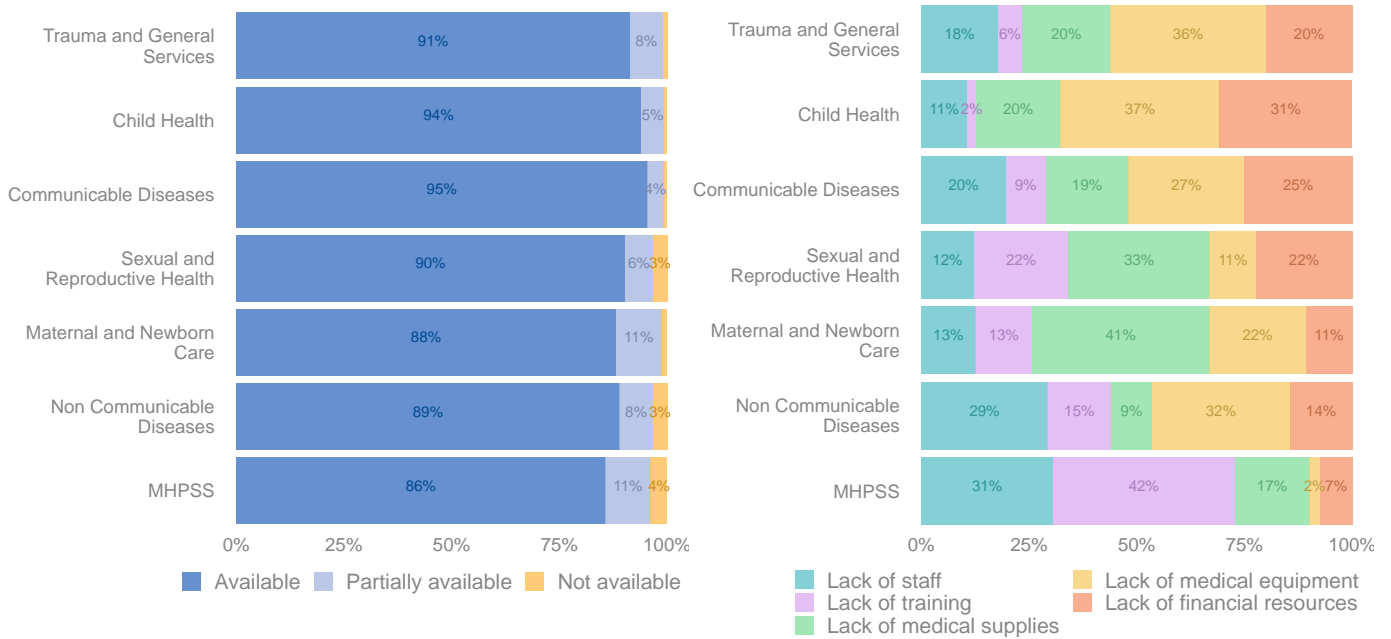


Mykolaivska

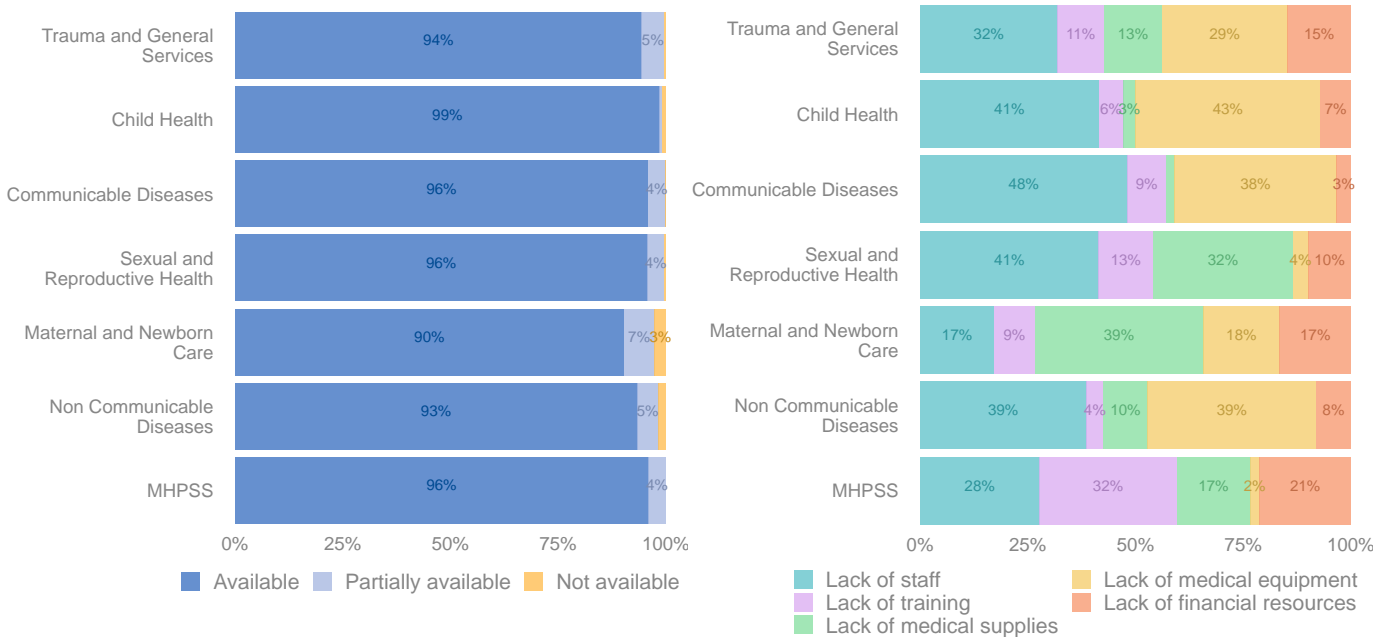


HEALTH SERVICE DOMAINS BY OBLAST

Odeska

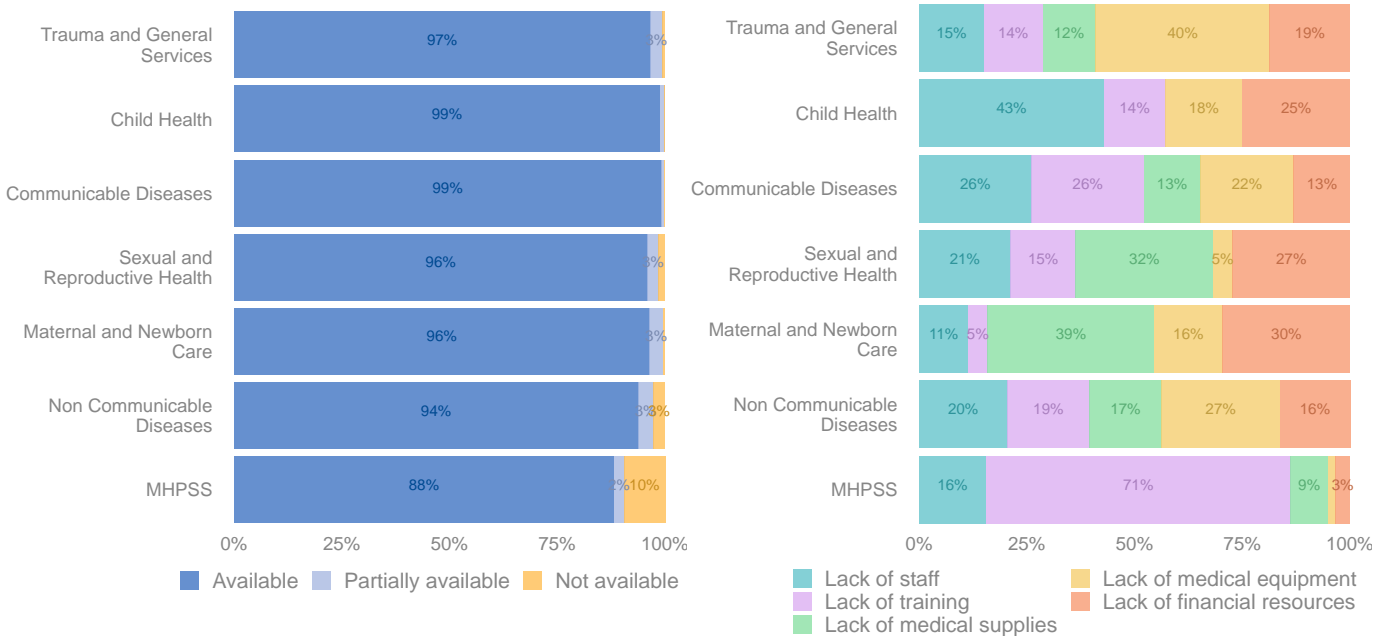


Poltavska

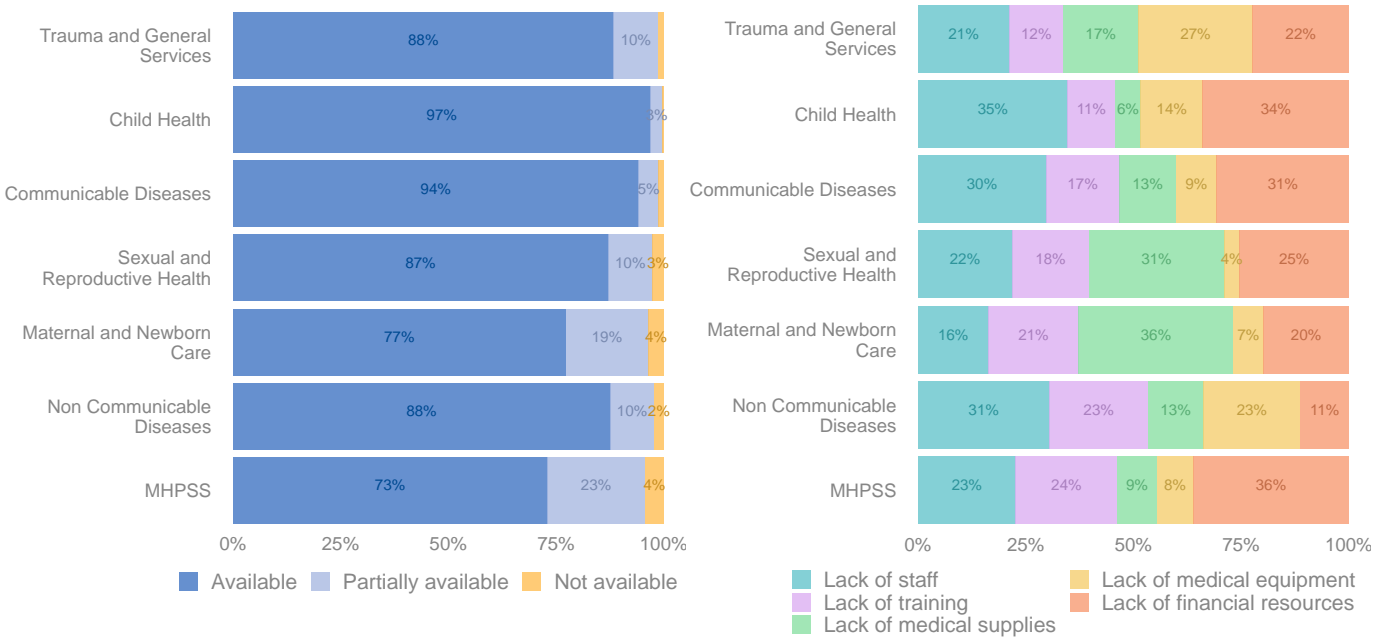


HEALTH SERVICE DOMAINS BY OBLAST

Rivnenska

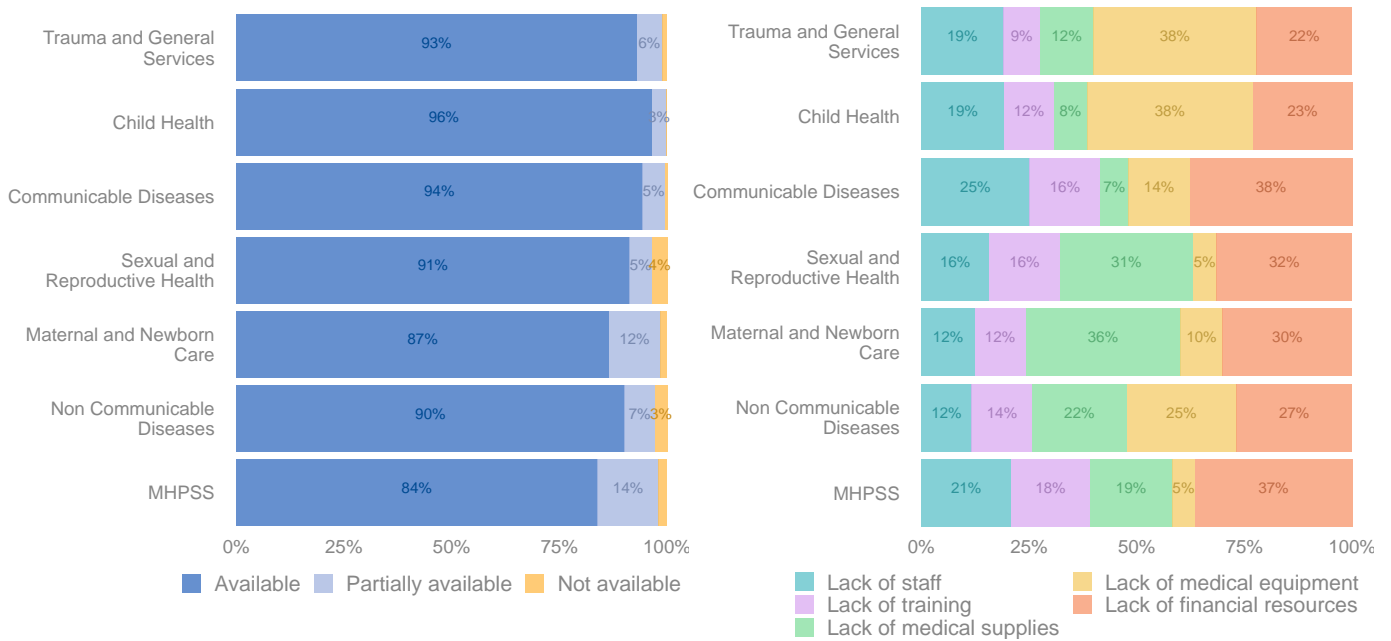


Sumska

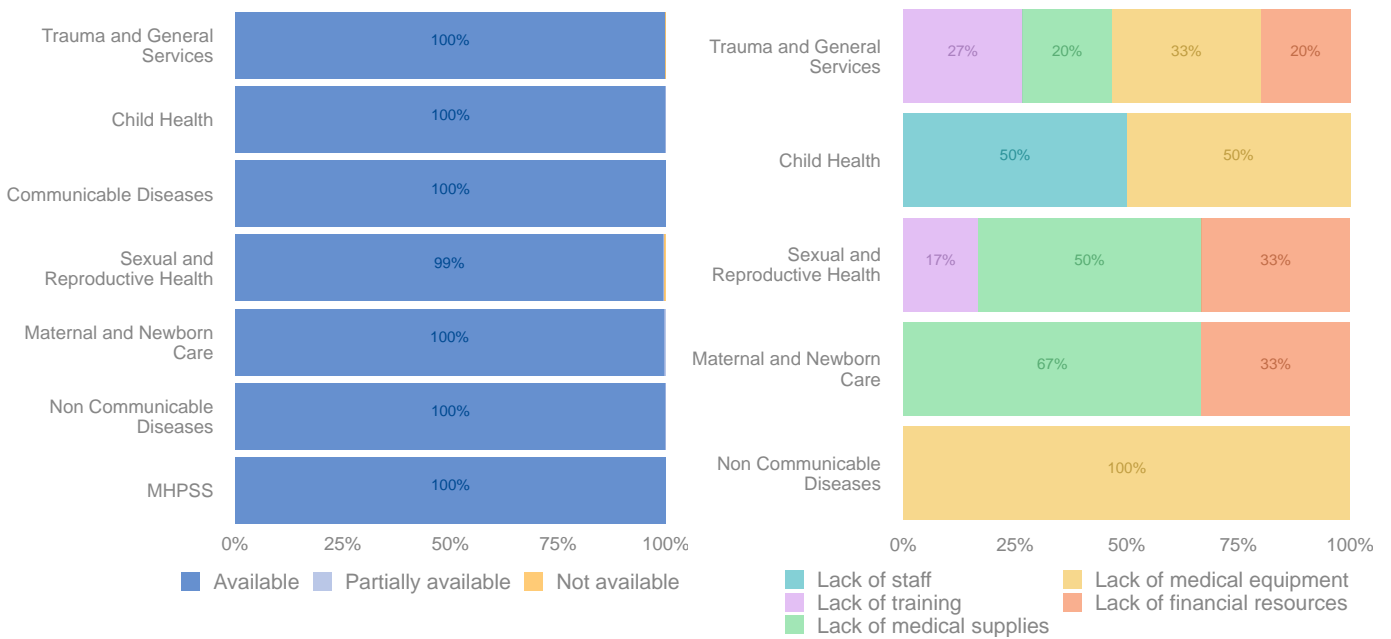


HEALTH SERVICE DOMAINS BY OBLAST

Ternopil'ska

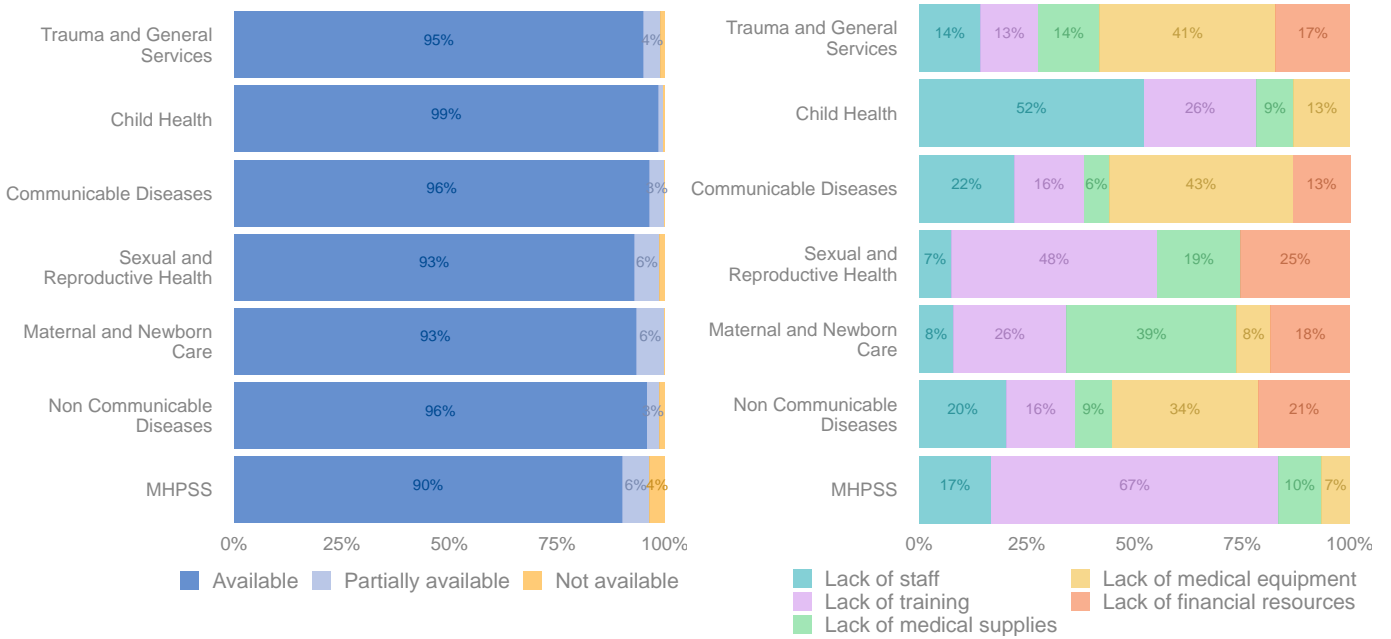


Vinnytska

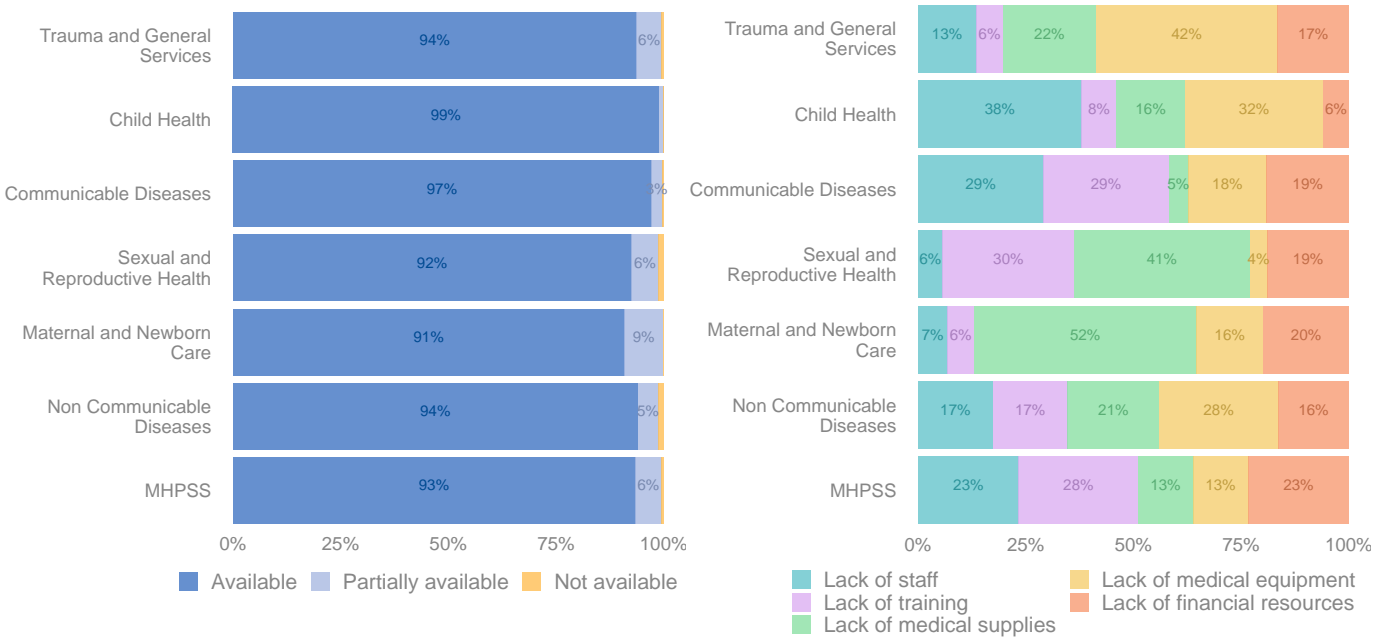


HEALTH SERVICE DOMAINS BY OBLAST

Volynska

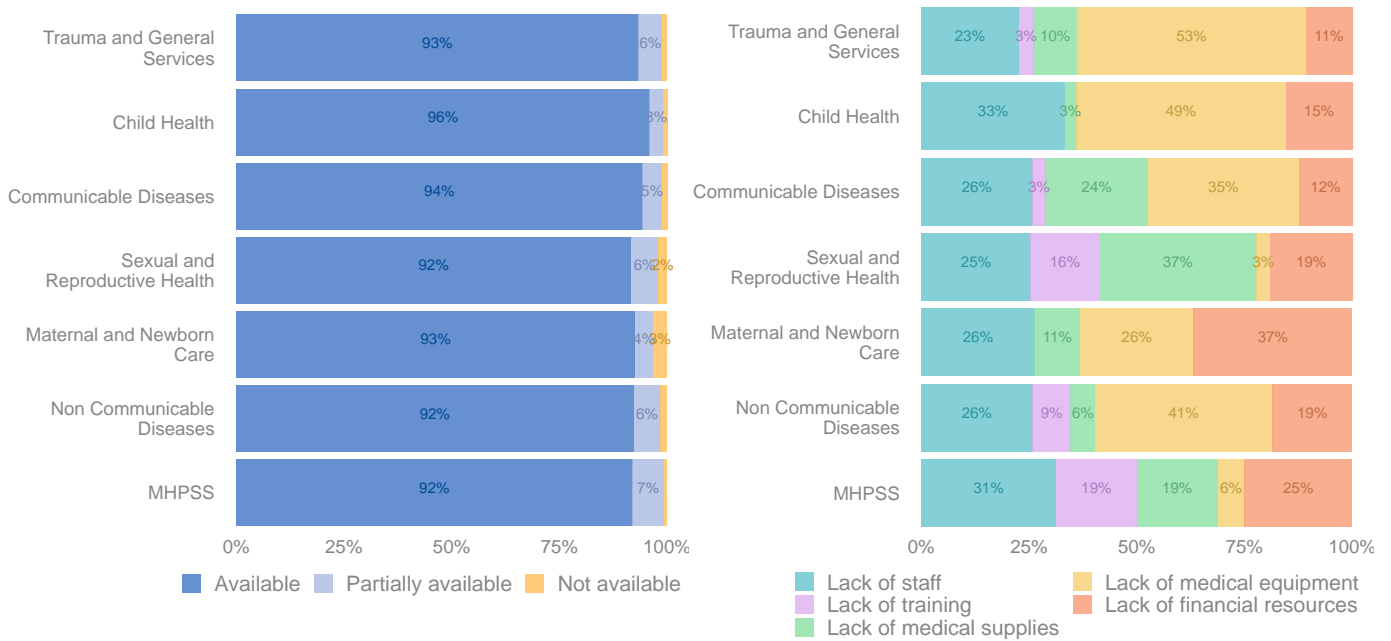


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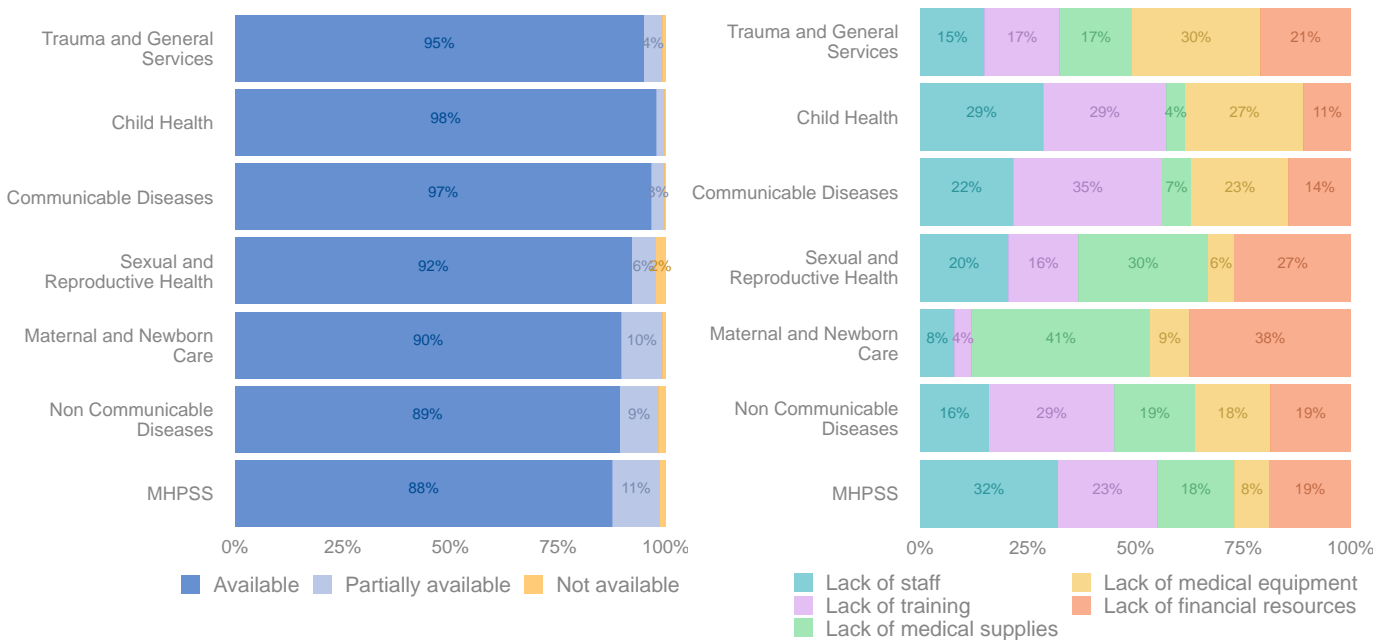


HEALTH SERVICE DOMAINS BY OBLAST

Zaporizka



Zhytomyrska



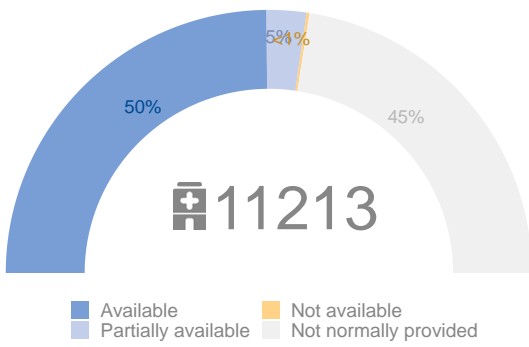


GENERAL CLINICAL AND EMERGENCY CARE SERVICES

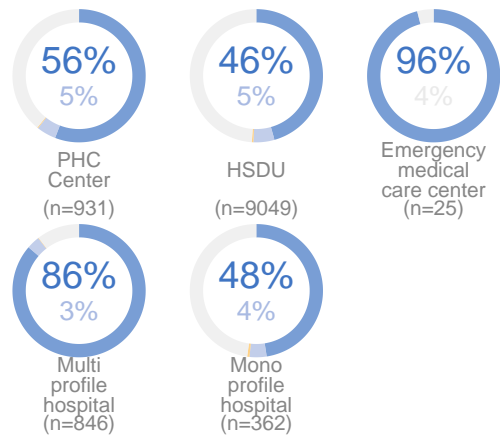


BASIC EMERGENCY CARE

Service availability

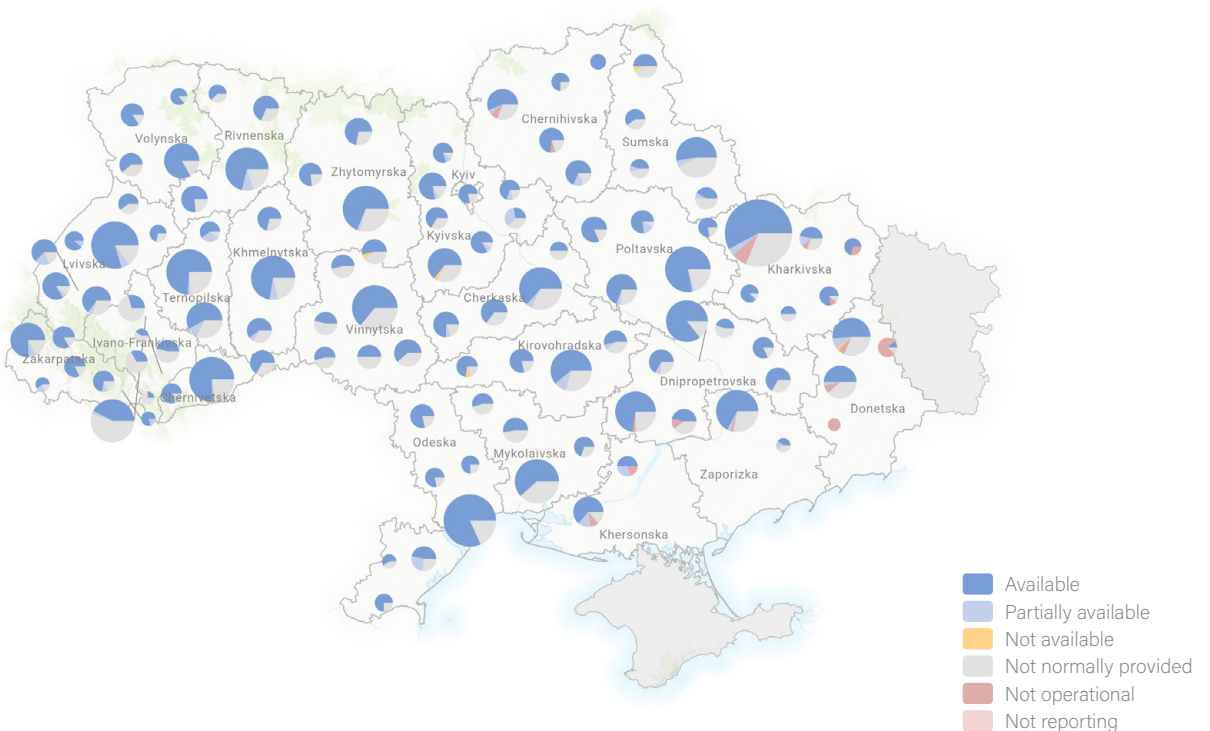


Service availability by health facility type



Main barriers impeding service delivery

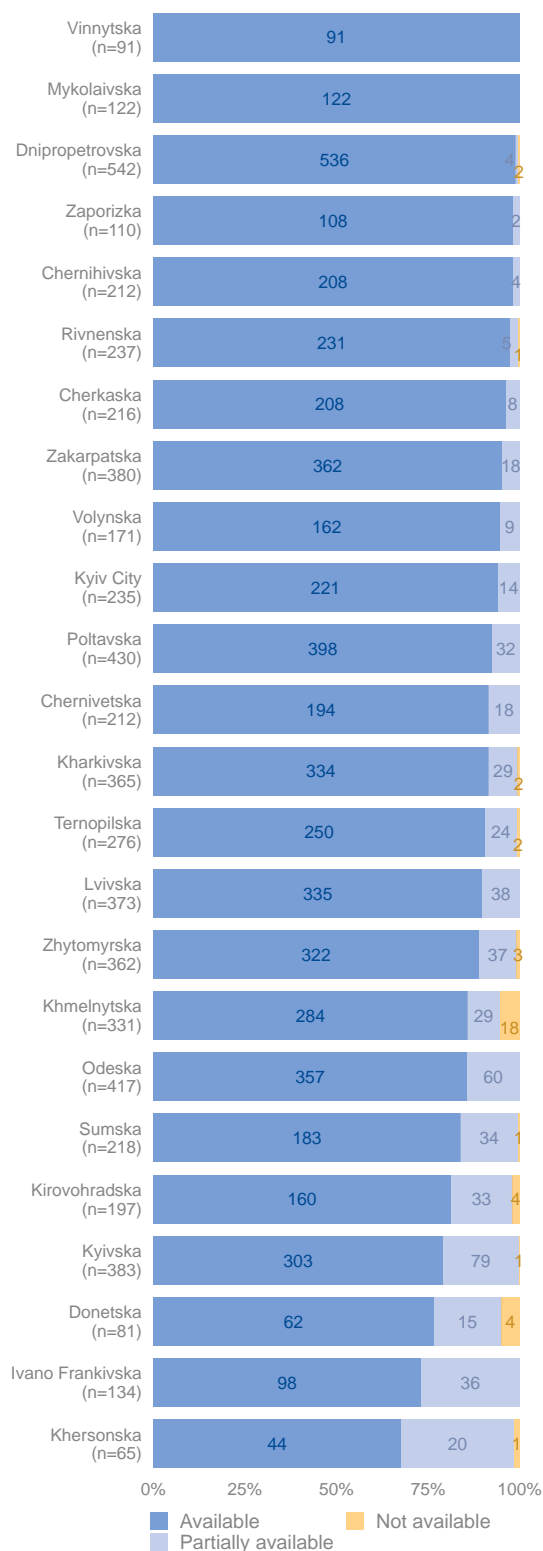
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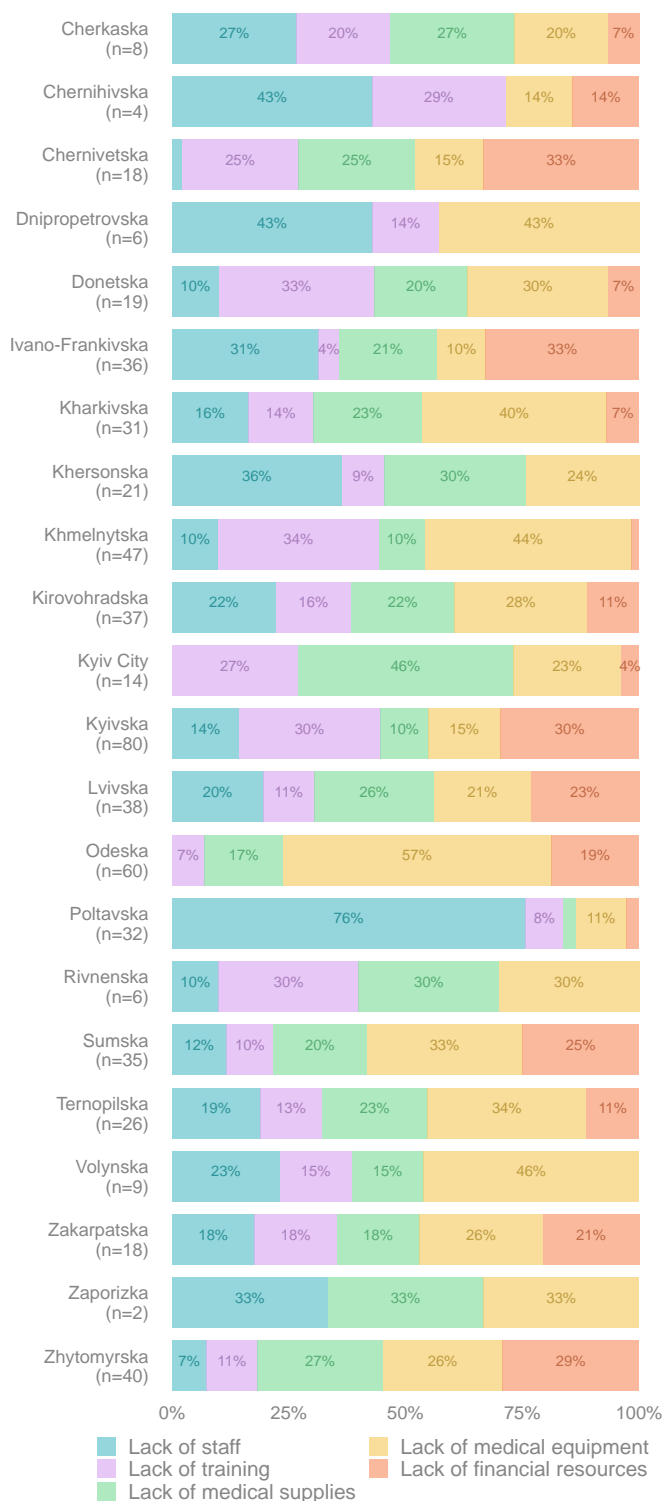
Map excludes HSDUs

BASIC EMERGENCY CARE

Service availability by oblast*



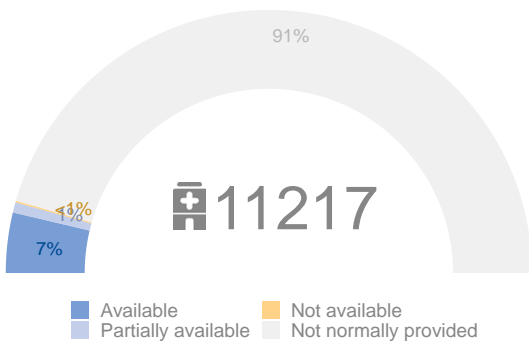
Main barriers impeding service delivery by oblast**



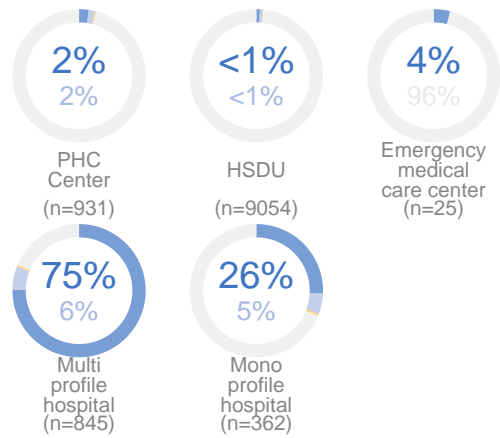
* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

ADVANCED SYNDROME-BASED MANAGEMENT

Service availability

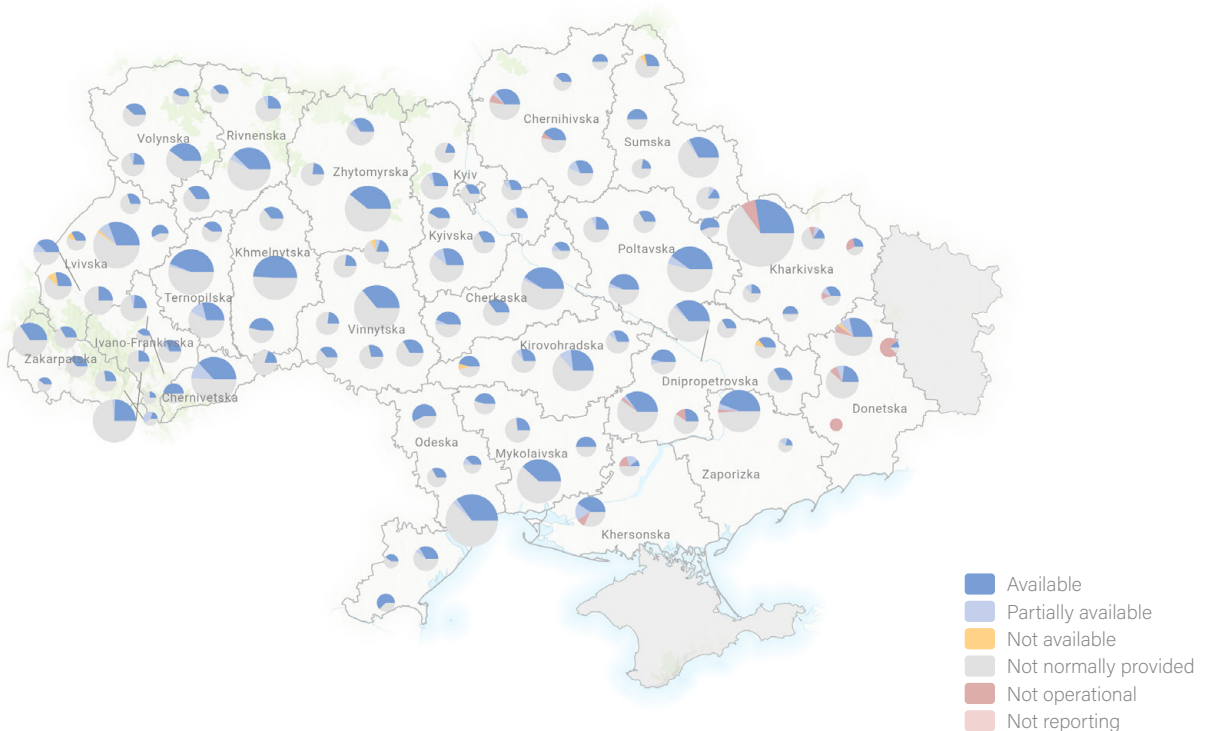


Service availability by health facility type



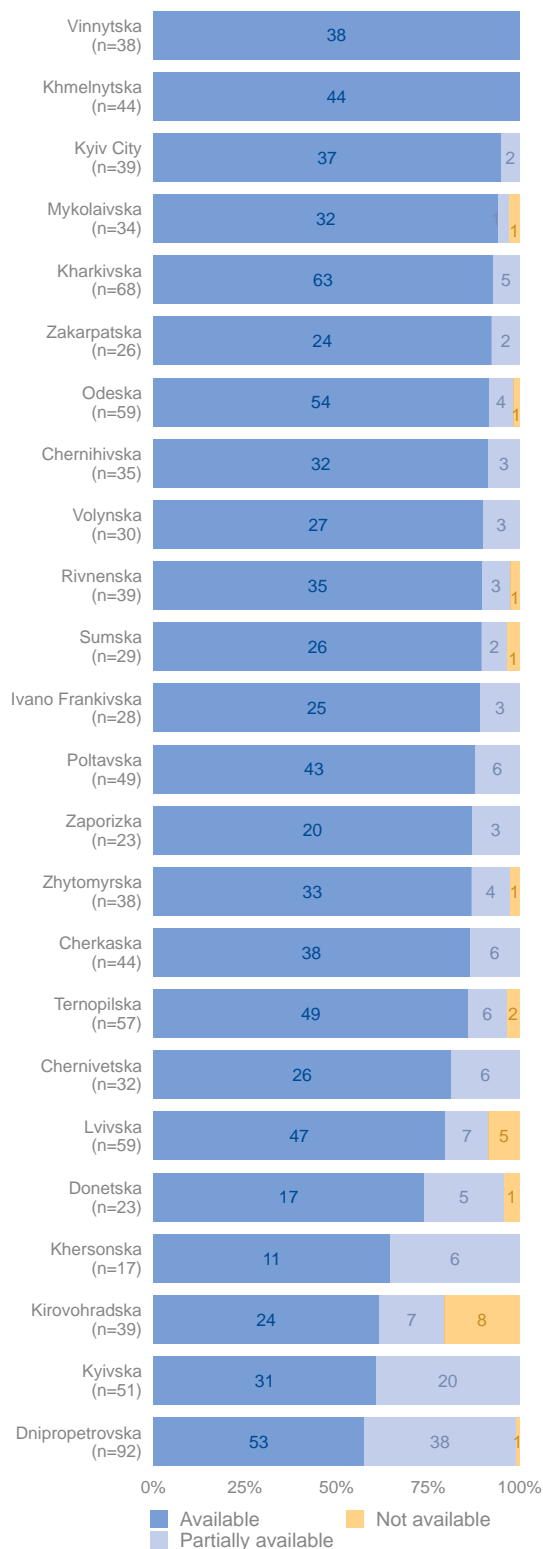
Main barriers impeding service delivery

(n = 164)

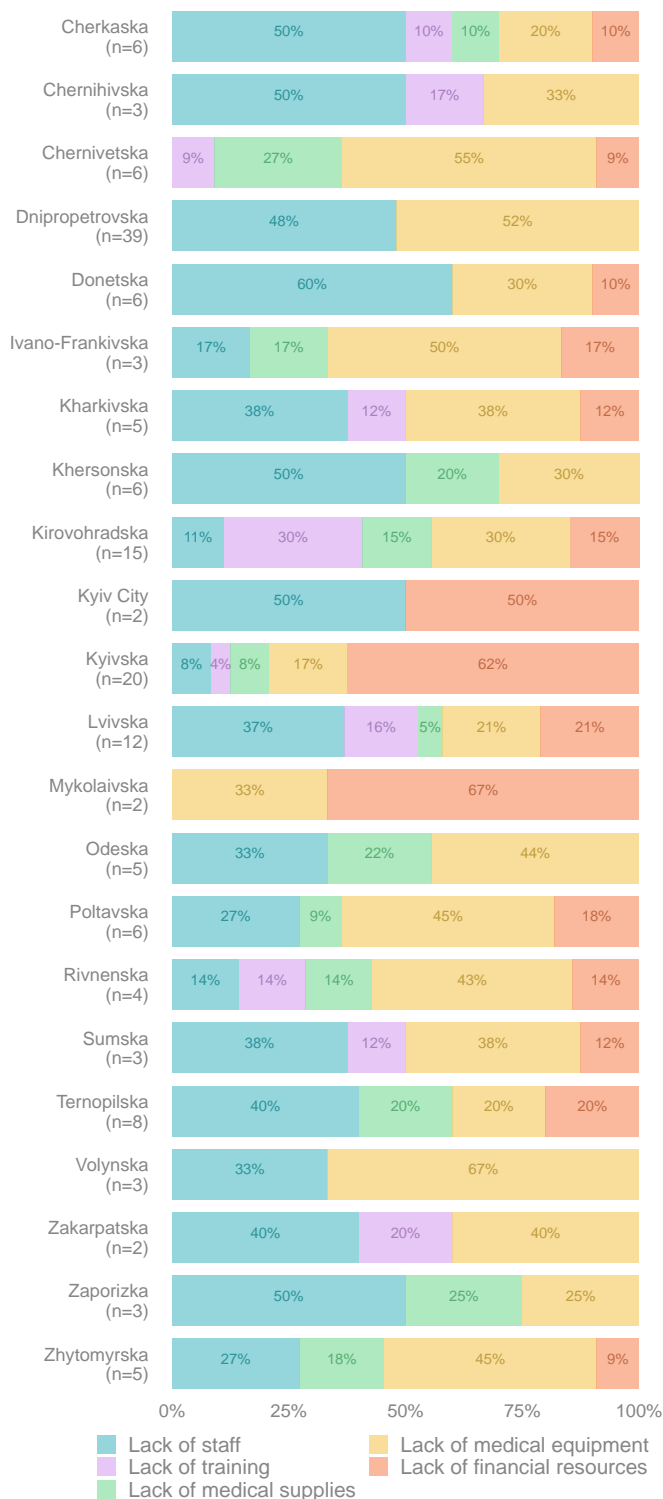


ADVANCED SYNDROME-BASED MANAGEMENT

Service availability by oblast*



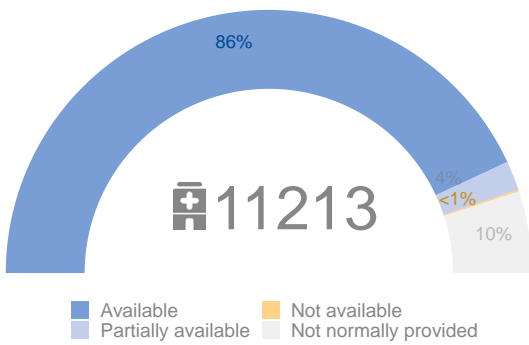
Main barriers impeding service delivery by oblast**



