HEALTH CLUSTER BULLETIN #9
SEPTEMBER 2025

HEALTH CLUSTER UKRAINE

Dignitas Ukraine medical team provides first aid to an injured evacuee from Donetsk Oblast at the Lozova Transit Center. © Dignitas Ukraine

9.2 M In Need

3M **(2.2M)*** Targeted

$130 M **(97.6 M)*** Required

1.5M Reached

**This figure represents the reprioritized 2025 HNRP*

HIGHLIGHTS

- In September 2025, according to the UN HRMMU, at least 214 civilians were killed and 916 injured, similar to figures reported in August 2025. The majority of deaths and injuries (69%) occurred near the frontline, with particularly high casualties in Donetsk and Kherson regions. Short-range drones remained the leading cause of 29% of all civilian casualties. Long-range strikes accounted for 30% of civilian casualties. These attacks continued to pose a serious threat to civilians, including in urban centres such as Kyiv, Zaporizhzhia, and Dnipro. Overall, the total number of civilian casualties from January to September 2025 remains 31% higher than during the same period in 2024.
- Between 16 and 30 September 2025, intensified hostilities along the front line led to the displacement of approximately 17,200 people — more than double the figure recorded in the first half of the month, according to IOM DTM. Displacement increased notably in the Donetska, Kharkivska, Dnipropetrovska, and Khersonska oblasts, with mandatory evacuations issued for families with children in several affected settlements. Transit centres in Lozova and Pavlohrad reported the highest influx of newly displaced people, together accounting for over 60% of all registrations in September. Evacuation movements in Khersonska oblast persisted amid ongoing strikes, while access constraints in Kupiansk complicated safe passage. At transit centres, partners reported that most health consultations were for life-threatening noncommunicable diseases and acute conditions such as respiratory infections, including COVID-19, and trauma requiring wound care. Since January 2025, Health Cluster partners have provided essential, life-saving primary health care services to over 12,000 people in transit centres.
- In September 2025, attacks targeting energy infrastructure in Ukraine increased by 15 per cent compared with August, with 31 incidents recorded. In the Chernihiv region alone, at least 12 such attacks resulted in temporary power outages across several districts, prompting the introduction of scheduled power cuts in October, according to the UN HRMMU.
- In September 2025, the WHO Country Office and the WHO Academy held a Coordination Meeting in Dnipro (22–23 September) with 56 participants, including Health Cluster partners, to discuss curriculum integration, standardization, and trainer certification for Mass Casualty Management training.

HEALTH SECTOR

1,373
health facilities supported as of *30 September 2025*
Source: 5W

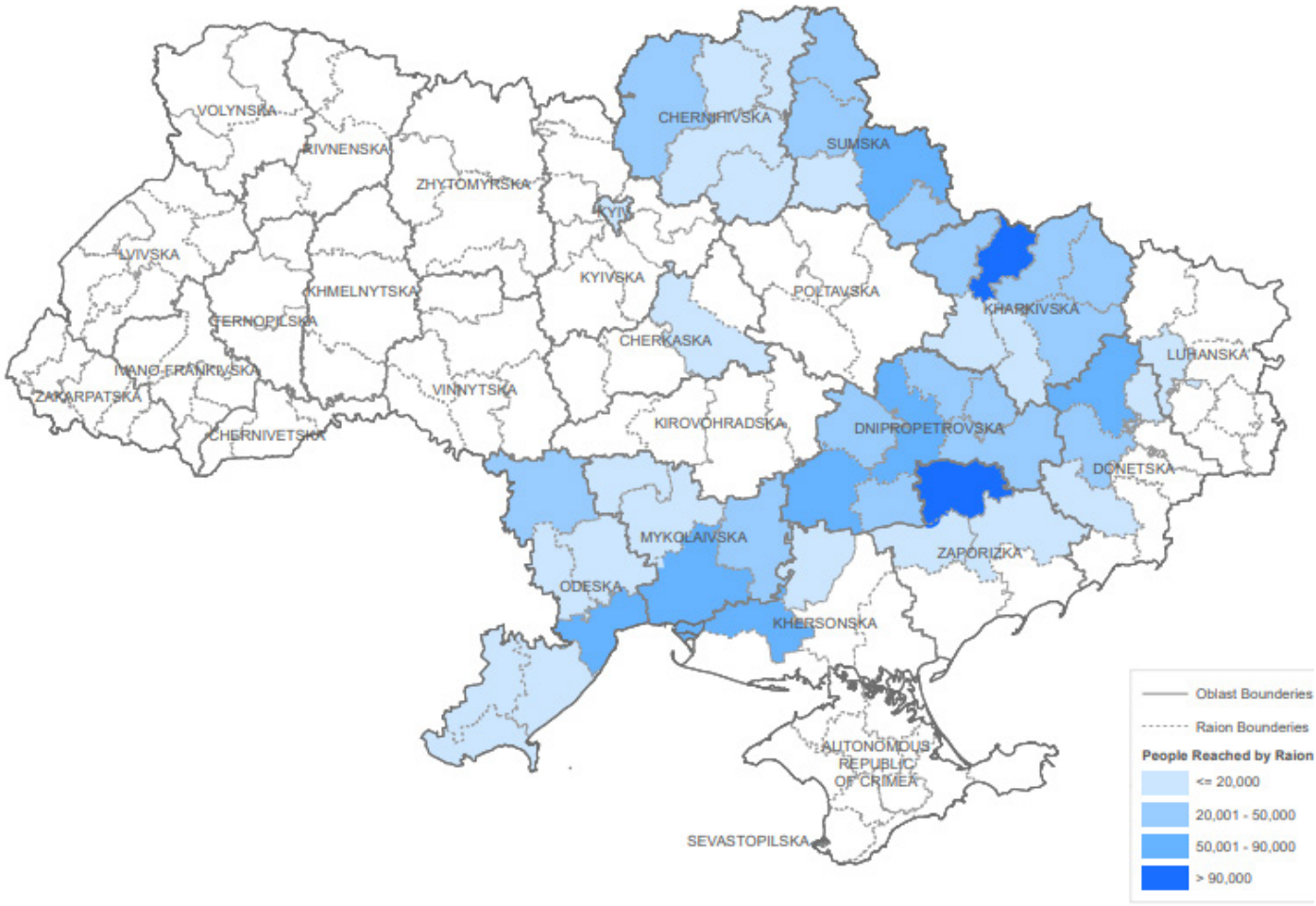
2,683 attacks on health care since *24 Feb 2022*
Source: WHO SSA

