

Factsheet

Access to Health Services in Ukraine Frontline Oblasts 2023–2024



Summary

Over the last three months, the health status of people in frontline areas has shown concerning trends. As of September 2024, while respondents' overall health status remains largely unchanged compared to the previous period, the proportion of respondents reporting improvements in their health has increased (15% vs 19%). Nearly half of respondents sought health care (52%), with a significant increase in those encountering challenges (7% vs 14%) primarily related to cost (30%). Care for chronic conditions remains an issue, with 18% of respondents facing access problems due to financial constraints and high service costs.

Access to health care for children has also declined, with 24% of households seeking care for children and 18% reporting barriers, including unavailability of doctors, high service costs, and financial difficulties. Improvement in child health care access dropped from 40% in April 2024 to 32% in September 2024.

Access to medicines continues to be relatively stable, with pharmacies remaining accessible to most respondents. However, 10% of respondents faced challenges, particularly related to cost and availability. Problems involving prescription medications have increased, with one in five (22%) reporting difficulties, primarily due to unavailability (49%).

Looking ahead, cost of medicines and treatments remains the most critical health need, highlighted by over half of respondents. Dental problems, mental health issues, and cardiovascular diseases also emerged as significant areas of concern.

The winterization assessment underscores the challenges households face in preparing for severe conditions. Last year, 64% of households experienced severe winter impacts, including blackouts, water shortages, and heat supply disruptions. Current preparedness remains insufficient, with 26% unprepared for blackouts, 29% unprepared for water cuts, and 35% unprepared for heat supply issues. Despite these gaps, more than half of households have stored drinking water (53%) and emergency food supplies (51%), and secured alternative heat sources (40%).

While over 80% of households have made some preparations to access health care during emergencies, a majority (70%) lack an emergency medical plan. Financial constraints (62%) and transportation challenges (28%) remain the primary barriers to accessing health care in severe winter conditions. Findings from this assessment align with those of the previous winterization assessments conducted in September 2023 and July 2024.

Background

The war has had lasting and profound effects for the country's health-care system, particularly in the southern and eastern regions. As of 2024, the situation remains critical, with widespread destruction of health-care infrastructure, including hospitals, clinics, and supply chains, leaving the local population with limited or no access to essential health-care services. Continued displacement of people and ongoing war exacerbate these challenges, straining an already fragile system.

The war precipitated a humanitarian emergency, necessitating immediate medical assistance, including emergency and trauma care, along with basic health care. The health-care system in Ukraine's southern and eastern regions is under considerable strain, coping with overwhelming challenges in meeting increased demand for health-care services in the face of the war.

Despite the overwhelming challenges, national health authorities, with support from humanitarian organizations and international partners, have remained committed to delivering health-care services. In response to the needs indicated by authorities and partners, the WHO Country Office in Ukraine has expanded its role, collaborating with local stakeholders to address both acute and systemic needs. Surveys and assessments have become integral to these efforts as an essential tool in identifying needs, providing evidence-based insights that inform effective interventions.

In the frontline oblasts, quarterly surveys continue to monitor access to health-care services. These data-driven approaches ensure that resources are directed where they are most needed, helping to mitigate the impact of ongoing disruptions.

Survey objectives

The following survey objectives were identified:

- monitor self-reported health needs at oblast level;
- monitor self-reported access to primary health-care services, family doctors, and basic medicines, and document the challenges experienced in accessing them at oblast level; and
- observe self-reported access to specialized services and medicines at oblast level.

Methodology and sampling

Survey method

The survey gathers self-reported household data using a standardized questionnaire available on the online platform [Premise](#). Respondents participating in this survey currently reside in Dnipropetrovsk, Donetsk, Kharkiv, Kherson, Mykolayiv, Odesa and Zaporizhzhya oblasts.

The key topics covered by the survey include:

- self-assessed health status
- access to primary and specialized health-care services
- access to pharmacies and medicines
- access to vaccination
- households' future health-related problems
- households' winter preparedness

Sample size

A convenient sampling approach was selected. The sample was based on the active network of Premise contributors in the frontline macroregion. The survey team does not provide any strict quotas for participation and key demographic characteristics. The contributors voluntarily participated in the survey and received a small remuneration.

Despite challenges, the survey team secured an adequate number of respondents in each oblast to ensure robust data analysis. Nevertheless, the data collected should be viewed as indicative rather than fully representative of each oblast and macroregion in general.

Data collection timelines

Data collection for Round 1 in Kharkiv and Kherson oblasts was conducted in December 2022 and January–February 2023, following their liberation.

In Zaporizhzhya, Mykolayiv, Dnipropetrovsk, and Donetsk oblasts, the assessment period spanned the preceding three months, with data collection occurring in March 2023.

Round 2 of data collection took place in June 2023, including additional data from Odesa oblast.

Starting from Round 3, data collection occurred quarterly and included all previously surveyed oblasts.

Data analysis

The data analysis incorporates results from Round 2 of data collection (June 2023) through Round 7 of data collection (September 2024), concentrating on the key trends and changes in the period, with a focus on the latest available data.