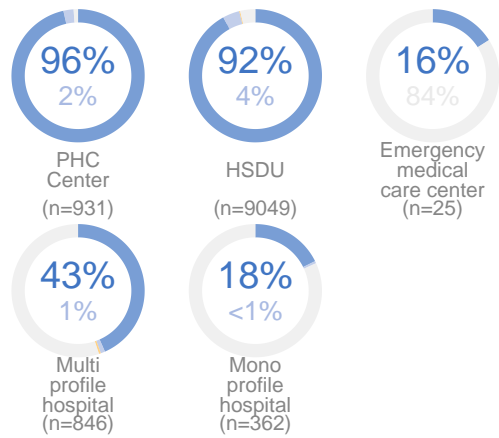
* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

OUTPATIENT SERVICES FOR PRIMARY CARE

Service availability

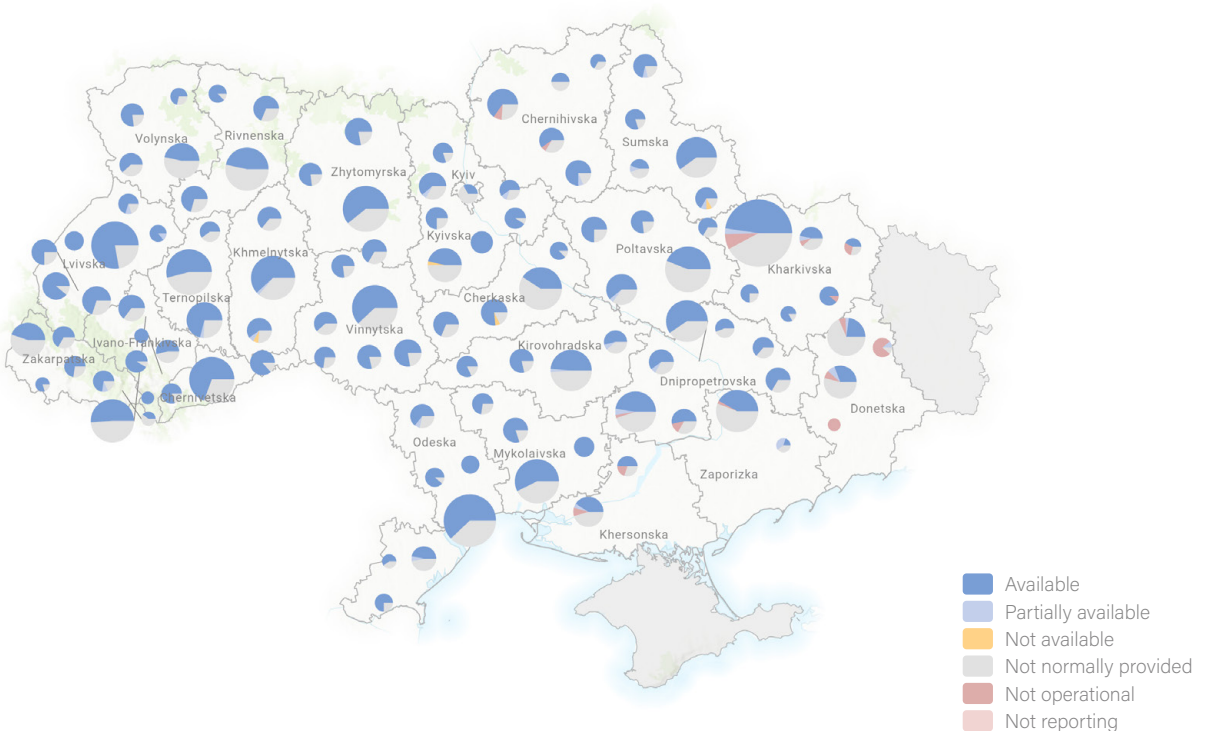


Service availability by health facility type



Main barriers impeding service delivery

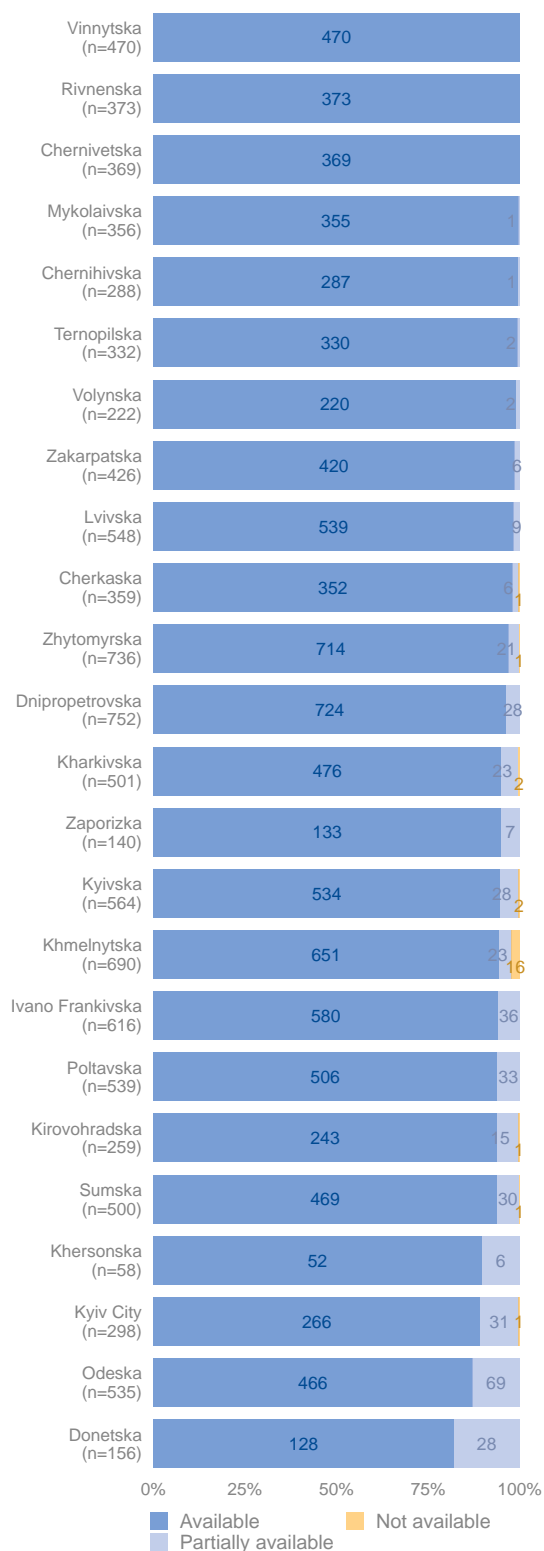
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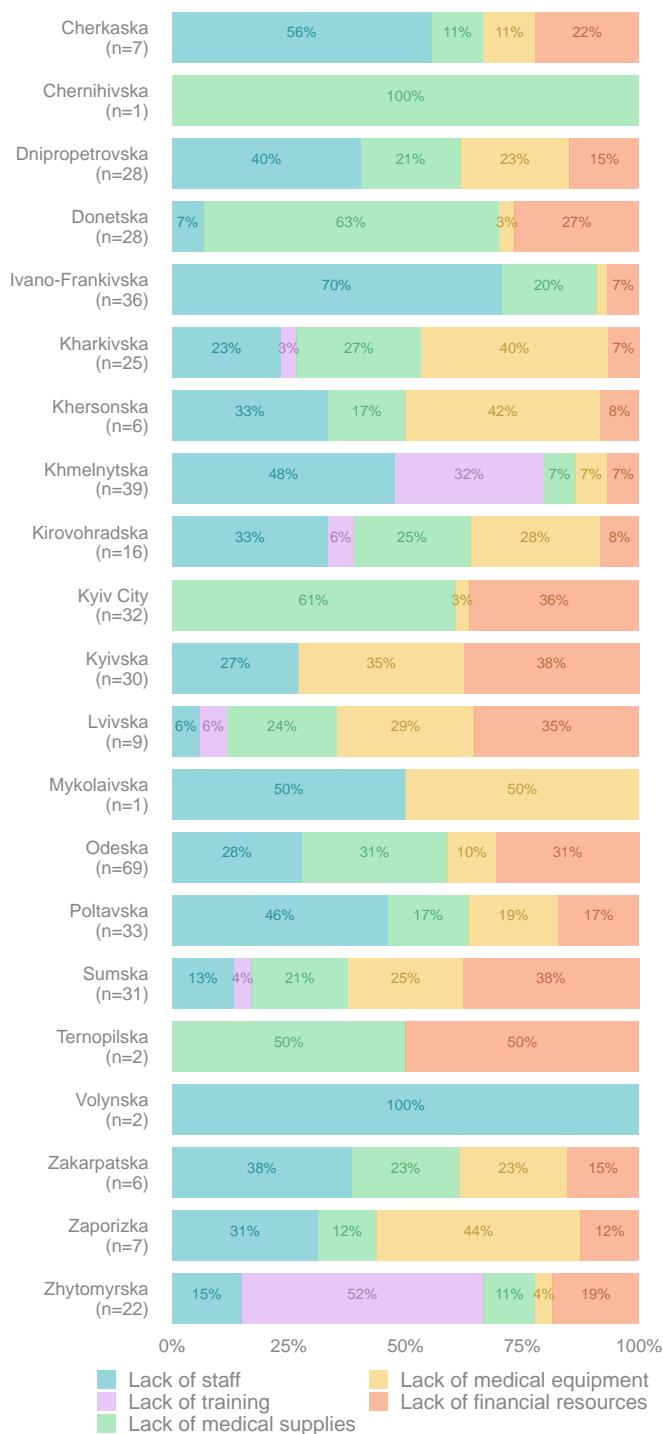
Map excludes HSDUs

OUTPATIENT SERVICES FOR PRIMARY CARE

Service availability by oblast*



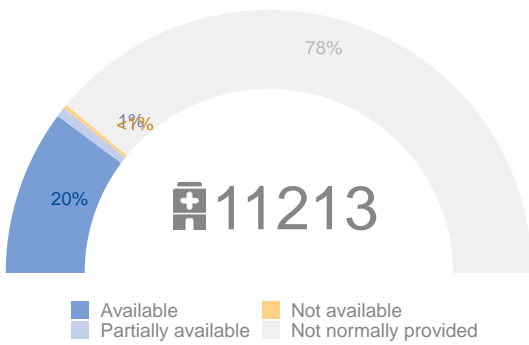
Main barriers impeding service delivery by oblast**



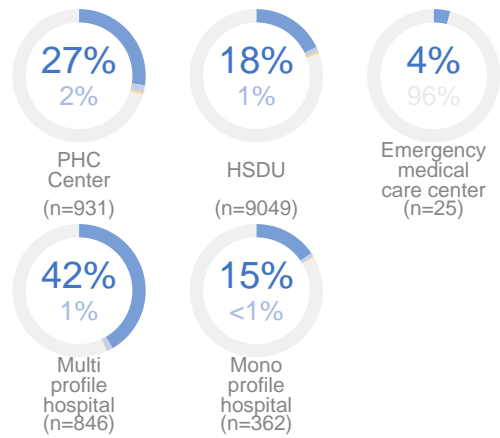
* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

OUTPATIENT DEPARTMENT FOR SPECIALIZED CARE

Service availability

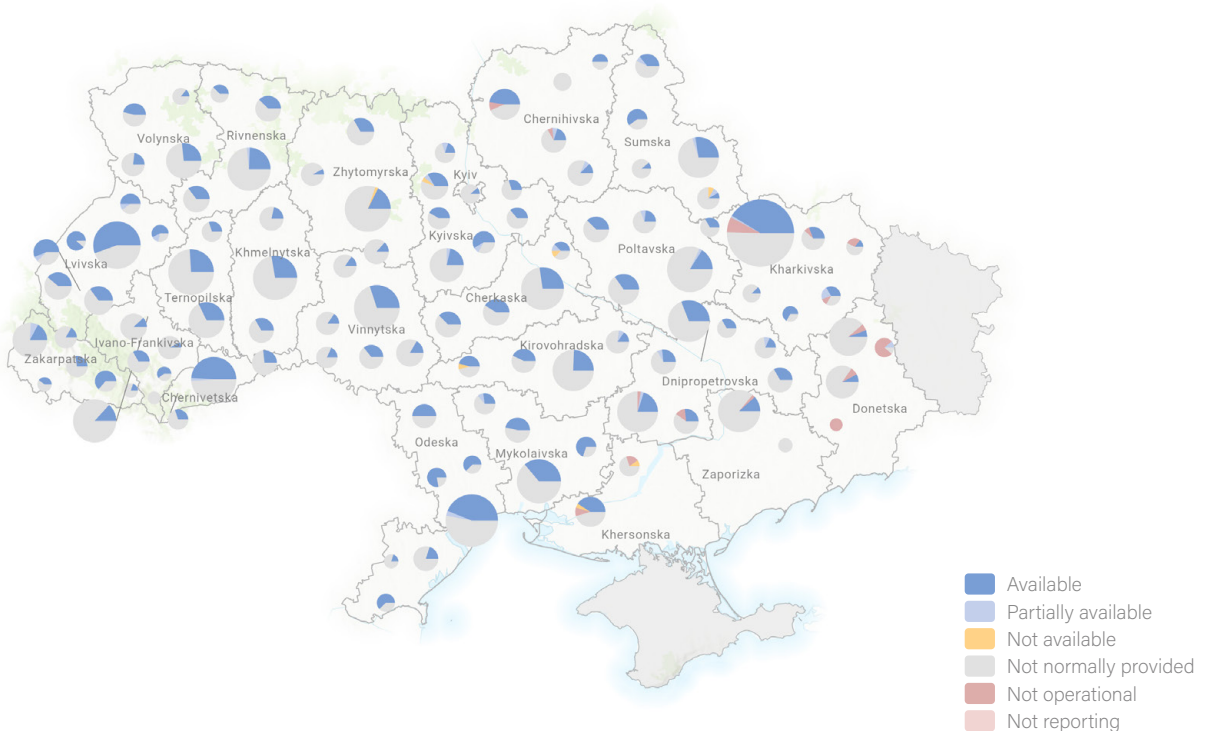
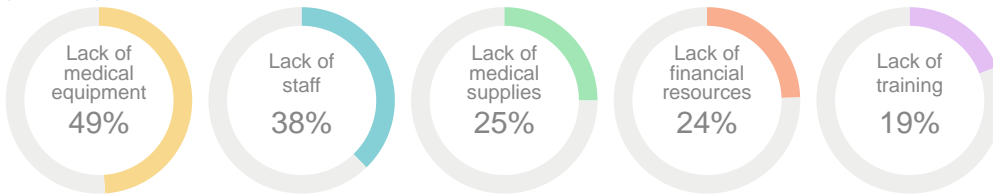


Service availability by health facility type



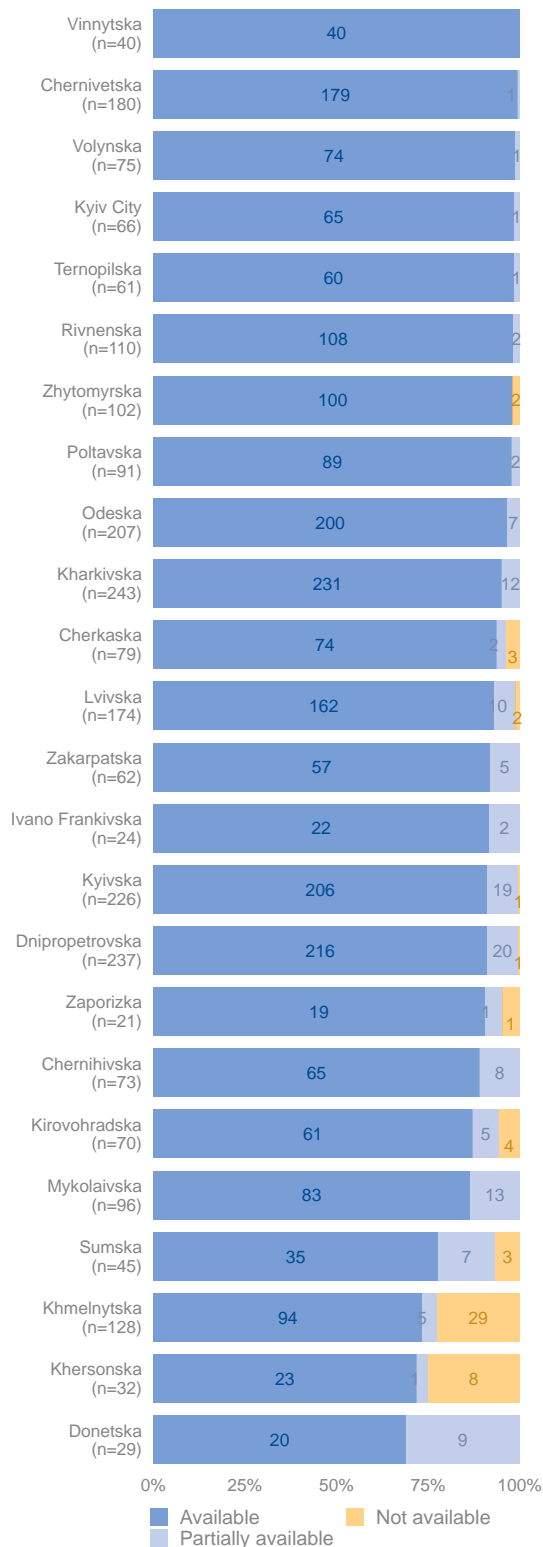
Main barriers impeding service delivery

(n = 188)

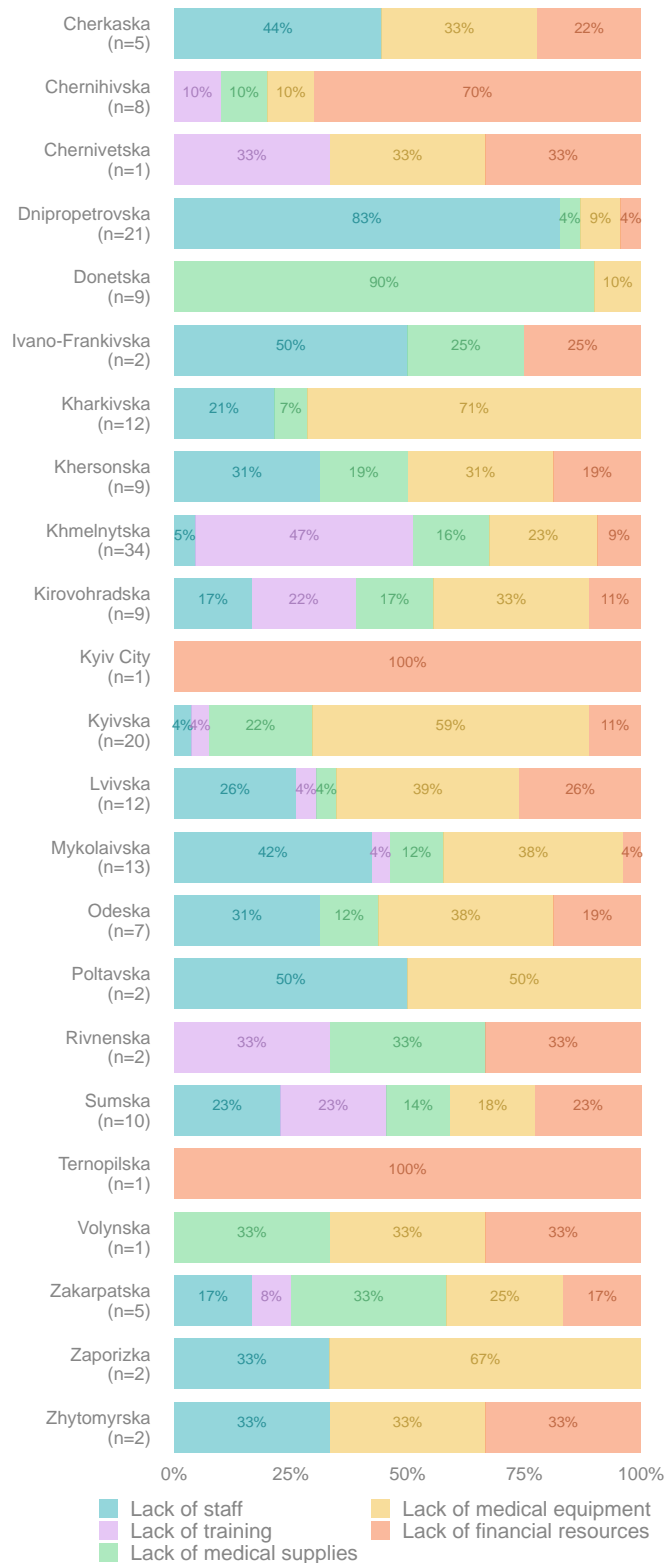


OUTPATIENT DEPARTMENT FOR SPECIALIZED CARE

Service availability by oblast*



Main barriers impeding service delivery by oblast**

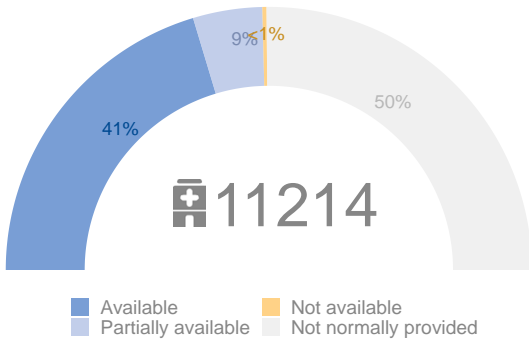


* Chart excludes health facilities where the service is not normally provided.

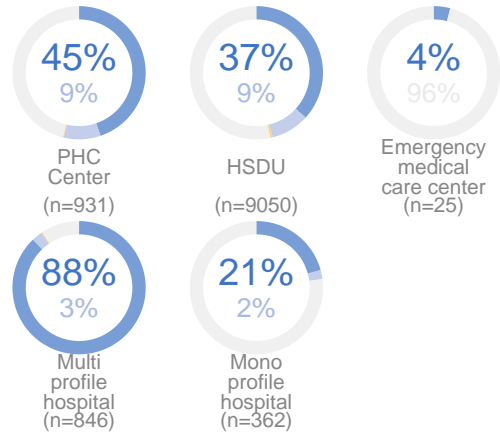
** Chart includes health facilities where the causes/barriers were indicated.

MINOR TRAUMA DEFINITIVE MANAGEMENT

Service availability

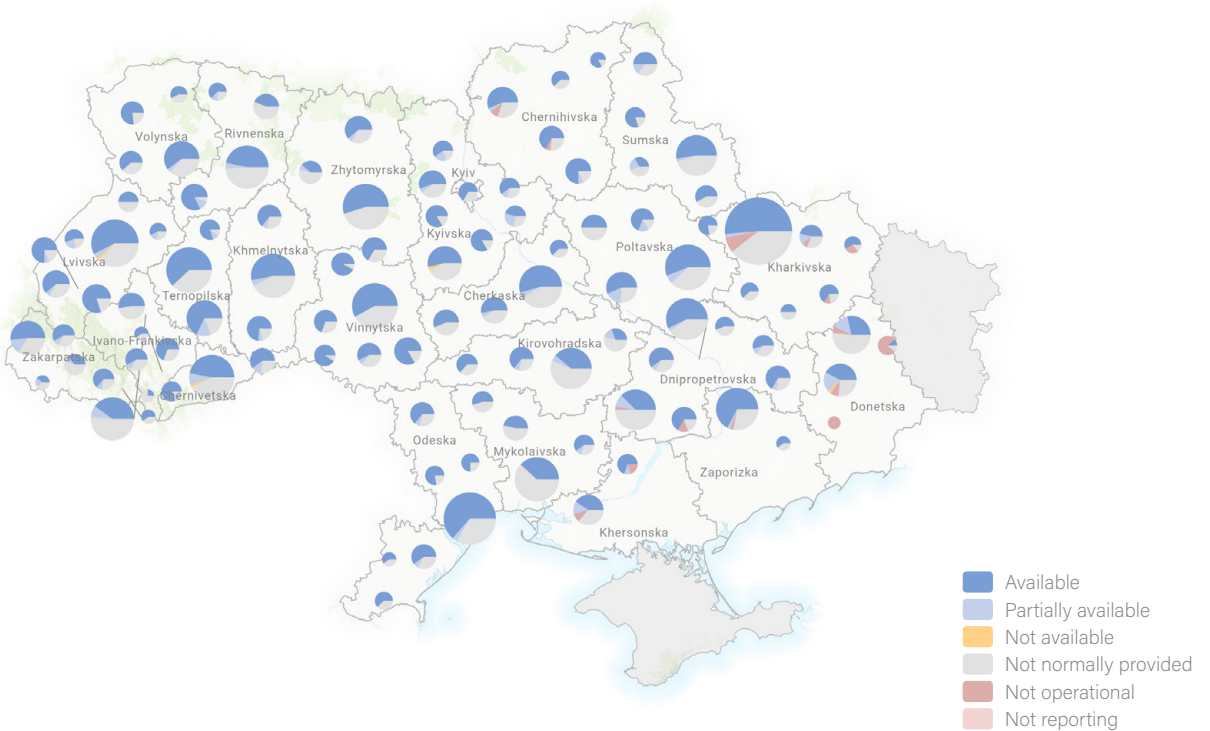


Service availability by health facility type



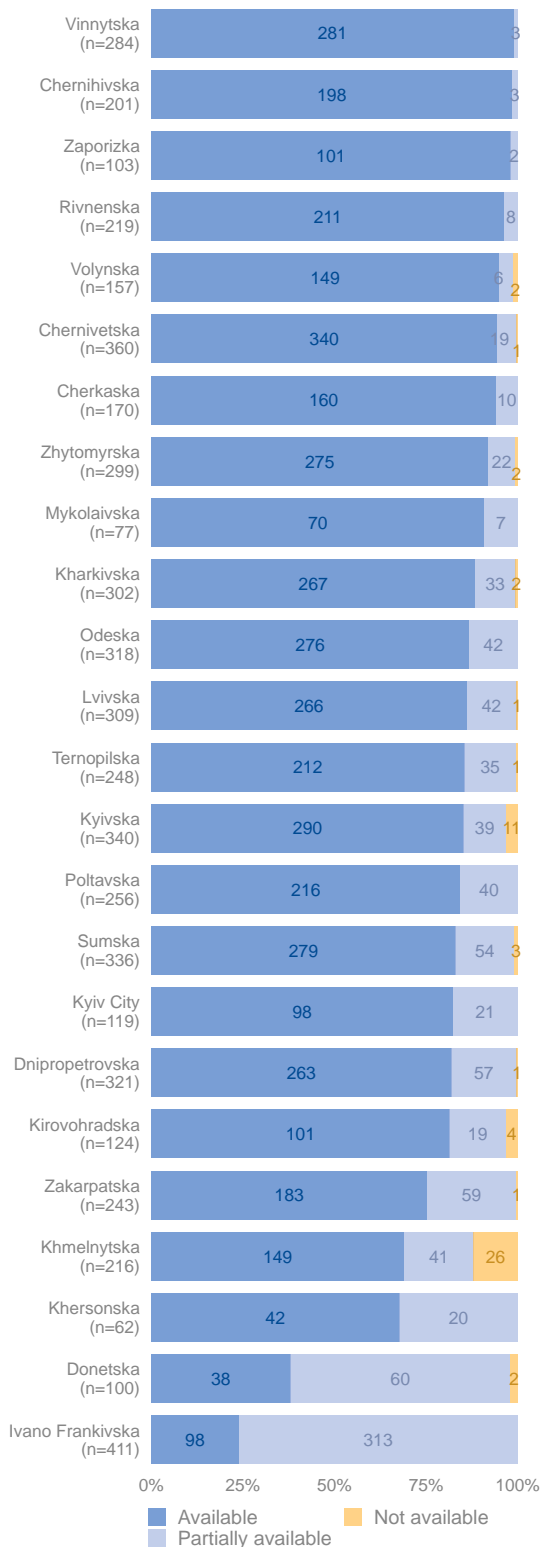
Main barriers impeding service delivery

(n = 1012)

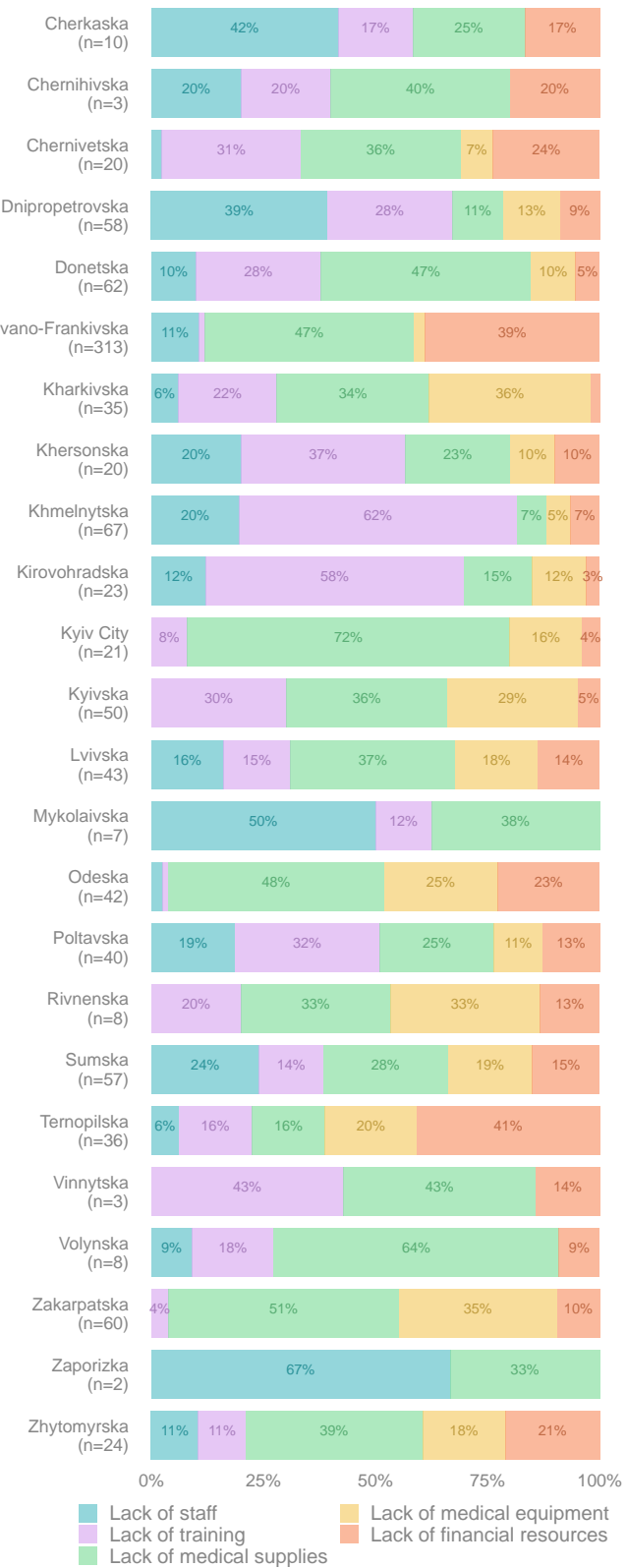


MINOR TRAUMA DEFINITIVE MANAGEMENT

Service availability by oblast*



Main barriers impeding service delivery by oblast**

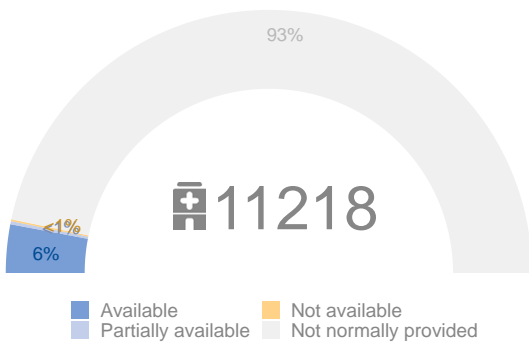


* Chart excludes health facilities where the service is not normally provided.

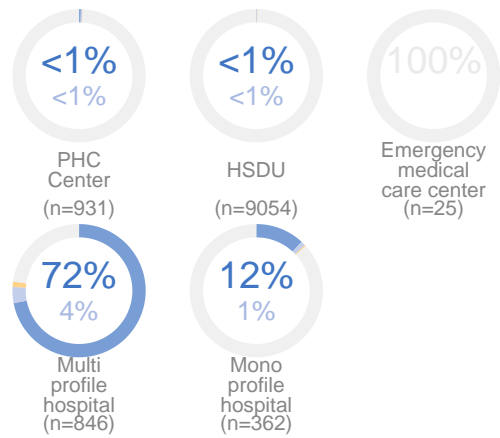
** Chart includes health facilities where the causes/barriers were indicated.

EMERGENCY AND ELECTIVE SURGERY

Service availability

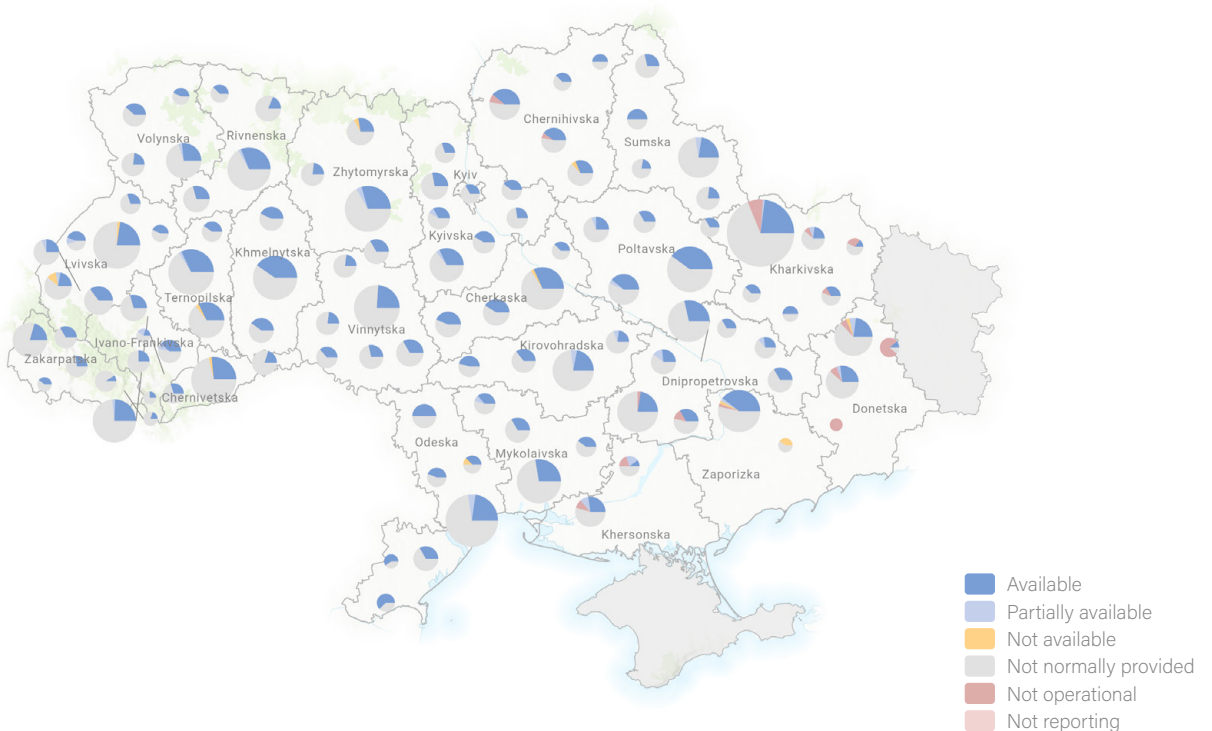


Service availability by health facility type



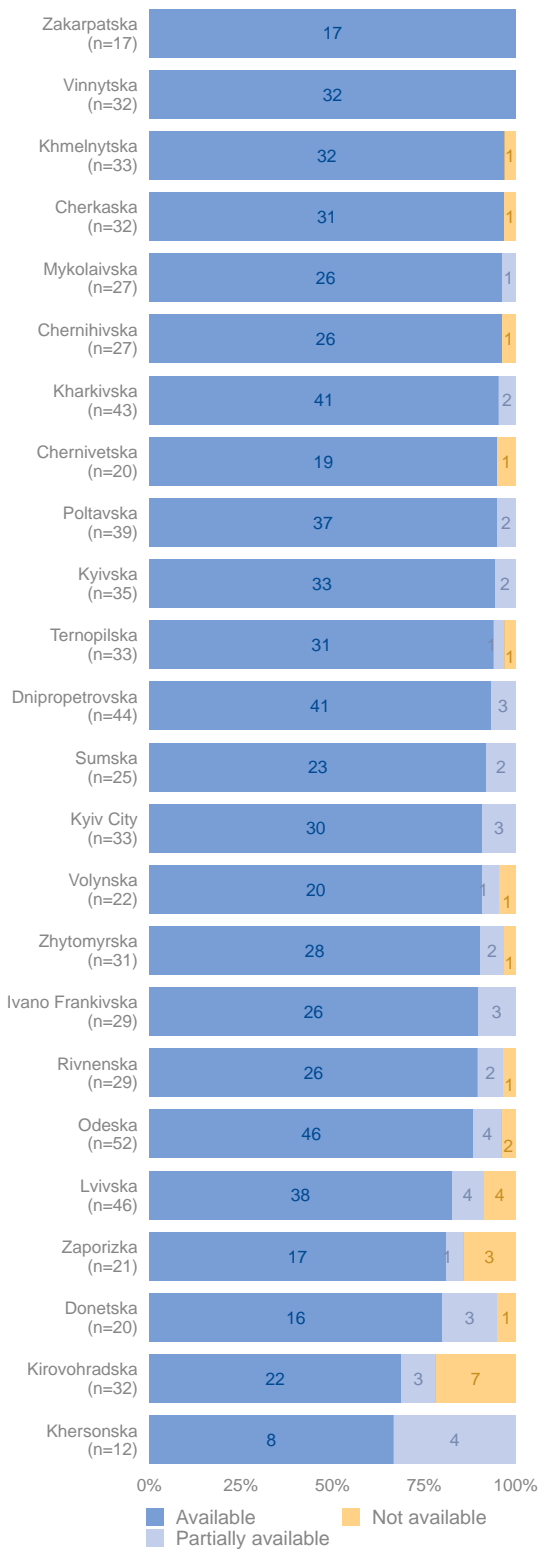
Main barriers impeding service delivery

(n = 68)

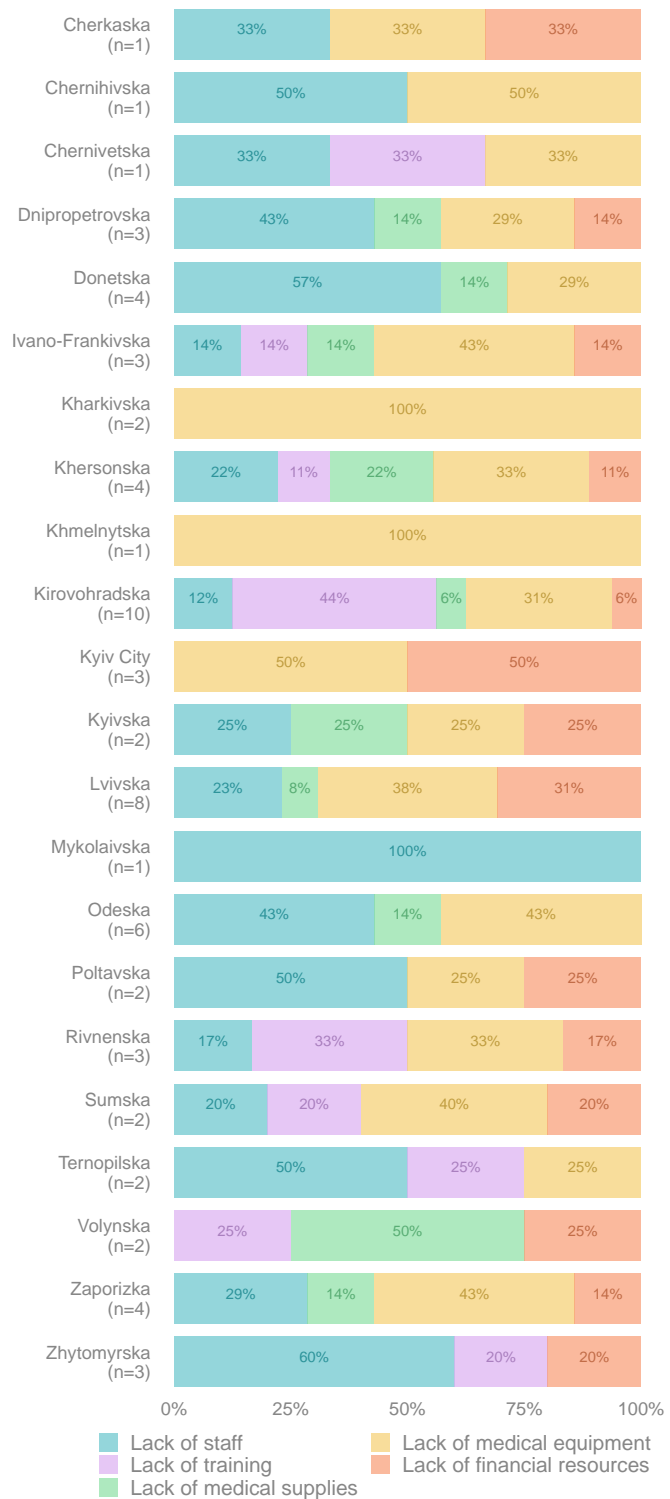


EMERGENCY AND ELECTIVE SURGERY

Service availability by oblast*



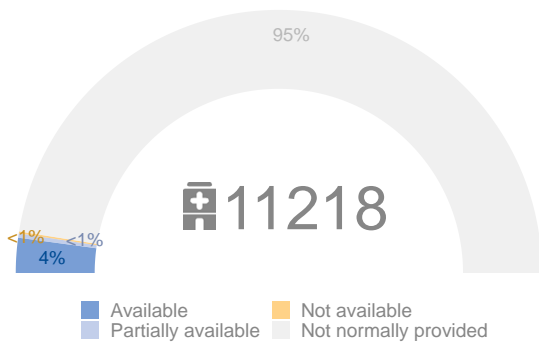
Main barriers impeding service delivery by oblast**



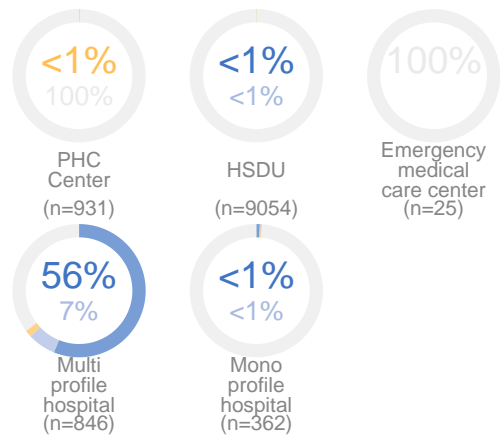
* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

ORTHOPEDIC/TRAUMA WARD

Service availability

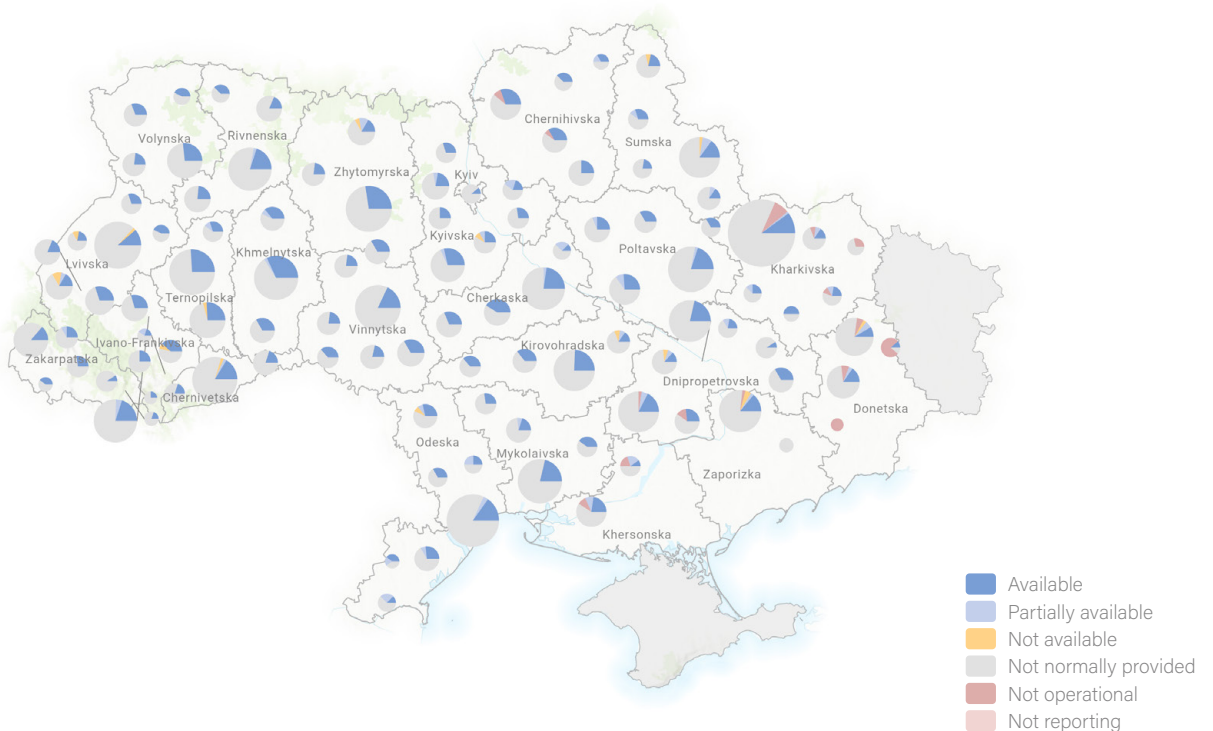
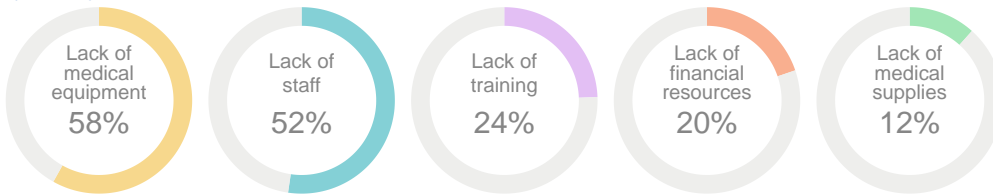


Service availability by health facility type



Main barriers impeding service delivery

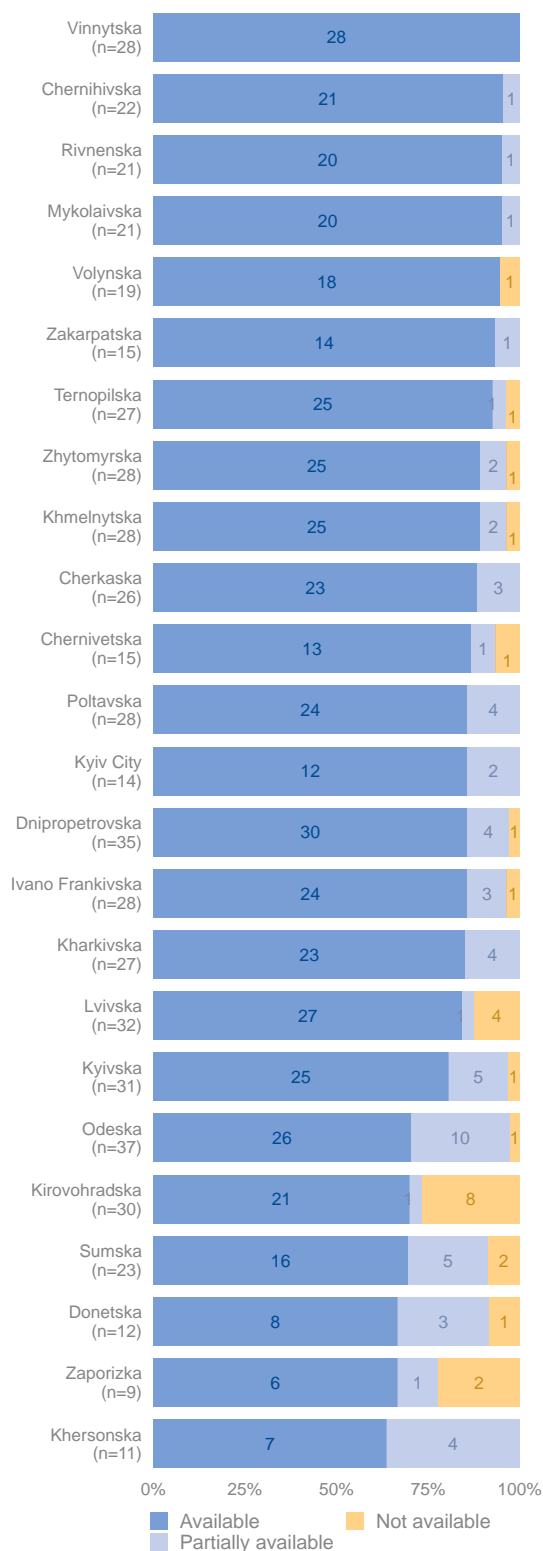
(n = 86)



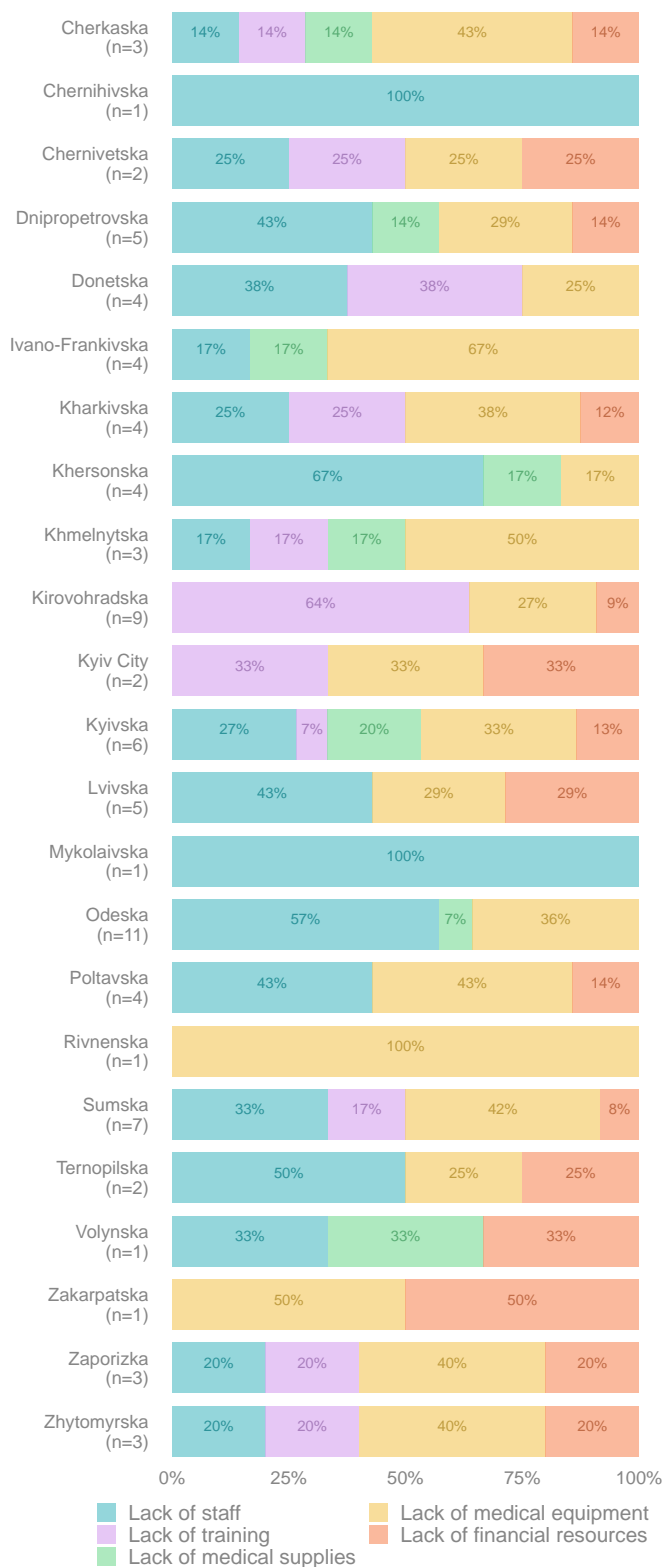
Map excludes HSDUs

ORTHOPEDIC/TRAUMA WARD

Service availability by oblast*



Main barriers impeding service delivery by oblast**

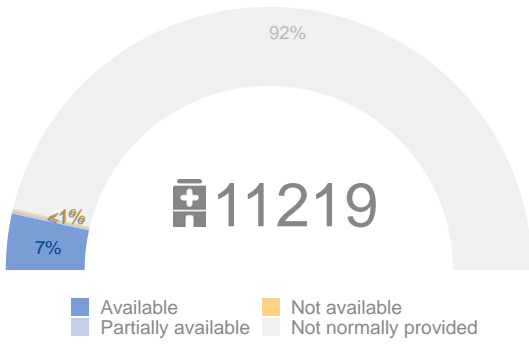


* Chart excludes health facilities where the service is not normally provided.