357
logged HRPR submissions in *2023, as of 30 September 2025*

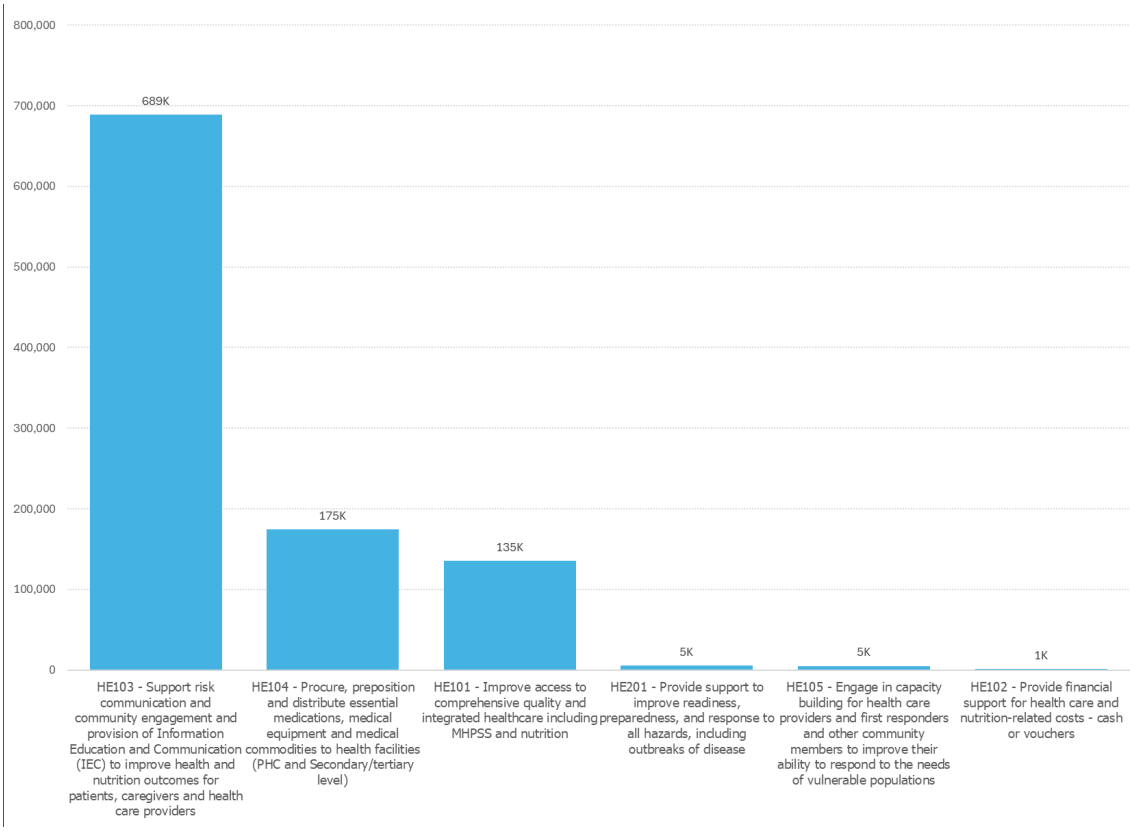
137
Partners reporting (cumulative) HRP activities in Activity Info, *as of 30 September 2025*

HEALTH CLUSTER RESPONSE PROGRESS

People Reached by Raion, as of 30 September 2025



People Reached by Activity, as of 30 September 2025



NEEDS & GAPS

Winter Risk

Populations across Ukraine face acute winter vulnerability due to conflict, displacement, and damaged housing and energy infrastructure. Cold spots in Kharkivskyi, Bohodukhivskyi, Sumskyi, Kramatorskyi, Shostkynskyi, and Buchanskyi show compounded risks, with Kramatorskyi and Shostkynskyi having the "highest" risk. Disrupted utilities, poor road access, and damaged health facilities hinder service delivery. Displaced persons, older adults, and those with chronic conditions face increased morbidity risks and limited access to essential care. Last winter, 51% of households reported unmet health needs, including lack of medications and primary care. Without timely funding, preventable illness, disability, and mortality will rise.

Availability of Medicines

In frontline and hard-to-reach areas, attacks on warehouses and damage to pharmacies and health facilities have severely disrupted access to essential medicines and health services. Medicine stockouts, facility closures, and supply chain interruptions have left vulnerable populations, especially IDPs, older persons, and those with chronic conditions, without consistent care. Despite these gaps, health partners continue to support the Ministry of Health by donating lifesaving medications. According to IOM (May 2025), 36% of the population struggles to access healthcare, with affordability and availability as key barriers. MSNA 2025 shows 8% of households with chronic illness were often unable to obtain needed medication. AMP coverage gaps and recent pricing reforms have further strained access. Pharmacies in rural and frontline areas often face challenges with replenishment. To mitigate this, some partners integrate CVA to support access to medicine and transport. The Health Cluster is exploring collaboration with UkrPoshta to expand last-mile delivery of medications to underserved areas.

Availability of Services

A critical shortage of health workers in war-affected and border regions continues to undermine health service delivery, especially in frontline areas. The February mobilization of medical and humanitarian personnel further reduced service availability, while attacks on health facilities disrupted care and endangered staff and patients. Access is particularly limited for people with disabilities and those with special needs, who report higher health needs and greater barriers. According to MSNA 2025, health-related needs are most severe near the frontline: in the 0–20 km zone, 26% of households in Donetska oblast were in need due to chronic conditions and lack of access to medication or care, compared to 7% in Chernihivska and 9% in Sumska. In the 21–50 km zone, needs remained high in Donetska (17%) and Sumska (16%). These gaps highlight the urgent need for targeted support to the health workforce, protection of health infrastructure, and inclusive service delivery for high-risk populations.

Mental Health and psychosocial Support

The burden of the war on the mental health of the population and the health workforce continues to increase. As a result of the attacks, many people across Ukraine including health staff require mental health support. According to the WHO Ukraine Health Needs Assessment Round 7 (April 2025), 72% of adults experienced mental health challenges over the past year, with stress, anxiety, and low mood reported most frequently. IDPs were disproportionately affected, with 80% reporting stress compared to 74% among non-displaced populations. The MSNA 2025 confirmed these findings, indicating that 63% of assessed households had at least one member feeling emotionally unwell, making daily life more difficult than usual, and 41% reported severe or extreme MHPSS challenges.

Trauma and Rehabilitation

Health facilities, especially in conflict-affected areas, face a high influx of trauma patients but lack specialized rehabilitation capacity. Trauma-related injuries, such as spinal cord injuries, brain trauma, burns, and amputations remain challenging to handle, with referrals challenges and limited access in some locations. Many advanced patients with complications will be referred to palliative care or long-term care, losing possibilities for regaining functional independence and returning to their daily lives. While multidisciplinary rehabilitation is available within the network of "capable hospitals" across Ukraine, service quality may vary, with waiting lists of up to three months and a shortage of specialized professionals. Integrating mental health into rehabilitation is essential for holistic recovery. Awareness among service users and service providers of free rehabilitation services is low, especially among primary care physicians, resulting in many without care. Stronger coordination is needed to address gaps and avoid duplication.

Sexual and Reproductive Health Needs

Access to SRH services is reduced due to pharmacy closures, damaged facilities, and supply disruptions. Limited SRH focal points at the primary care level affects care-seeking behavior. High rates of intimate partner and non-partner sexual violence highlight the need for enhanced clinical services and medical capacity-building. Access to antenatal care, especially for adolescents, has dropped, leading to increased maternal complications. Declining HIV and syphilis testing among pregnant women calls for expanded screening and treatment. Regional disparities in teenage pregnancy, rising abortion-to-live-birth ratio and unsafe abortions, and higher syphilis and hepatitis B cases demand stronger public health interventions, sexuality education, and improved contraception access. Strengthening SRH services at the PHC level is essential to ensure the availability of comprehensive SRH services.

Risk Communication & Community Engagement

Reaching vulnerable populations with risk communication and community engagement (RCCE) materials continues to be a challenge, particularly in frontline oblasts where insecurity and disrupted service delivery exacerbate public health risks. In these contexts, limited access to accurate information may contribute to low health-seeking behaviors and the adoption of negative coping strategies. Strengthened coordination is essential to ensure consistent and contextually appropriate messaging, especially on priority issues such as rabies prevention, measles vaccination, and the promotion of essential health-seeking practices. Aligning messages with the Ministry of Health's priorities is key to addressing risk communication challenges. Greater partner involvement in community listening would amplify voices from high-risk regions.

HEALTH CLUSTER COORDINATION UPDATES

HNRP Update

The Health and Shelter/NFI cluster are co-chairing Strategic Priority #1 (relating to frontline response) of the Humanitarian Needs and Response Plan (HNRP 2026). This working group has been responsible for leading discussions on defining the geographic boundaries, multisectoral needs profiles and estimation of the affected population. Once the process is finalized, the working group with support of the clusters, will determine the multisectoral response packages for each of the strategic priorities. Clusters will finally calculate sectoral People in Need (PiN), severity, target, and resource requirements in line with the Joint Intersectoral Analysis Framework (JIAF 2.0).

Mass Casualty Management training

In September 2025, the WHO Country Office, in collaboration with the WHO Academy, held a two-day Coordination Meeting in Dnipro (22–23 September) to advance the integration of the Mass Casualty Management (MCM) training into Ukraine's medical education system. The event gathered 56 participants, including representatives from the Ministry of Health, medical universities, and Health Cluster partners. Discussions focused on curriculum integration, standardization, and trainer certification, resulting in an agreed framework and the establishment of a national Community of Practice to sustain coordination. These efforts aim to institutionalize MCM competencies and strengthen Ukraine's emergency preparedness and response capacity.

Winter Response Planning 2025

The Health Cluster contributed to the UN OCHA multisectoral Winter Preparedness Plan (October 2025–March 2026), aligning health priorities with the strategy of the Humanitarian Country Team (HCT) to assist vulnerable populations near the front line, evacuees, respond rapidly to strikes, and support displaced people. The health response focuses on emergency case management of acute respiratory infections, provision of medical supplies for diagnosis and treatment (including pandemic influenza), and intensive care for severe respiratory infections, with the collective effort aiming to reach 98,200 people.

With temperatures rapidly declining and access constraints worsening due to ongoing hostilities, urgent funding is required to sustain and scale up the Health Cluster's Winter Response. Predictable and timely support is essential to implement preparedness measures before severe cold sets in. The Health Cluster, WHO, and partners continue to advocate for flexible and rapid funding to ensure the delivery of life-saving health services and winterization activities.

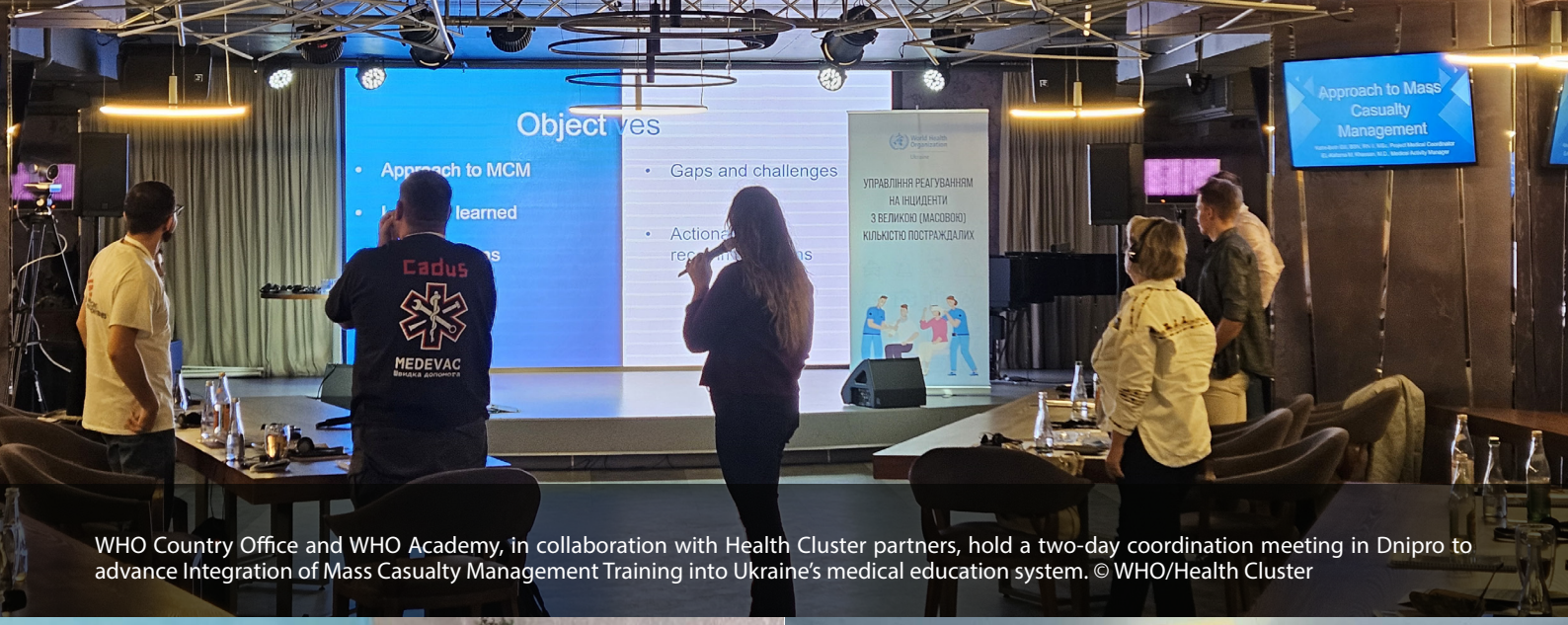
Evacuations Response in Pavlohrad and Kharkiv