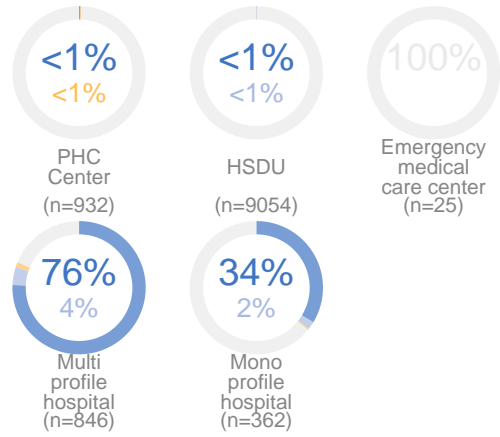
** Chart includes health facilities where the causes/barriers were indicated.

INPATIENT CRITICAL CARE MANAGEMENT

Service availability

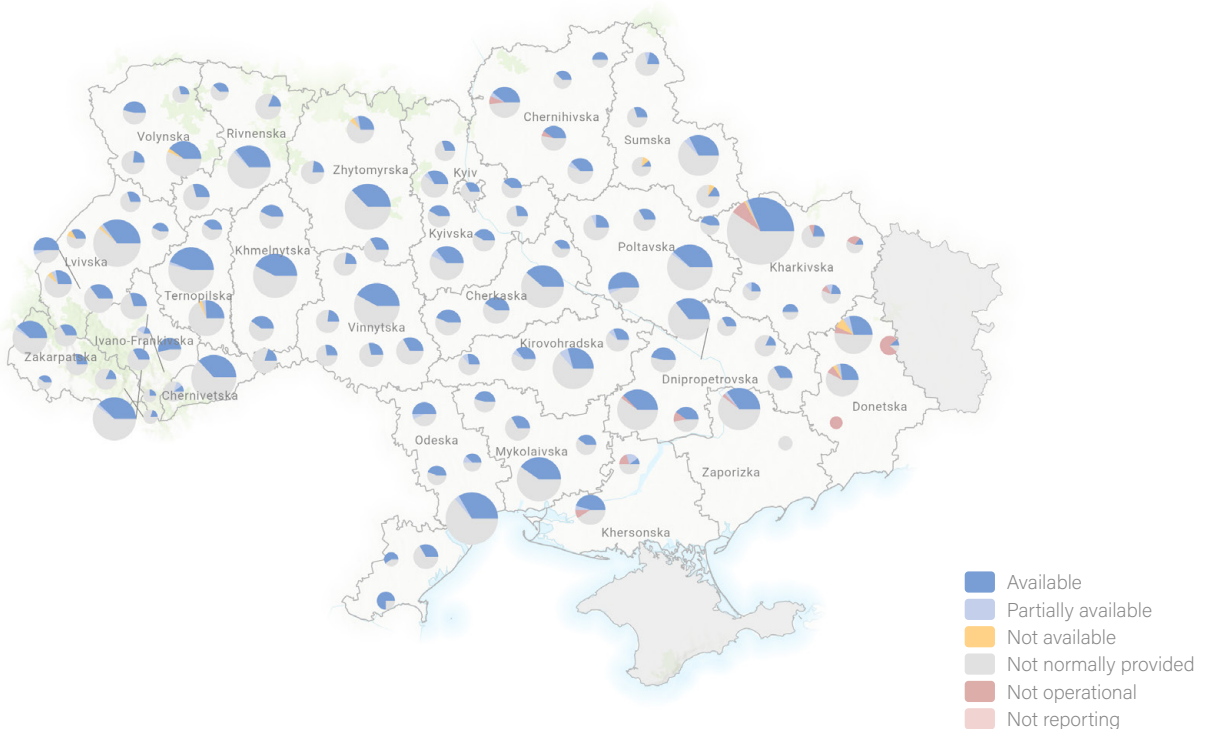


Service availability by health facility type



Main barriers impeding service delivery

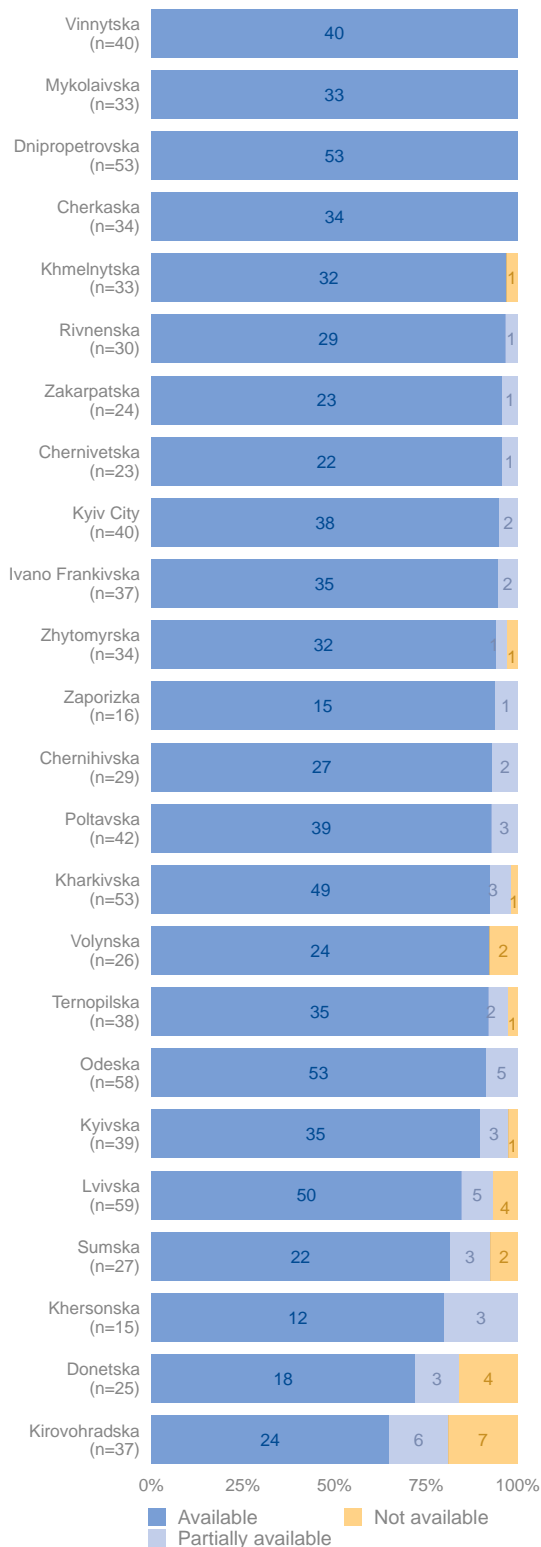
(n = 71)



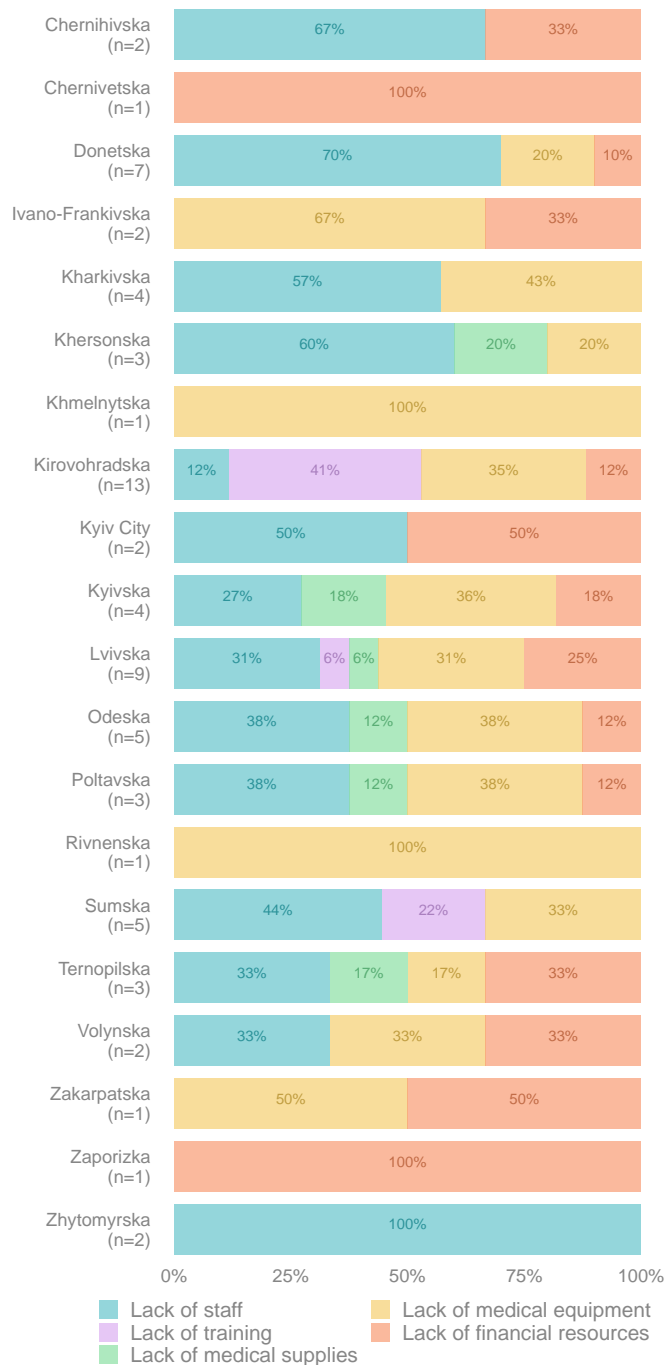
Map excludes HSDUs

INPATIENT CRITICAL CARE MANAGEMENT

Service availability by oblast*



Main barriers impeding service delivery by oblast**



* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

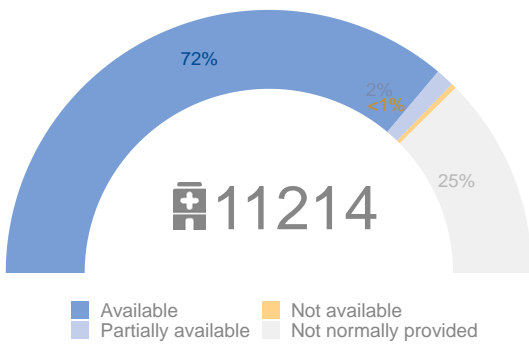


CHILD HEALTH AND NUTRITION

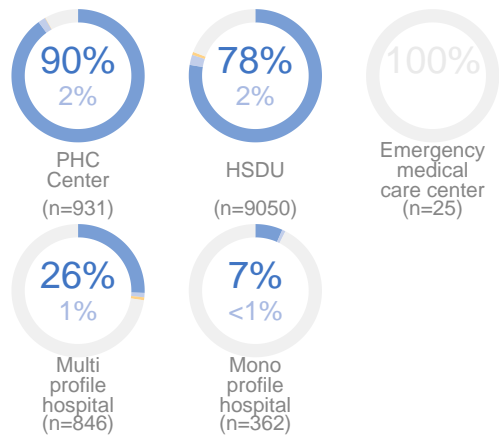


EPI

Service availability

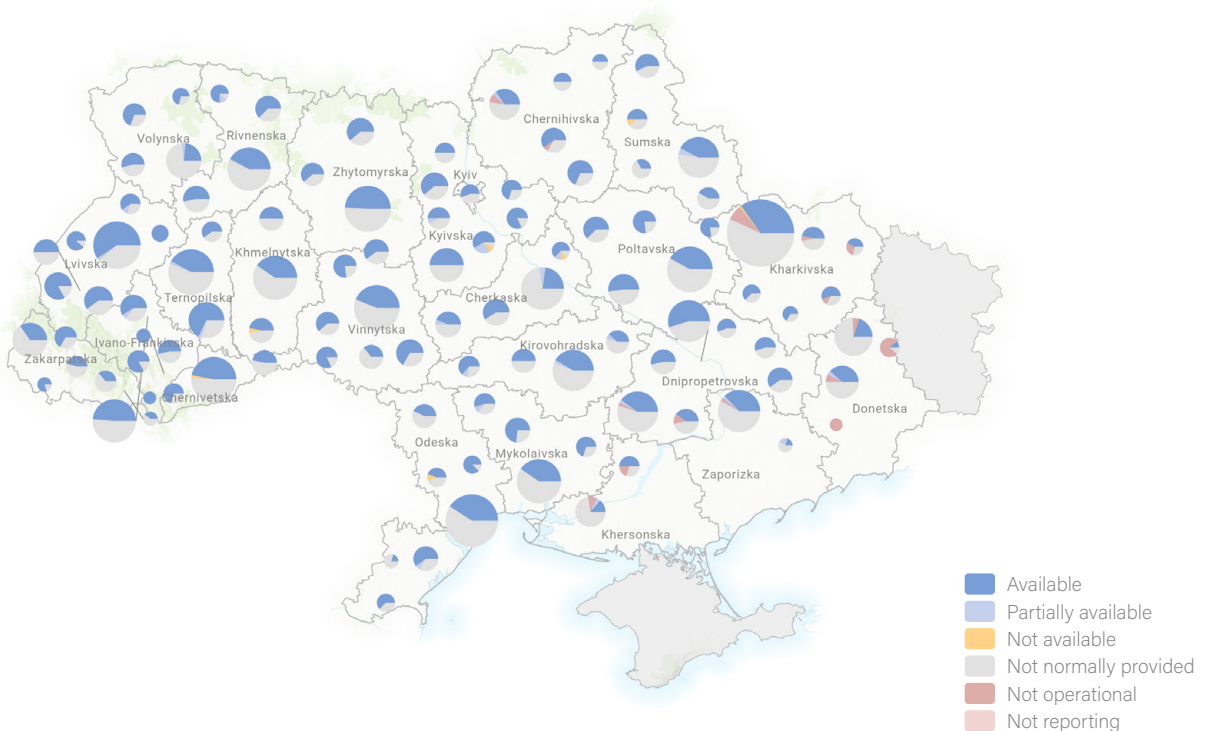


Service availability by health facility type



Main barriers impeding service delivery

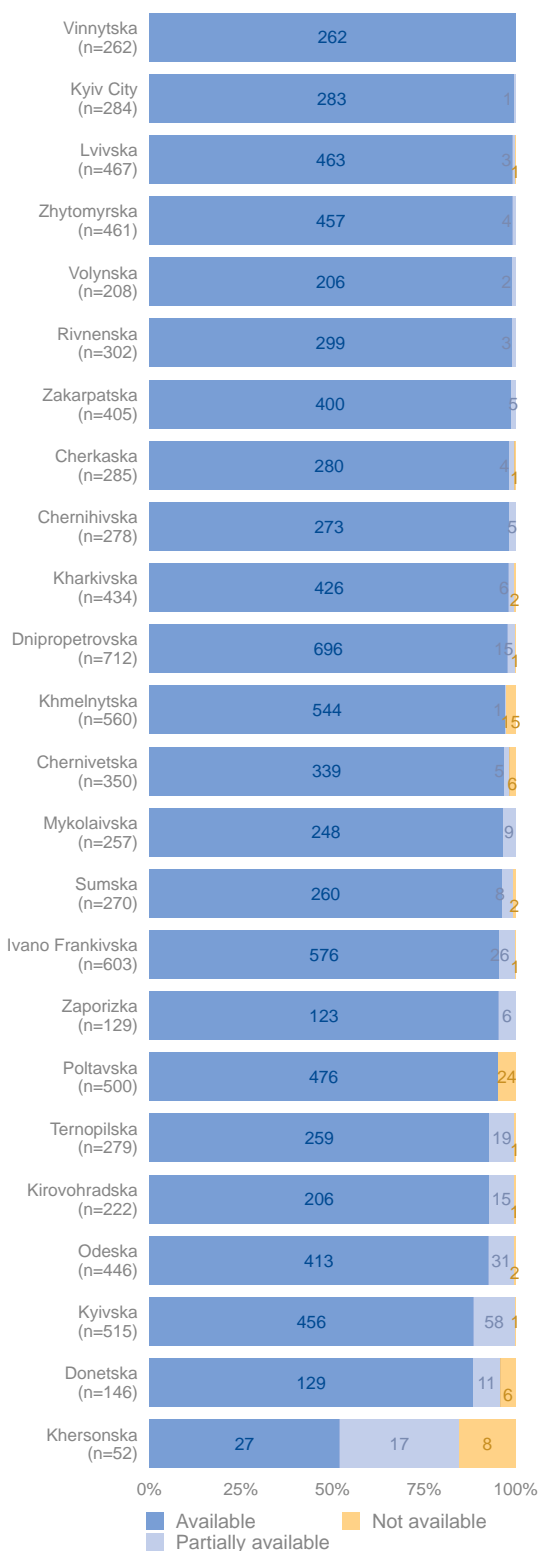
(n = 326)



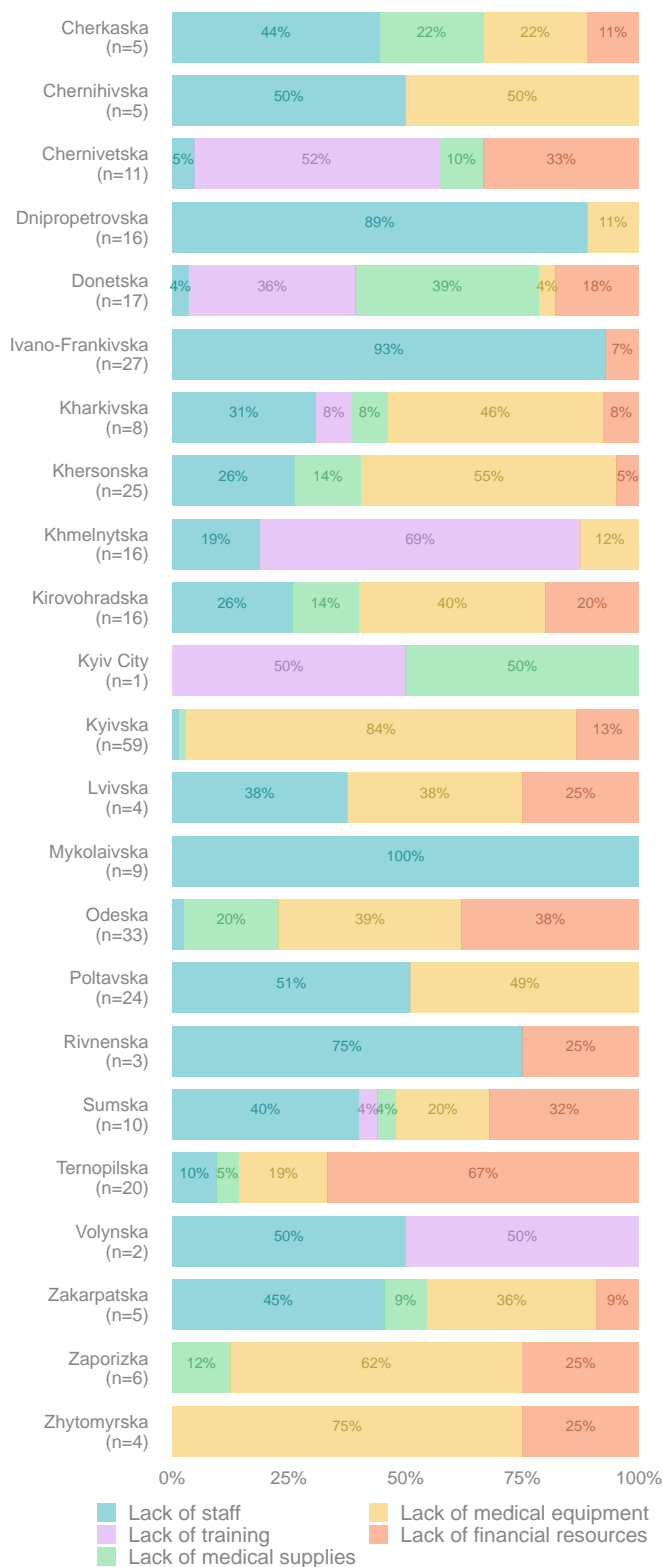
Map excludes HSDUs

EPI

Service availability by oblast*



Main barriers impeding service delivery by oblast**



* Chart excludes health facilities where the service is not normally provided.

** Chart includes health facilities where the causes/barriers were indicated.

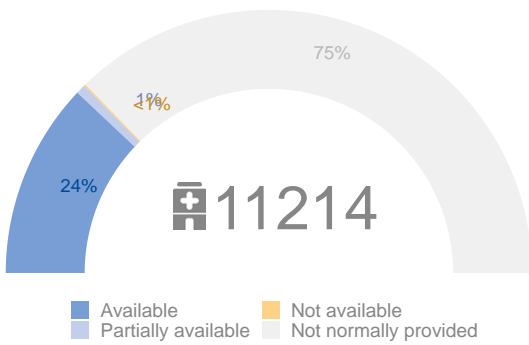


COMMUNICABLE DISEASES

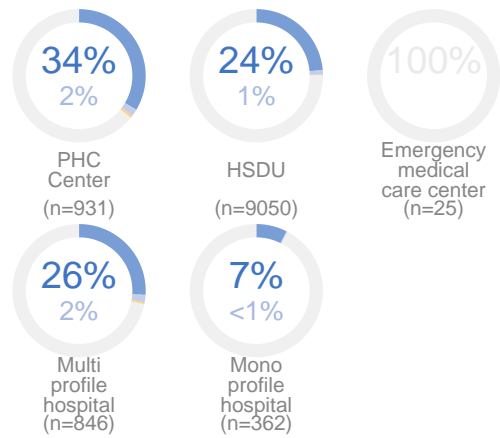


TUBERCULOSIS

Service availability

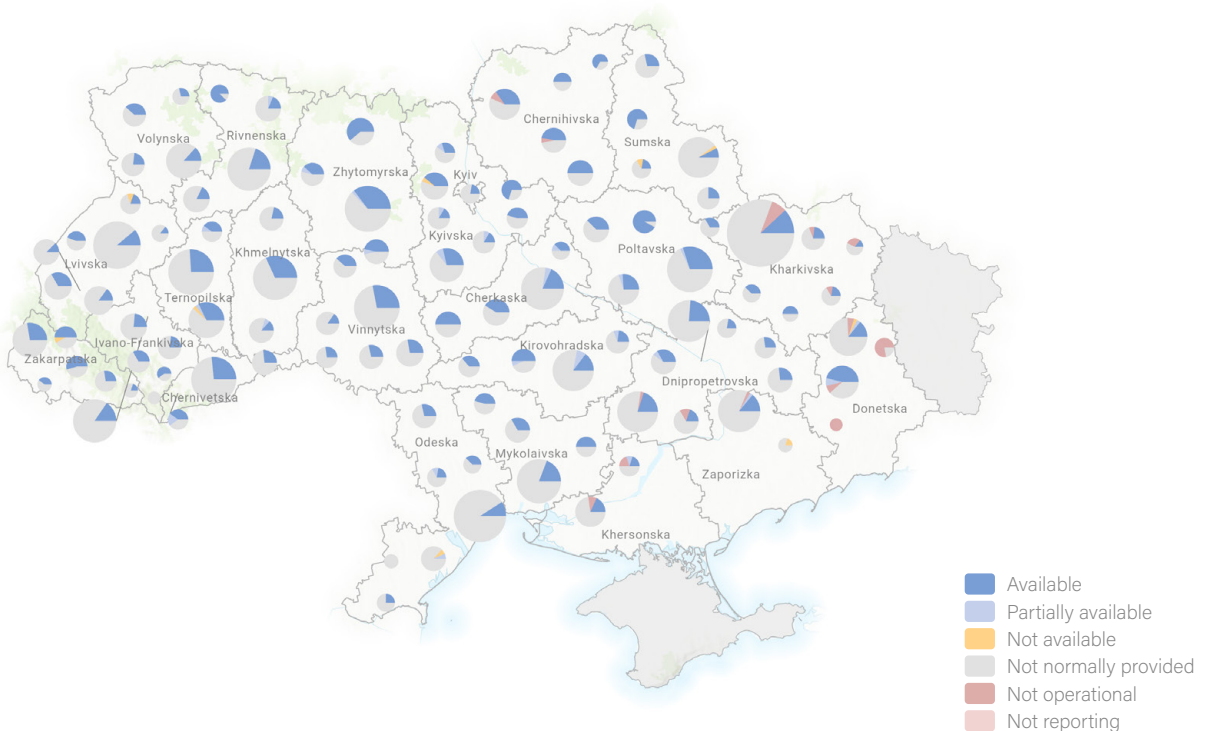
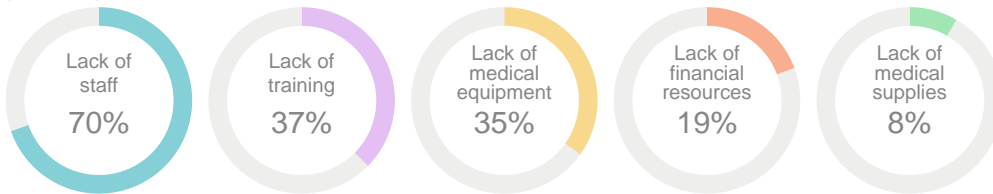


Service availability by health facility type



Main barriers impeding service delivery

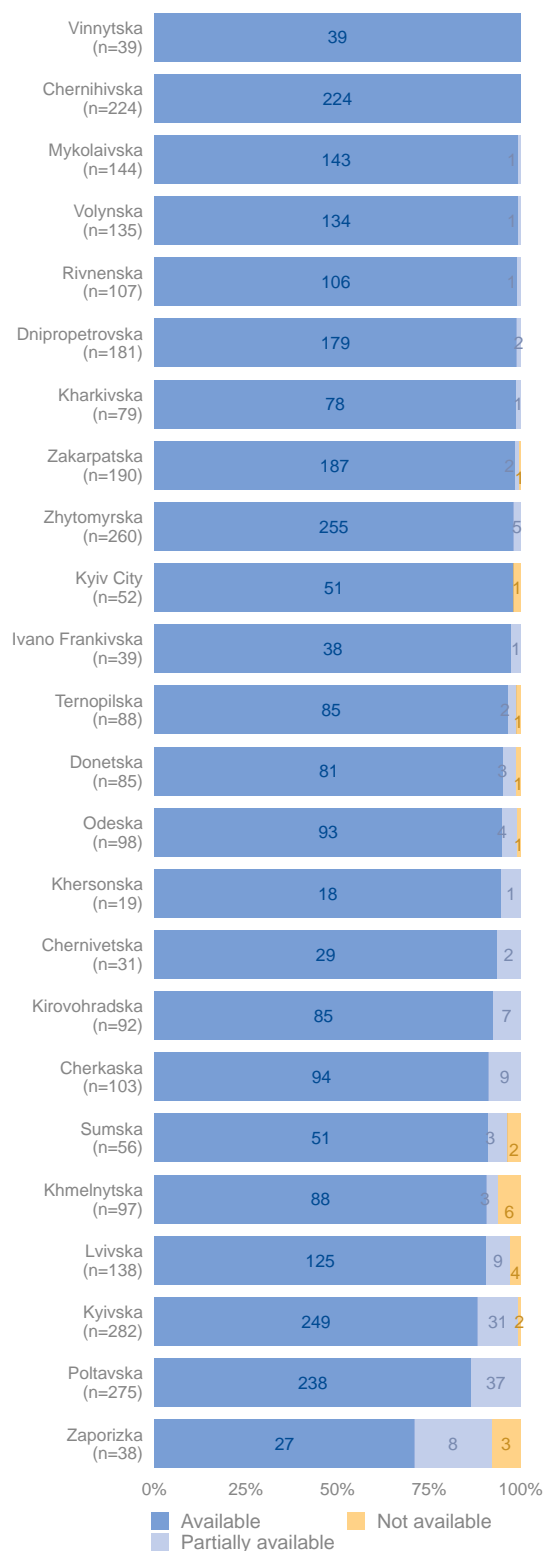
(n = 155)



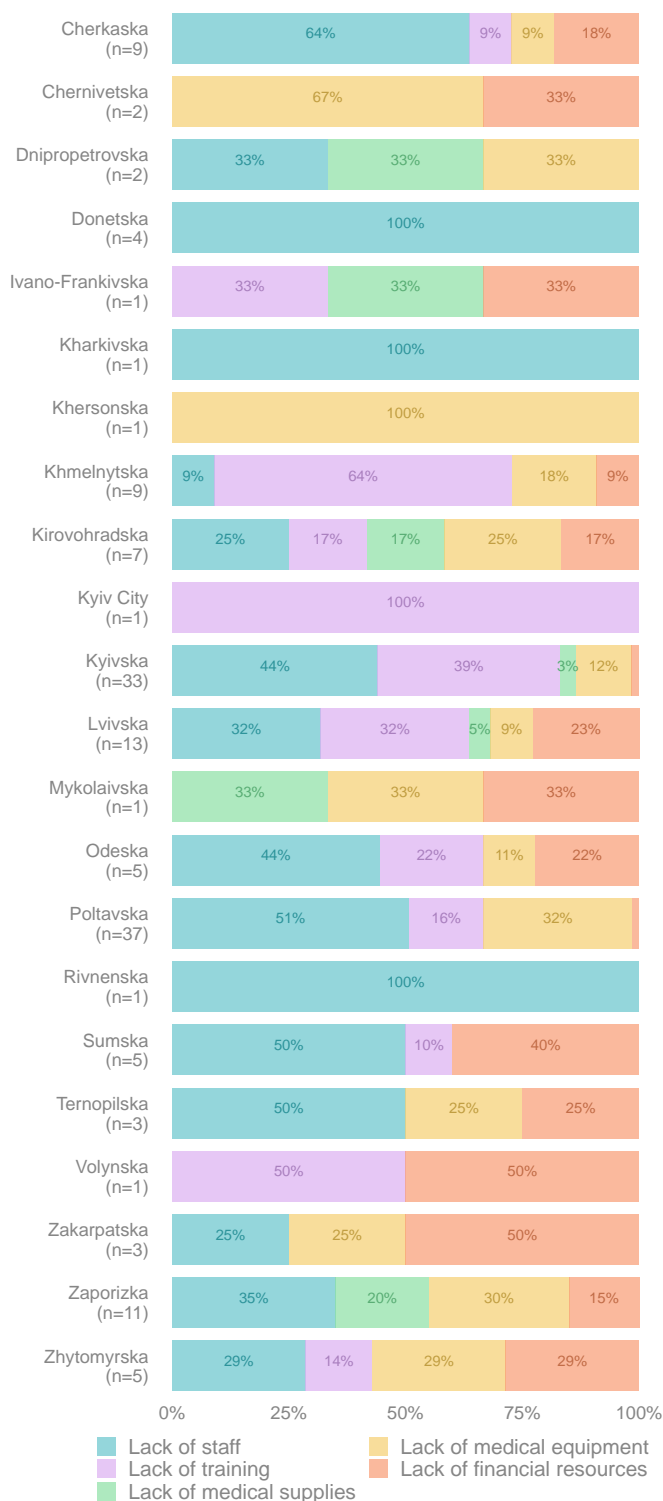
Map excludes HSDUs

TUBERCULOSIS

Service availability by oblast*



Main barriers impeding service delivery by oblast**

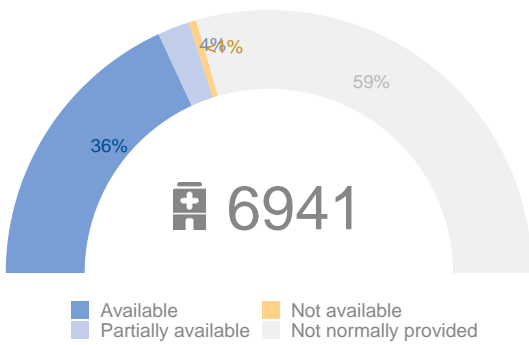


* Chart excludes health facilities where the service is not normally provided.

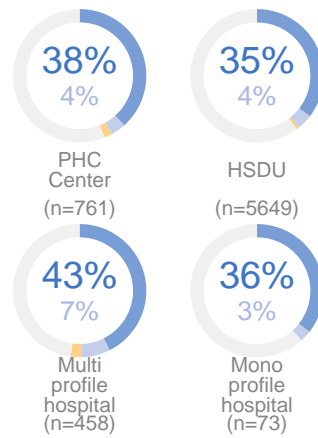
** Chart includes health facilities where the causes/barriers were indicated.

MDRTB

Service availability

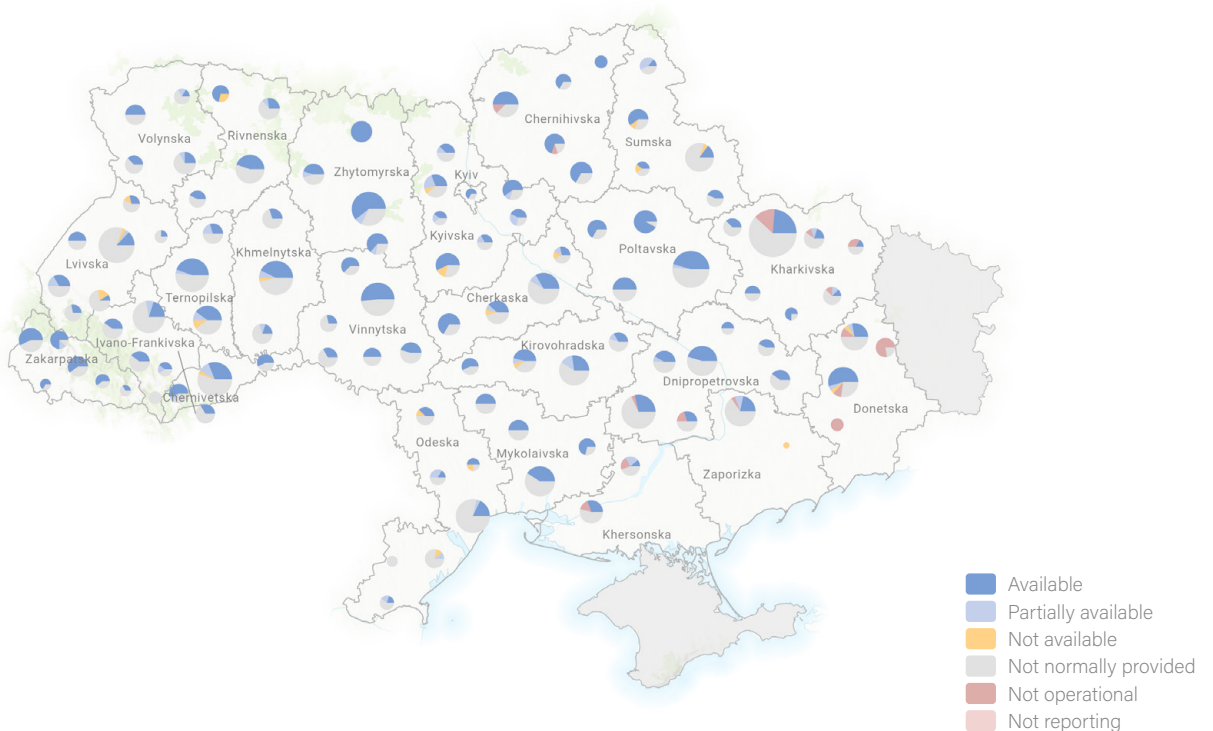
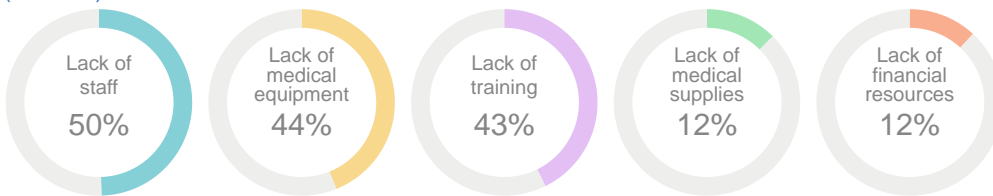


Service availability by health facility type



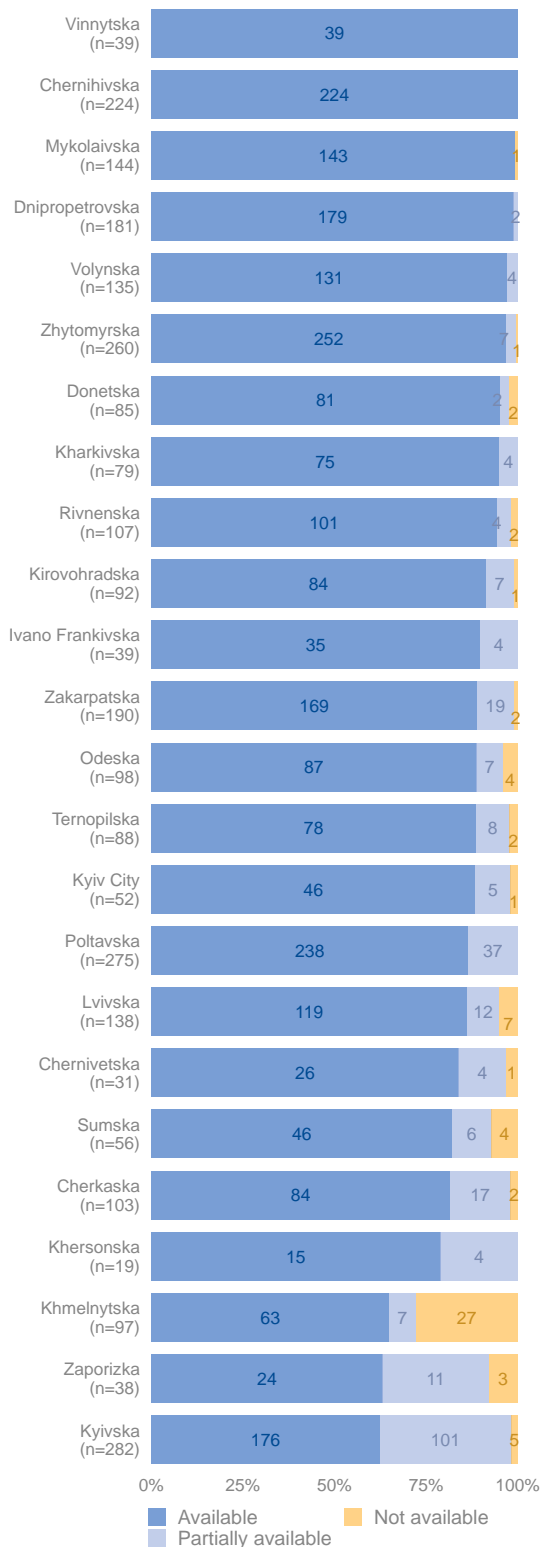
Main barriers impeding service delivery

(n = 337)

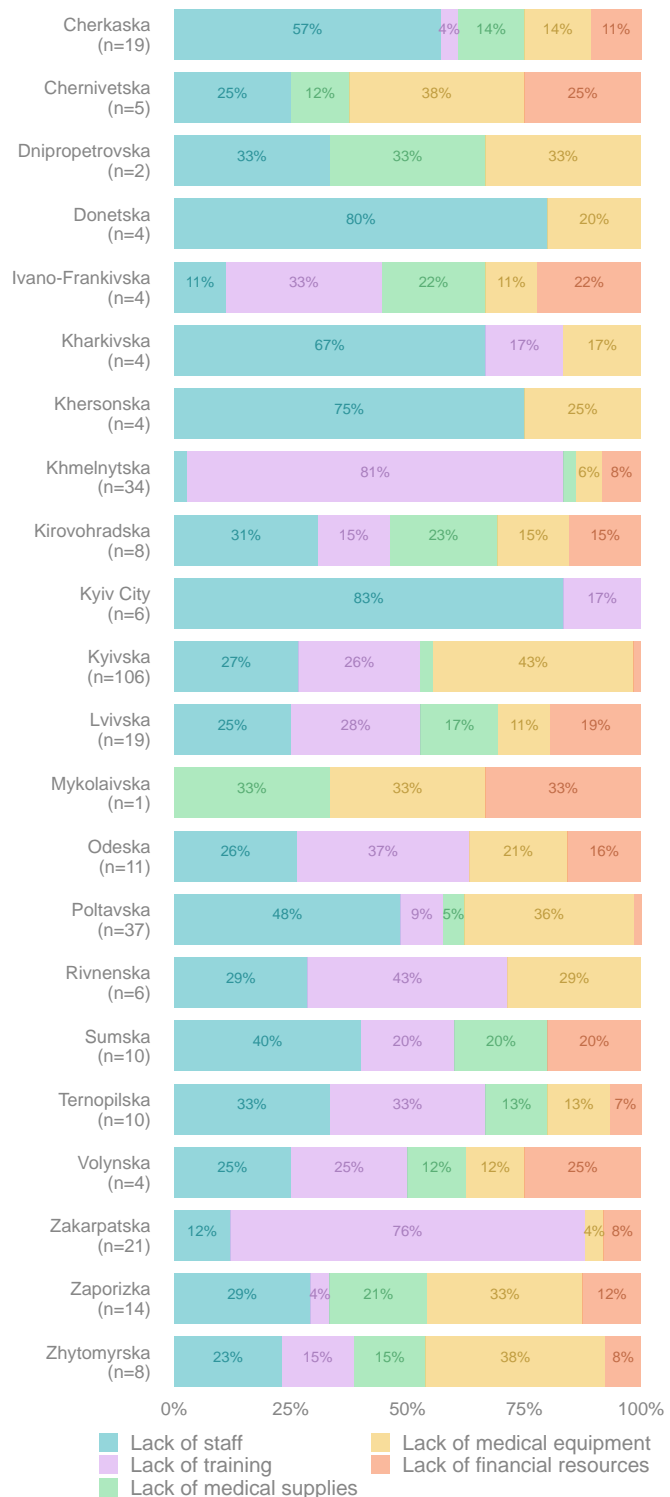


MDRTB

Service availability by oblast*



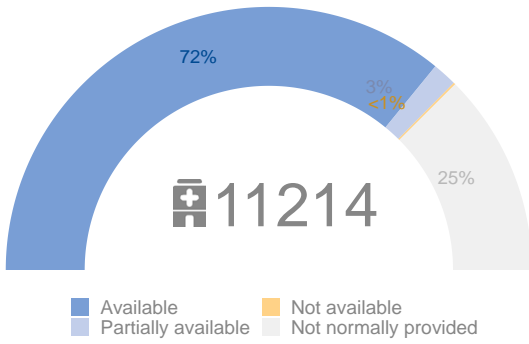
Main barriers impeding service delivery by oblast**



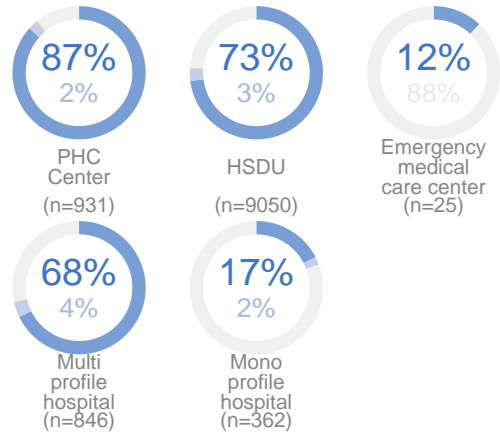
* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