Between 16 and 30 September, around 17,200 people were displaced from frontline areas, more than twice the number from the first half of the month (8,400). This sharp increase shows how fighting and insecurity are forcing more people to leave their homes. In Donetska oblast, many fled from northern and central areas due to shelling and movement restrictions. Despite the danger, some towns still host thousands of residents, including children. As of 2 September, two settlements were under mandatory evacuation orders.

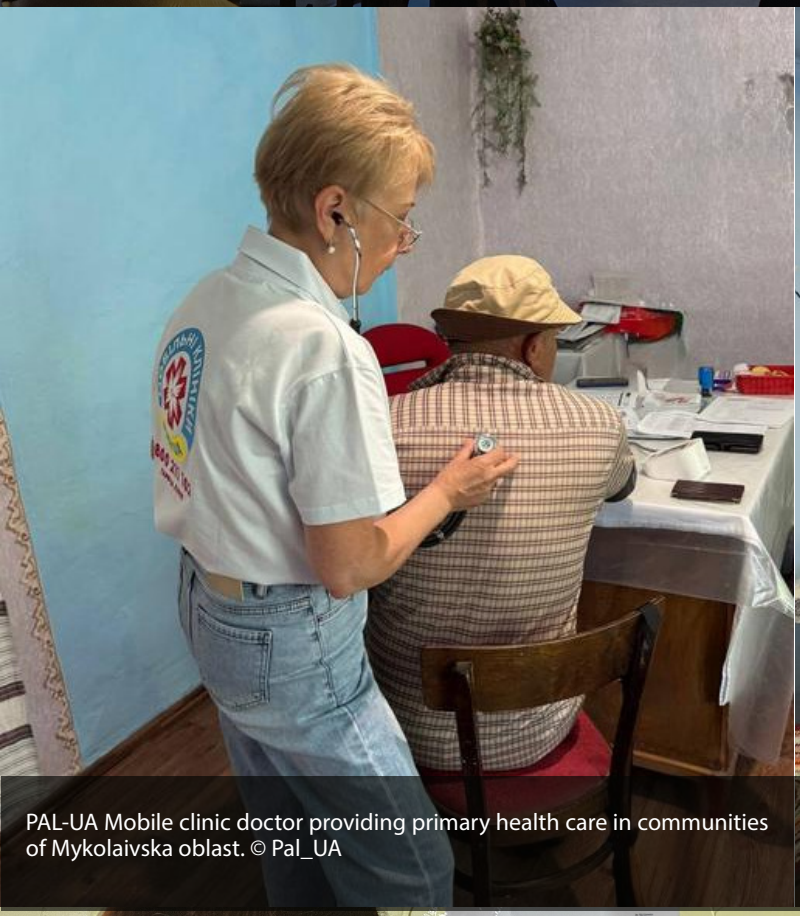
In the Kharkivska oblast, the Lozova Transit Center received the highest number of new arrivals (4,200), showing a shift in displacement toward central and northern areas. In Kupiansk, movement restrictions were tightened, allowing only foot or military-assisted evacuations, making safe travel even more difficult. In the Dnipropetrovska oblast, over 7,800 people were evacuated, mostly families with children from 18 settlements. In the Khersonska oblast, evacuations continued due to heavy fighting and strikes along the Dnipro River. Temporary evacuation points remain active in Donetska and Kherson.

In total, 10,851 people were registered at transit centers in September. The Lozova Transit Centre received 39% of them, followed by Pavlohrad (25%), Voloske (16%), Kharkiv (12%), Dnipro (6%), and Sumy (2%). Health partners reported that most medical consultations were for serious non-communicable diseases (NCDs), respiratory infections (including COVID-19), and injuries needing wound care, highlighting urgent health needs.

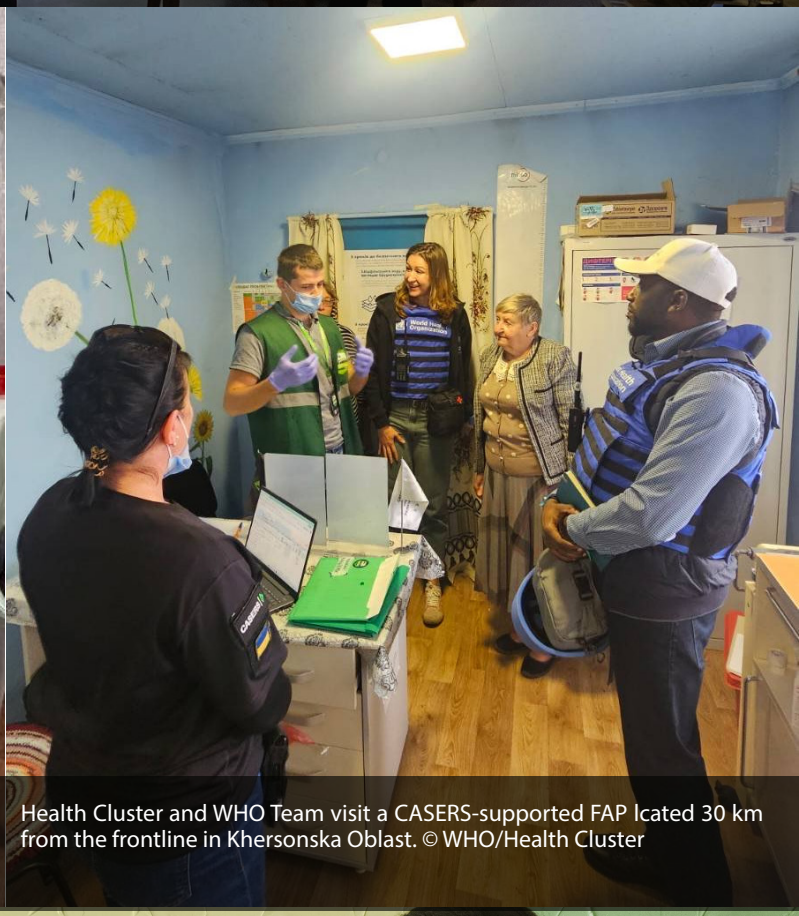
To respond, the Health Cluster coordinated 20 partners across five transit centers in Kharkivska and Dnipropetrovska oblasts. Mobile teams provided primary health care and mental health support in close cooperation with local authorities. Since January 2025, over 12,000 people have received essential health services. In Donetska oblast, one partner continues services at an evacuation point, while two others supply



WHO Country Office and WHO Academy, in collaboration with Health Cluster partners, hold a two-day coordination meeting in Dnipro to advance Integration of Mass Casualty Management Training into Ukraine's medical education system. © WHO/Health Cluster



PAL-UA Mobile clinic doctor providing primary health care in communities of Mykolaivska oblast. © Pal_UA



Health Cluster and WHO Team visit a CASERS-supported FAP lcated 30 km from the frontline in Khersonska Oblast. © WHO/Health Cluster

WHO PSEA representative and Health Cluster Dnipro Team raise awareness on PSEA during visits to two transit centers in Dnipropetrovska oblast © Health Cluster

PARTNERS' ACHIEVEMENTS

As part of the implementation of health programs, nonspecialized psychological interventions (PM+, CETA, ASSYST, and others) continued to improve the psychosocial well-being of patients. In September, 187 beneficiaries received psychological support, with 191 individual consultations and 42 group sessions conducted. To ensure psychosocial support for staff directly involved in health program delivery, consultations were organized for 9 specialists, including 8 individual and 1 group session. In the area of rehabilitation services (physical therapy, occupational therapy, speech therapy, prosthetics, neuropsychology, rehabilitation care, FMR), 94 beneficiaries received support, including 16 persons with disabilities. A total of 167 rehabilitation consultations were provided, covering 35 girls and 59 boys. Under the voucher program for the purchase of medicines, 133 beneficiaries received support (including 10 persons with disabilities), with 195 vouchers issued. Financial and voucher support for laboratory and diagnostic tests was provided to 50 beneficiaries, with 133 vouchers distributed. Additionally, 21 women received support under maternal and child health services (all with disabilities), with 40 vouchers issued. Transport assistance was provided to 20 beneficiaries, including 7 persons with disabilities. To prevent STIs/HIV and promote healthy behaviors, information and educational activities were conducted, reaching 318 beneficiaries.

In September 2025, under the UHF-funded humanitarian health project, 100% Life Dniprov Region and Medical Teams International delivered essential health services in 23 communities across Kherson (11 de-occupied) and Dnipropetrovsk (12 hard-to-reach) oblasts. Mobile medical teams reached 600 vulnerable individuals—exceeding targets by 10%—through integrated specialist care in cardiology, orthopedics, ophthalmology, gynecology, pediatrics, and dermatology. Additionally, 120 MHPSS consultations and 65 home visits for bedridden patients were conducted. To strengthen localization and sustainability, 35 family caregivers were trained using methodologies from HelpAge International and Handicap International. Activities ensured full coverage of identified needs, with a focus on gender sensitivity (65% female beneficiaries) and inclusion, and contributed to Health Cluster coordination to support the transition from humanitarian aid to recovery.

In September, Artesans-ResQ Ukraine continued implementing the WHO-funded project to provide 24/7 Critical Care Transfer (CCT) services and coordination support to EMS and the Ministry of Health of Ukraine Medevac Coordination Unit. The service ensured safe transfers of critically ill adult, pediatric, neonatal, and burn patients from frontline and underserved regions. A total of 114 requests were received, with 106 transfers completed (93% completion rate), including 6 pediatric/neonatal and 5 burn patients, and 12 long-distance missions using the Norwegian medical evacuation bus with Dnipro EMS. ARQ also participated in Emergency Medical Care 2025 Congress and delivered the first CCT training course for Kropyvnytskyi EMS teams at the city's Training and Simulation Center.

In September, CADUS deployed three emergency teams based in Dnipro, Donetsk, and Sumy. These teams transferred 55 patients over a combined distance of more than 6,095 kilometers, averaging 135 kilometers per patient. The patients originated from Dnipro, Donetsk, Kharkiv, and Sumy oblasts and were transported to hospitals across Dnipro, Donetsk, Kharkiv, Kyiv, Kirovohrad, Lviv, and Sumy regions. Intensive care support (ICU levels 2 and 3) was required for 38.18% of the patients.

During September, the Charitable Organization "Charity Fund 'Medical Aid Committee in Zakarpattya'", with the support of the French Association SAFE, delivered medical supplies, hygiene products, assistive devices, and vitamins to healthcare facilities in Kharkiv, Kherson, Zaporizhzhia, Mykolaiv, Kyiv, Dnipropetrovsk, Poltava, Vinnytsia, Zhytomyr, and Kirovohrad regions. Medical furniture was provided to one health facility in Kirovohrad oblast and another in Dnipropetrovsk oblast. A ventilator was delivered to a health facility in Mykolaiv oblast, while medical scales were supplied to facilities in Zhytomyr and Dnipropetrovsk oblasts, among others. As part of the project "Improving the Protection of Children in Emergencies in Ukraine by Providing Safe Shelters, Food and Non-Food Items, and Psychosocial Support", gynecological kits and medicines were donated to one health facility in Kherson oblast, and an audiometer for infant hearing screening was provided to a maternity department in Zakarpattia oblast. .

In September, Dignitas Ukraine, in partnership with SAFE, carried out 1,564 medical consultations in the homes of older adults with disabilities living in the Kharkiv and Sumy oblasts. Three mobile clinics operate in 38 localities in the Kharkiv region, and a new mobile clinic was launched in September to cover 15 localities in the Sumy region. Mobile clinics also provided medical services at the transit centers in Kharkiv and Lozova, as well as at 12 IDP centres. At the same time, 44 children from the Kharkiv region benefited from equine-assisted collective therapy at the Korotych Equestrian Centre.