LOCAL PRIORITY DISEASES

Service availability

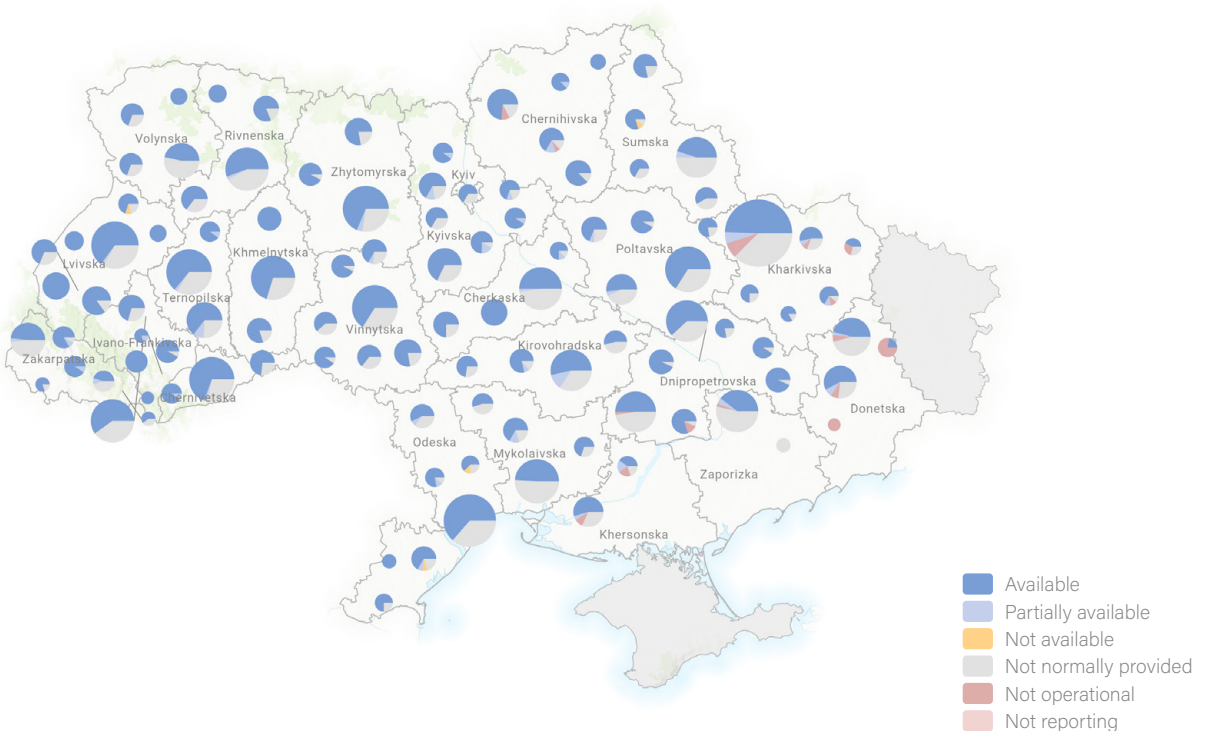


Service availability by health facility type



Main barriers impeding service delivery

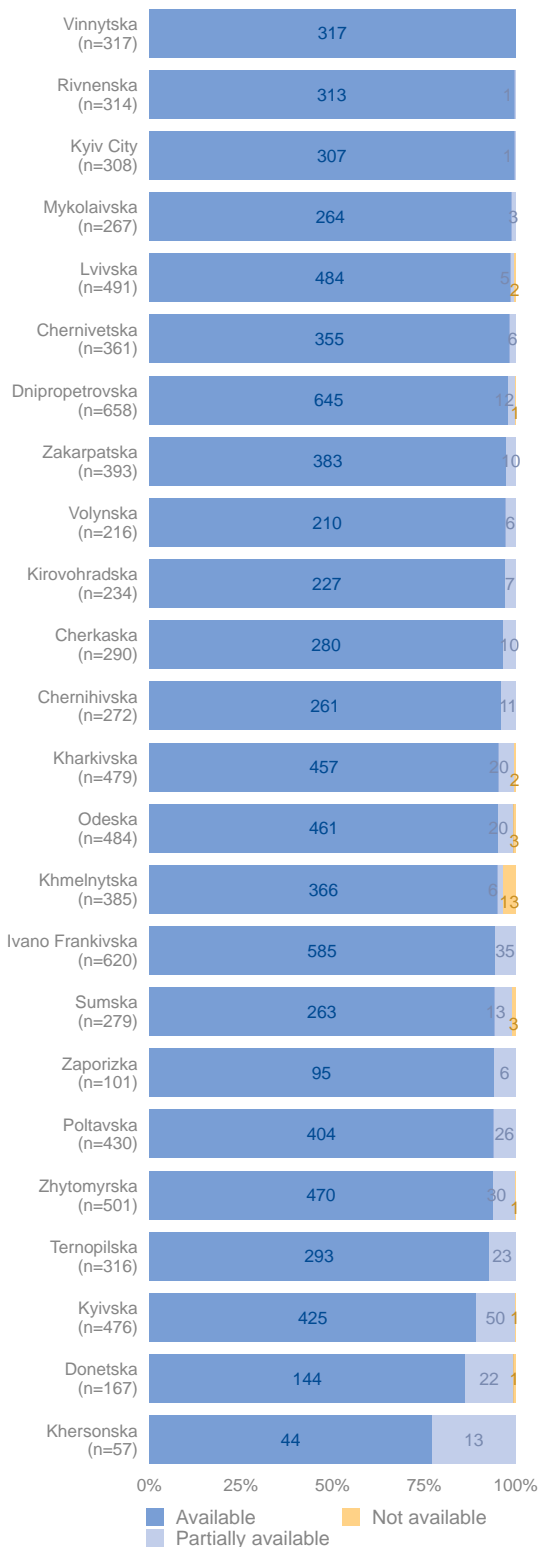
(n = 363)



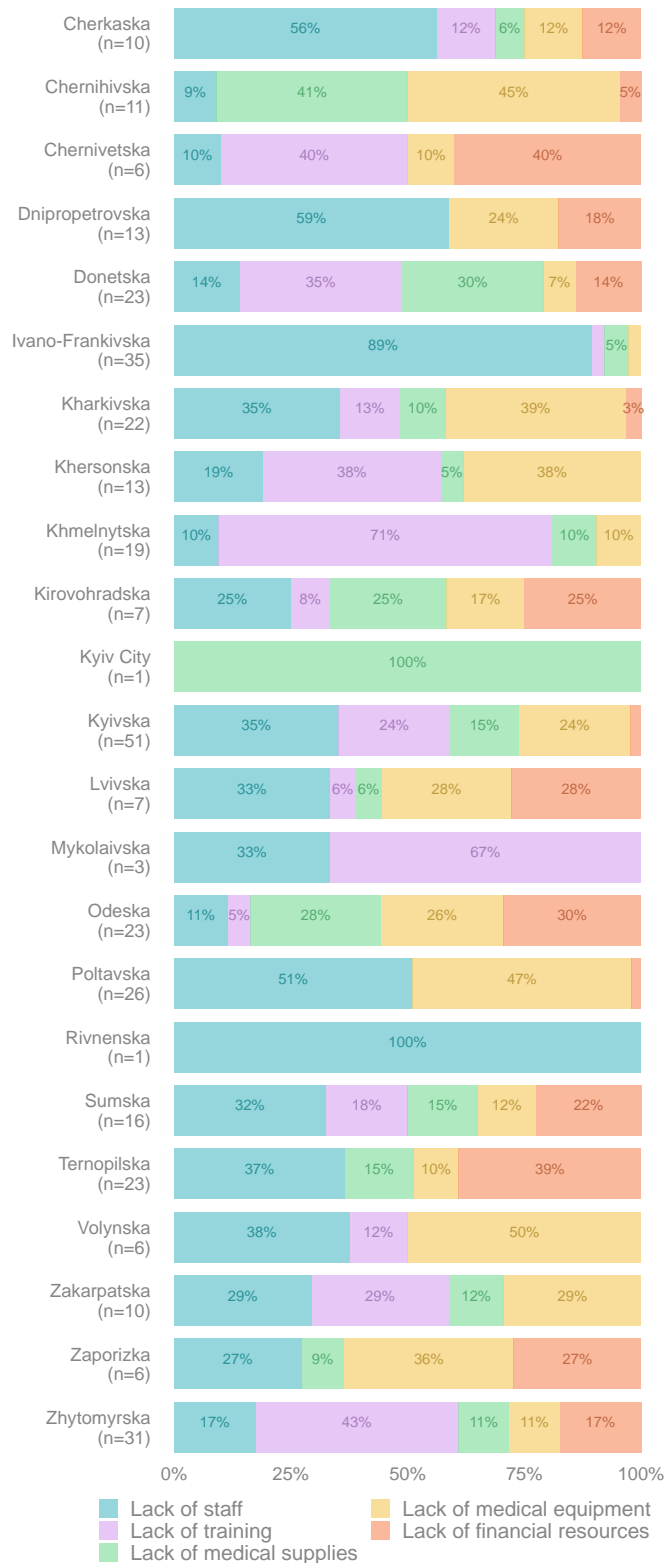
Map excludes HSDUs

LOCAL PRIORITY DISEASES

Service availability by oblast*



Main barriers impeding service delivery by oblast**

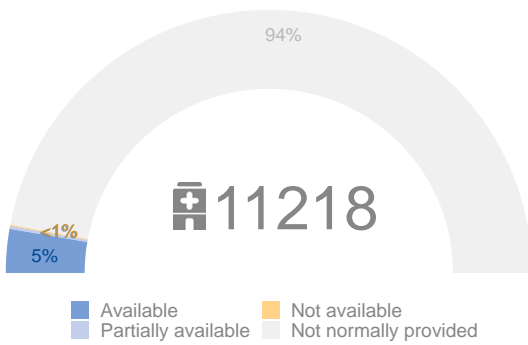


* Chart excludes health facilities where the service is not normally provided.

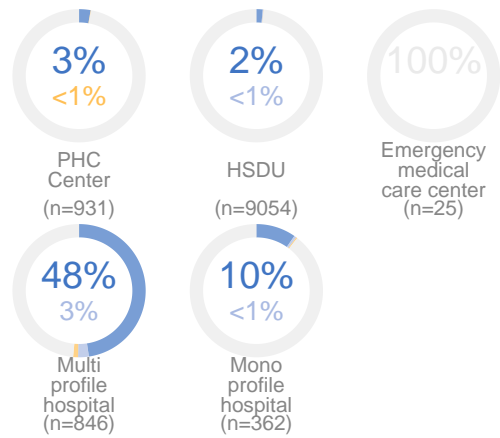
** Chart includes health facilities where the causes/barriers were indicated.

MANAGEMENT OF SEVERE AND/OR COMPLICATED COMMUNICABLE DISEASES

Service availability

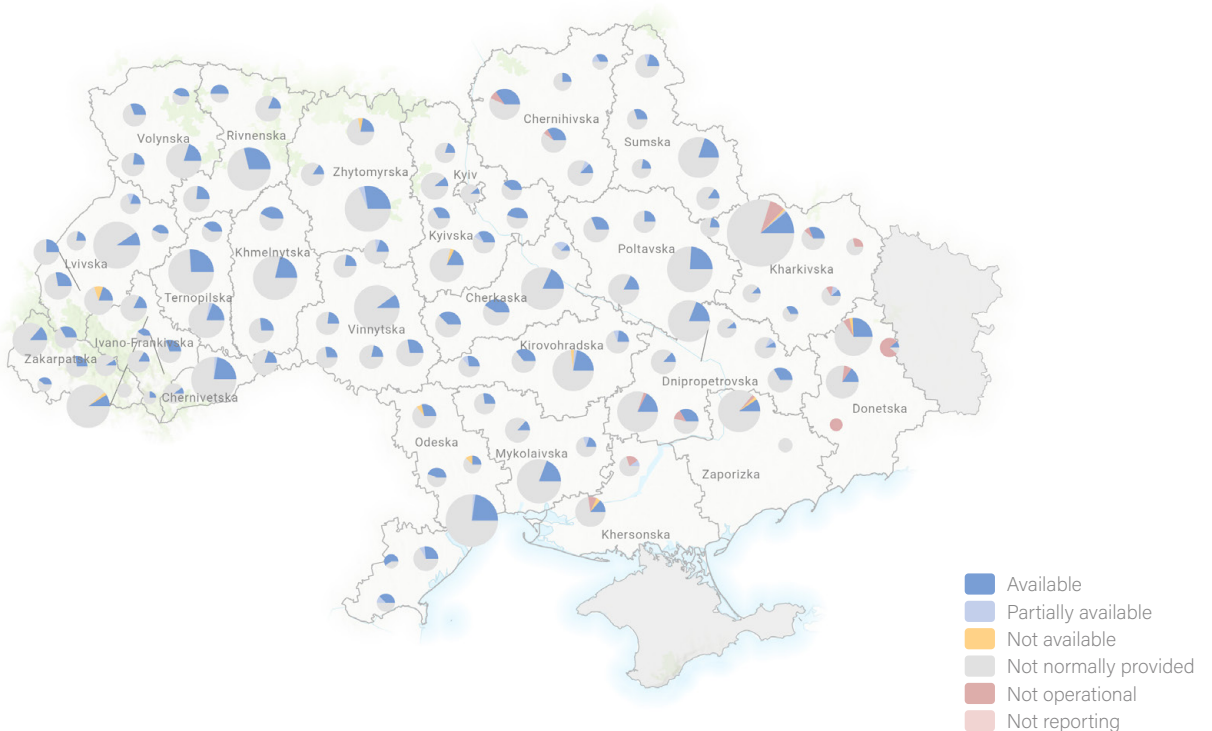
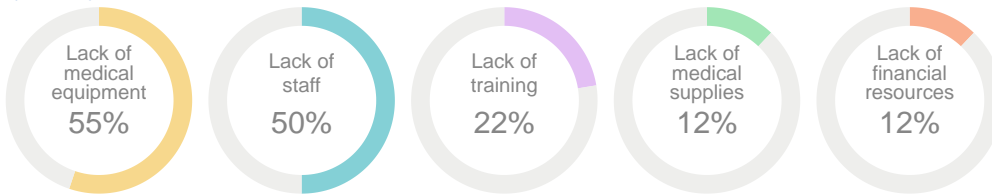


Service availability by health facility type



Main barriers impeding service delivery

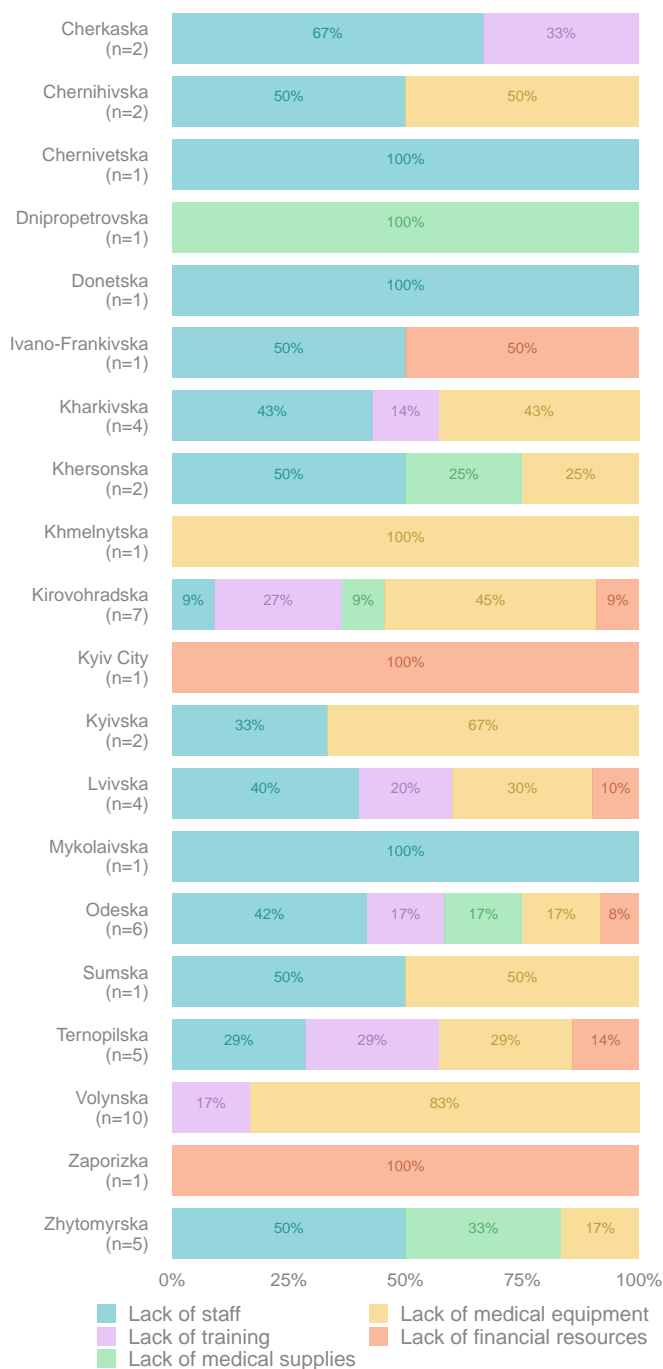
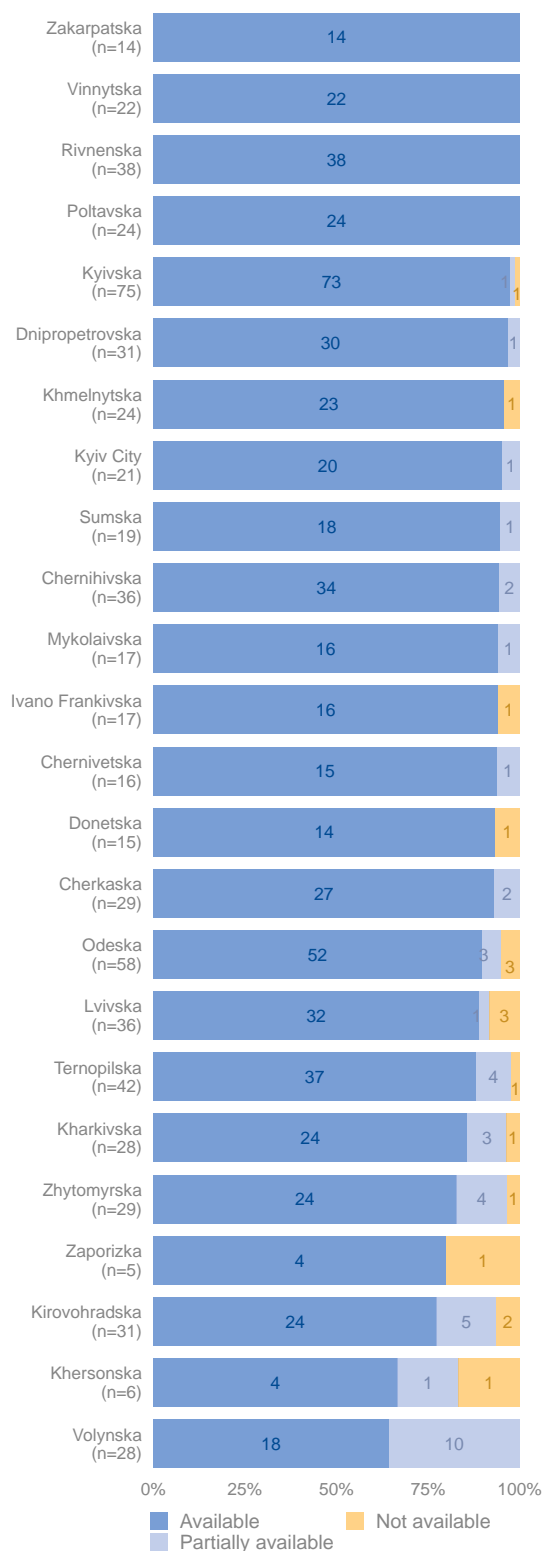
(n = 58)



MANAGEMENT OF SEVERE AND/OR COMPLICATED COMMUNICABLE DISEASES

Service availability by oblast*

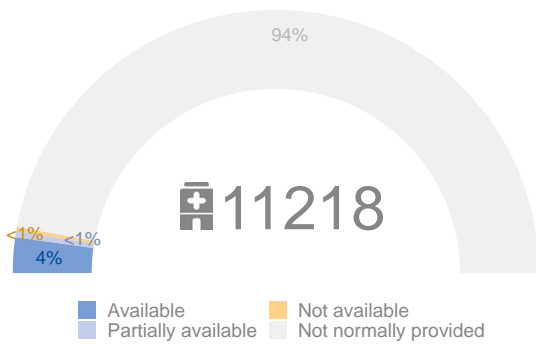
Main barriers impeding service delivery by oblast**



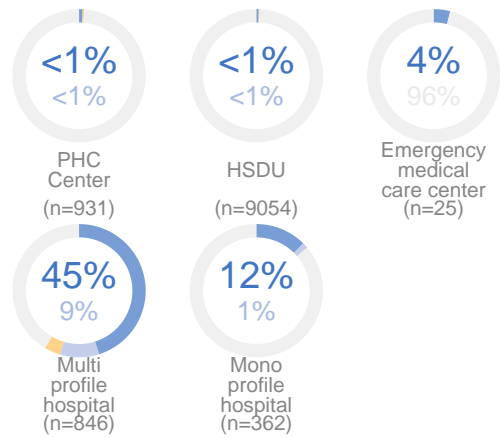
* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

READINESS OF EPIDEMIC AND EMERGENCY SITUATIONS

Service availability

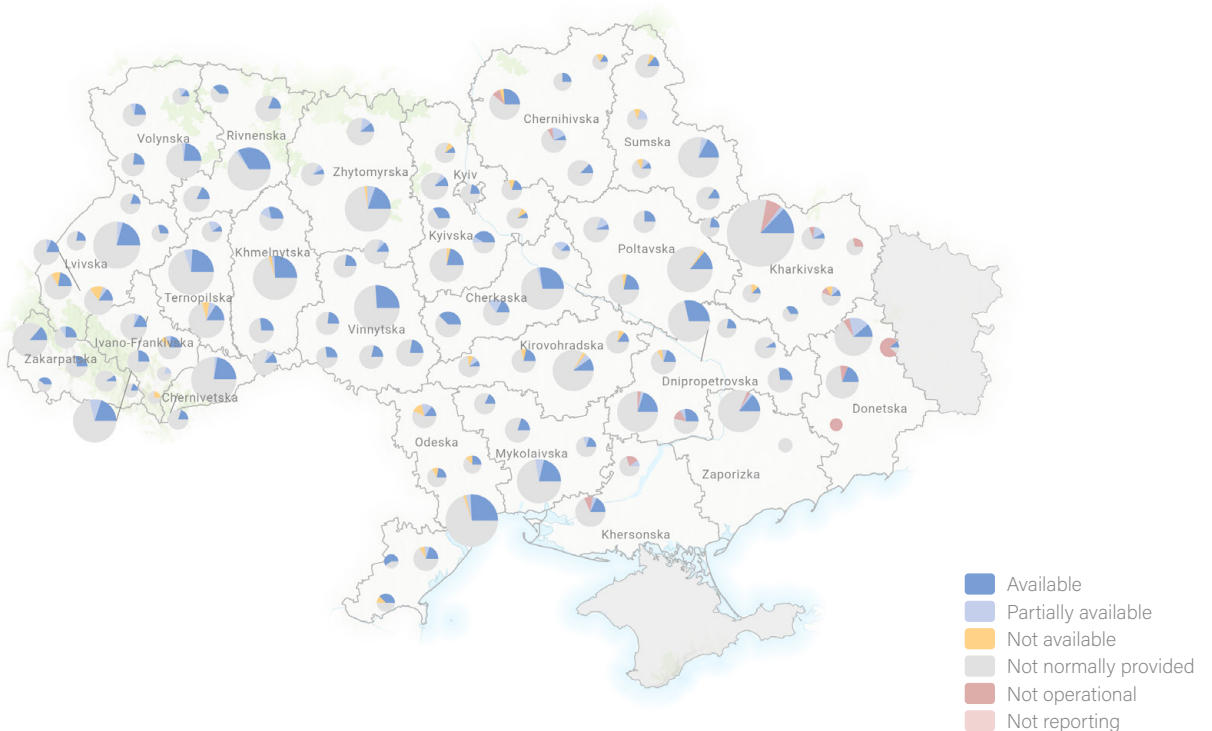


Service availability by health facility type



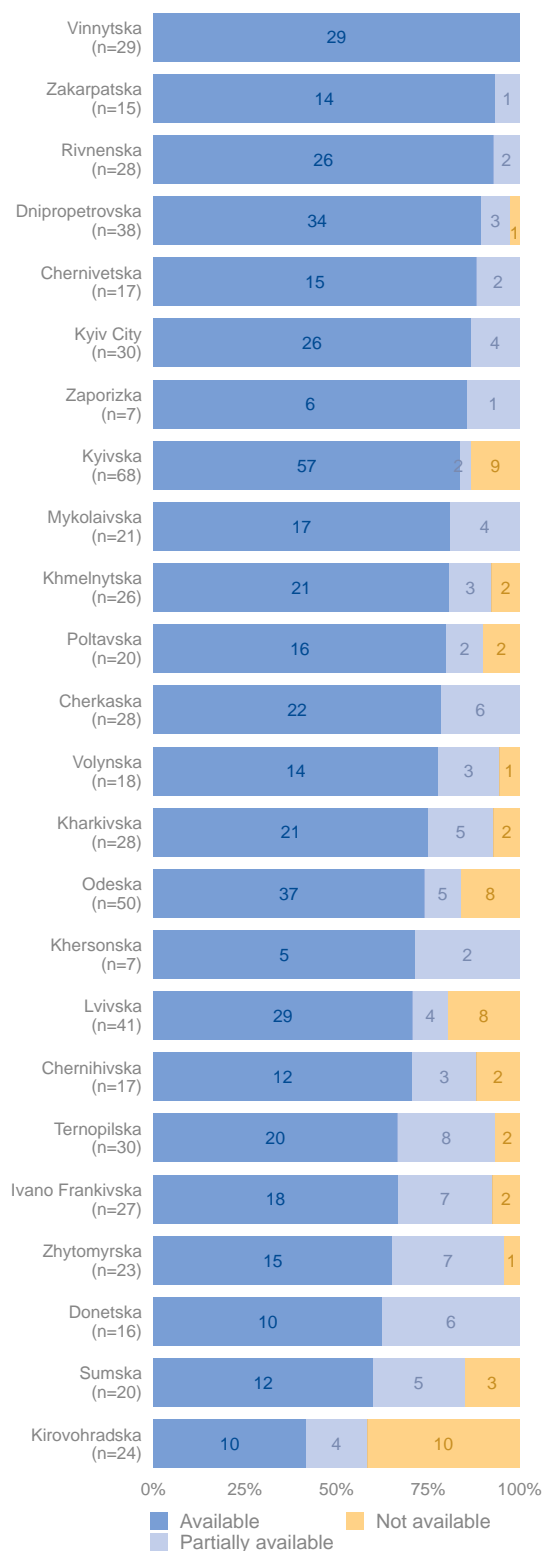
Main barriers impeding service delivery

(n = 142)

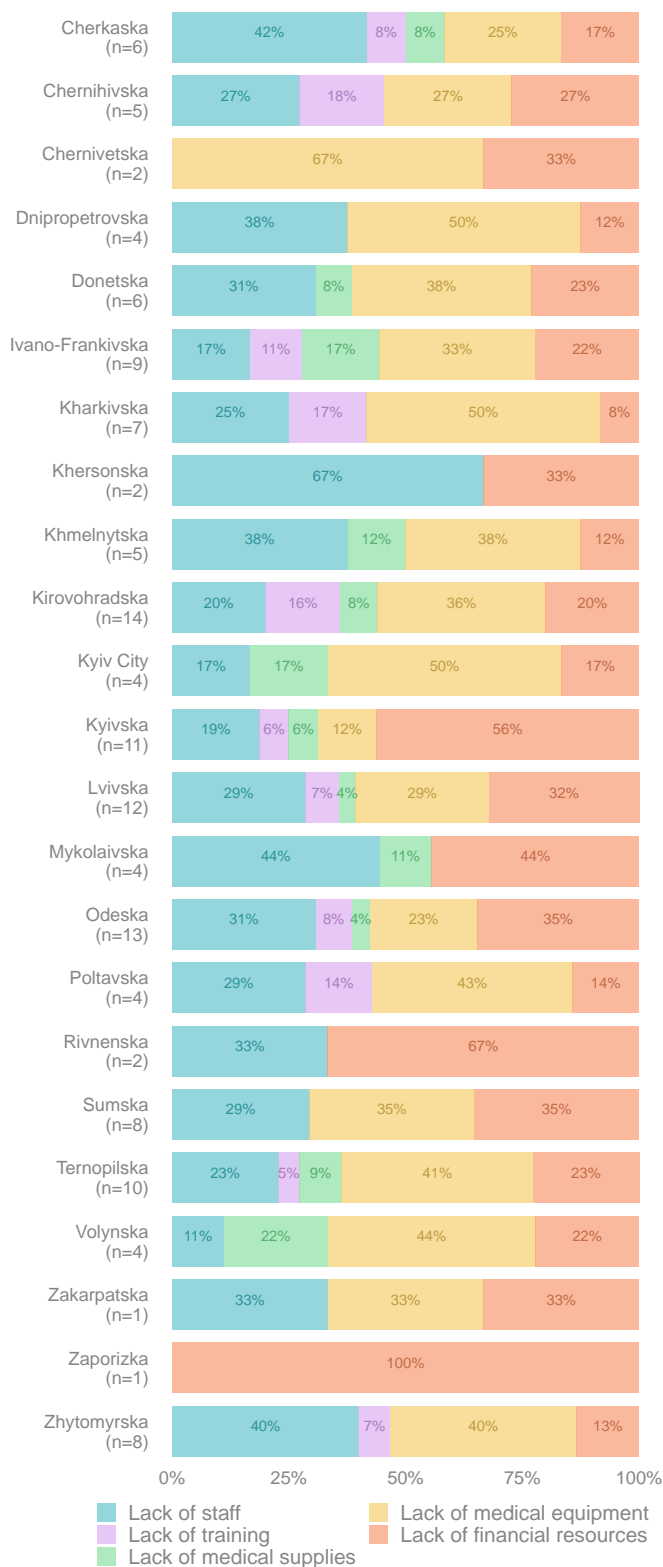


READINESS OF EPIDEMIC AND EMERGENCY SITUATIONS

Service availability by oblast*



Main barriers impeding service delivery by oblast**



* Chart excludes health facilities where the service is not normally provided.

** Chart includes health facilities where the causes/barriers were indicated.

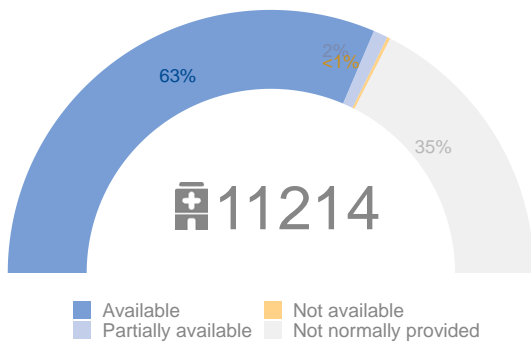


SEXUAL AND REPRODUCTIVE HEALTH (STIS AND HIV/AIDS)

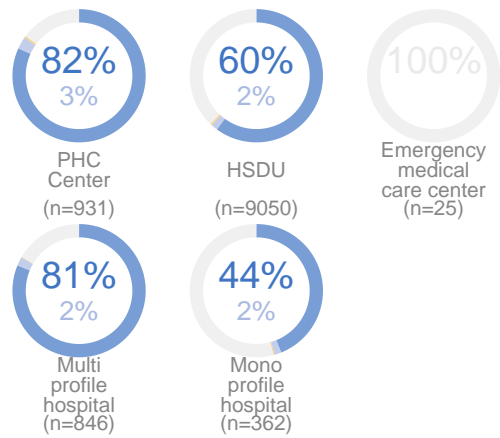


HIV TESTING AND COUNSELING

Service availability

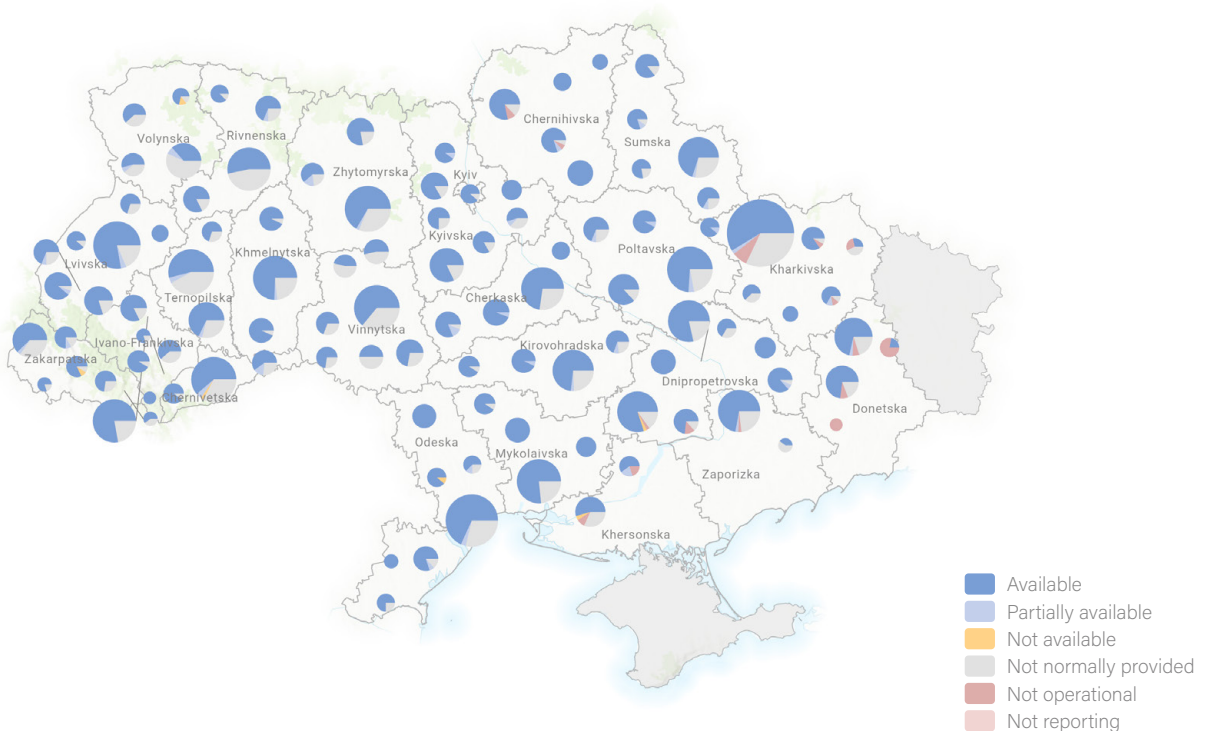


Service availability by health facility type



Main barriers impeding service delivery

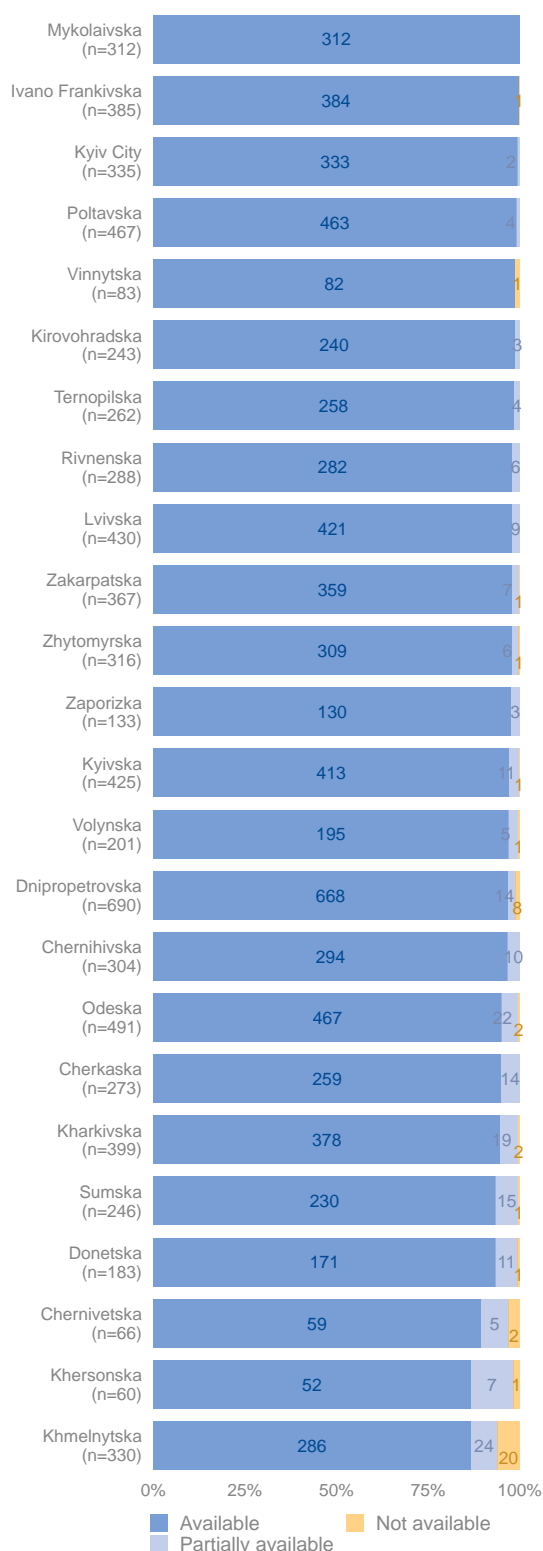
(n = 244)



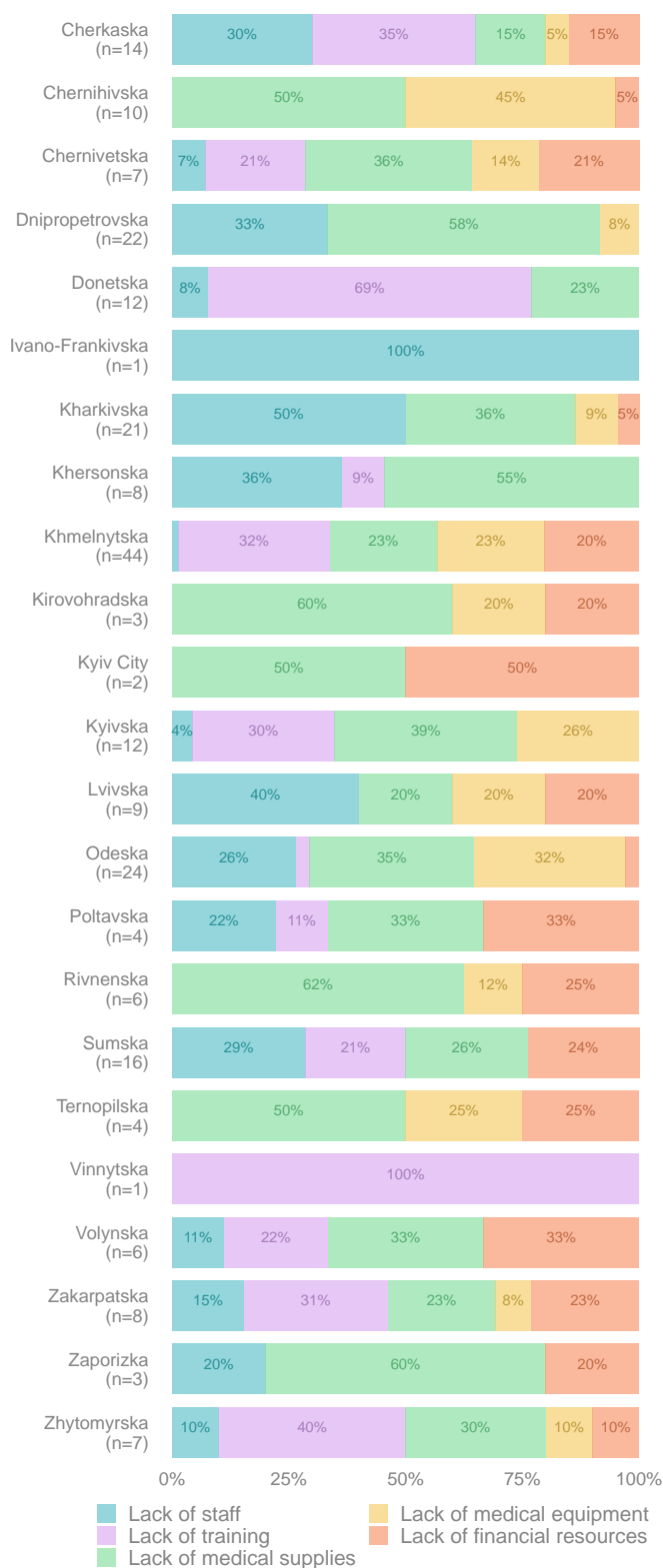
Map excludes HSDUs

HIV TESTING AND COUNSELING

Service availability by oblast*



Main barriers impeding service delivery by oblast**

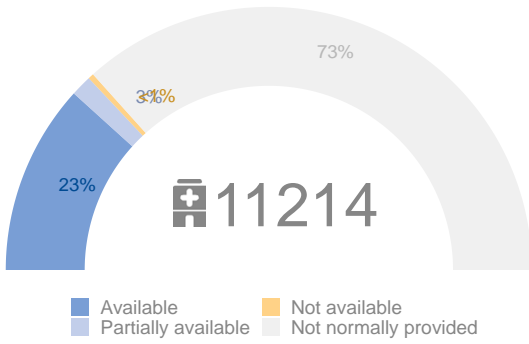


* Chart excludes health facilities where the service is not normally provided.

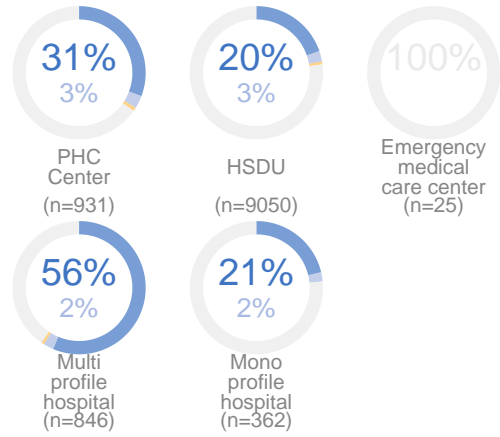
** Chart includes health facilities where the causes/barriers were indicated.