In September 2025, EMERGENCY ONG ETS continued providing essential health services in Oleksandrivka Hromada (Donetsk Oblast), while preparing to launch activities in Barvinkove and Blyzniuky Hromadas (Kharkiv Oblast) in October. Through its Community Health Worker (CHW) network and collaboration with the local Primary Health Care center, EMERGENCY conducted 808 household visits, including 82 first-time and 726 follow-up visits, offering NCD screening, basic care, first aid, and referrals to primary and secondary healthcare as needed. A total of 806 beneficiaries were reached, including 584 women, 222 men, 65 children, and 48 persons with disabilities, who received free primary care consultations, essential medicines, health education, and follow-up support. At the Interim Transit Point in Oleksandrivka, EMERGENCY maintained a daily medical presence with one feldsher and one CHW per shift, providing first aid, basic health screening, and psychosocial support to 233 evacuees since the center's opening. In parallel, the organization supported the Oleksandrivka health facility with medical supplies and essential equipment, and delivered hygiene and non-medical items to enhance sanitary conditions and safety for both evacuees and staff.

In September 2025, Family Health International (FHI 360) supported 11 mobile teams delivering medical care and psychosocial support to communities in Dnipropetrovsk, Kharkiv, Mykolaiv, and Kherson oblasts. The mobile teams provided outpatient consultations, conducted diagnostic procedures such as ultrasounds and electrocardiograms, prescribed and dispensed medications, and conducted home visits for patients with limited mobility. FHI 360 also brings specialist doctors as part of the mobile teams (e.g., cardiologists, otolaryngologists, endocrinologists, neurologists, gynecologists. In September, FHI 360's mobile teams provided 4,857 outpatient consultations, and specialist doctors provided an additional 818 consultations (the most needed specialties were Gynecologist and Neurologist). 3,651 people received psychological support consultations in mobile teams and primary healthcare centers through individual and group sessions. Capacity-building activities included an SH+ training session in Kharkiv Oblast with 17 participants, and mhGAP training for seven healthcare professionals in Dnipro and Zaporizhzhia oblasts.

Project HOPE mobile medical unit providing health services in Dnipropetrovska oblast © Project HOPE

FRIDA Charitable Foundation mobile team operating in Khersonska oblast. ©FRIDA CF

Mobile clinic of the Polish Medical Mission providing health services in Kharkivska oblat.© Polish Medical Mission

International Medical Corps conducts Adolescents' sexual and reproductive health training at underground school in Zaporizhzhia © International Medical Corps

In September 2025, the mobile medical teams of the FRIDA Charitable Foundation continued providing healthcare services in Kherson, Mykolaiv, and Sumy oblasts. The multidisciplinary teams included dentists, gynecologists, ophthalmologists, surgeons, urologists, neurologists, cardiologists, dermatologists, endocrinologists, general practitioners, otorhinolaryngologists, rehabilitation specialists, and psychologists. Currently, the organization operates 3 mobile dental units and 3 mobile gynecology units. Throughout the month, the teams provided over 1,500 medical consultations and distributed 820 packages of medicines free of charge. Under the "Little Hearts" project, doctors of various specialties conducted 248 consultations at a children's home in western Ukraine. Additionally, the FRIDA team launched a new project to deploy mobile clinics in Dnipropetrovsk and Zaporizhzhia oblasts. These teams will include family doctors, cardiologists, endocrinologists, as well as mobile gynecology and dental units with specialists in corresponding field.

In September, Humanity & Inclusion (HI) delivered 509 individual rehabilitation sessions in Kharkiv, Dnipro, Zaporizhzha, Mykolaiv and Kherson oblasts to 133 new service users. 63 of them received an assistive device to enhance their mobility and self care. HI also provided 120 individual consultations to 48 new individuals, 77% of them being rehabilitation service users or their support persons. 169 new individuals attended 48 MHPSS group sessions including nine Self Help+ sessions, three group sessions for people in helper's positions, four awareness sessions and 32 Active Longevity sessions. Part of the support to health staff, HI provided six MHPSS training and five rehabilitation training to 63 new health staff.

In September, humedica e.V., with support from the German Federal Foreign Office and UHF, continued providing life-saving primary healthcare and MHPSS services to vulnerable populations—including persons with disabilities, older people, and IDPs—in hard-to-reach rural areas of Dnipropetrovska, Sumska, and Chernihivska oblasts through mobile medical units. A total of 1,367 family doctor consultations were conducted, along with 600 gynecological (107 PAP smears, 248 ultrasounds) and 258 dental consultations. SRH awareness sessions reached 250 women, and 318 patients were referred to secondary healthcare. Additionally, 375 people received legal support and 291 MHPSS consultations. MMUs also began operating at the transit center in Voloske, Dnipropetrovska oblast. To strengthen local capacity, two online trainings on prevention of the spread of blood-borne HIV/AIDS infections and viral hepatitis B, C were held reaching 26 PHC staff, and a 5-day mhGAP training on mental disorders was delivered to 13 healthcare professionals in Sumska and Chernihivska oblasts.

In September, IMC facilitated 24,299 outpatient consultations through its network of supported healthcare facilities and mobile medical units across 5 oblasts of Ukraine. To maintain uninterrupted access to essential care, critical medicines, medical equipment, and consumables were delivered to health facilities in Dnipropetrovska, Zaporizhska, and Khersonska oblasts. This support reached 8 primary healthcare centers and 2 specialized medical facilities. IMC also conducted Adolescents Sexual and Reproductive Health training in 4 underground schools in Zaporizhzhia. A total of 159 children participated in the sessions and received hygiene kits upon completion, promoting awareness and personal well-being. In collaboration with the Public Health Center of Ukraine, IMC in September developed and disseminated family planning leaflets and posters across 23 oblasts, contributing to broader public health education and outreach.

In September, the IRC and its local partners provided integrated primary and specialized healthcare through Mobile Medical Units in Sumska, Kharkivska, Dnipropetrovska, Khersonska, and Mykolaivska oblasts. A total of 16,534 medical consultations were conducted across 59 locations, and 477 MHPSS services were delivered to vulnerable individuals. To strengthen the regional health system, IRC supported the Blood Transfusion Department of the Sumy Regional Clinical Hospital with modern equipment for storing and processing donor blood, including refrigerators, freezers, a platelet shaker-incubator, and a generator. Previously dependent on supplies from Kharkiv or Poltava, the hospital can now provide donor blood immediately, improving the quality and timeliness of care and enhancing the region's healthcare resilience. In Lozova, the IRC Rapid Response Health Team supported evacuees at the transit center with medical consultations, psychological assistance, and diagnostic services (ECG, ultrasound). Most patients were presented with chronic disease exacerbations, and severe cases were referred for further treatment.

In September, IVY Japan, in partnership with STEP-IN, began implementing the joint project "Providing healthcare support to vulnerable populations with limited access to healthcare services in Zaporizhzhia City." Funded by the Government of Japan and private companies through Japan Platform, the project operates a mobile medical unit with an integrated mental health component. In September, the unit provided healthcare services to around 500 patient .

During September 2025, MdM Germany ensured access to essential healthcare and psychosocial support for conflict-affected populations in eastern Ukraine. Despite security constraints, mobile unit missions maintained healthcare access in hard-to-reach areas. A total of 7,345 people were reached, including 2,166 unique beneficiaries. Medical teams delivered 1,874 primary healthcare and 1,000 SRH consultations, 620 mental health support sessions, 70 awareness sessions for 428 people, 558 laboratory referrals, and 491 breastfeeding consultations. Capacity building included 4 SRH trainings (2 in Kramatorsk and 2 in Tomakivka), strengthening the knowledge and skills of 64 healthcare professionals. As part of preparedness efforts, MdM Germany coordinated with local health authorities and pre-positioned essential medicines and medical supplies for a health facility in Lyman hromada.

In September 2025, MdM Greece continued providing integrated primary health care (PHC) and MHPSS services through its MMU in Sumy Oblast, in close collaboration with the health facility of one of the hromadas. The MMU delivered 293 health consultations across eight rural settlements located near the border, where communities remain affected by ongoing hostilities. The MHPSS team delivered 150 in-person consultations via the MMU and provided psychological support to 414 individuals through the MdM-supported Helpline. Most callers were women (270), and the main issues addressed were family relations (17.4%), personal/interpersonal concerns (10.6%), and professional or public-sphere challenges (33.1%). 1 mhGAP training took place in Konotop, Sumy (22–25 September), engaging 22 healthcare providers to strengthen their capacity in community-based mental health support. Overall, MdM Greece reached 649 beneficiaries, including 213 PHC and 436 MHPSS beneficiaries. Despite escalating security threats and shelling in border communities such as Yunakivka, operations continued safely through adaptive planning and coordination with local authorities.

During September 2025, MdM Spain continued to deliver essential health and psychosocial services across eastern and northern Ukraine. Five MMUs (three in Zaporizhzhia and two in Kharkiv regions) provided 2,596 primary health care consultations for 2,226 patients and 1,287 SRH consultations for 1,176 patients. The MHPSS team offered 653 individual sessions (368 full, 285 brief) to 590 beneficiaries and conducted 81 awareness sessions reaching 765 participants. Health promotion activities included 43 community sessions with 607 participants, focusing on disease prevention and self-care. A two-day training on "Family Planning: Modern Methods of Contraception" was held in Mena (Chernihiv Oblast) for 10 family doctors and nurses. In parallel, MdM Spain MHPSS teams conducted advanced courses and supervisions in Kyiv, Kharkiv, Zaporizhzhia, and Chernihiv regions, covering PM+, mhGAP, MHBasic, and Doing What Matters in Times of Stress, training and supervising over 130 specialists. MdM Spain delivered 17 donations of medicines and equipment to health facilities in Zaporizhzhia and Kharkiv.

In September 2025, La Chaîne de l'Espoir organized 2 Advanced Course for Damage Control Surgery trainings for 12 medical professionals in Kharkiv and Lviv. To further strengthen emergency and surgical care, the organization donated 3 Negative Pressure Wound Therapy Systems to support advanced wound management in the Kyiv region, along with various medical products, including pharmacological preparations, distributed to healthcare facilities across multiple regions of Ukraine. In the Chernihiv region, 72 patient consultations were conducted using donated cardiovascular diagnostic equipment. These activities were carried out with the support of Expertise France and The Crisis and Support Centre of the Ministry for Europe and Foreign Affairs.

In September 2025, the Mobile/Remote Care Project, implemented by Mobile Clinic PAL-UA and Stichting Vluchteling, continued providing free medical and psychological support to residents in frontline and hard-to-reach communities of Mykolaiv Oblast, including Horokhivska, Snihurivska, Shyrokivska, Bereznehuvatska, Pryvilnenska, Inhulska, and Bashtanka communities. Over the course of the month, the mobile team visited 20 settlements, delivering 320 family doctor consultations, 165 specialist consultations, 275 individual psychological sessions, 10 group MHPSS sessions, and conducting 27 home visits for patients with limited mobility. A major achievement in September was the integration of project activities with Ukraine's Electronic Healthcare System (EHS). This allowed doctors to issue electronic prescriptions under the "Affordable Medicines" program and refer patients to specialized care, ensuring treatment transparency and continuity. In addition, the team guided patients on ordering medicines via UkrPoshta's postal delivery service, helping residents in remote areas access essential medications without leaving their communities.

In September 2025, Peace Winds Japan and Eleos-Ukraine continued operating the Family Center in Zvyahel, Zhytomyr Oblast, with support from the Ministry of Foreign Affairs of Japan. The center provides psychosocial, social, and legal assistance to women, children, internally displaced persons, and survivors of war and domestic violence. As of September 2025, the project reached 484 beneficiaries and delivered 509 services, including individual psychological counseling, case management, legal consultations, and group sessions led by a psychologist. Outreach visits to Dubrivska and Bronykivska communities further expanded access to support. Key topics addressed in September included adolescent support, women's mental health, and assistance to families of military personnel. A specialized psychologist also began providing services to veterans. Looking ahead, a speech therapist and child rehabilitation specialist are scheduled to start in October.

In September, the mobile medical teams of the Polish Medical Mission operated in Kharkiv and Sumy oblasts, providing over 1,000 medical consultations, including those by general practitioners, endocrinologists, cardiologists, and psychologists. More than 900 packages of medicines for the treatment of acute and chronic diseases were distributed free of charge. The PMM laboratory conducted tests for 84 beneficiaries, while the Kharkiv mobile team continued providing medical support to people in the transit center. As part of the "Neonatal Project" implemented with the support of the Ministry of Foreign Affairs of Poland, 12 training sessions were conducted in maternity hospitals and perinatal centers across Ukraine.