PMTCT

Service availability

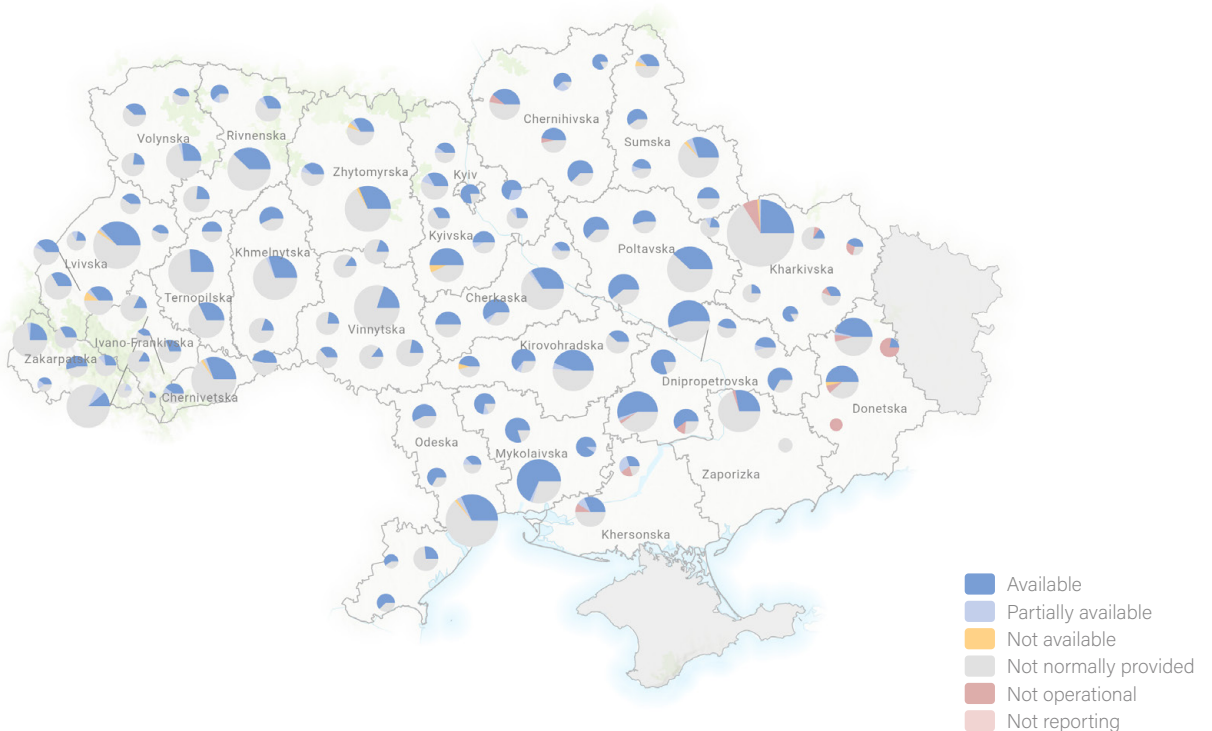
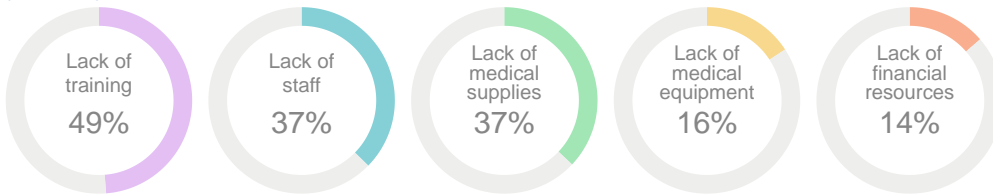


Service availability by health facility type



Main barriers impeding service delivery

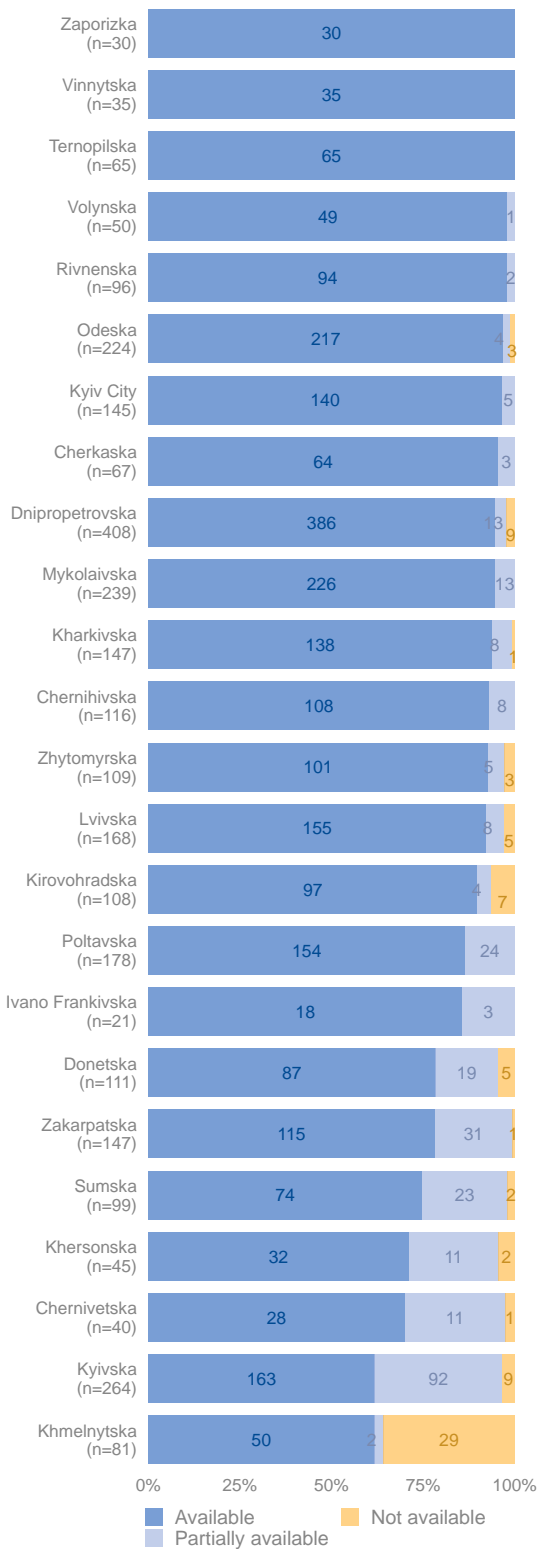
(n = 367)



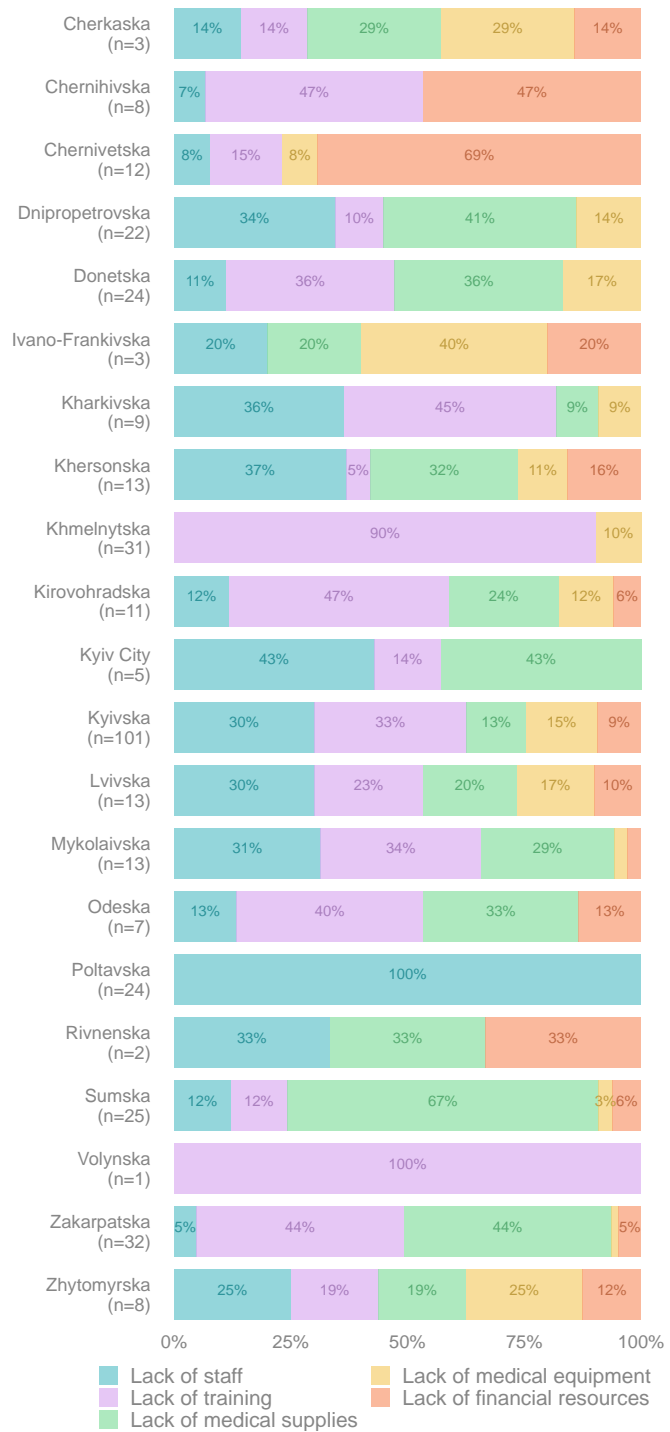
Map excludes HSDUs

PMTCT

Service availability by oblast*



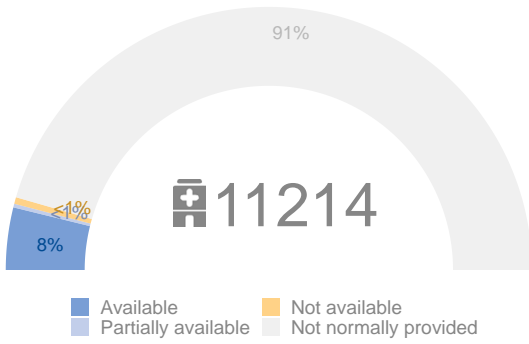
Main barriers impeding service delivery by oblast**



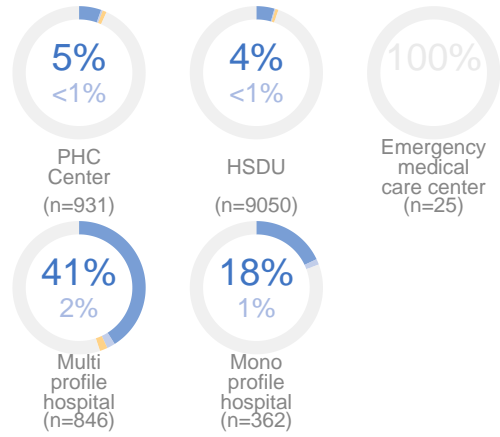
* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

ANTIRETROVIRAL TREATMENT

Service availability

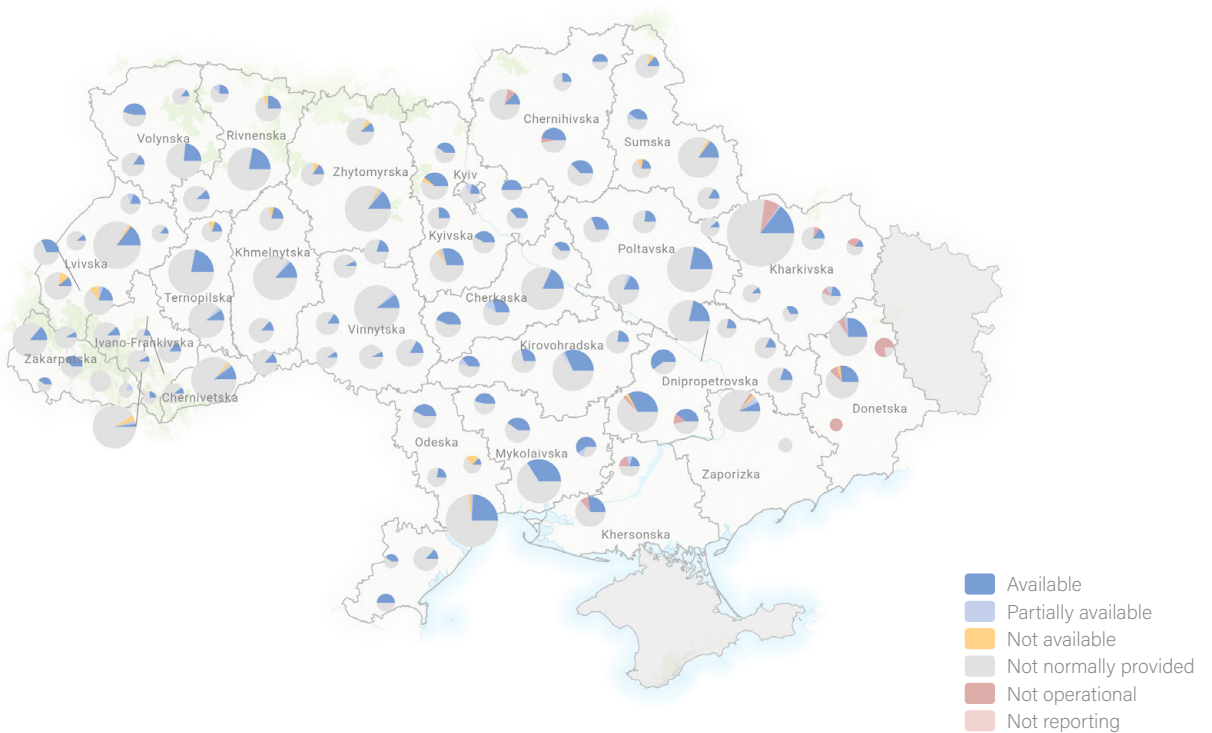


Service availability by health facility type



Main barriers impeding service delivery

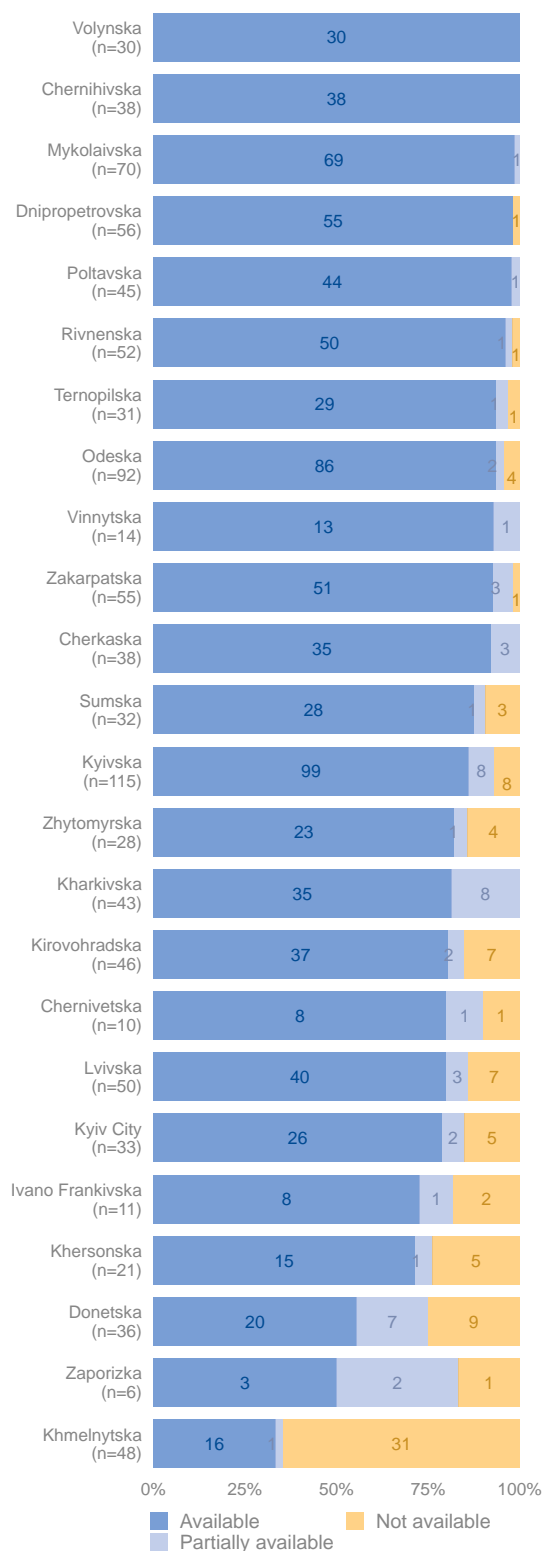
(n = 142)



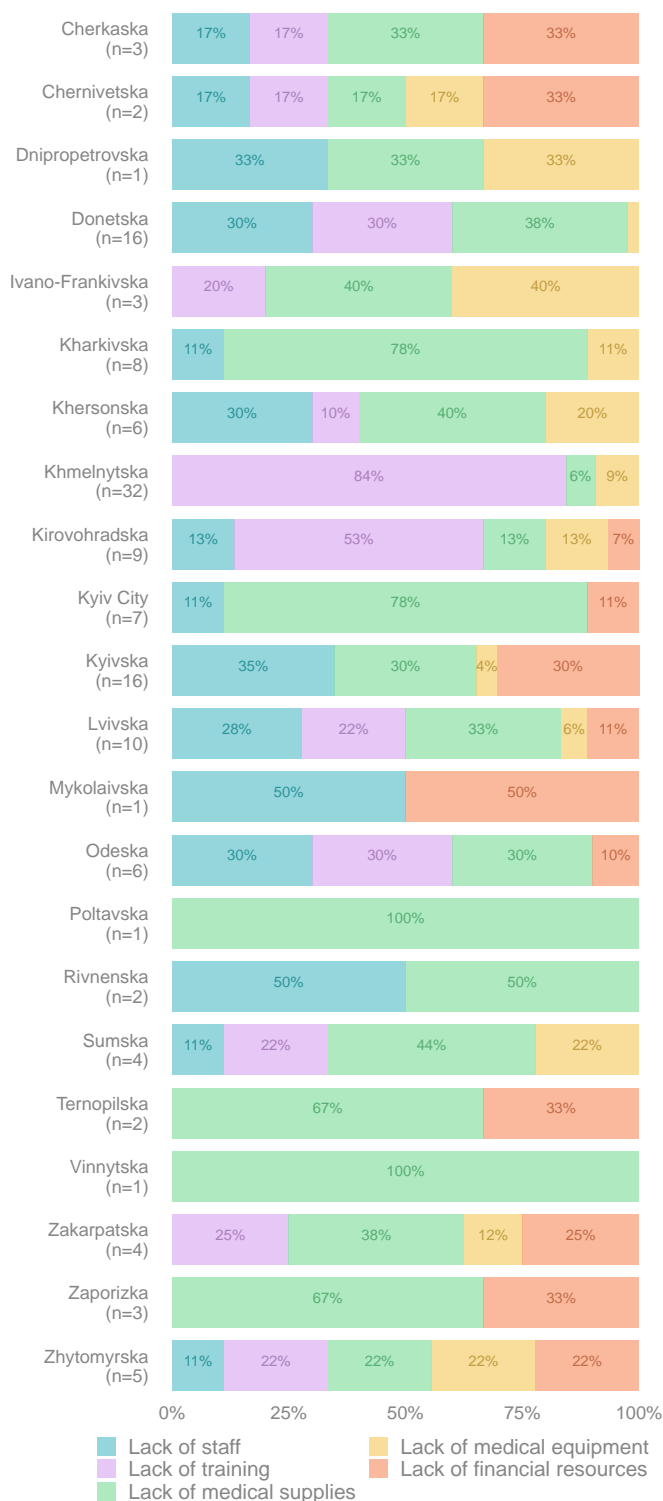
Map excludes HSDUs

ANTIRETROVIRAL TREATMENT

Service availability by oblast*



Main barriers impeding service delivery by oblast**



* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

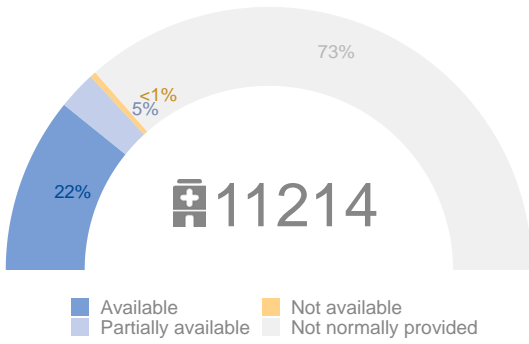


SEXUAL AND REPRODUCTIVE HEALTH (MATERNAL AND NEWBORN CARE)

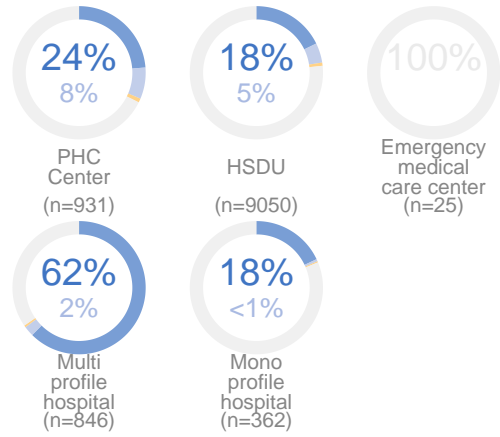


ANTENATAL CARE

Service availability

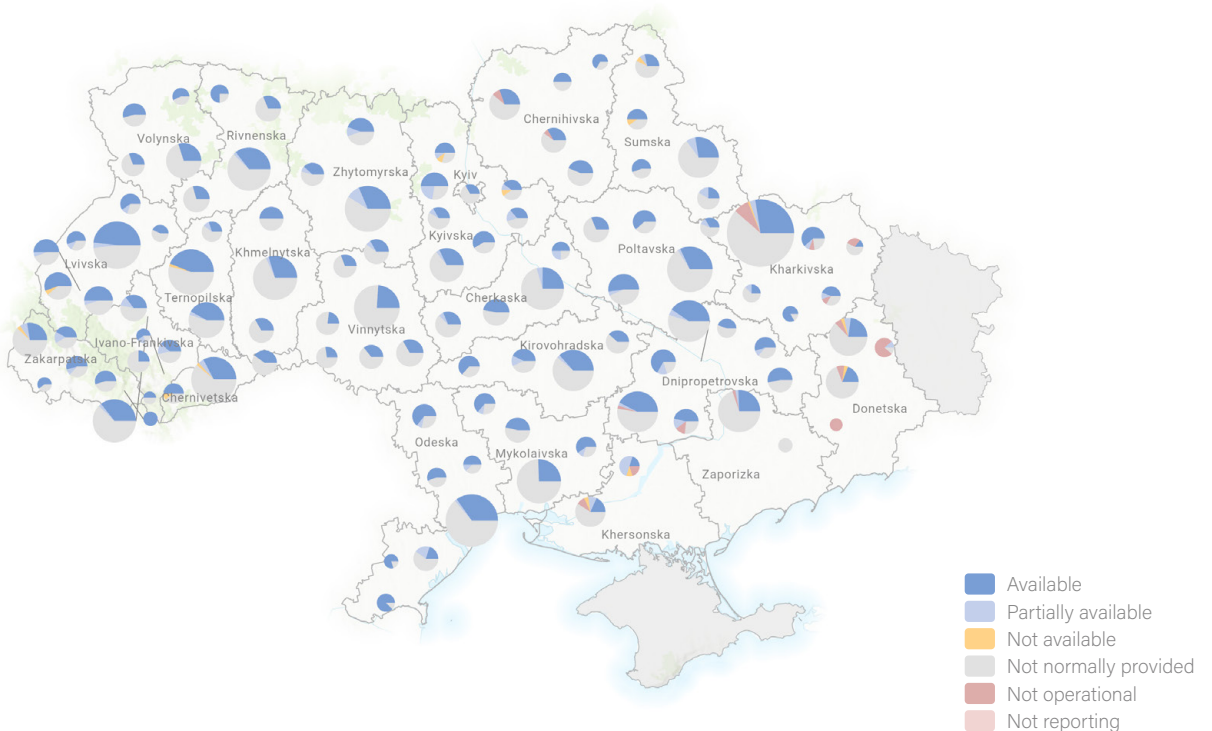


Service availability by health facility type



Main barriers impeding service delivery

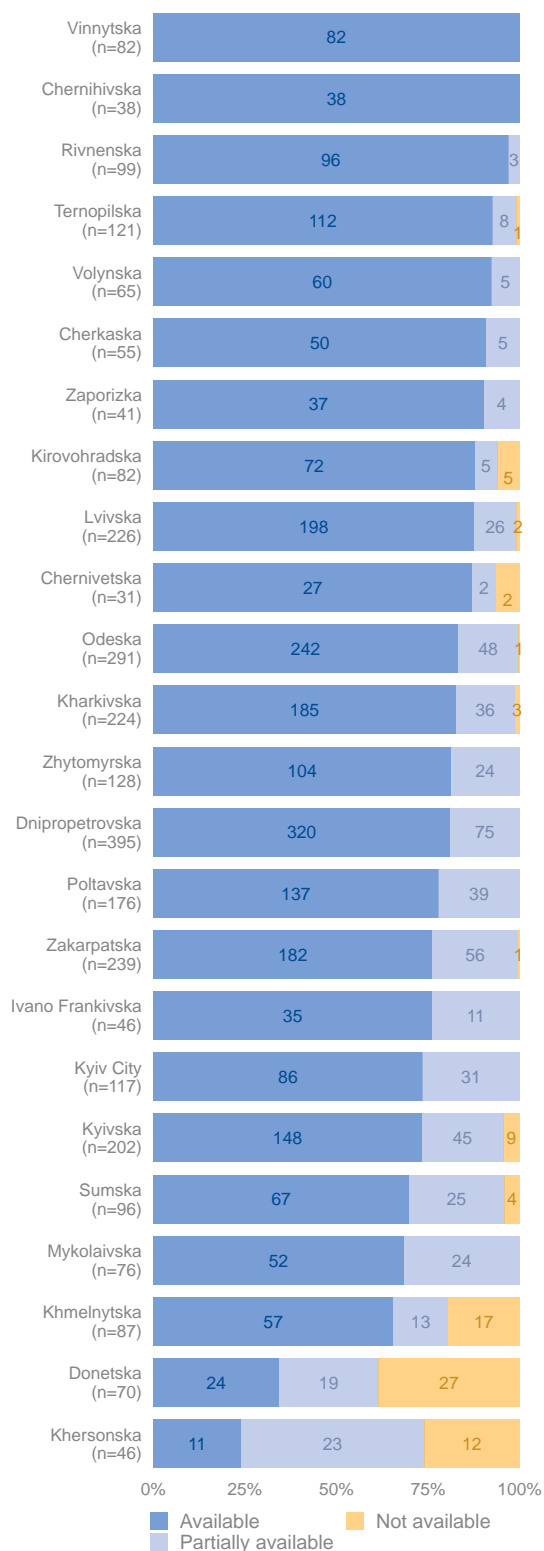
(n = 611)



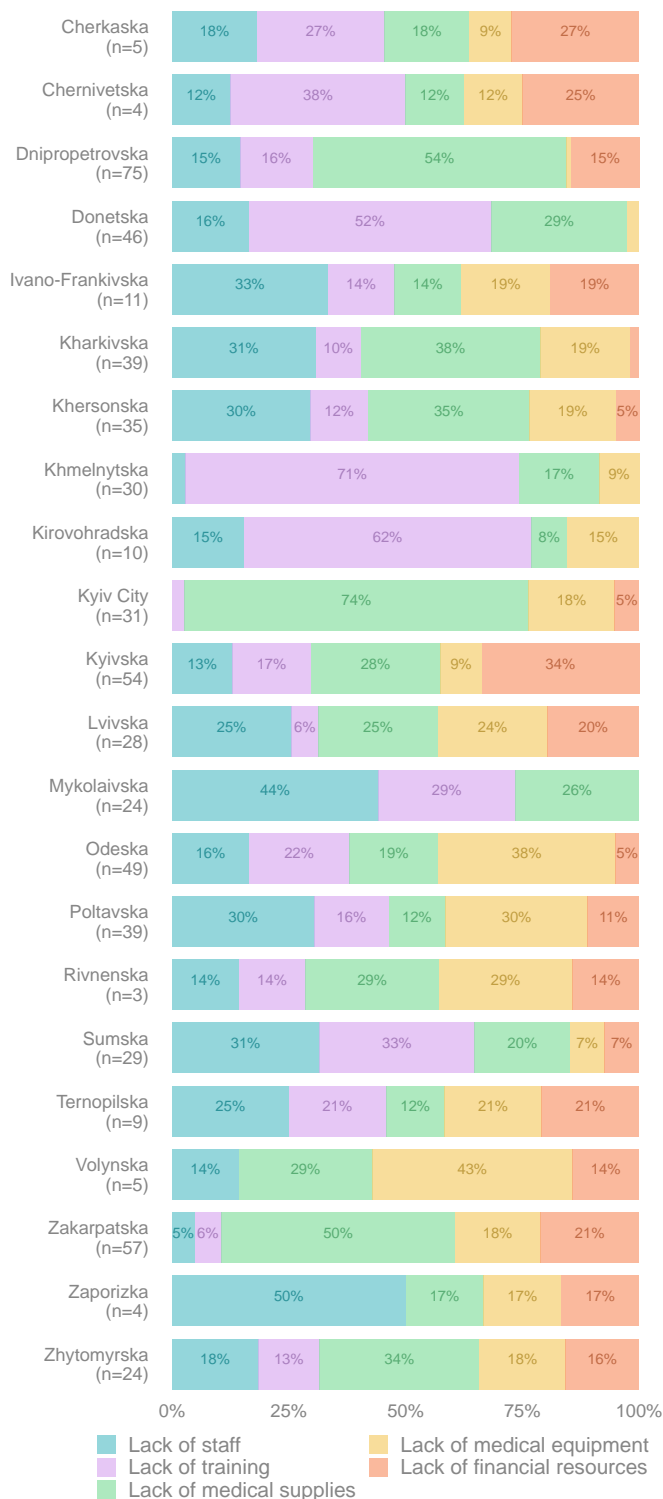
Map excludes HSDUs

ANTENATAL CARE

Service availability by oblast*



Main barriers impeding service delivery by oblast**

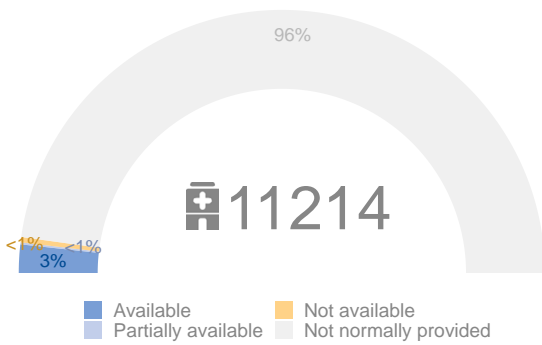


* Chart excludes health facilities where the service is not normally provided.

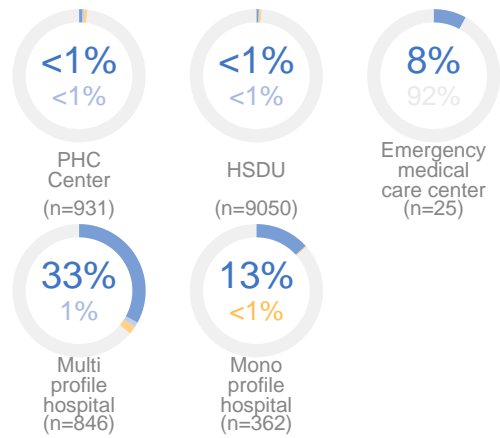
** Chart includes health facilities where the causes/barriers were indicated.

SKILLED CARE DURING CHILDBIRTH

Service availability

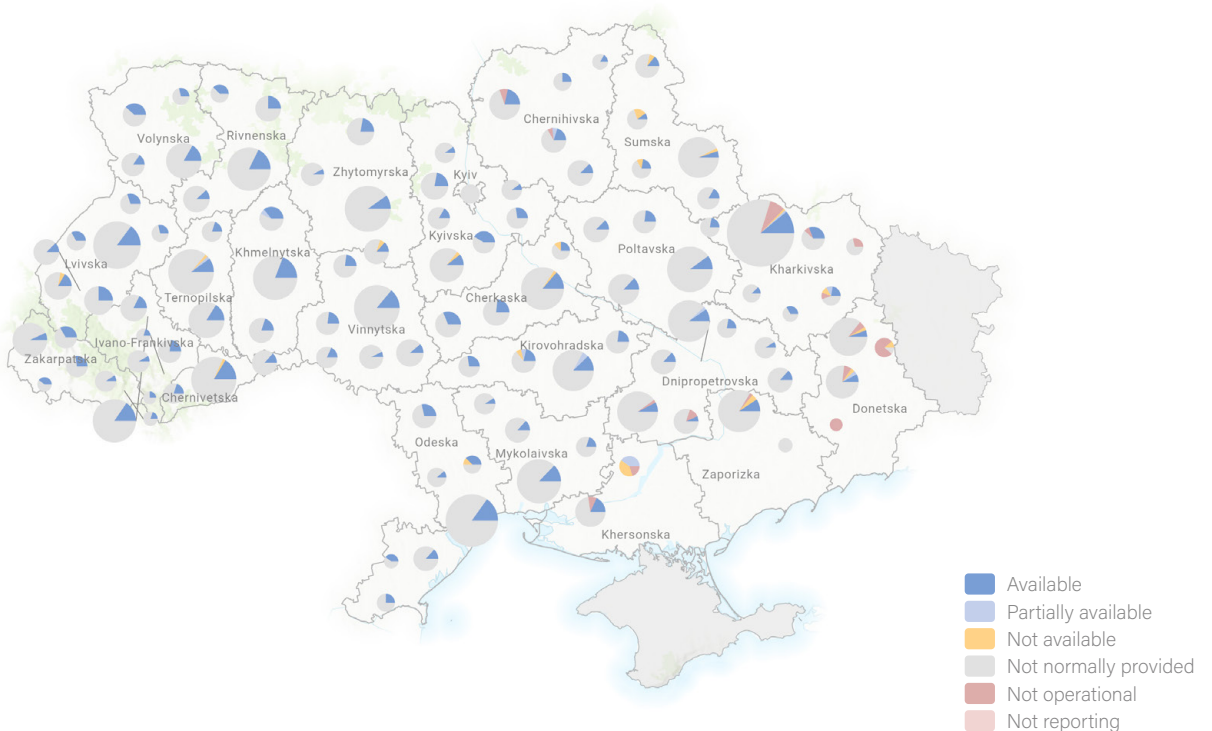


Service availability by health facility type



Main barriers impeding service delivery

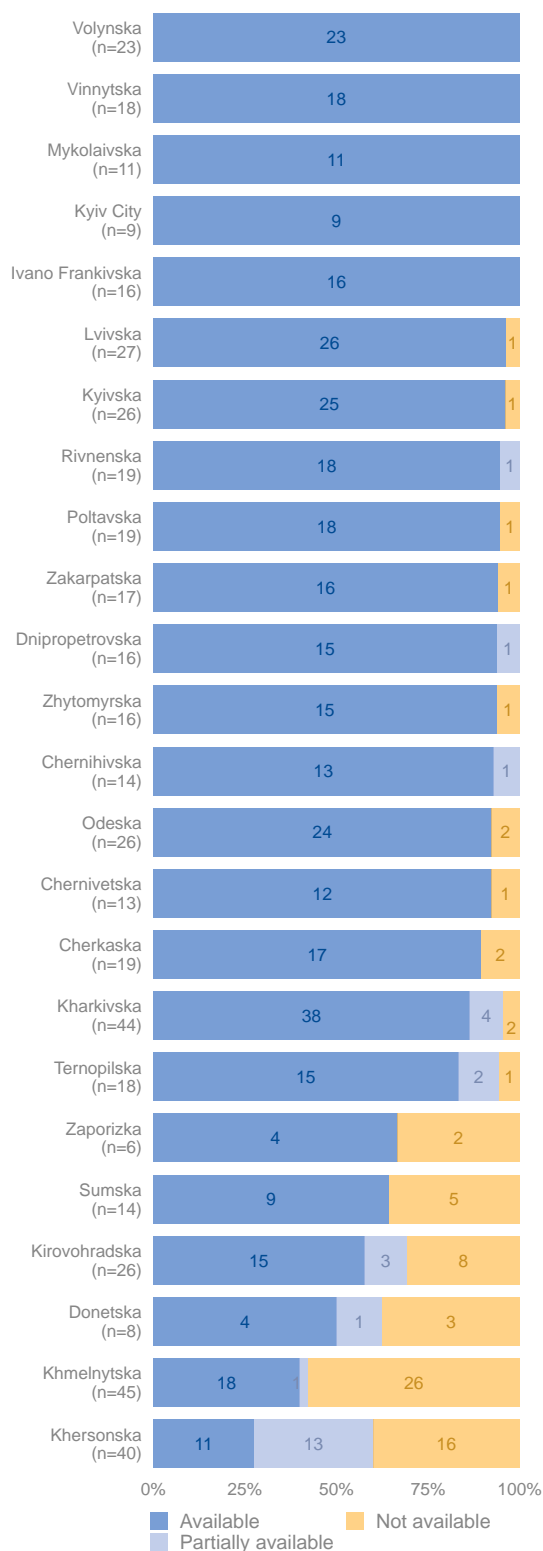
(n = 100)



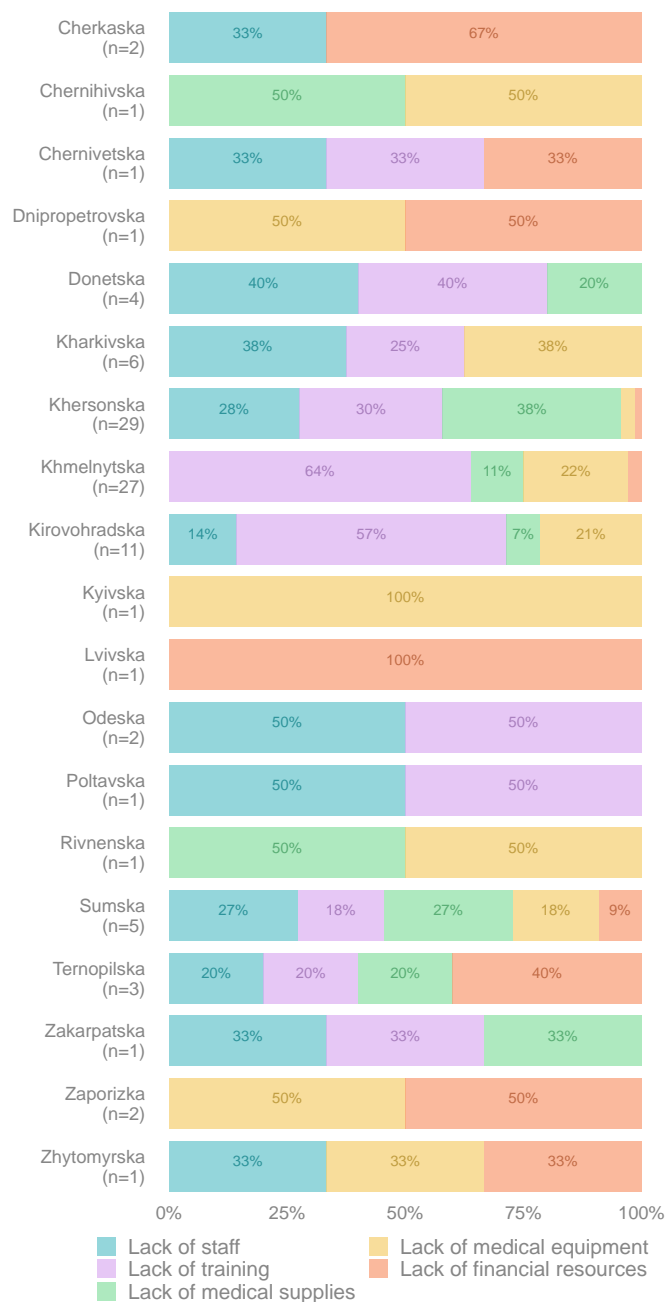
Map excludes HSDUs

SKILLED CARE DURING CHILDBIRTH

Service availability by oblast*



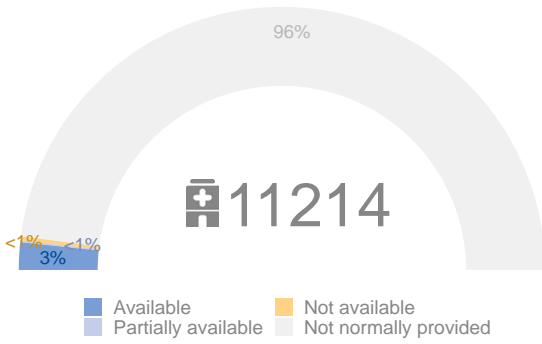
Main barriers impeding service delivery by oblast**



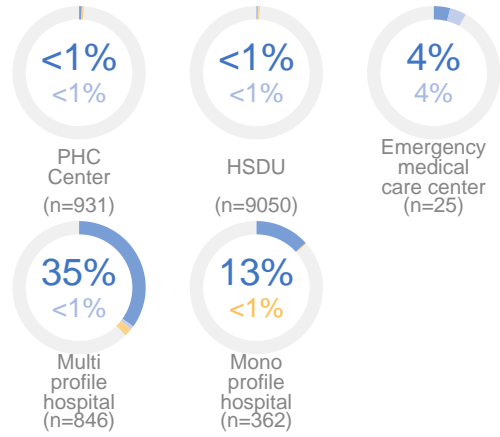
* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

BASIC EMERGENCY OBSTETRIC CARE

Service availability

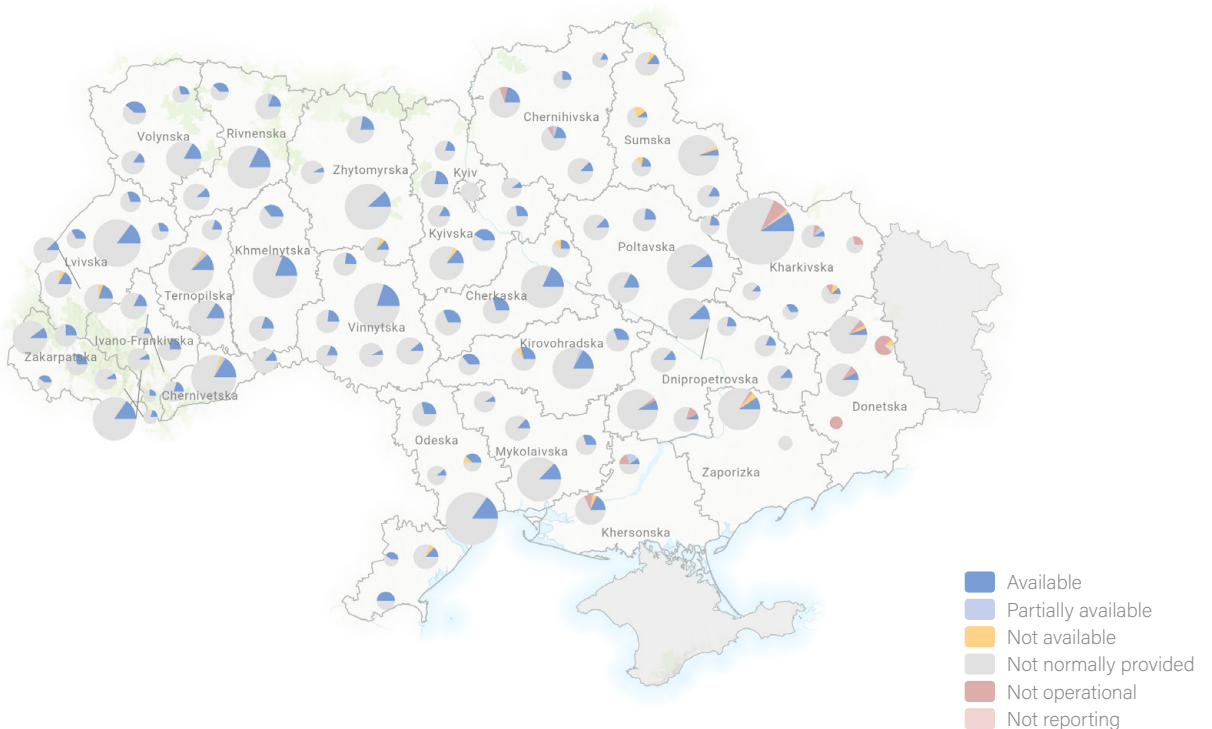
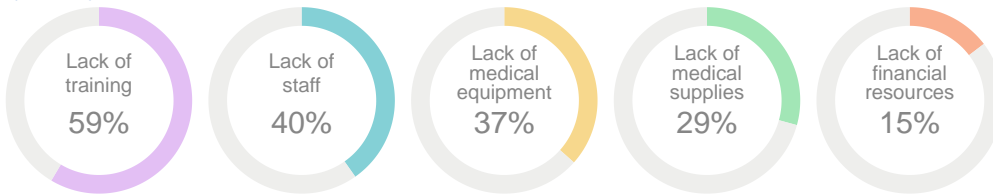


Service availability by health facility type



Main barriers impeding service delivery

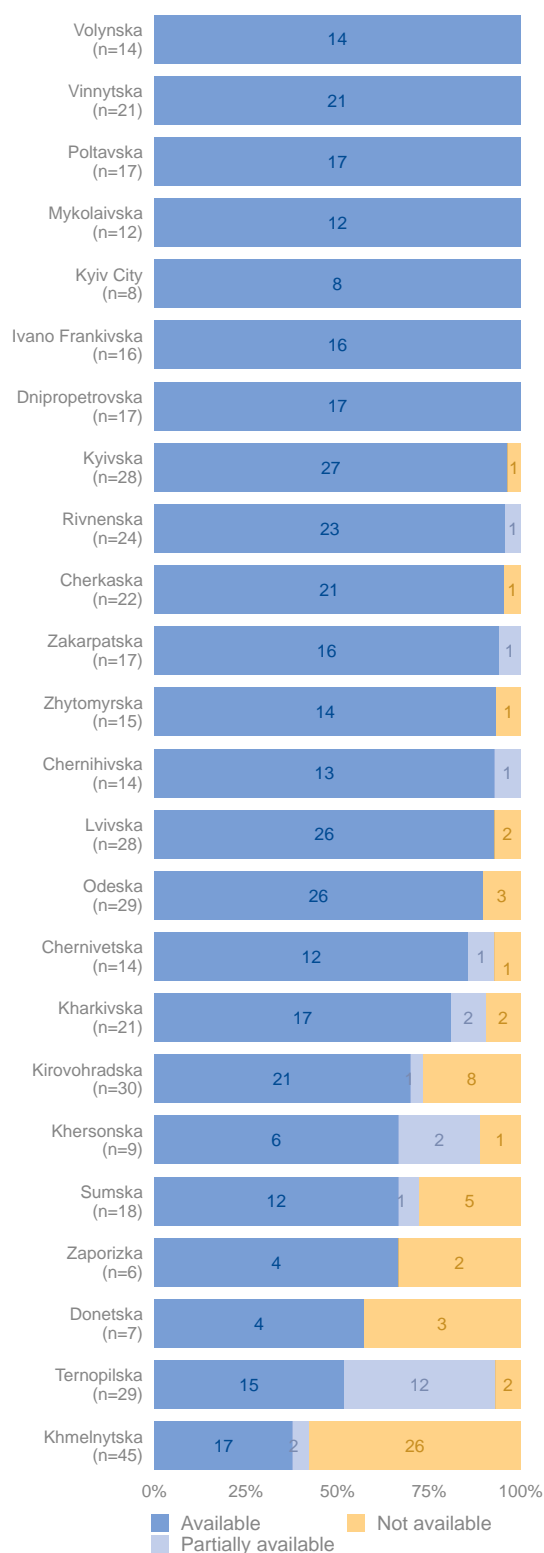
(n = 82)



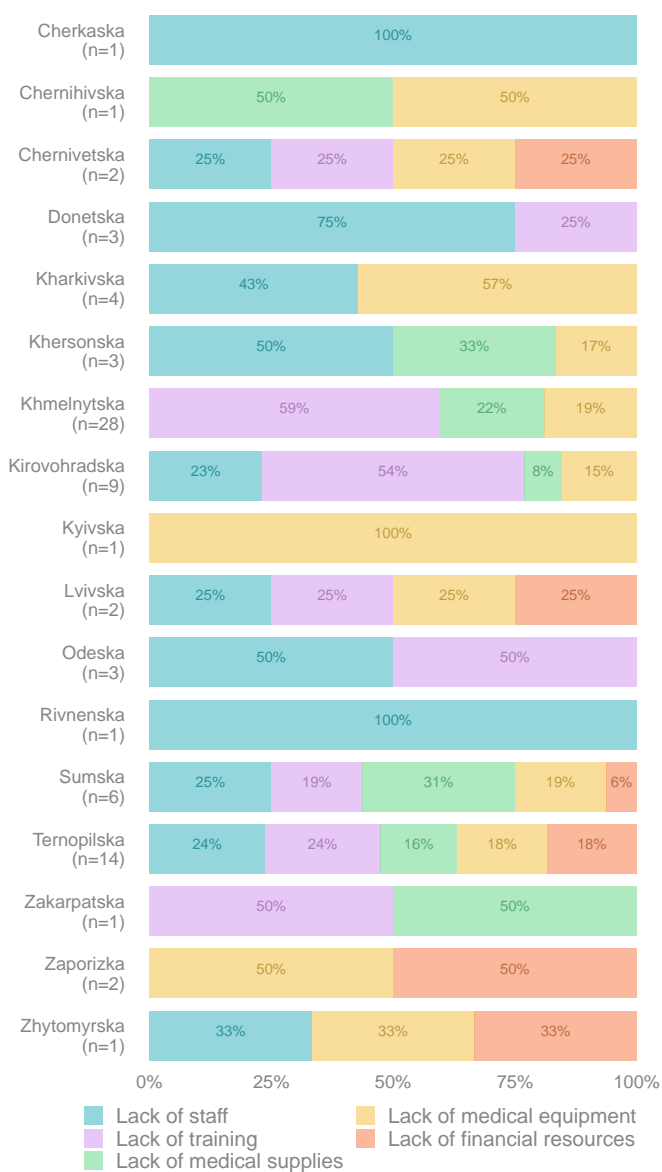
Map excludes HSDUs

BASIC EMERGENCY OBSTETRIC CARE

Service availability by oblast*



Main barriers impeding service delivery by oblast**

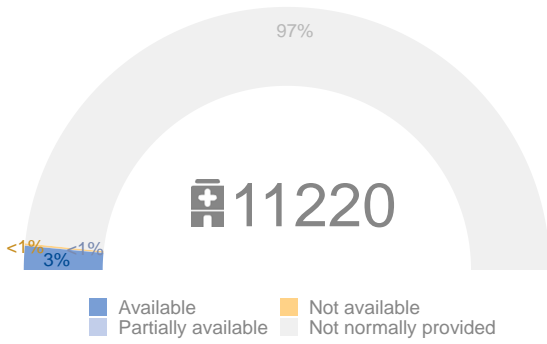


* Chart excludes health facilities where the service is not normally provided.

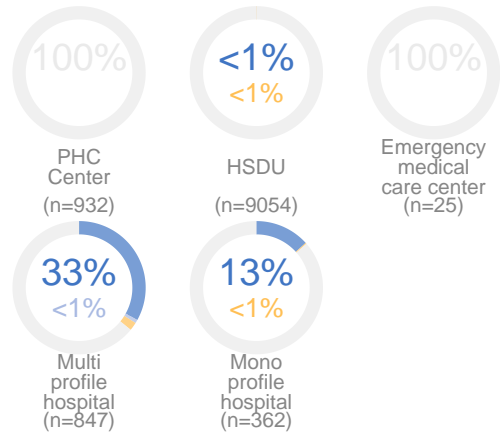
** Chart includes health facilities where the causes/barriers were indicated.