In September 2025, Project HOPE continued ensuring access to primary healthcare services across frontline and hard-to-reach areas of Ukraine. A network of 42 mobile medical units provided 60,623 medical consultations to 19,590 individuals (38% men, 62% women). In parallel, 4 ambulances supported 313 emergency medical evacuations for wounded and critically ill patients across three frontline oblasts. Through staff-support grants at 33 hospitals, Project HOPE continued to sustain the availability of essential medical personnel, enabling 59,464 consultations for 20,720 beneficiaries (39% men, 61% women). Project HOPE also donated eight ultrasound scanners to eight frontline medical facilities. On September 5, Project HOPE celebrated the reopening of a fully renovated outpatient clinic in Kyiv region, where extensive rehabilitation works were completed, including structural repairs, thermomodernization, installation of a solar energy system, new medical equipment, and accessibility upgrades. Capacity-building efforts were strengthened through trainings for 80 healthcare professionals, covering topics such as Nurse Training, Advanced Life Support, and Basic Life Support.

In September 2025, Première Urgence Internationale (PUI) continued delivering comprehensive support to communities in Kharkivska, Sumska, Donetska, Dnipropetrovska, and Zaporizka oblasts. Integrated mobile teams provided health and mental health and psychosocial support (MHPSS) consultations to internally displaced persons in transit centers in Kharkivska and Dnipropetrovska oblasts, as well as residents of frontline areas. In total, 2,303 individual and 320 group consultations were conducted. PUI also facilitated MHPSS and health risk communication and community engagement (RCCE/IEC) awareness sessions, organizing 28 group sessions that reached 342 beneficiaries. In close collaboration with Primary Health Care Centers (PHCCs), MHPSS officers provided short-term psychotherapy through referrals from family doctors in Kharkivska, Sumska, and Dnipropetrovska oblasts. Capacity-building remained a key component of PUI's work. Ten trainings on basic life support and sexual and reproductive health at the primary care level were delivered for eight PHCCs, reaching 133 participants. Additional MHPSS trainings focused on supporting veterans and their families and on identifying, preventing, and managing professional burnout. Three refresher trainings and technical supervision groups were held with 43 participants. To strengthen integrated primary healthcare service delivery, PUI also provided indirect support to health facilities. This included HR support to one PHCC in Zaporizka oblast, donation of non-medical equipment (vehicle spare parts) to four PHCCs in Dnipropetrovska oblast, and the delivery of bicycles to another PHCC to facilitate outreach by first aid point staff.

In September 2025, two Mobile Medical Units operated by the organization provided healthcare services in Zaporizka and Kharkivska oblasts, delivering a total of 4,609 medical consultations to 976 beneficiaries. An additional 109 individuals received psychosocial support. The teams covered 16 locations in Kharkivska and 14 locations in Zaporizka oblast. The most common noncommunicable diseases recorded during the reporting period were: Cardiovascular diseases – 819 consultations; Hypertension – 798 consultations; Diabetes – 205 consultations.

In September, STEP-IN Ukraine was finalizing a Polish Aid–funded project to strengthen pre-hospital polytrauma care in Dnipropetrovska, Zaporizka, and Donetska oblasts. The initiative combined medical staff training with the provision of essential equipment to facilities whose personnel participated in capacity-building activities. Based on needs identified by hospitals, PHCCs, and emergency medical service stations, a range of life-saving, diagnostic, surgical, and training equipment was supplied, prioritizing facilities with the most urgent gaps. The items included oxygen concentrators, defibrillators, ultrasound and ECG monitors, surgical drills, stretchers, sterilizers, and CPR mannequins, aimed at improving trauma care quality and strengthening medical staff competencies.

In September 2025, UK-MED, with support from the Ukrainian Humanitarian Fund, continued delivering vital healthcare services to residents of Kharkiv and Zaporizhzhia regions. Mobile medical units provided 2,136 consultations for people living near the frontline and for evacuees in shelters and transit centers, marking an increase compared with the previous month. UK-MED psychologists offered 347 individual consultations and conducted group sessions for 241 participants. Capacity-building activities included training on first aid, psychological support, infection control, and wound care, reaching 421 healthcare workers, first responders, and community members. In addition, UK-MED began mhGAP trainings for non-specialist doctors, helping medical professionals identify and manage mental health conditions such as depression, anxiety, and substance use disorders. The first two sessions were held in Kharkiv and Zaporizhzhia.

In September, Your City Fund strengthened the healthcare system by integrating free medical services with the National Electronic Healthcare System (eHealth). This allowed patients to receive official electronic prescriptions and referrals, ensuring more sustainable, transparent, and coordinated assistance. Through the "Charity Doctor" project, 862 medical services were provided to 341 IDPs, including examinations, lab tests, cardiac diagnostics, ultrasounds, and consultations. Electronic referrals were issued through eHealth and Helsi to state medical institutions in Odesa oblast. At medication assistance centers, 1,303 patients received free essential medicines, including 106 who were provided with high-cost drugs. Over 100 people were officially referred to access medicines under the state "Affordable Medicines" program. The Mental Health Center supported 215 people through 15 group activities and 69 individual consultations, focusing on IDPs, military families, women, and children. The Emergency Response Mobile Team provided medication to 39 victims, medical care to 23, and psychological support to 12 people at rocket attack sites in Odesa. By integrating digital tools and cross-sectoral cooperation, Your City Fund is building a new model of humanitarian medicine that is free, transparent, and aligned with the national health system.

During September 2025, ZDOROVI advanced multiple initiatives to strengthen Ukraine's healthcare system, with a focus on veteran reintegration, mental health support, and sector-wide coordination. A memorandum of cooperation was signed with the Ministry of Veterans Affairs of Ukraine to jointly develop rehabilitation programs and equip hospitals with modern technologies. In September, ZDOROVI and the IRC visited the Central District Hospital in Sumy oblast to assess project results: the facility received ophthalmological and urological equipment worth UAH 7.5 million, and medical staff were trained in equipment use and mental health support. Additionally, 2,000 medical supplies were delivered from Scandinavia to health departments in Kharkiv, Sumy, and Mykolaiv, and Life Hold emergency response kits were provided to hospitals in Dnipro and Shostka. The mental health project "Doctor. Reboot" was completed across 15 medical institutions in three regions, delivering 72 group sessions and 120 individual consultations to more than 860 healthcare professionals. Reported well-being improved by 56% among group participants and 59% among individual session participants.

HEALTH CLUSTER RESOURCES & CONTACTS

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KEY PUBLICATIONS, September 2025

- Health Cluster Workshop Report: Improving the management, distribution and use of medical commodities in the Health Response, July 2025
- Ukraine: Advocacy Note for Health Winter Response Funding, September 2025

KEY RESOURCES