COMPREHENSIVE EMERGENCY OBSTETRIC CARE

Service availability

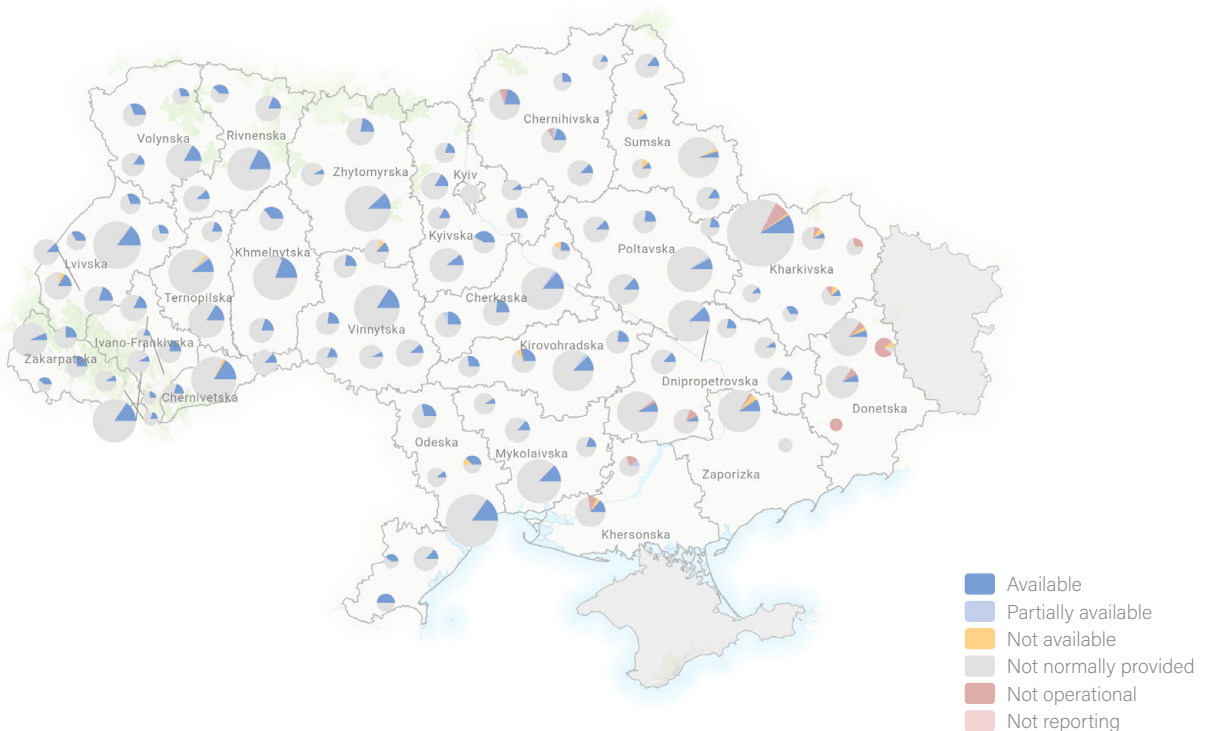
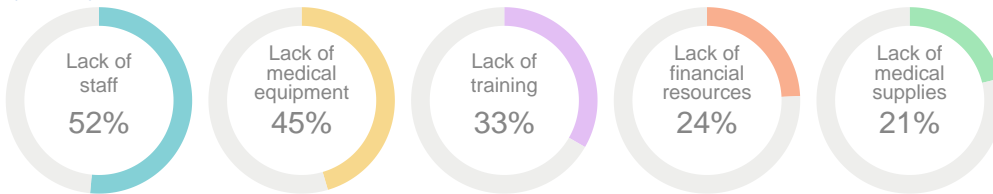


Service availability by health facility type



Main barriers impeding service delivery

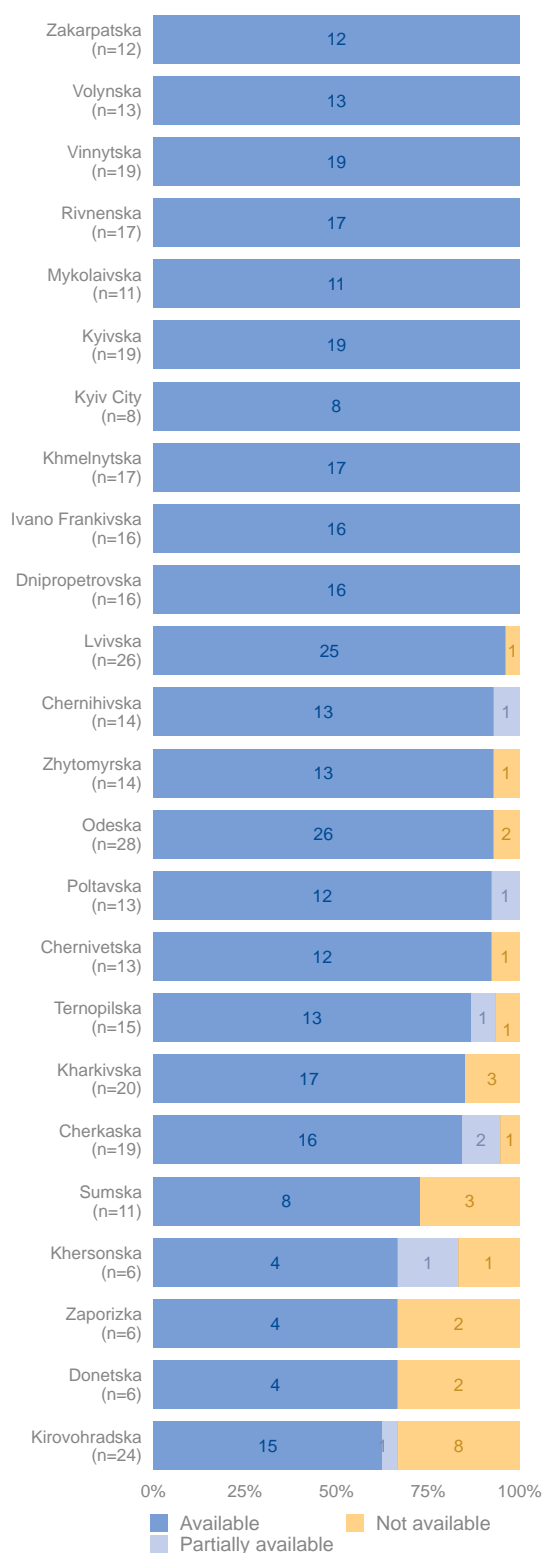
(n = 33)



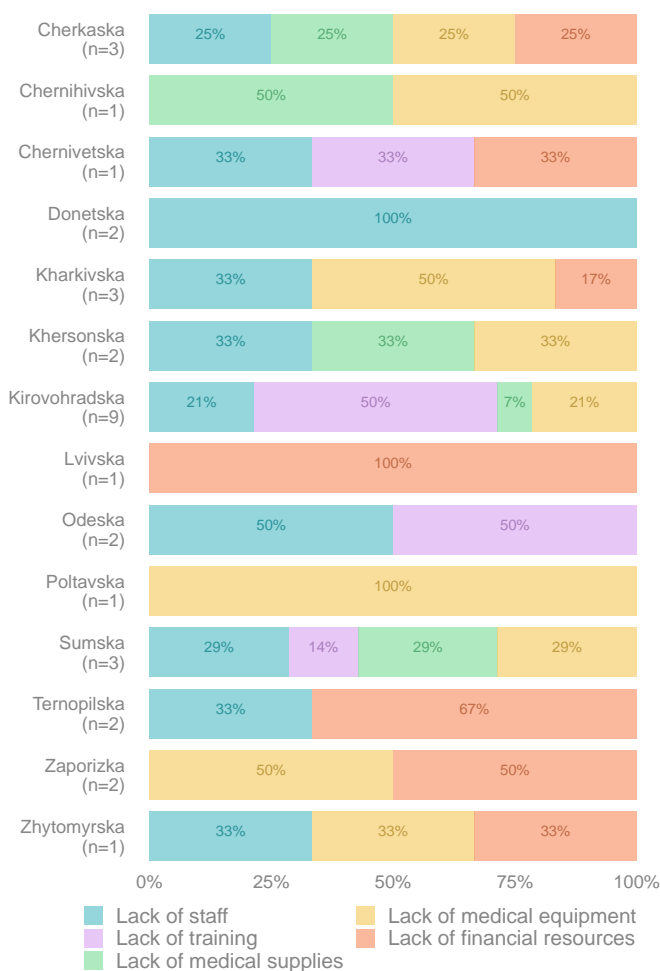
Map excludes HSDUs

COMPREHENSIVE EMERGENCY OBSTETRIC CARE

Service availability by oblast*



Main barriers impeding service delivery by oblast**

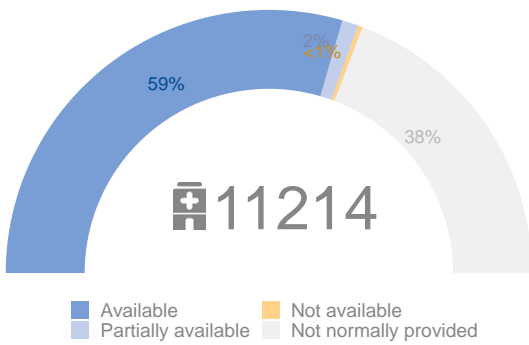


* Chart excludes health facilities where the service is not normally provided.

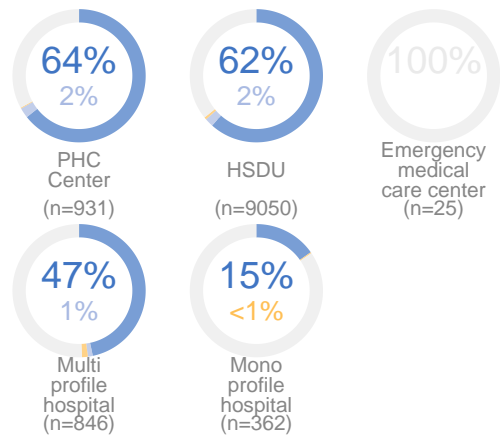
** Chart includes health facilities where the causes/barriers were indicated.

POSTPARTUM CARE

Service availability

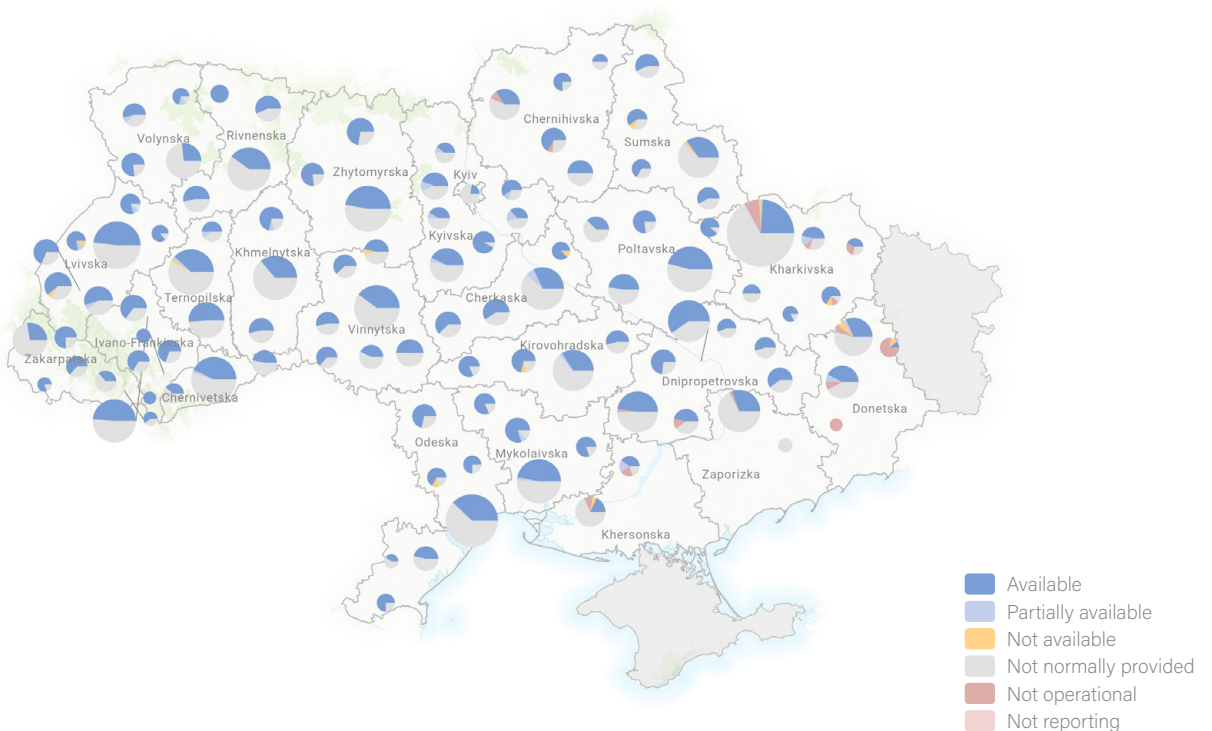
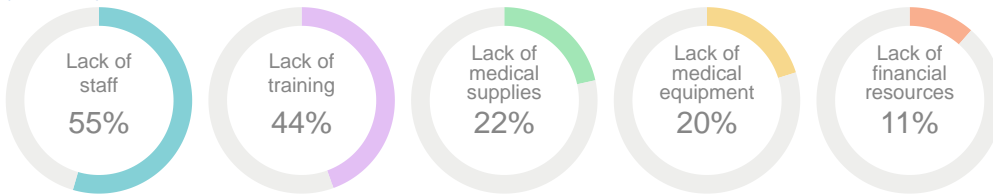


Service availability by health facility type

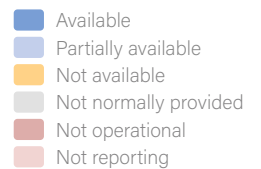


Main barriers impeding service delivery

(n = 288)

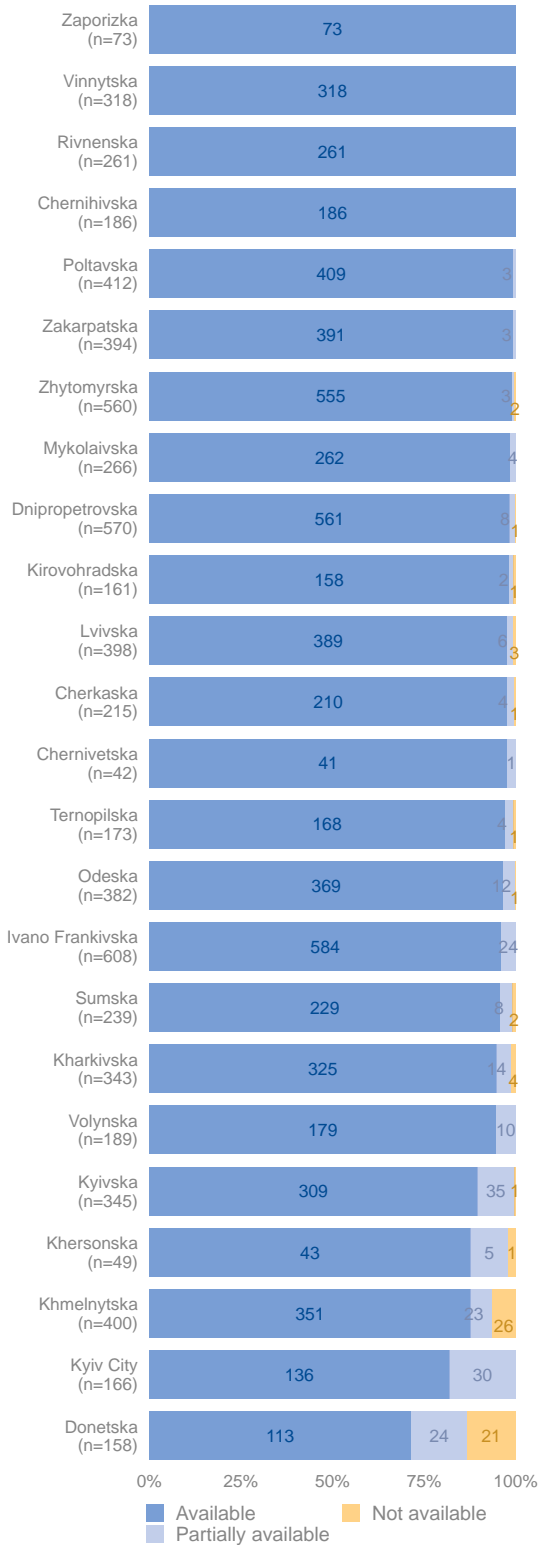


Map excludes HSDUs

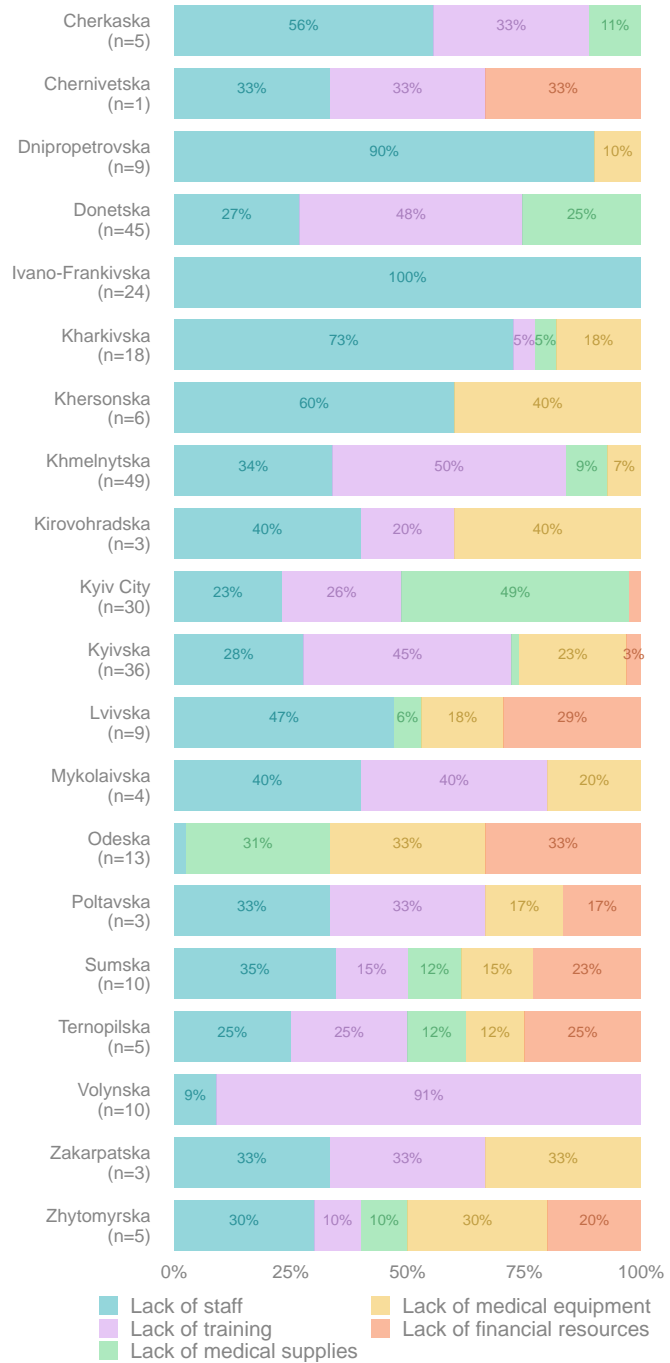


POSTPARTUM CARE

Service availability by oblast*



Main barriers impeding service delivery by oblast**



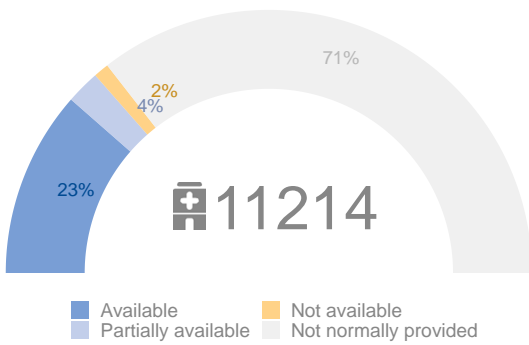
* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

SEXUAL AND REPRODUCTIVE HEALTH (SEXUAL VIOLENCE)

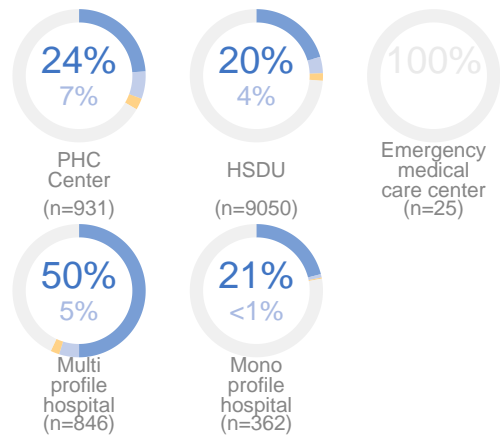


CLINICAL MANAGEMENT OF RAPE SURVIVORS

Service availability

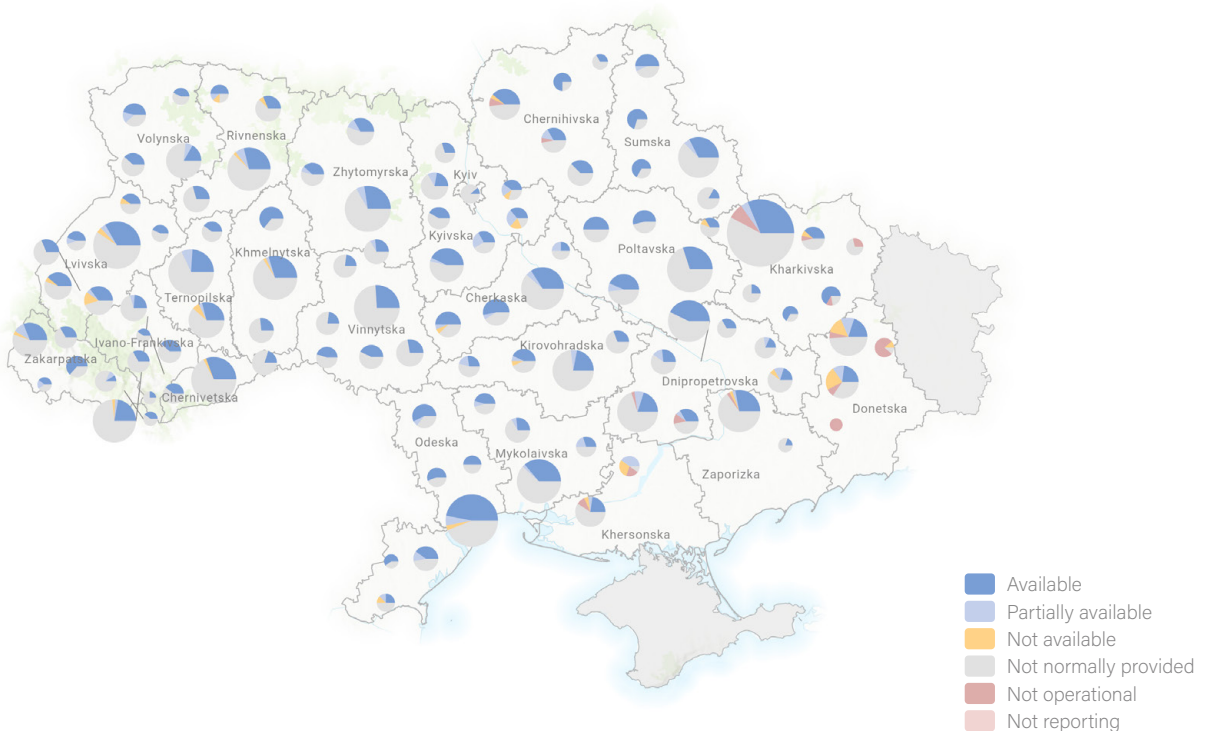


Service availability by health facility type



Main barriers impeding service delivery

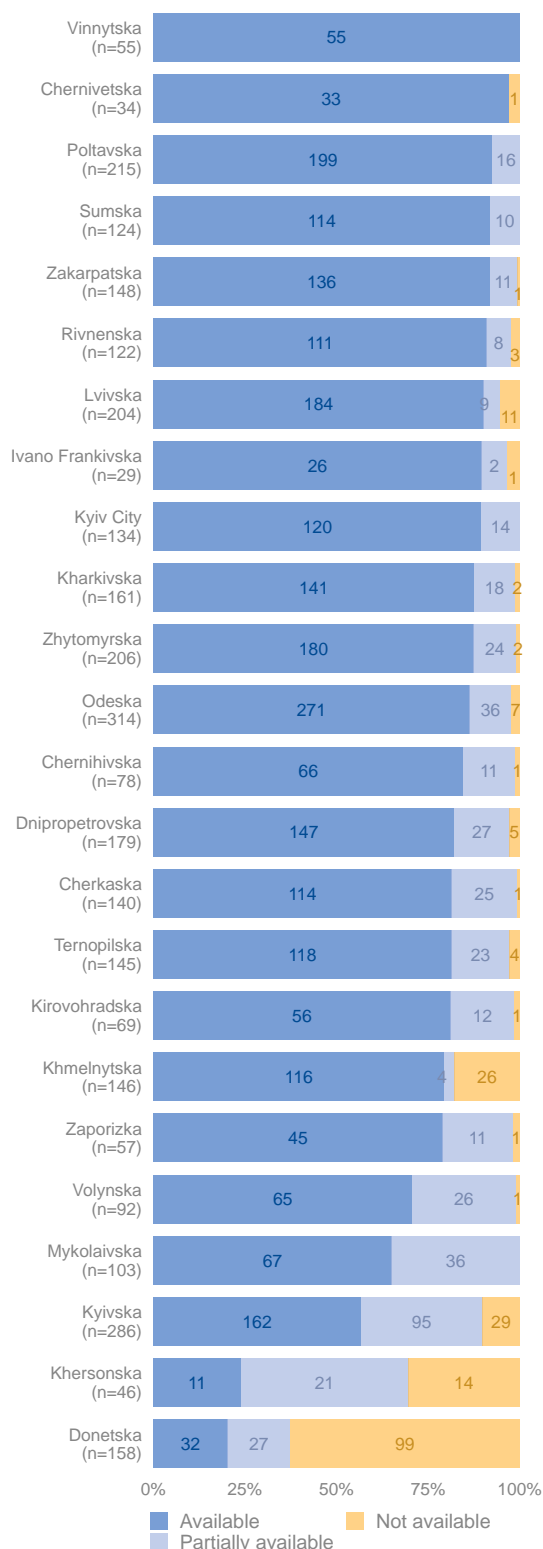
(n = 676)



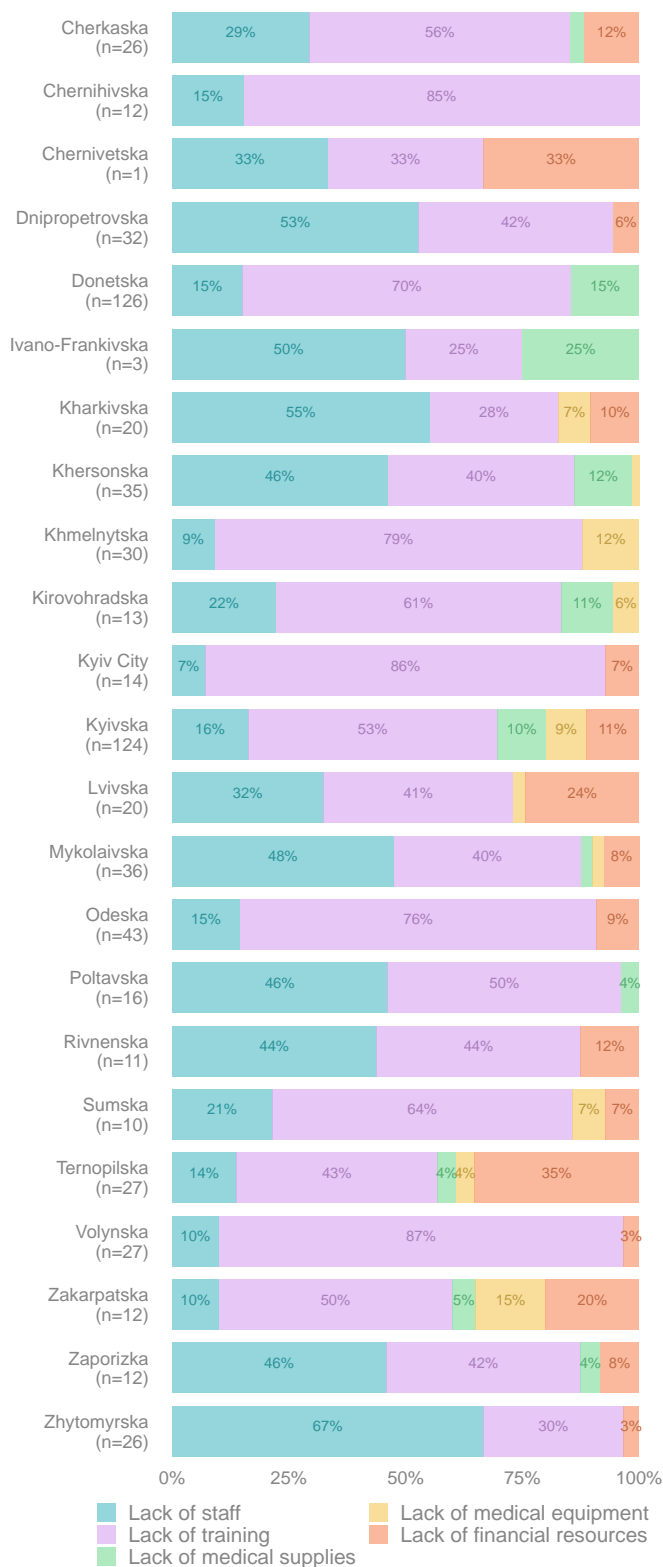
Map excludes HSDUs

CLINICAL MANAGEMENT OF RAPE SURVIVORS

Service availability by oblast*



Main barriers impeding service delivery by oblast**

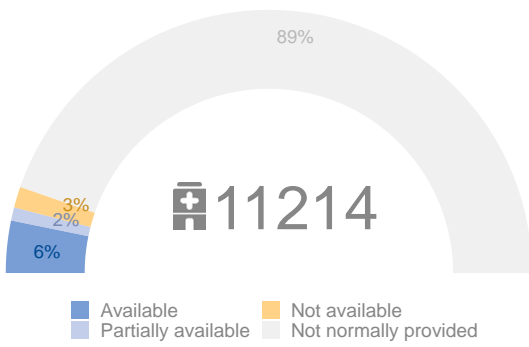


* Chart excludes health facilities where the service is not normally provided.

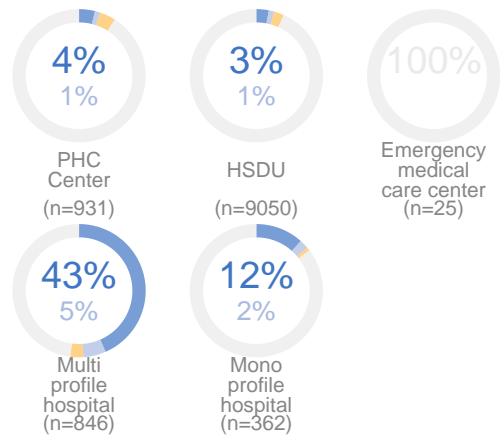
** Chart includes health facilities where the causes/barriers were indicated.

EMERGENCY CONTRACEPTION

Service availability

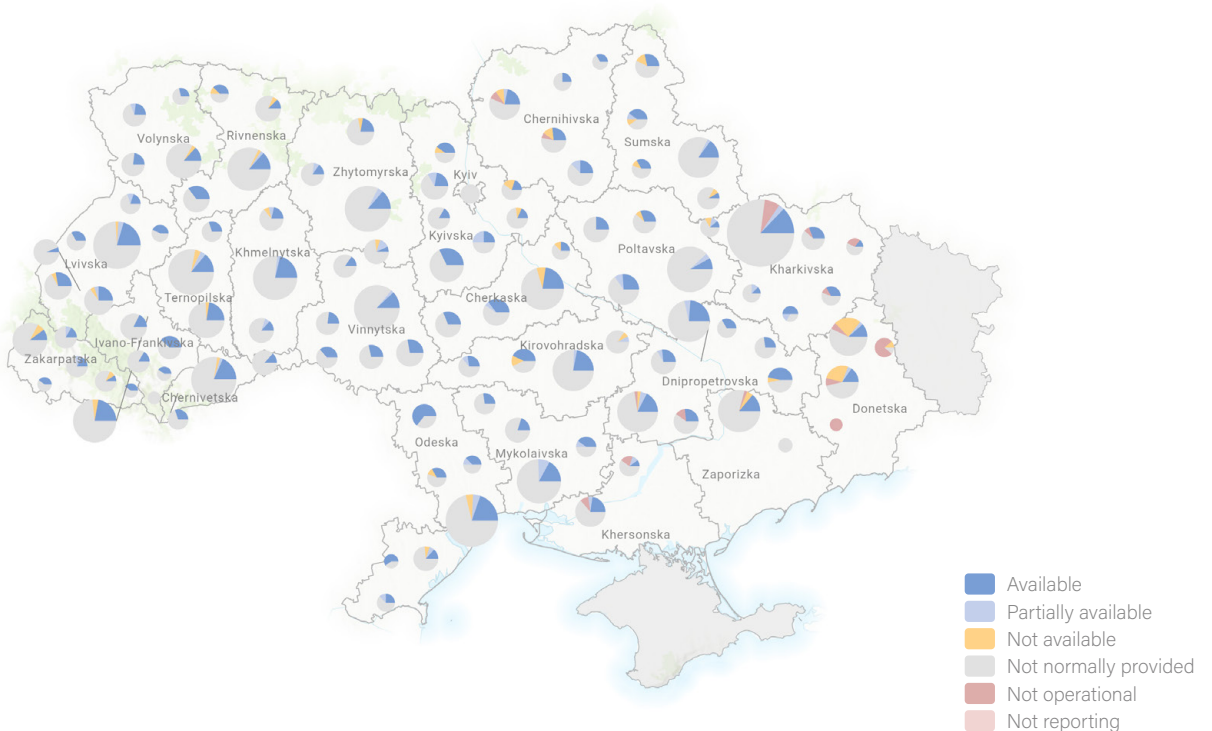


Service availability by health facility type



Main barriers impeding service delivery

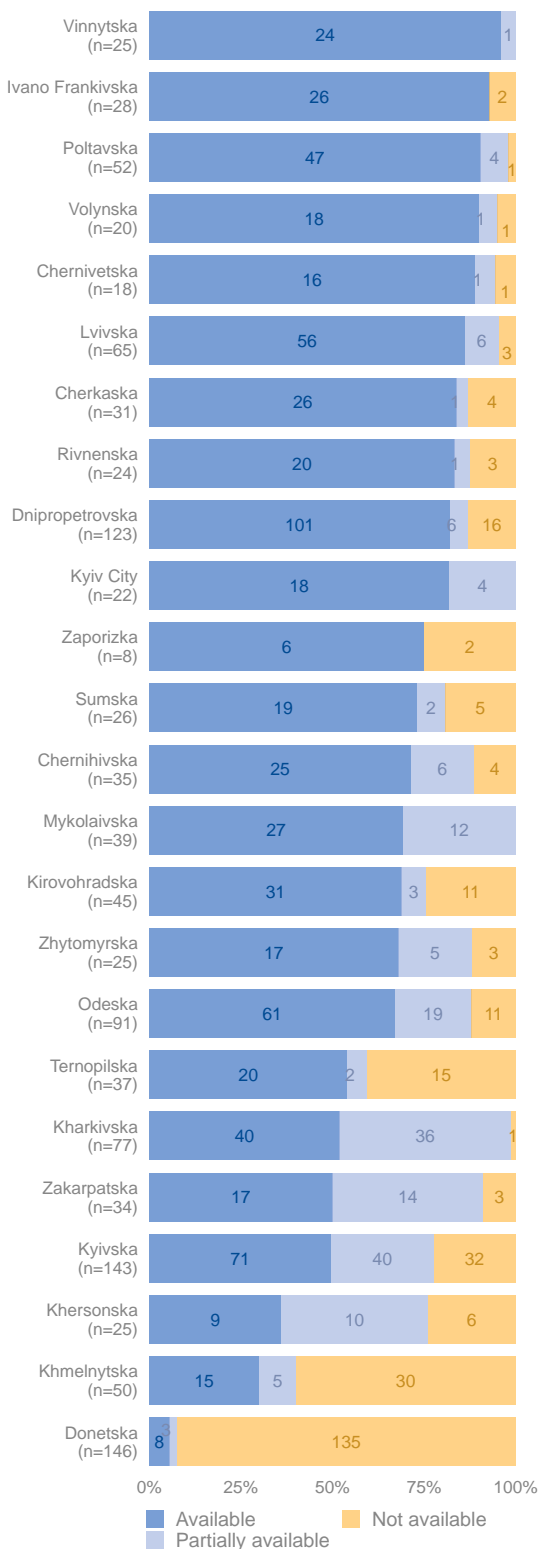
(n = 471)



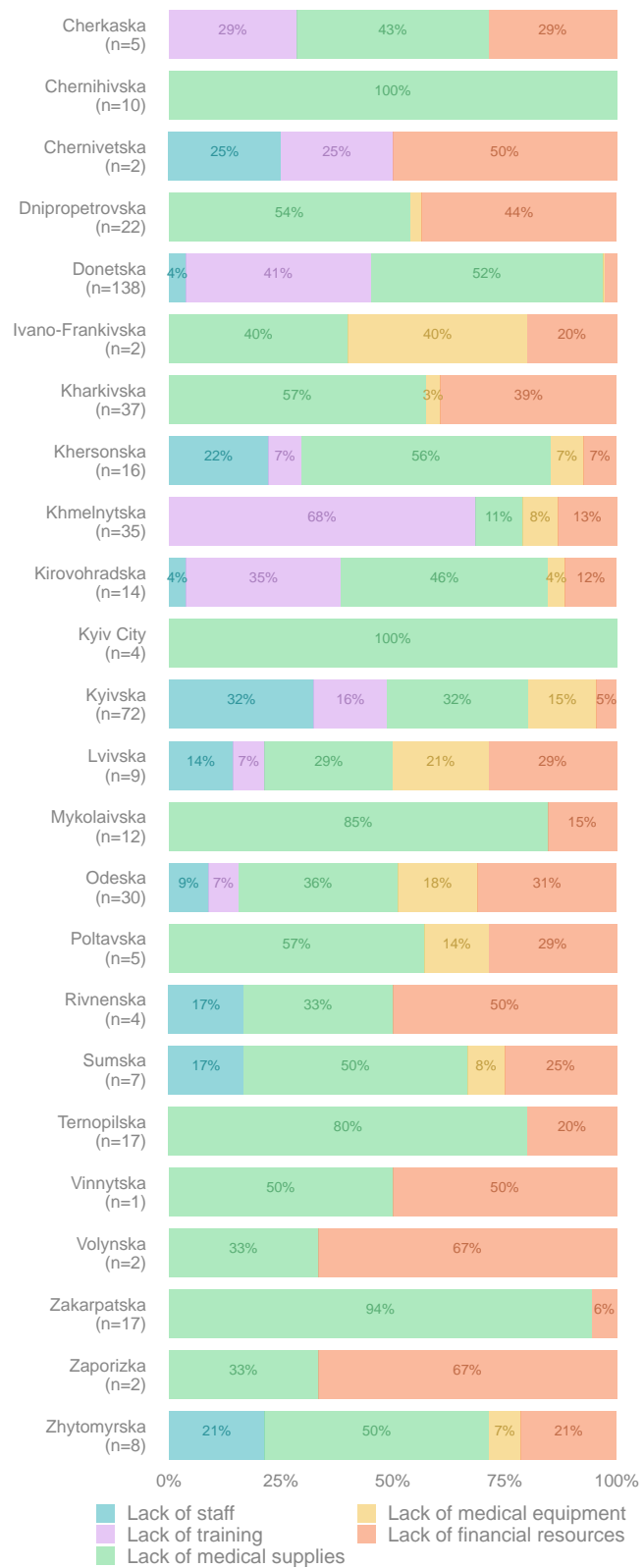
Map excludes HSDUs

EMERGENCY CONTRACEPTION

Service availability by oblast*



Main barriers impeding service delivery by oblast**

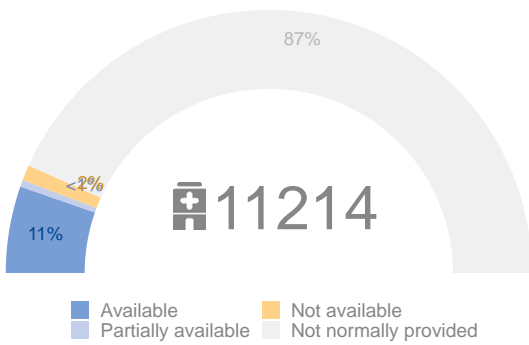


* Chart excludes health facilities where the service is not normally provided.

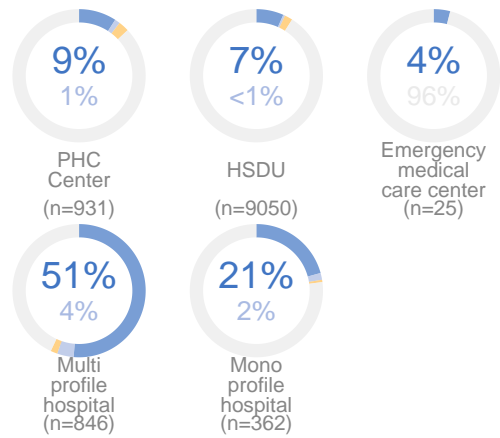
** Chart includes health facilities where the causes/barriers were indicated.

POST-EXPOSURE PROPHYLAXIS

Service availability

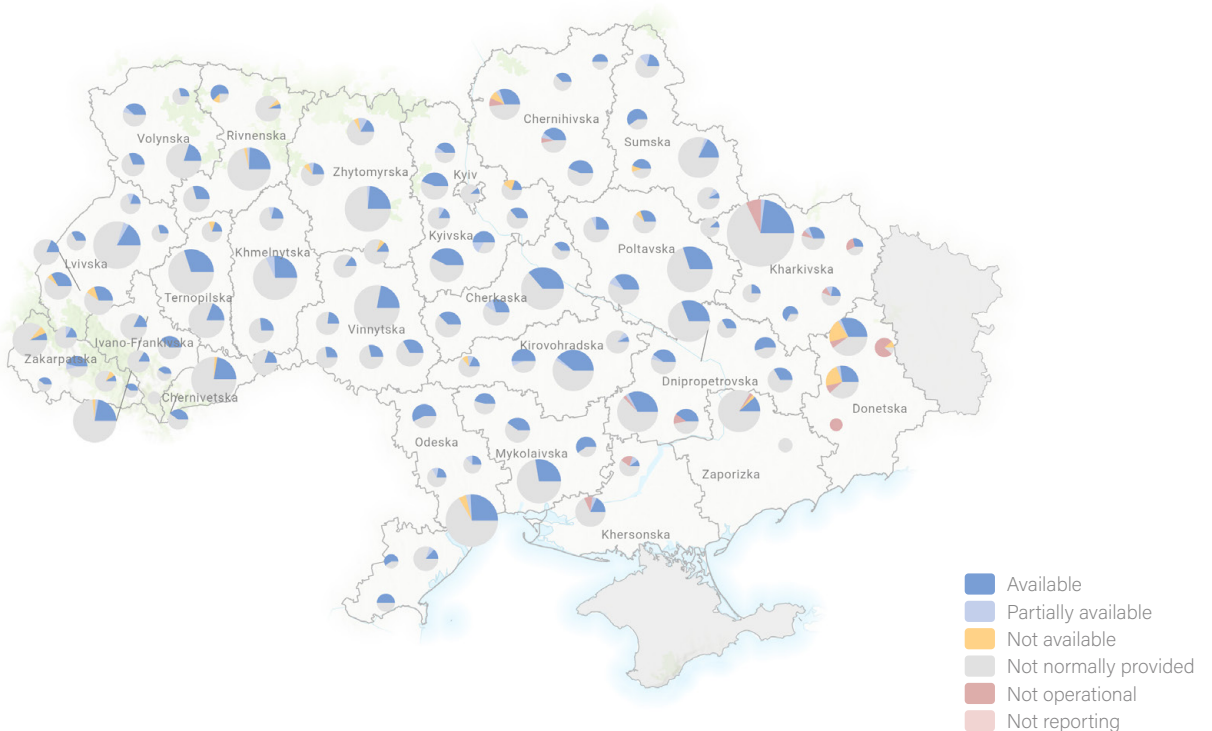


Service availability by health facility type



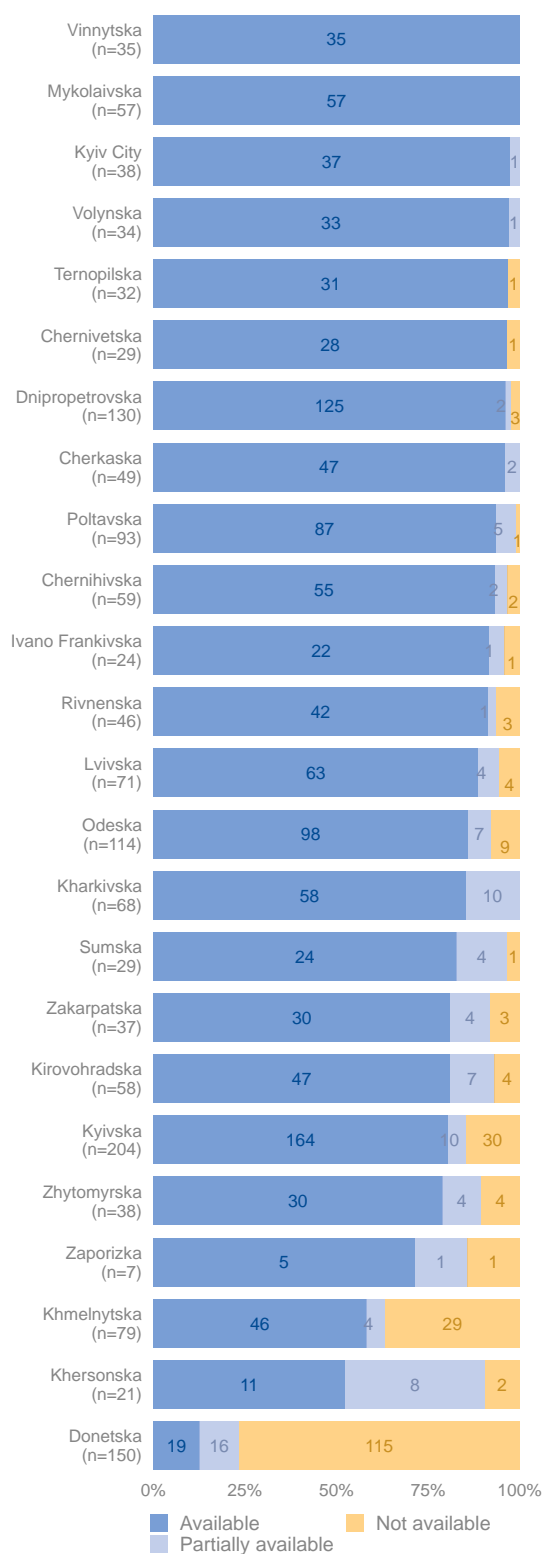
Main barriers impeding service delivery

(n = 308)

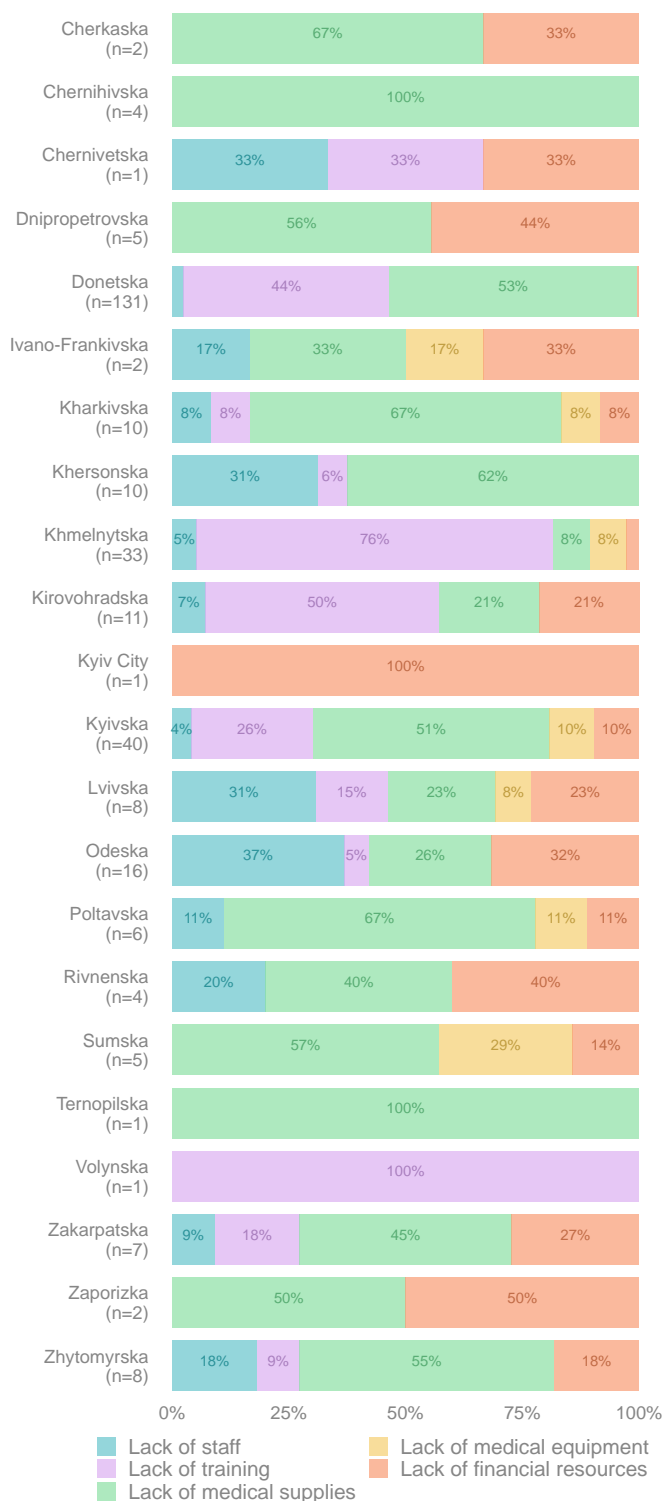


POST-EXPOSURE PROPHYLAXIS

Service availability by oblast*



Main barriers impeding service delivery by oblast**



* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

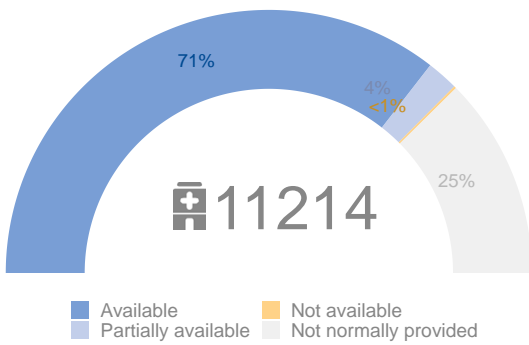


NONCOMMUNICABLE DISEASES (NCDS)

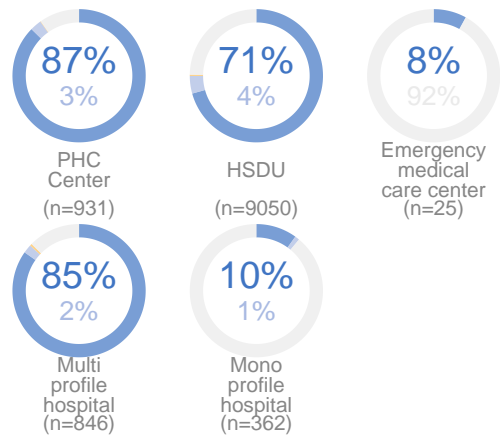


ASTHMA AND CHRONIC OBSTRUCTIVE PULMONARY DISEASE

Service availability

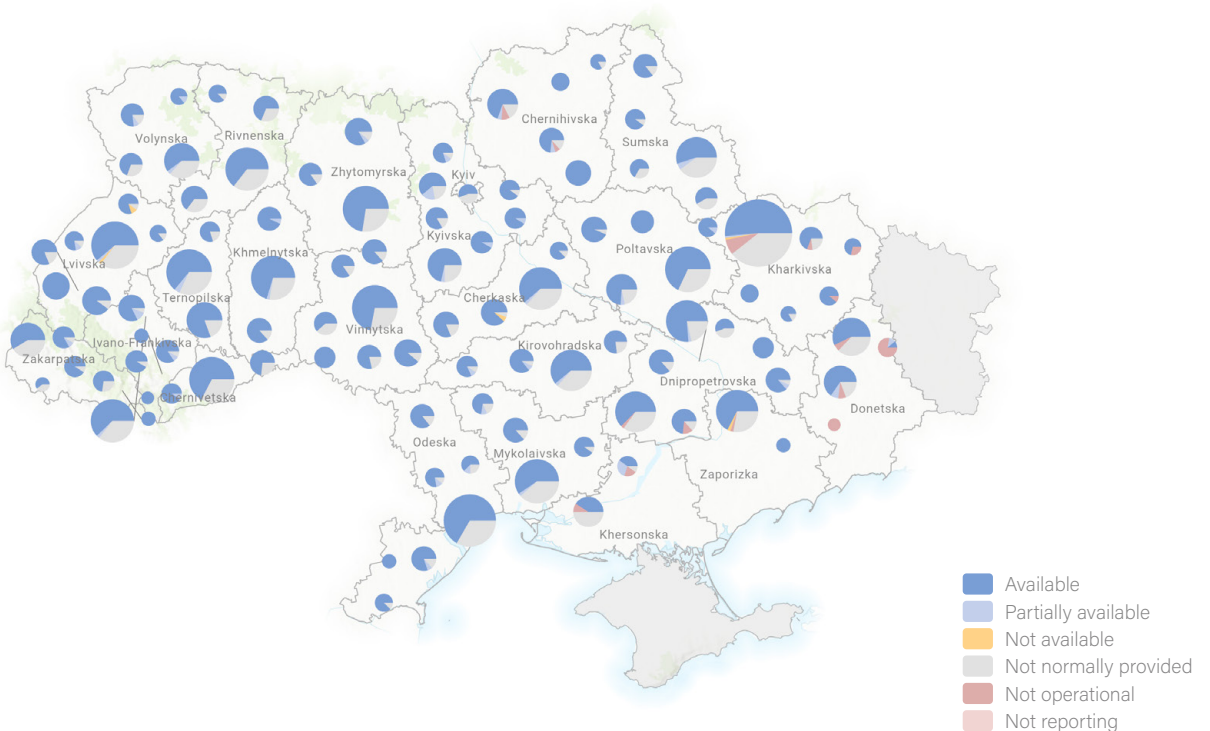
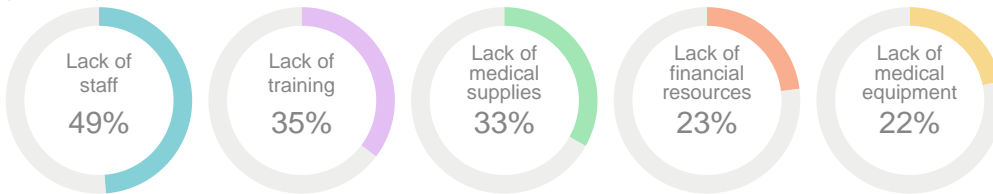


Service availability by health facility type



Main barriers impeding service delivery

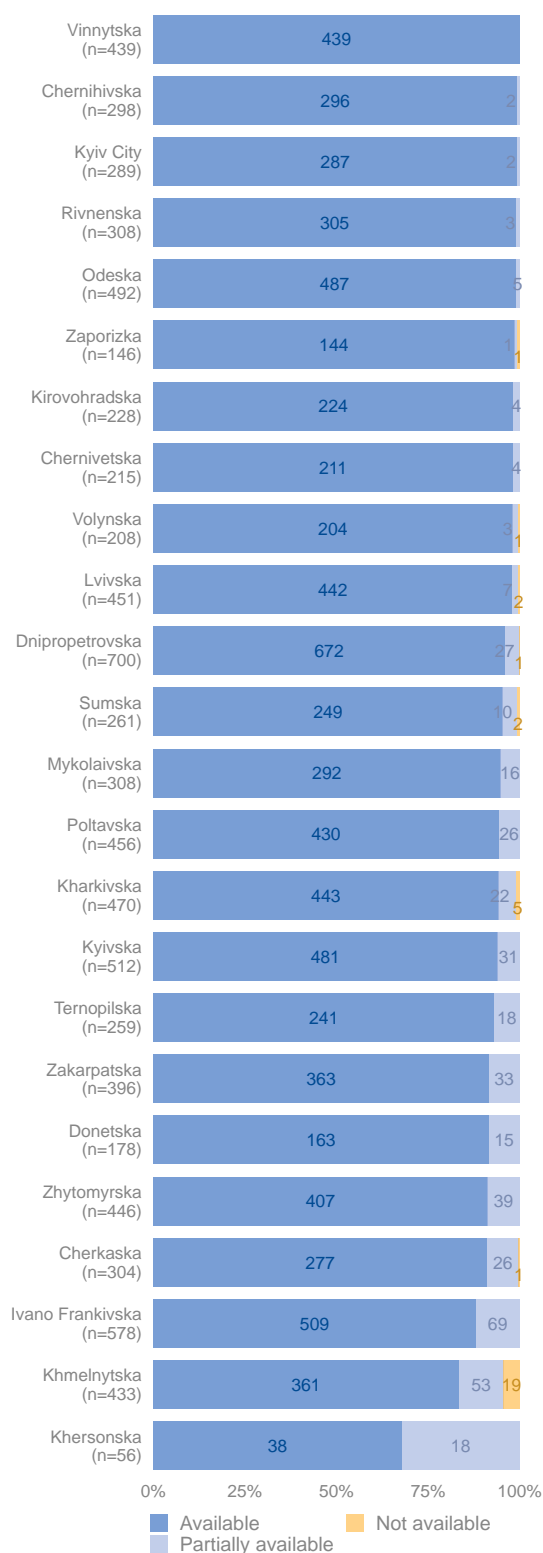
(n = 465)



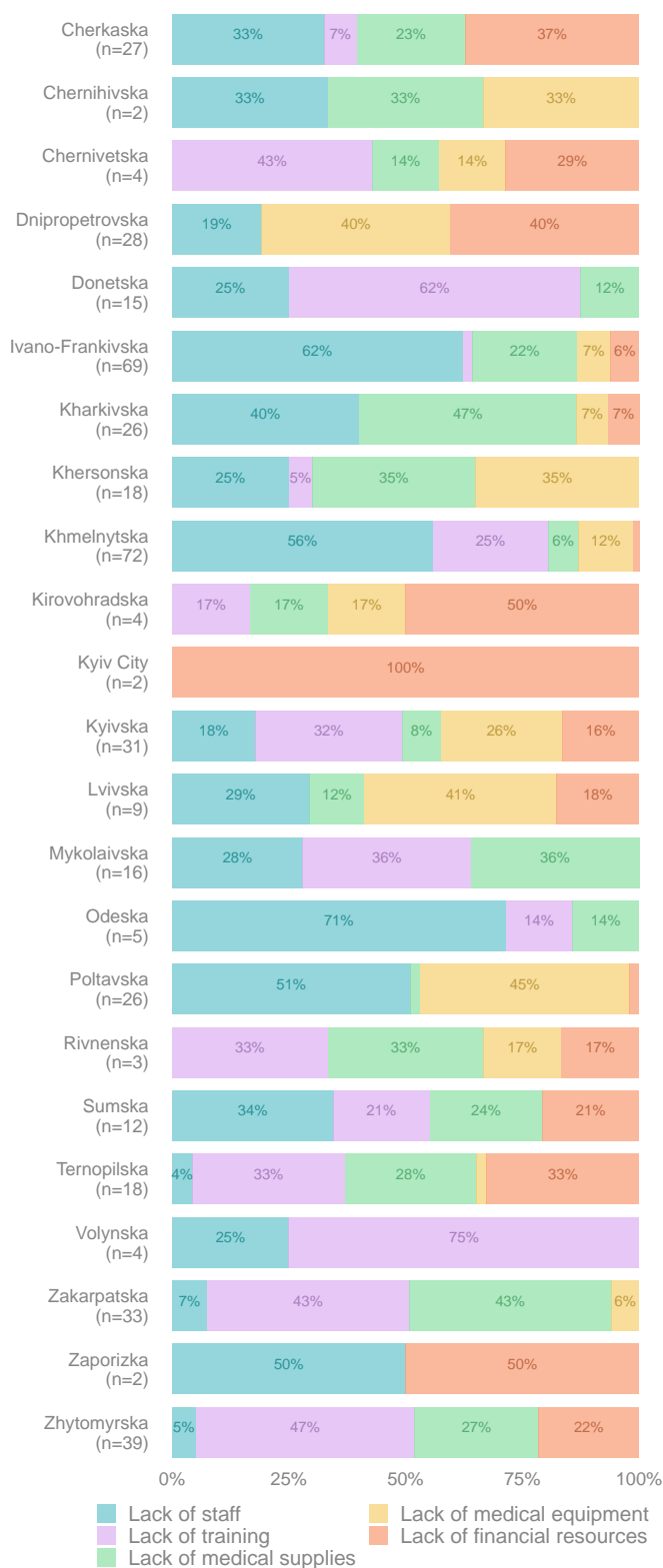
Map excludes HSDUs

ASTHMA AND CHRONIC OBSTRUCTIVE PULMONARY DISEASE

Service availability by oblast*



Main barriers impeding service delivery by oblast**

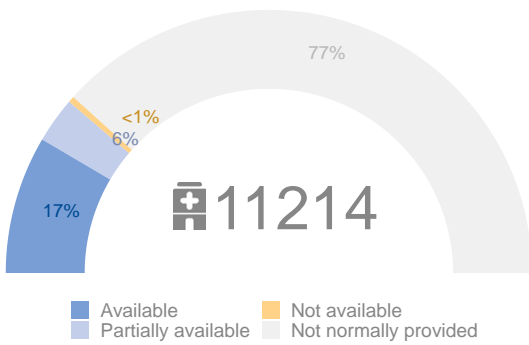


* Chart excludes health facilities where the service is not normally provided.

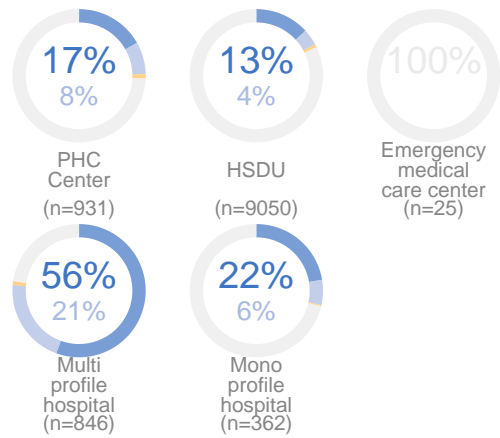
** Chart includes health facilities where the causes/barriers were indicated.

AVAILABILITY OF CANCER DIAGNOSTICS SERVICES

Service availability

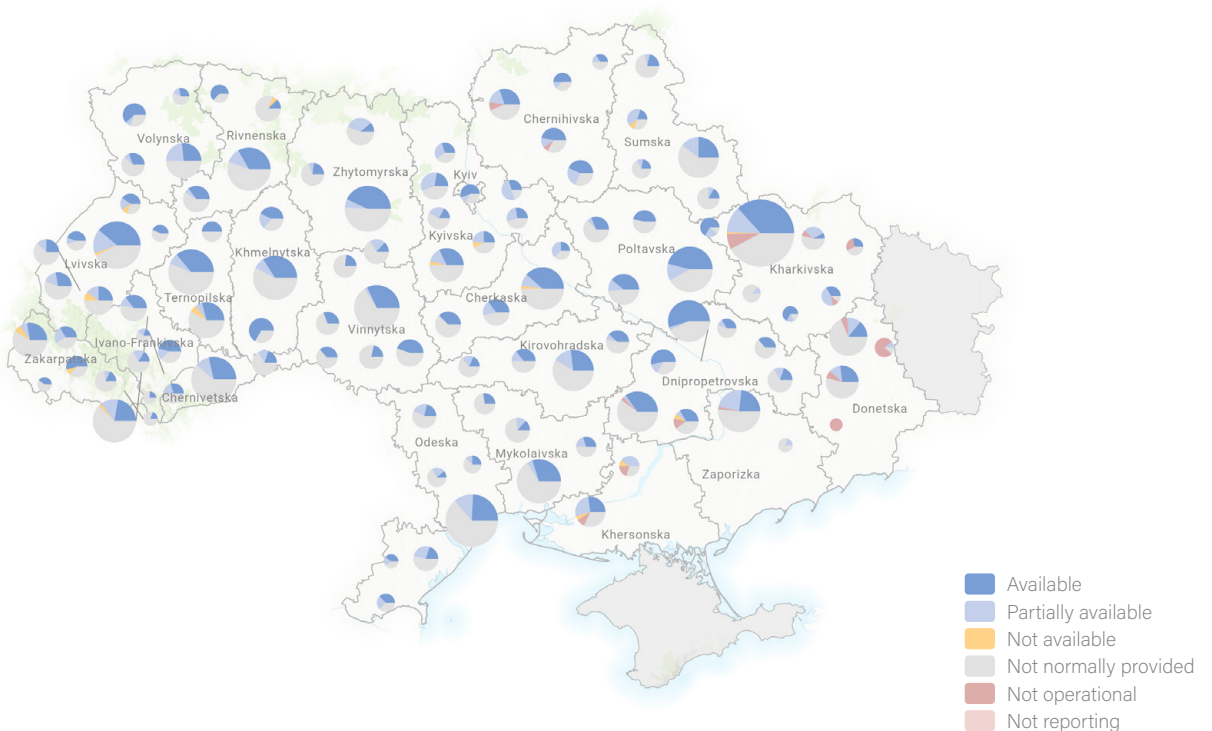
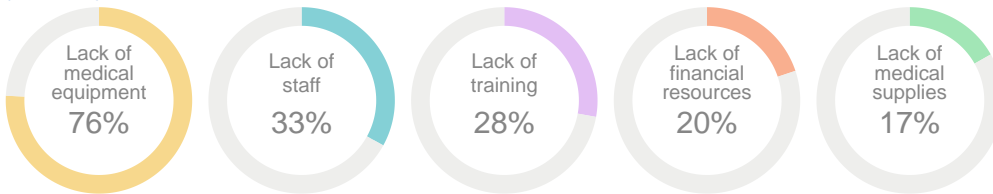


Service availability by health facility type



Main barriers impeding service delivery

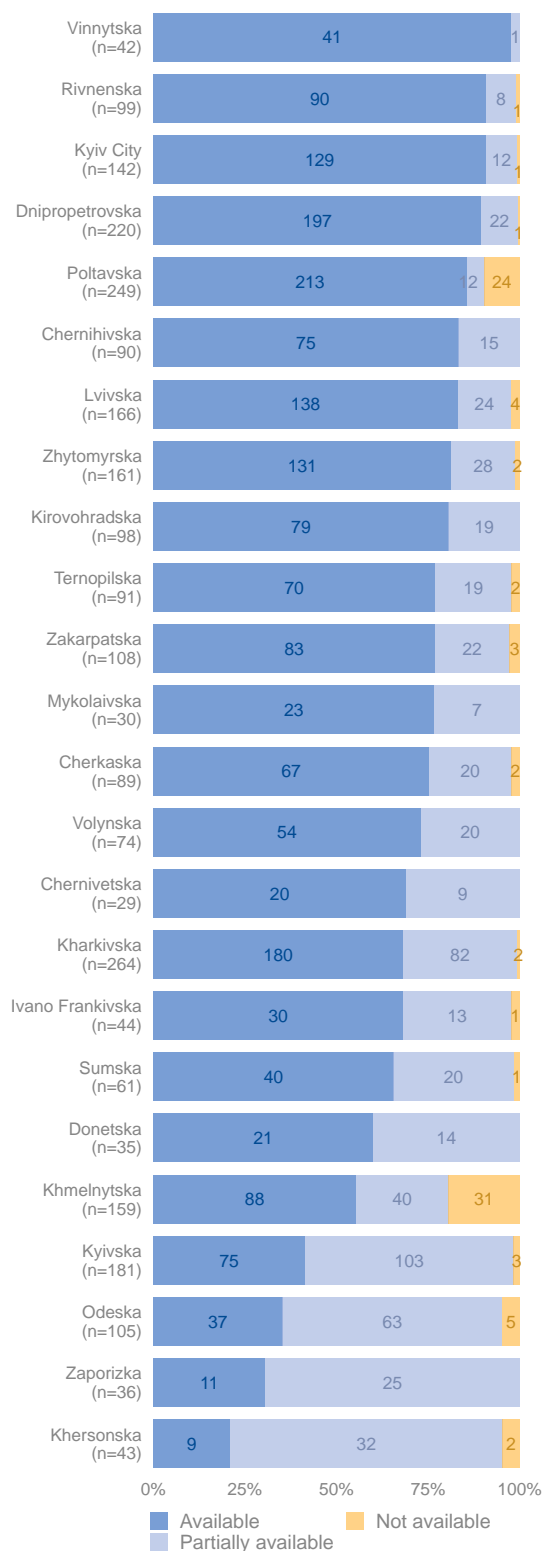
(n = 715)



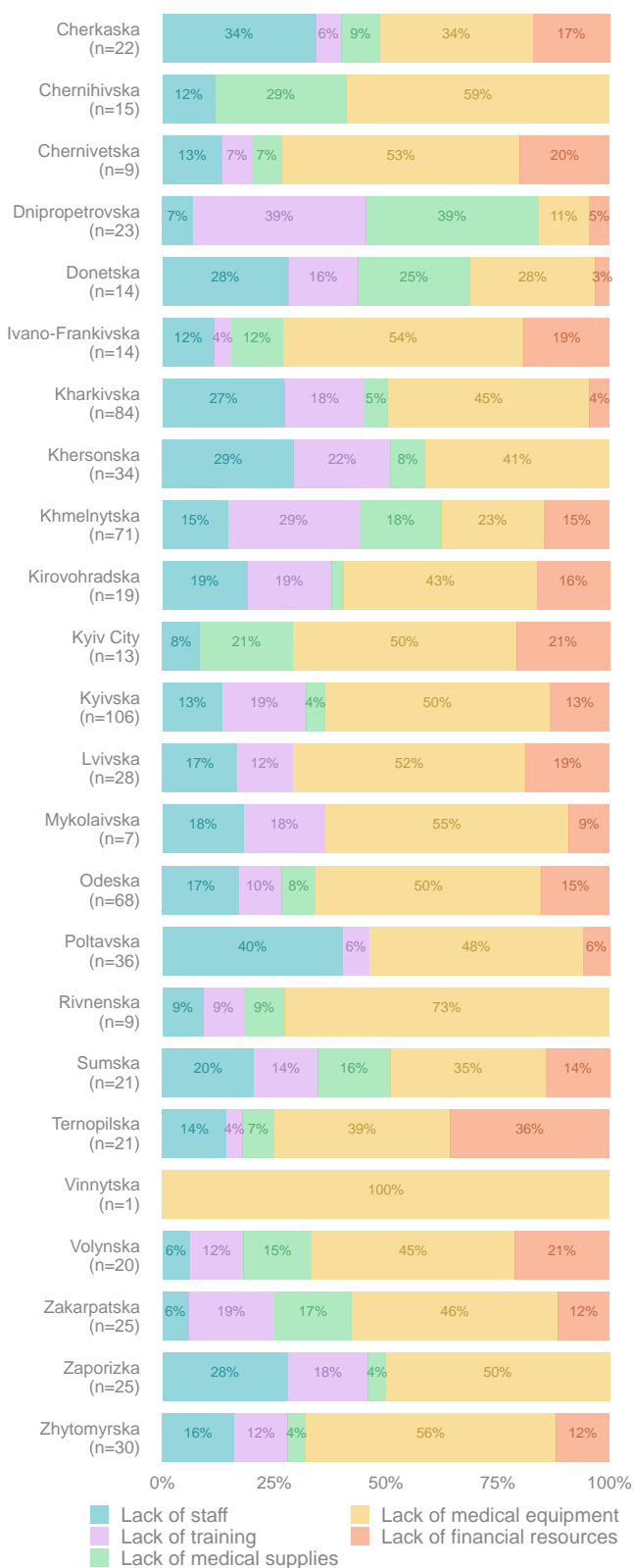
Map excludes HSDUs

AVAILABILITY OF CANCER DIAGNOSTICS SERVICES

Service availability by oblast*



Main barriers impeding service delivery by oblast**

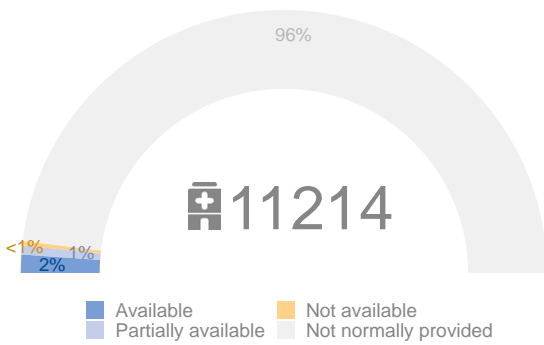


* Chart excludes health facilities where the service is not normally provided.

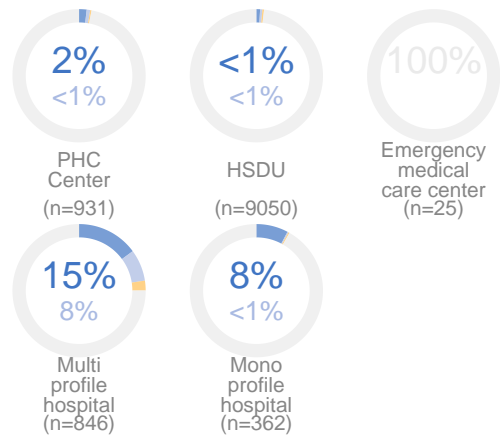
** Chart includes health facilities where the causes/barriers were indicated.

AVAILABILITY OF CANCER TREATMENT SERVICES

Service availability

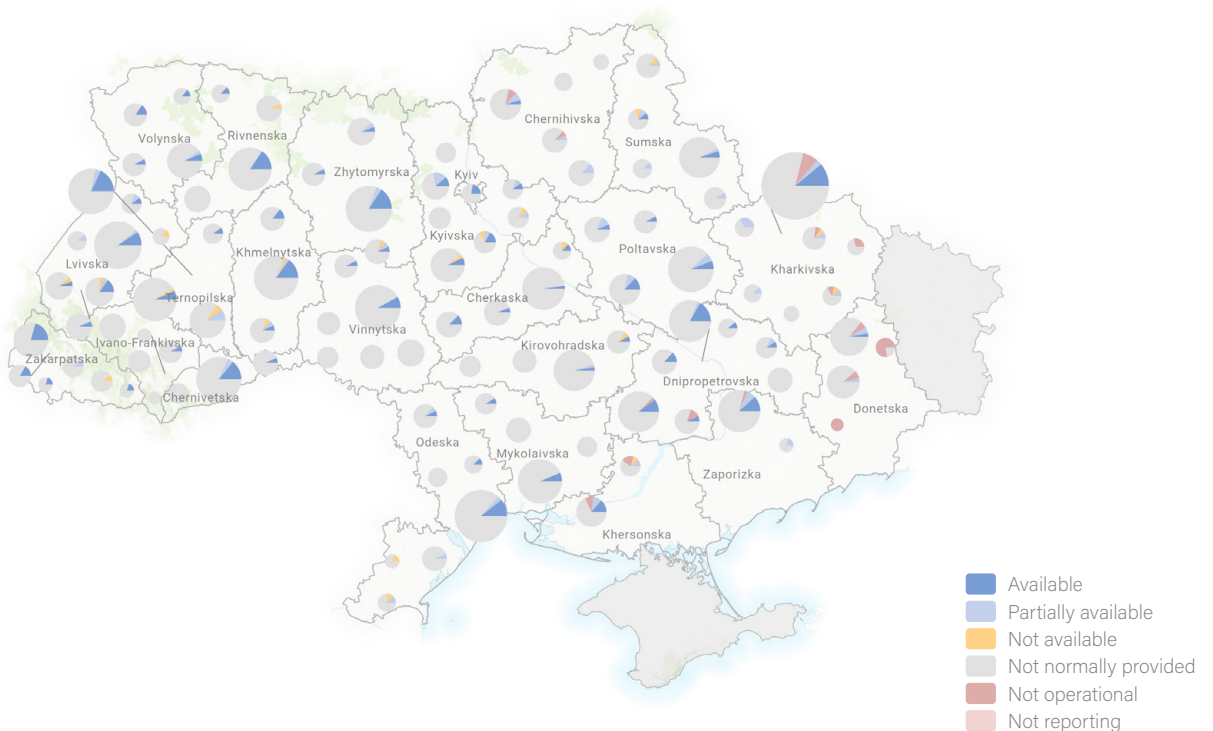
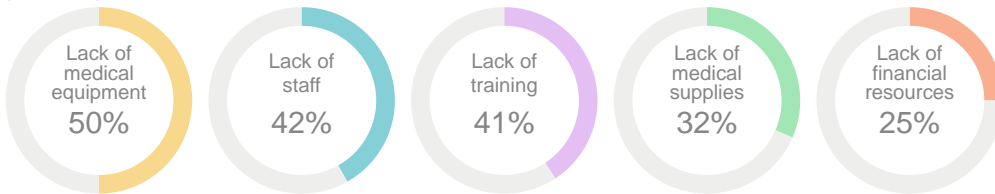


Service availability by health facility type



Main barriers impeding service delivery

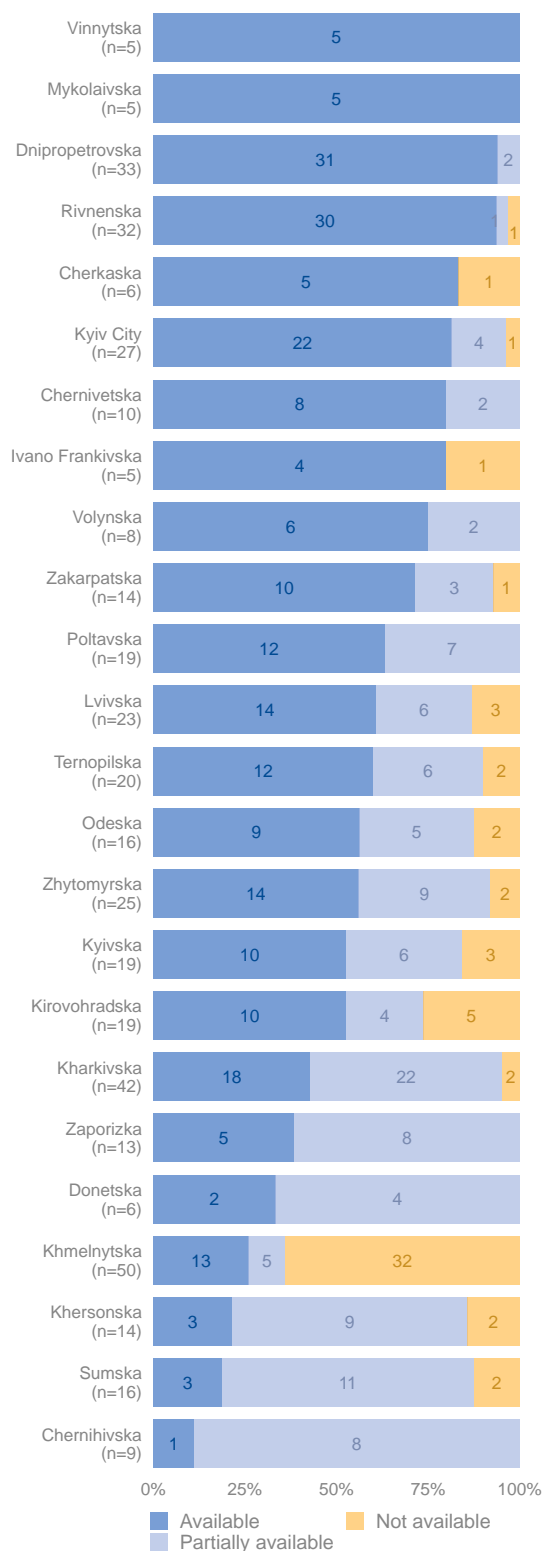
(n = 184)



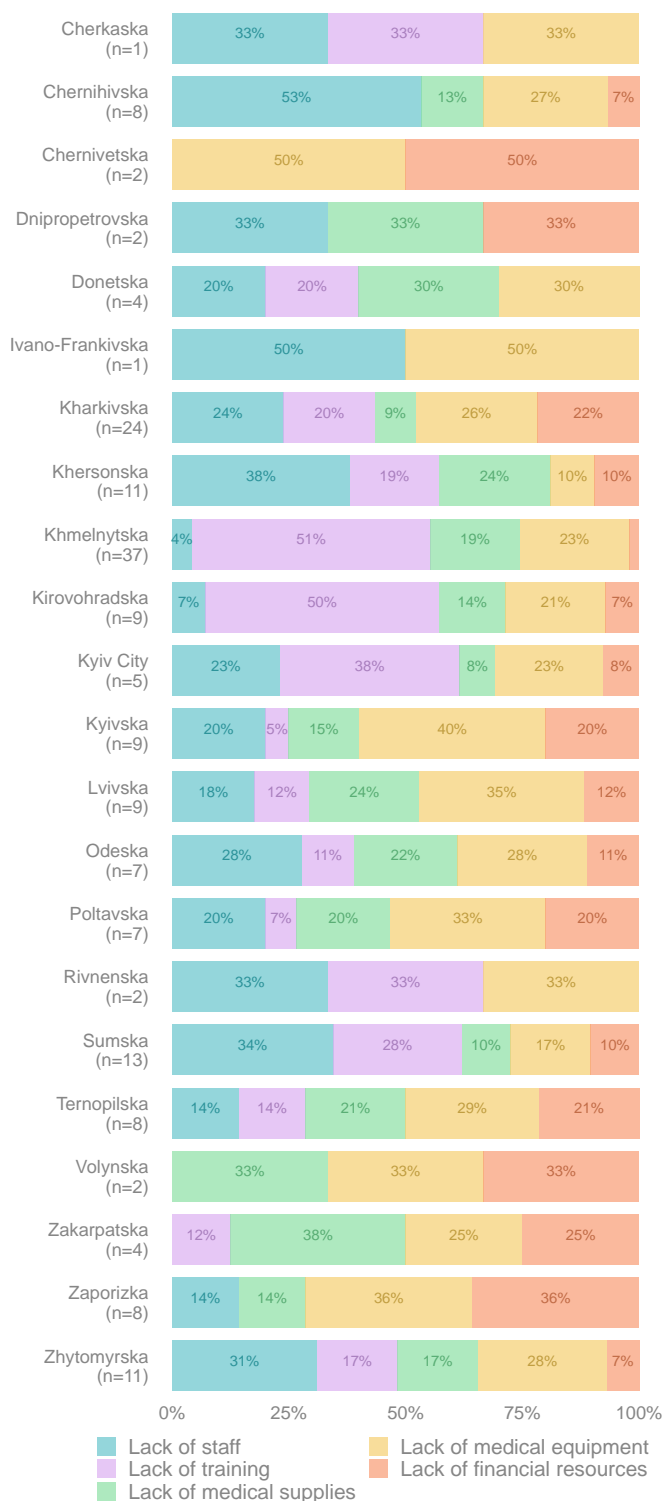
Map excludes HSDUs

AVAILABILITY OF CANCER TREATMENT SERVICES

Service availability by oblast*



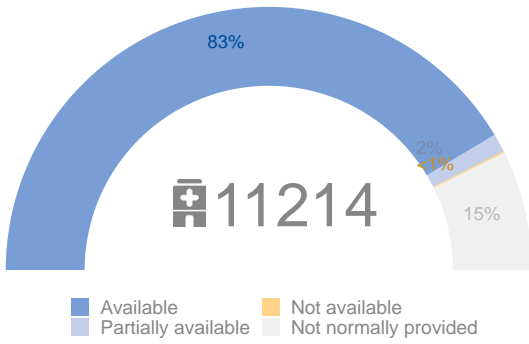
Main barriers impeding service delivery by oblast**



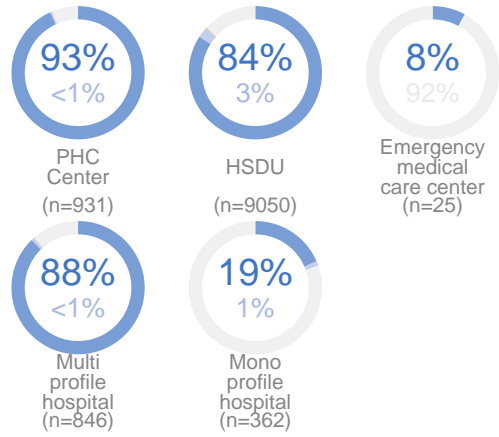
* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

HYPERTENSION

Service availability

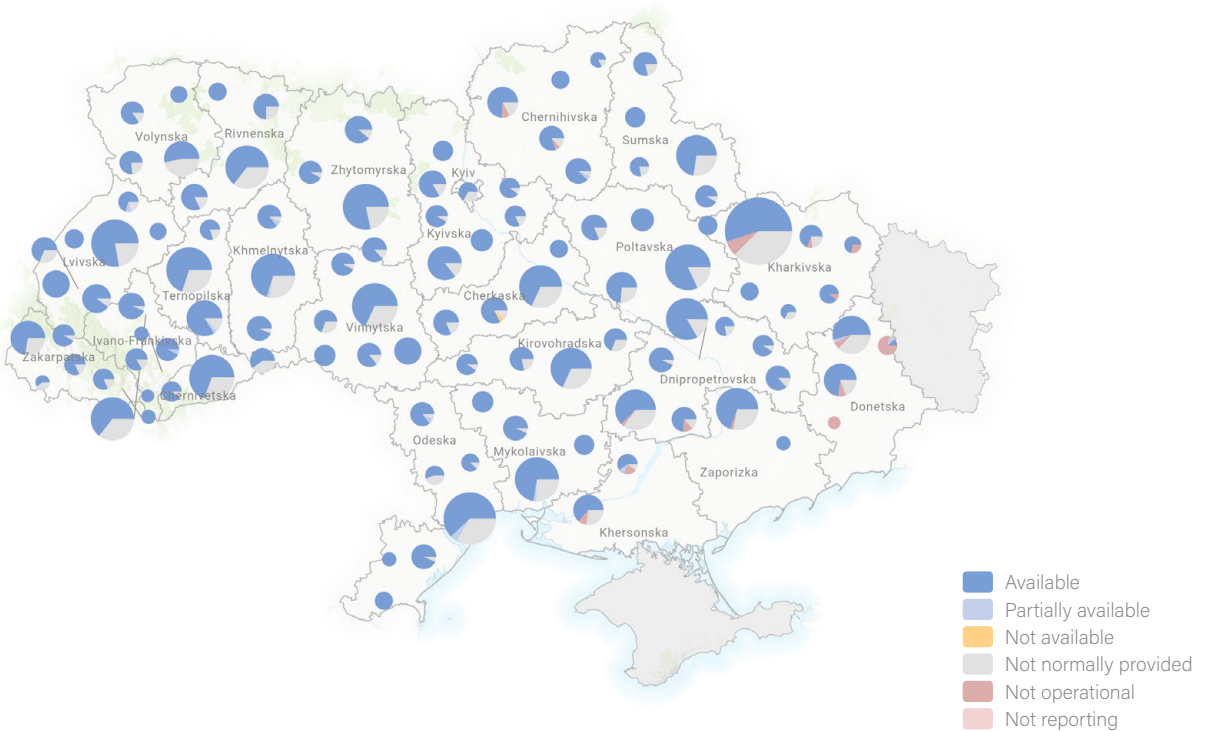
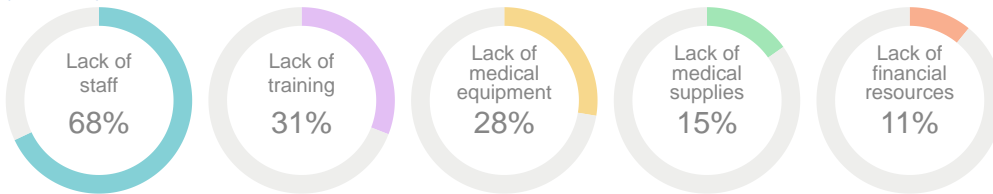


Service availability by health facility type



Main barriers impeding service delivery

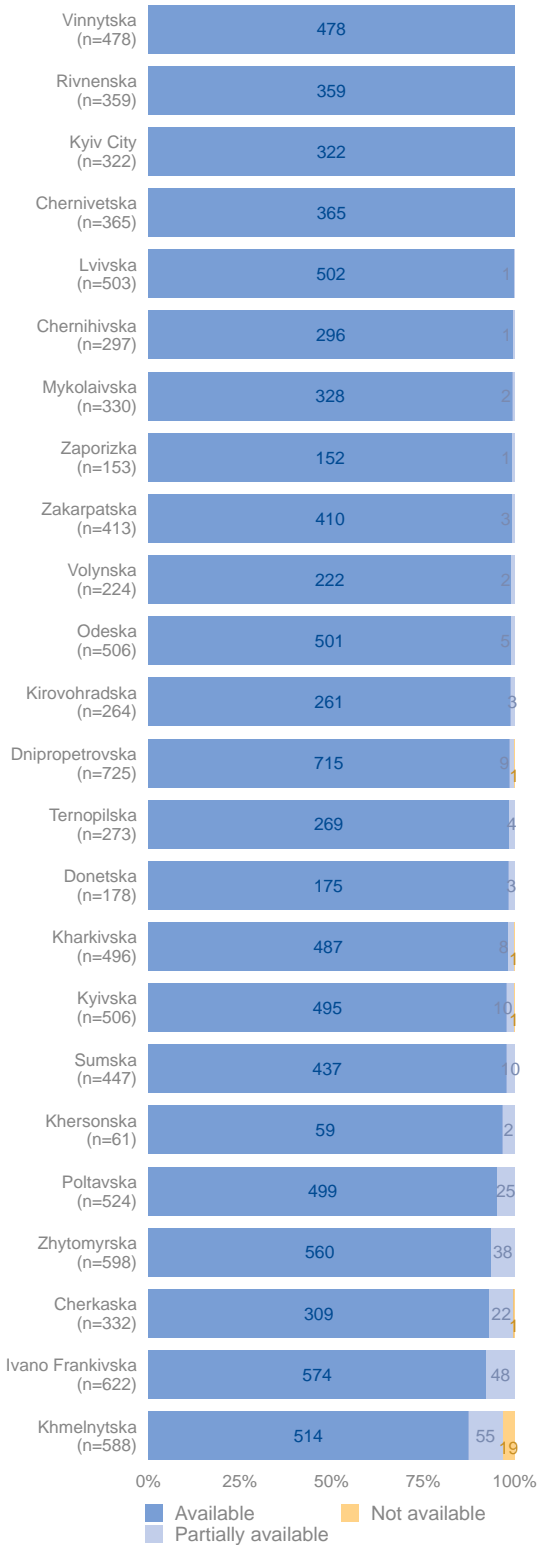
(n = 275)



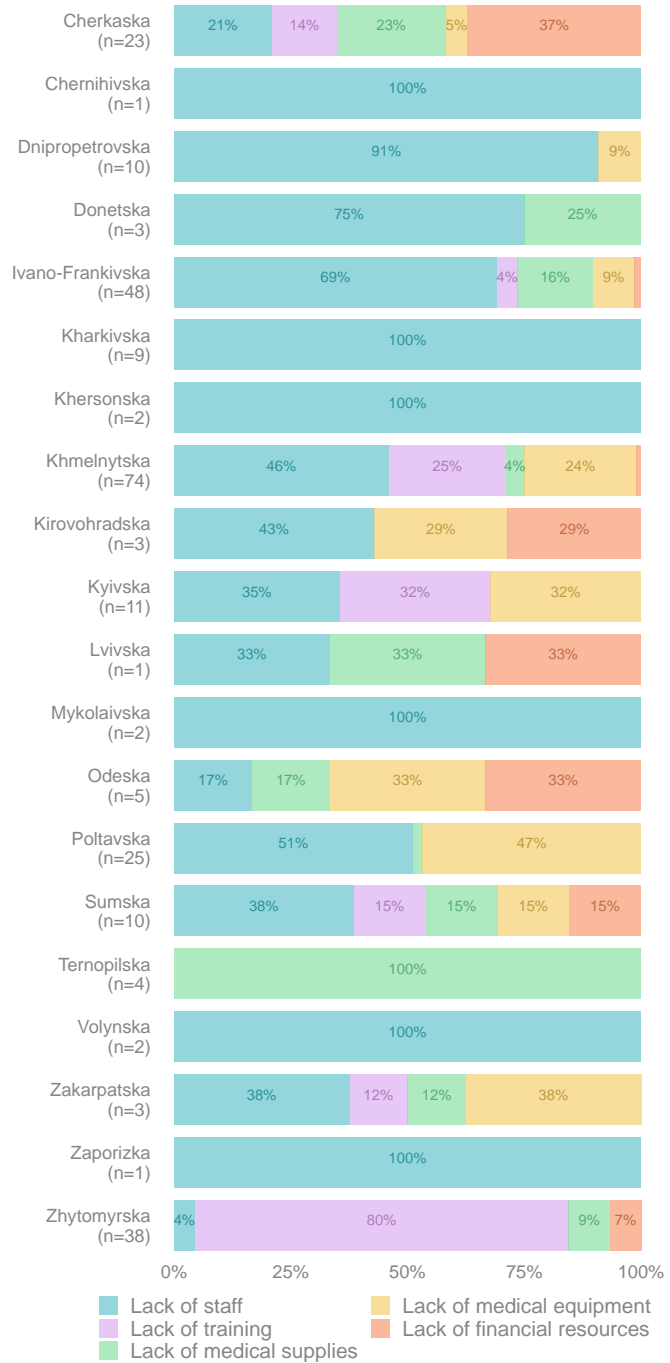
Map excludes HSDUs

HYPERTENSION

Service availability by oblast*



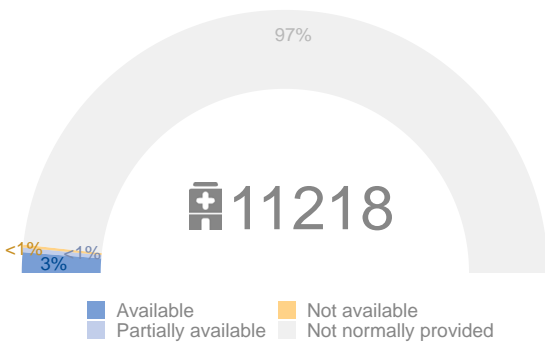
Main barriers impeding service delivery by oblast**



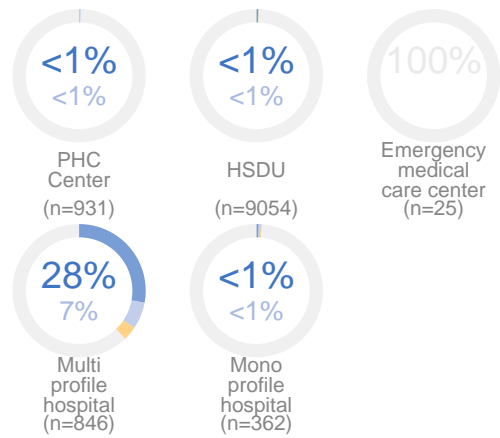
* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

MEDICAL ASSISTANCE IN ACUTE CEREBRAL STROKE

Service availability

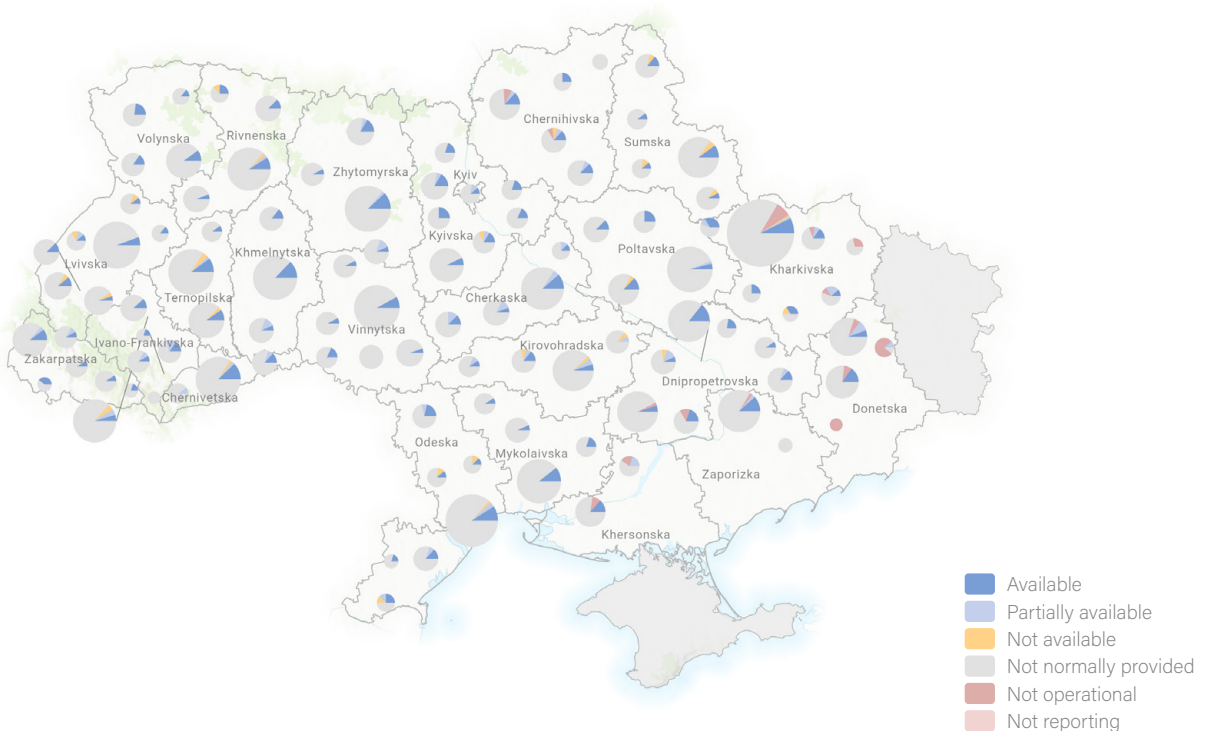


Service availability by health facility type



Main barriers impeding service delivery

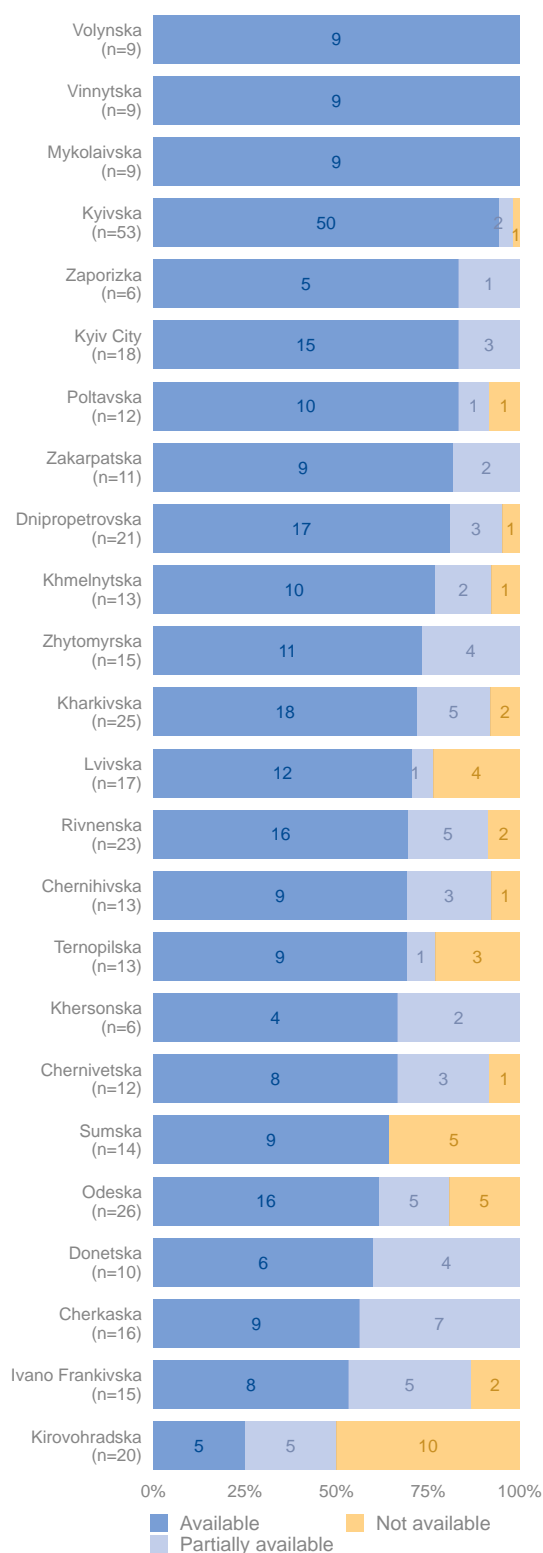
(n = 103)



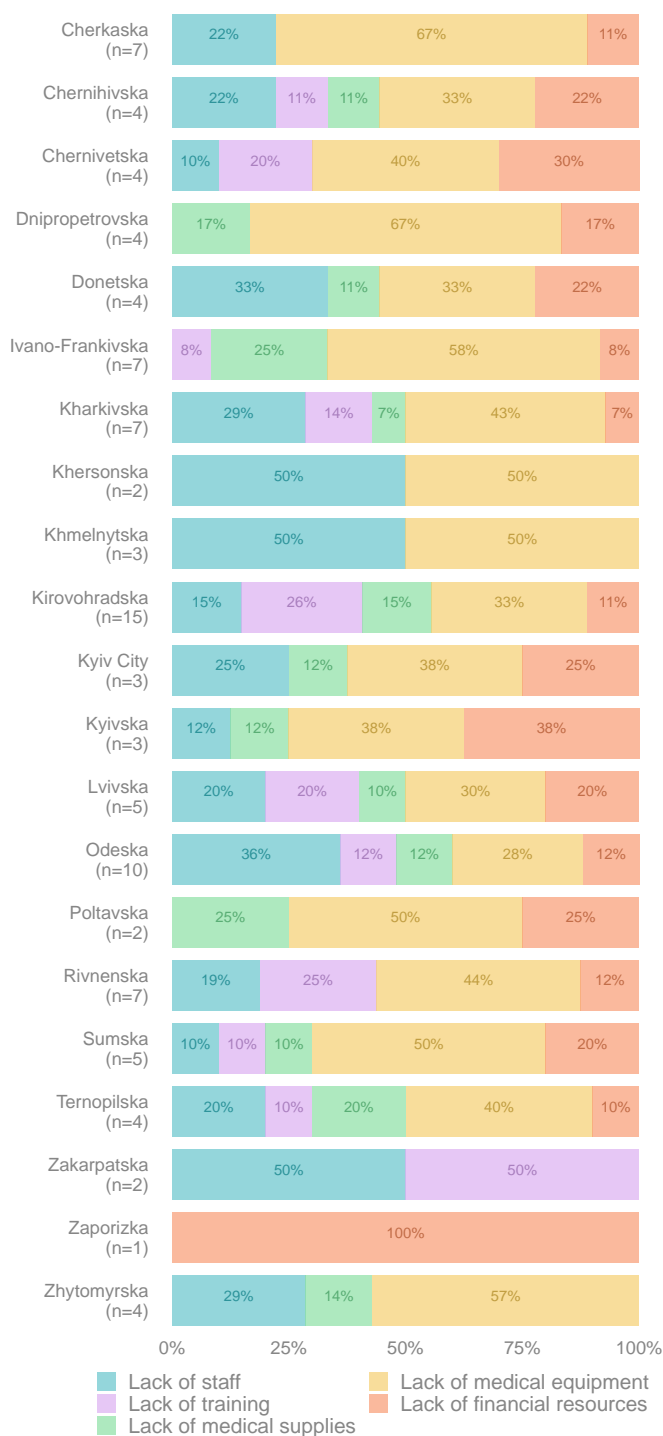
Map excludes HSDUs

MEDICAL ASSISTANCE IN ACUTE CEREBRAL STROKE

Service availability by oblast*



Main barriers impeding service delivery by oblast**

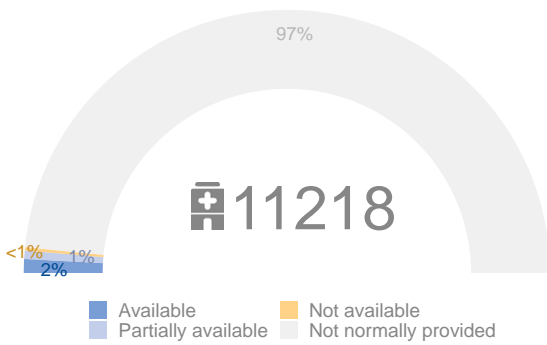


* Chart excludes health facilities where the service is not normally provided.

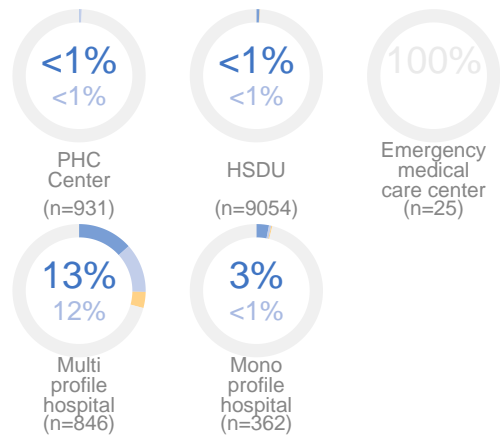
** Chart includes health facilities where the causes/barriers were indicated.

MEDICAL ASSISTANCE FOR ACUTE MYOCARDIAL INFARCTION

Service availability

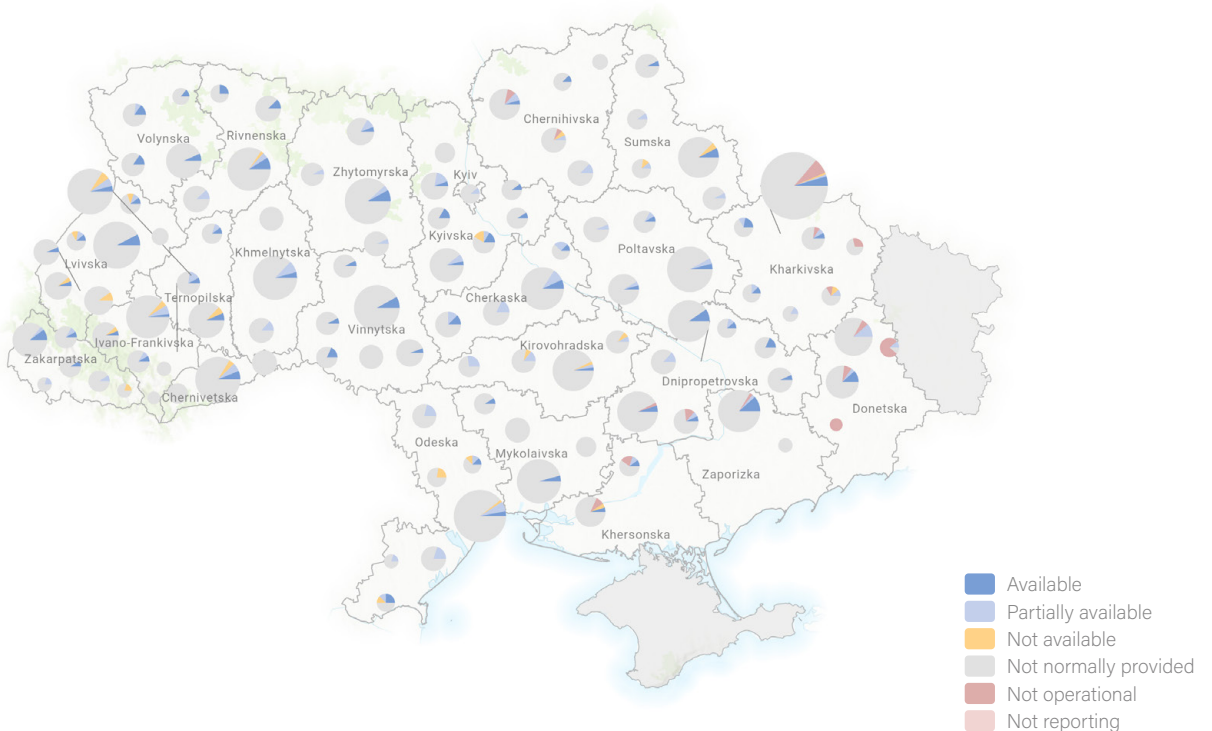


Service availability by health facility type



Main barriers impeding service delivery

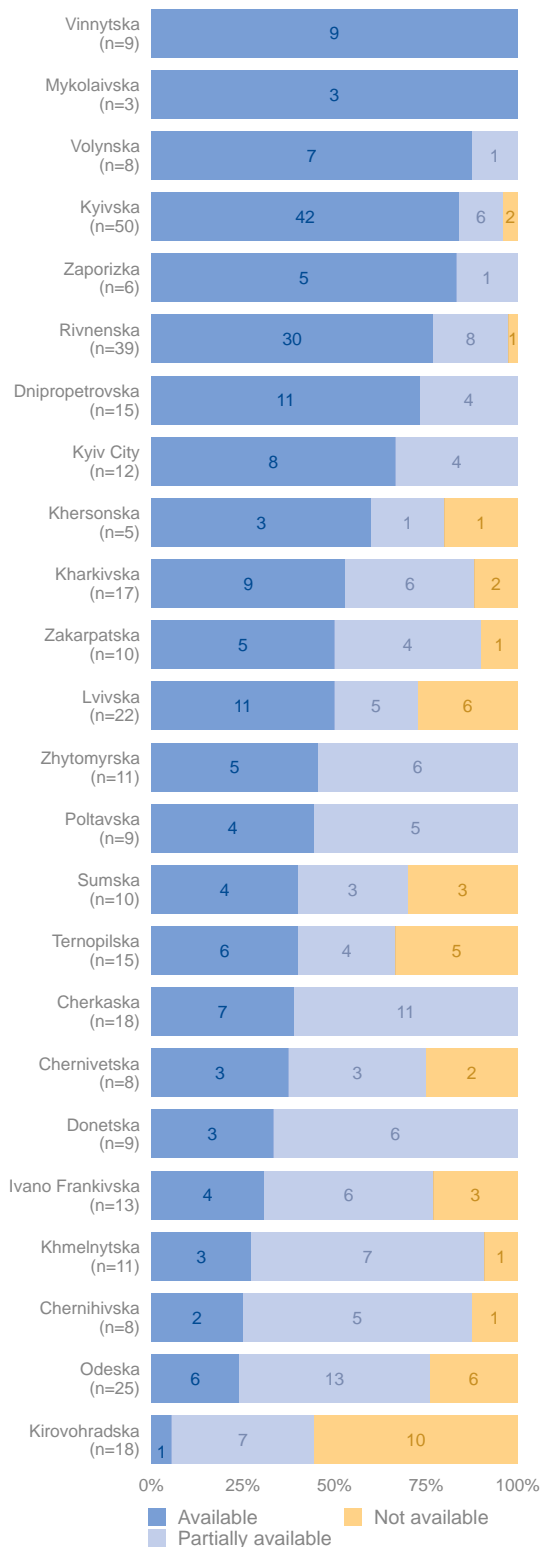
(n = 158)



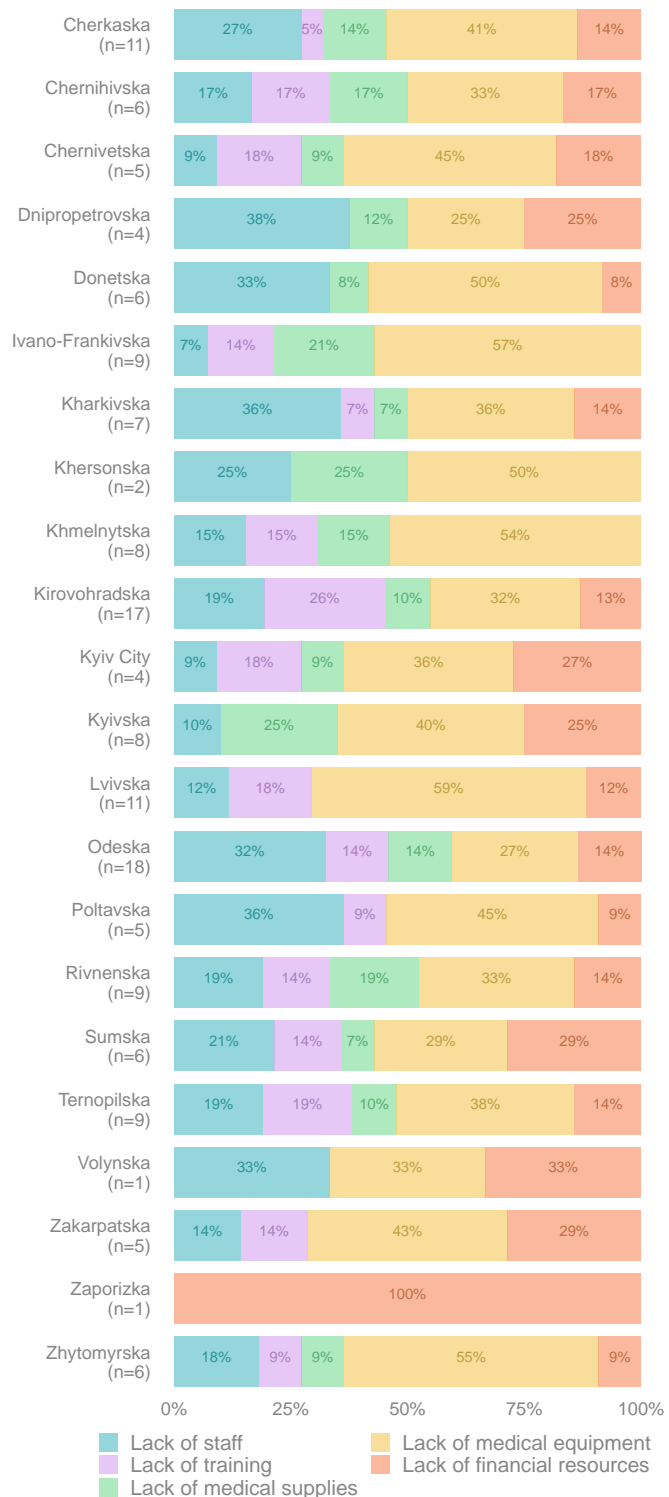
Map excludes HSDUs

MEDICAL ASSISTANCE FOR ACUTE MYOCARDIAL INFARCTION

Service availability by oblast*



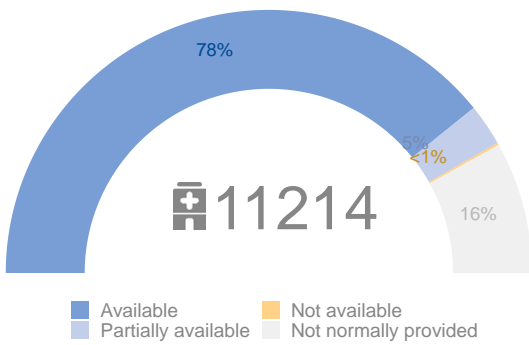
Main barriers impeding service delivery by oblast**



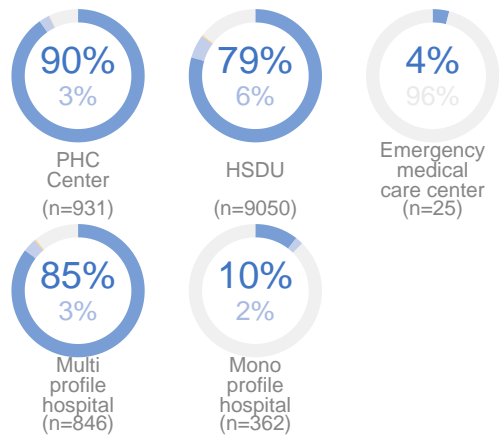
* Chart excludes health facilities where the service is not normally provided.
 ** Chart includes health facilities where the causes/barriers were indicated.

DIABETES

Service availability

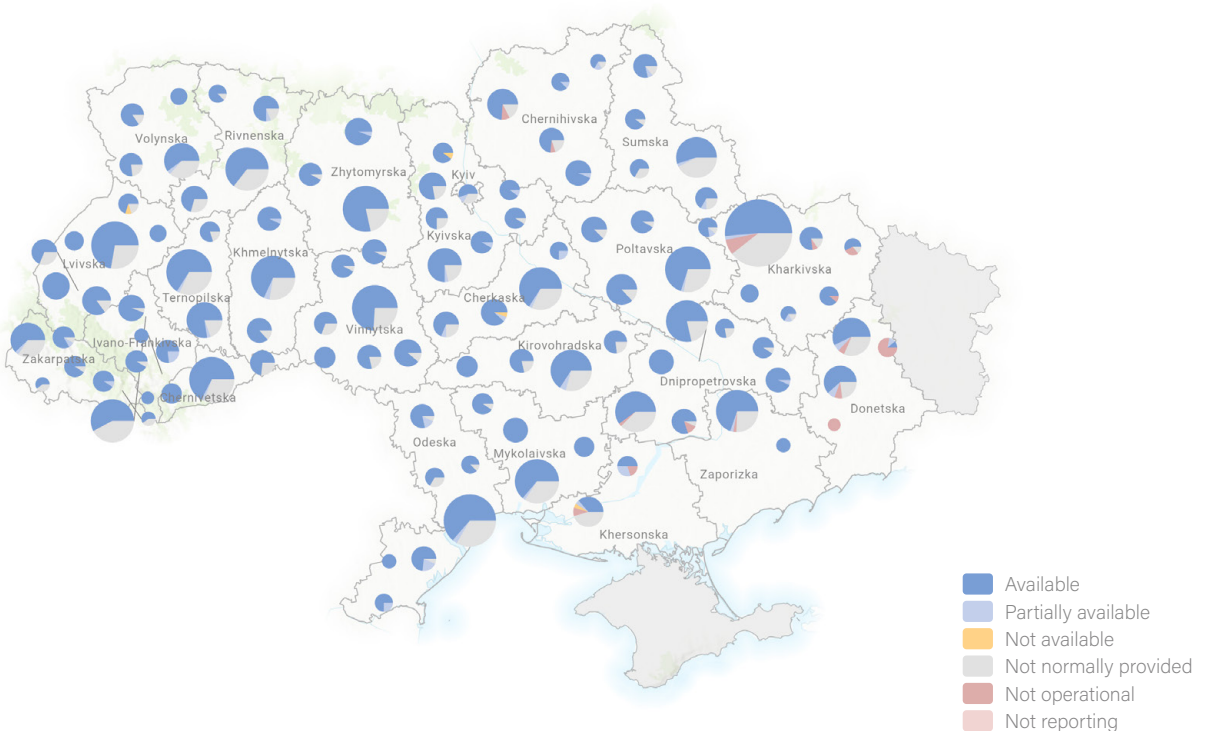
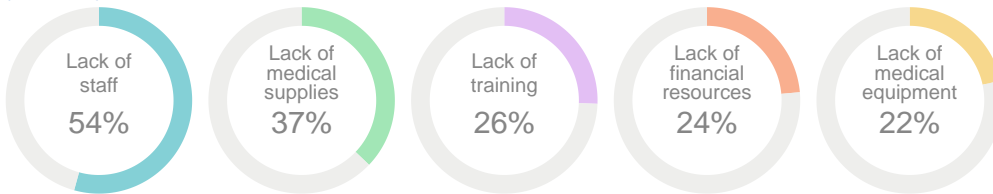


Service availability by health facility type



Main barriers impeding service delivery

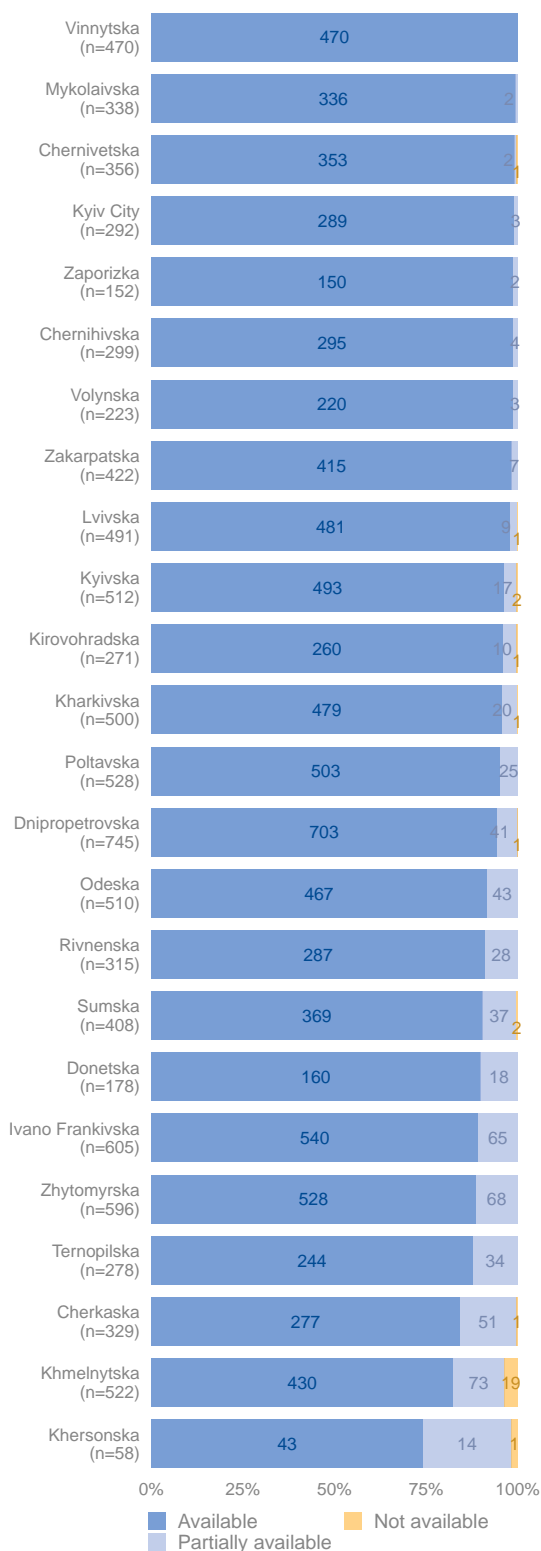
(n = 606)



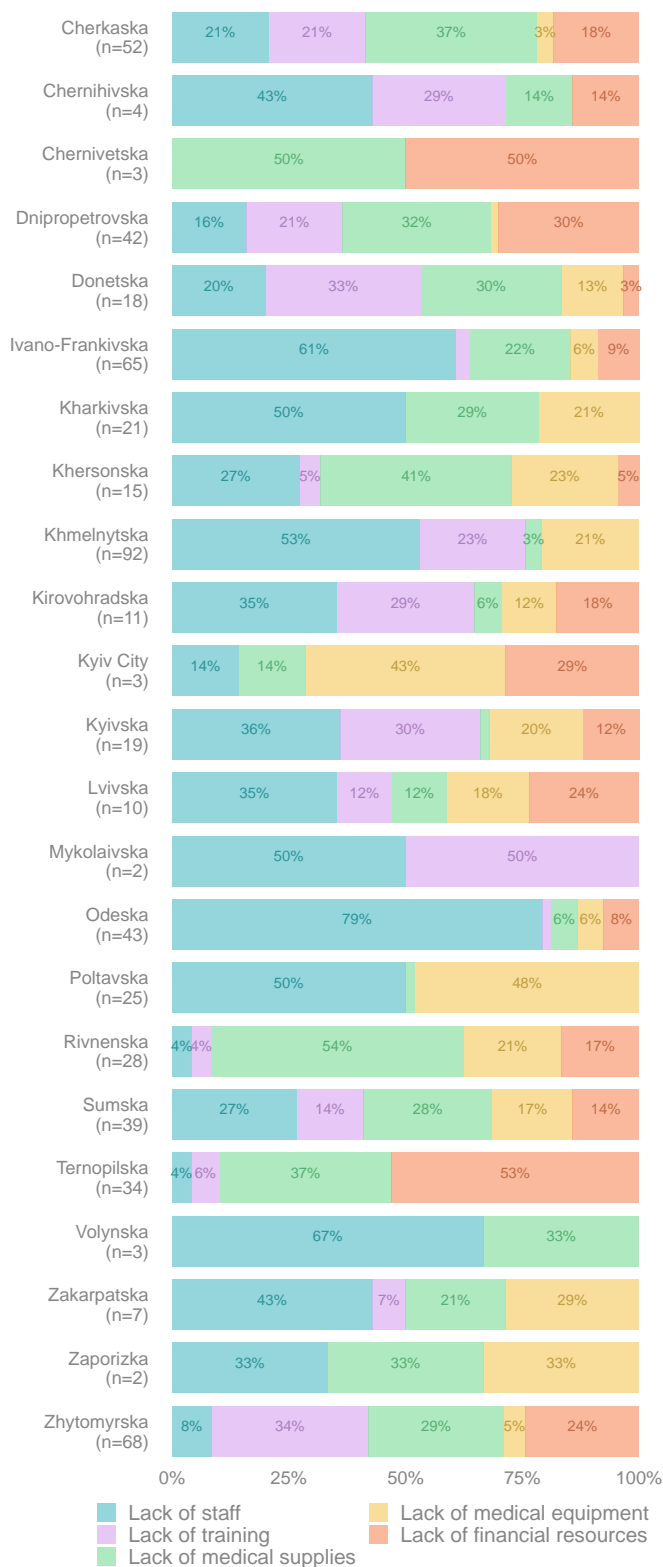
Map excludes HSDUs

DIABETES

Service availability by oblast*



Main barriers impeding service delivery by oblast**

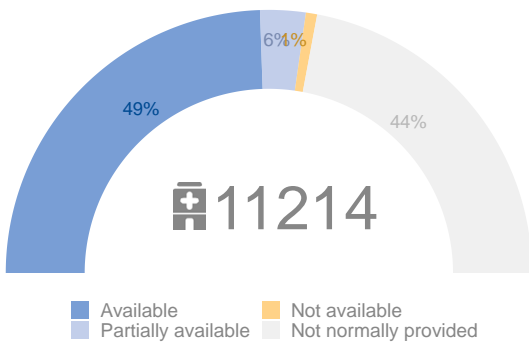


* Chart excludes health facilities where the service is not normally provided.

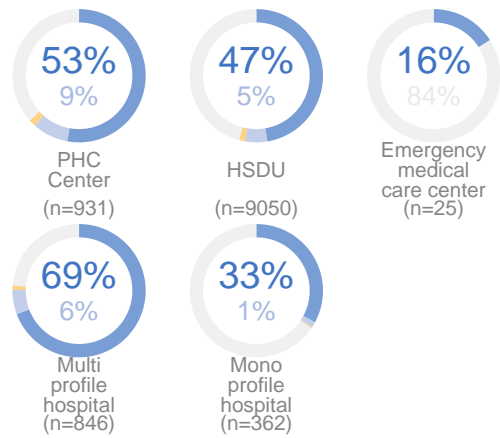
** Chart includes health facilities where the causes/barriers were indicated.

PSYCHOLOGICAL FIRST AID

Service availability

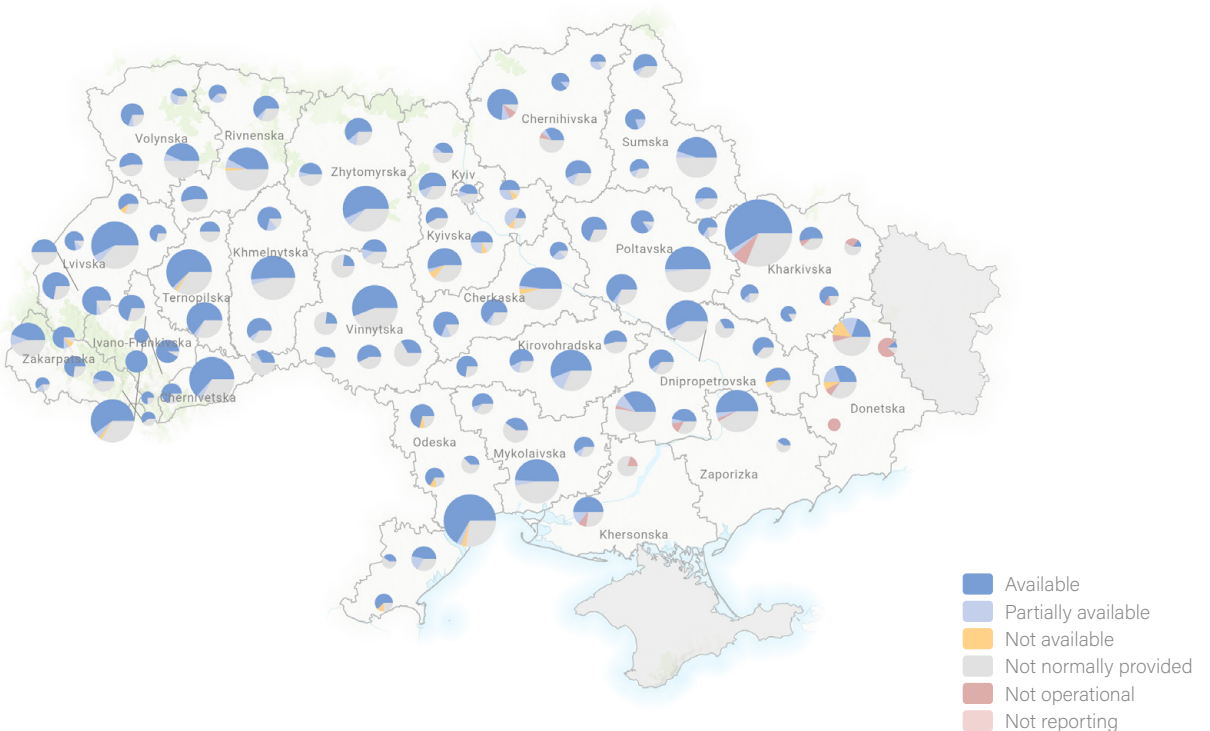


Service availability by health facility type



Main barriers impeding service delivery

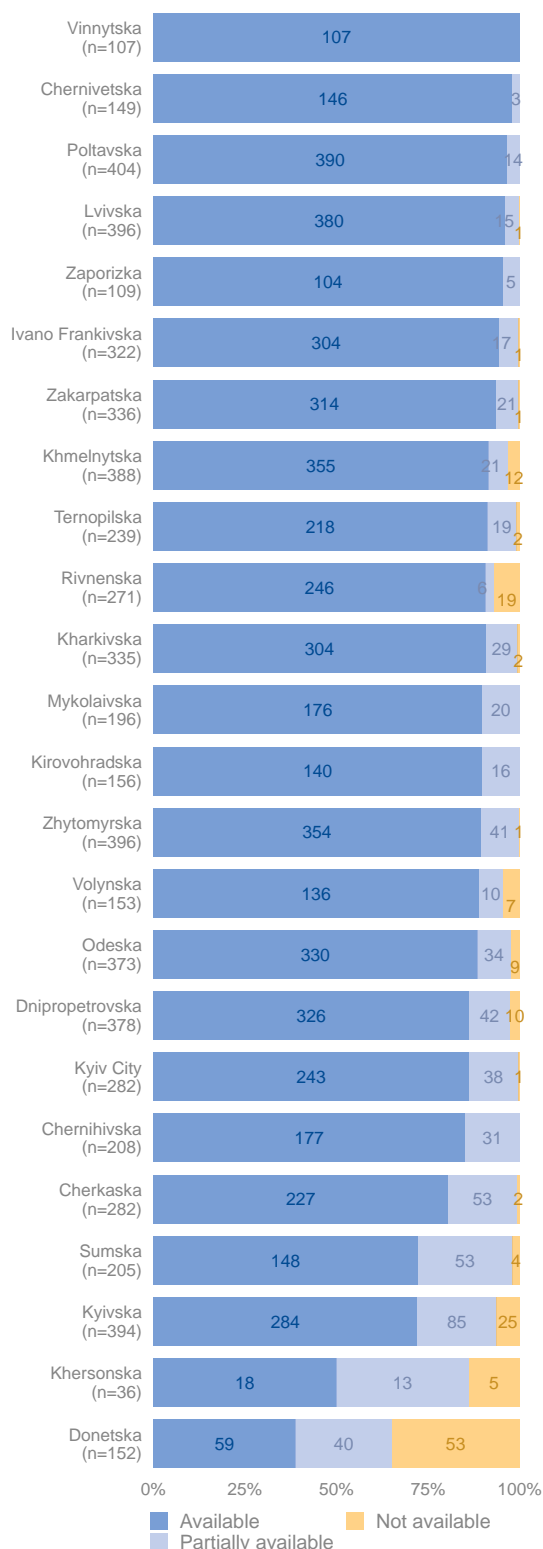
(n = 781)



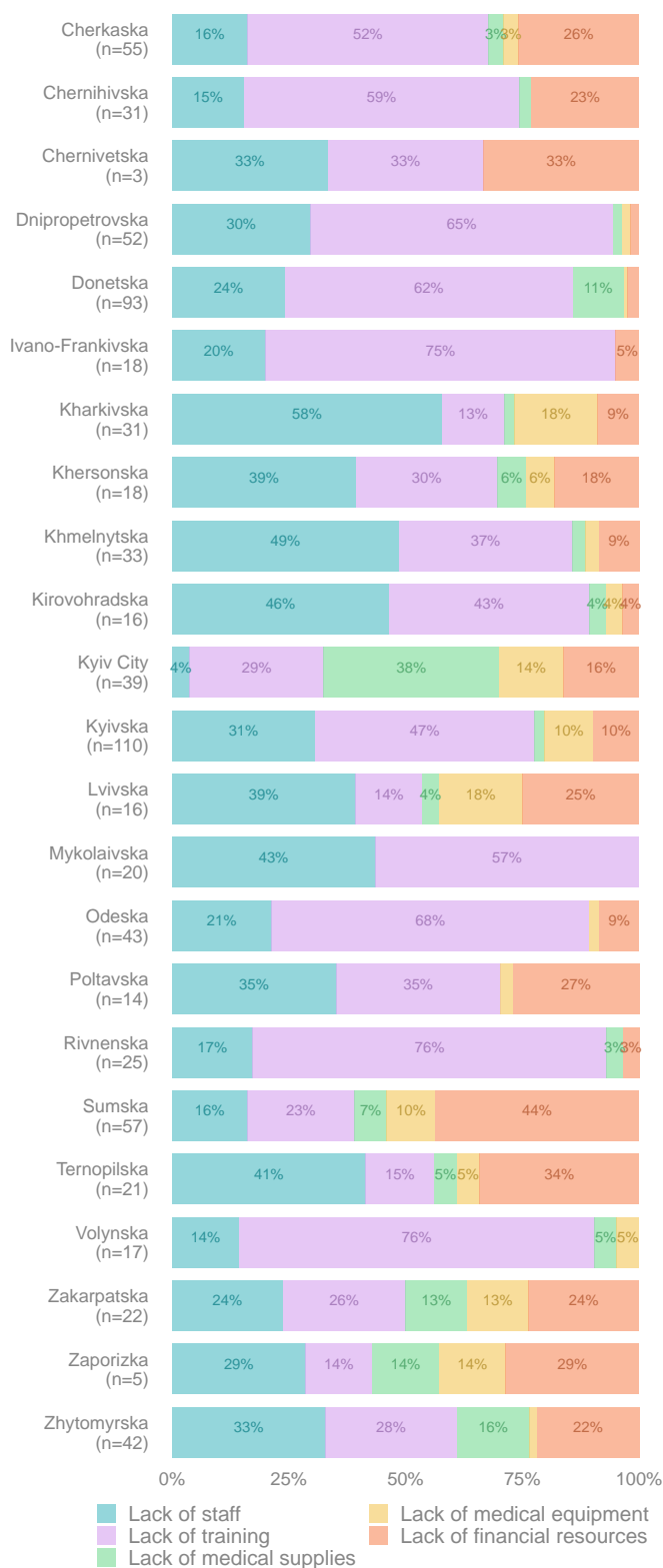
Map excludes HSDUs

PSYCHOLOGICAL FIRST AID

Service availability by oblast*



Main barriers impeding service delivery by oblast**

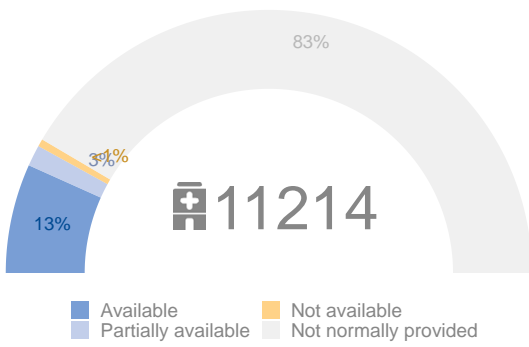


* Chart excludes health facilities where the service is not normally provided.

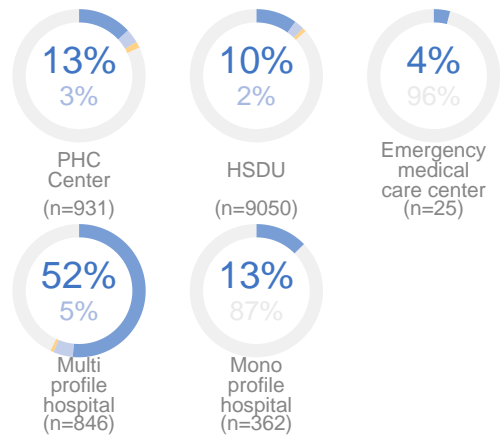
** Chart includes health facilities where the causes/barriers were indicated.

OUTPATIENT MANAGEMENT OF MENTAL DISORDERS

Service availability

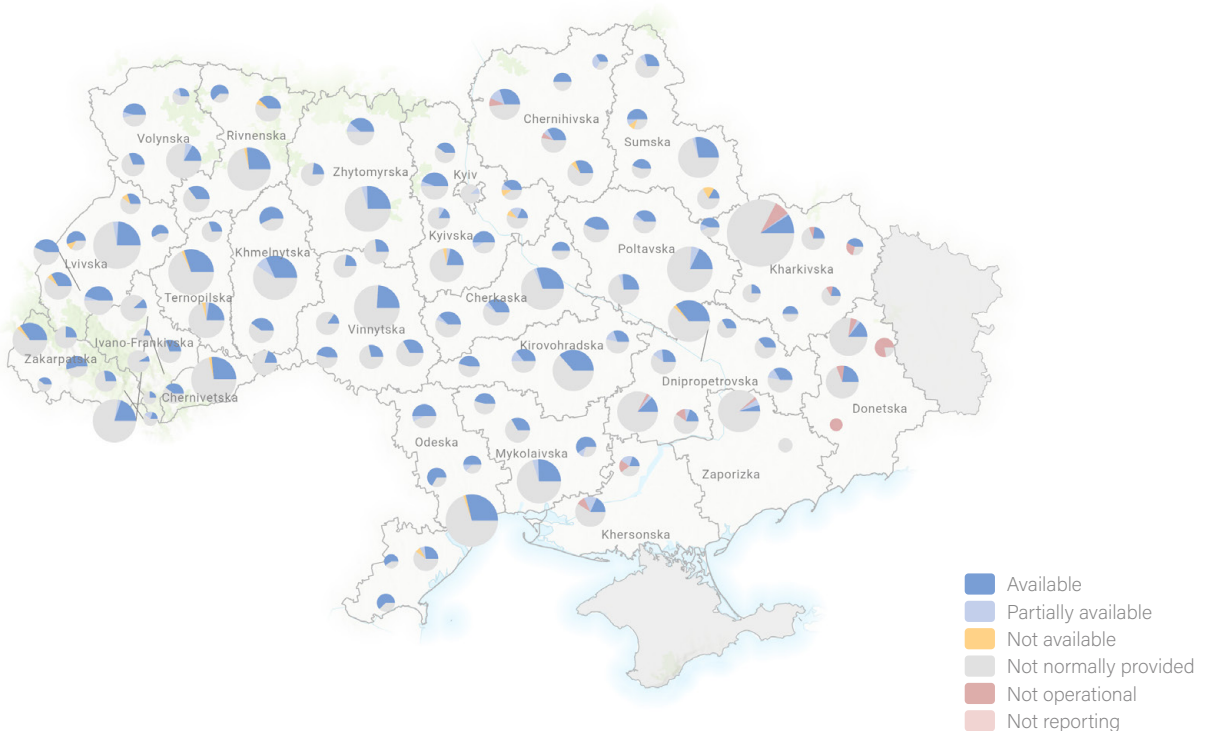


Service availability by health facility type



Main barriers impeding service delivery

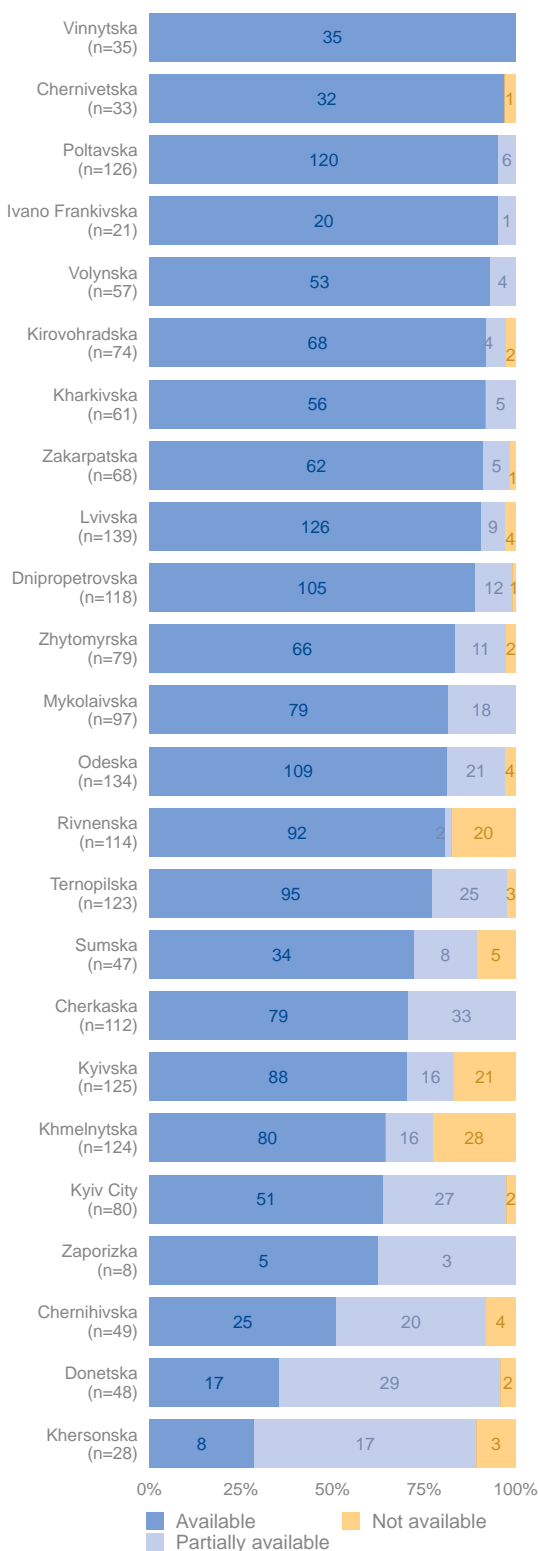
(n = 394)



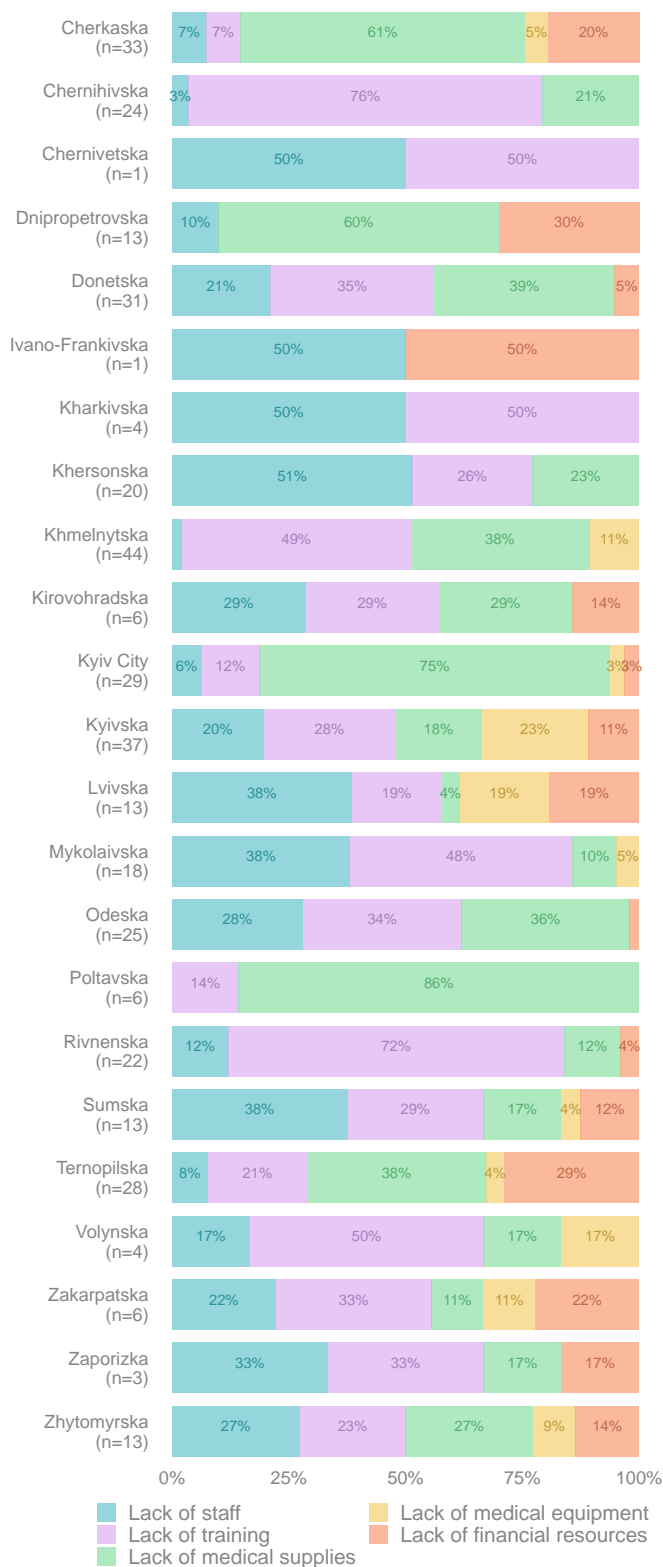
Map excludes HSDUs

OUTPATIENT MANAGEMENT OF MENTAL DISORDERS

Service availability by oblast*



Main barriers impeding service delivery by oblast**



* Chart excludes health facilities where the service is not normally provided.

** Chart includes health facilities where the causes/barriers were indicated.