Key results



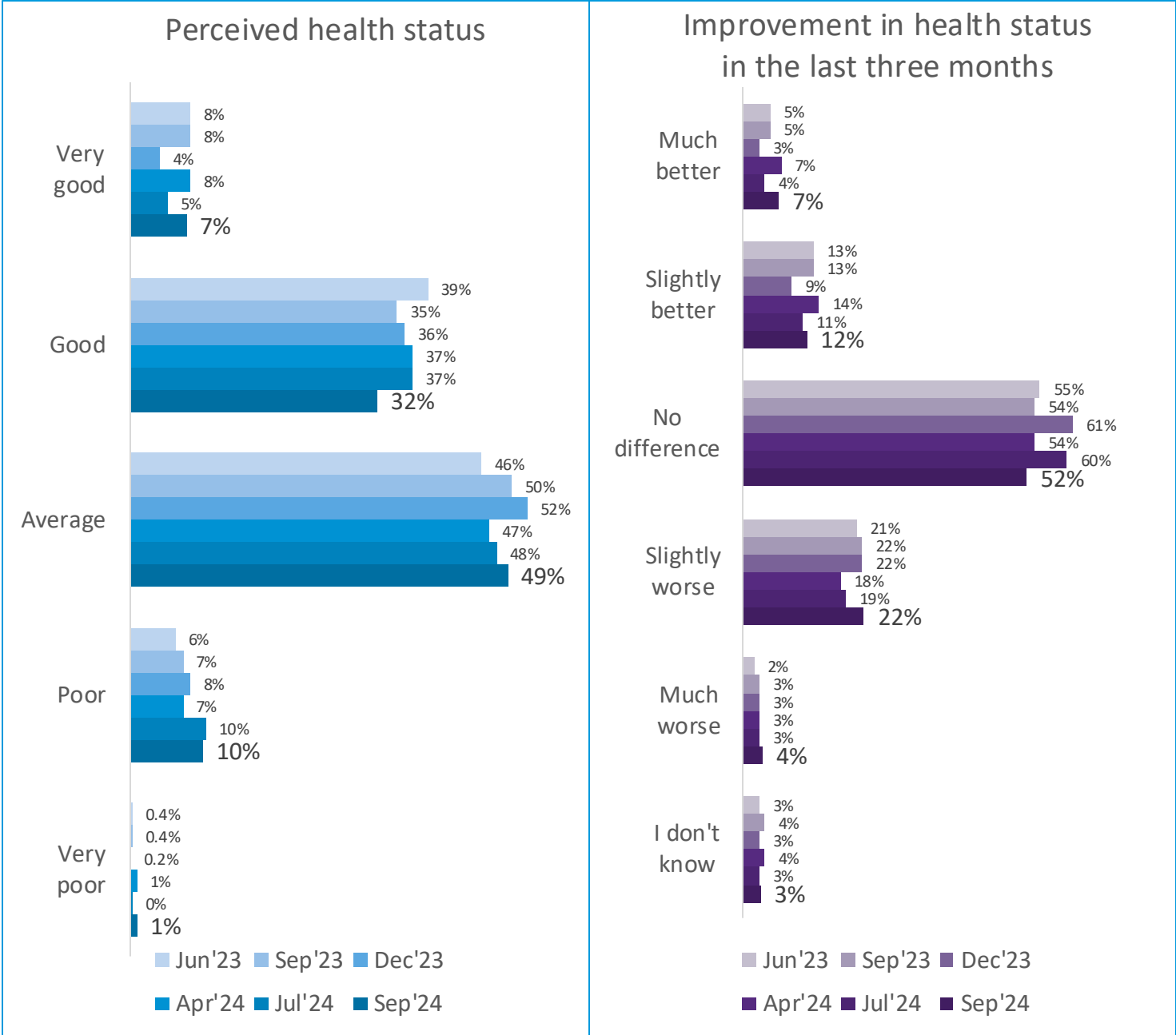
Key sociodemographic characteristics

Gender	R2 June 2023	R3 September 2023	R4 December 2023	R5 March 2024	R6 June 2024	R7 September 2024
Male	52%	50%	55%	54%	51%	52%
Female	48%	50%	45%	46%	49%	48%

Age (years)	R2 June 2023	R3 September 2023	R4 December 2023	R5 March 2024	R6 June 2024	R7 September 2024
18–25	29%	28%	14%	28%	18%	22%
26–35	29%	31%	25%	26%	25%	24%
36–45	25%	25%	35%	26%	32%	27%
46–59	14%	14%	21%	16%	20%	21%
60+	3%	2%	5%	4%	5%	6%

Oblast	R2 June 2023	R3 September 2023	R4 December 2023	R5 March 2024	R6 June 2024	R7 September 2024
Dnipropetrovsk	433	530	243	305	201	290
Donetsk	81	65	44	41	11	37
Kharkiv	357	348	186	161	139	170
Kherson	52	44	23	42	30	38
Mykolayiv	133	130	64	86	57	106
Odesa	388	366	179	225	189	241
Zaporizhzhya	198	163	118	185	106	105
Total	1642	1646	857	1045	733	987

Access to health-care services

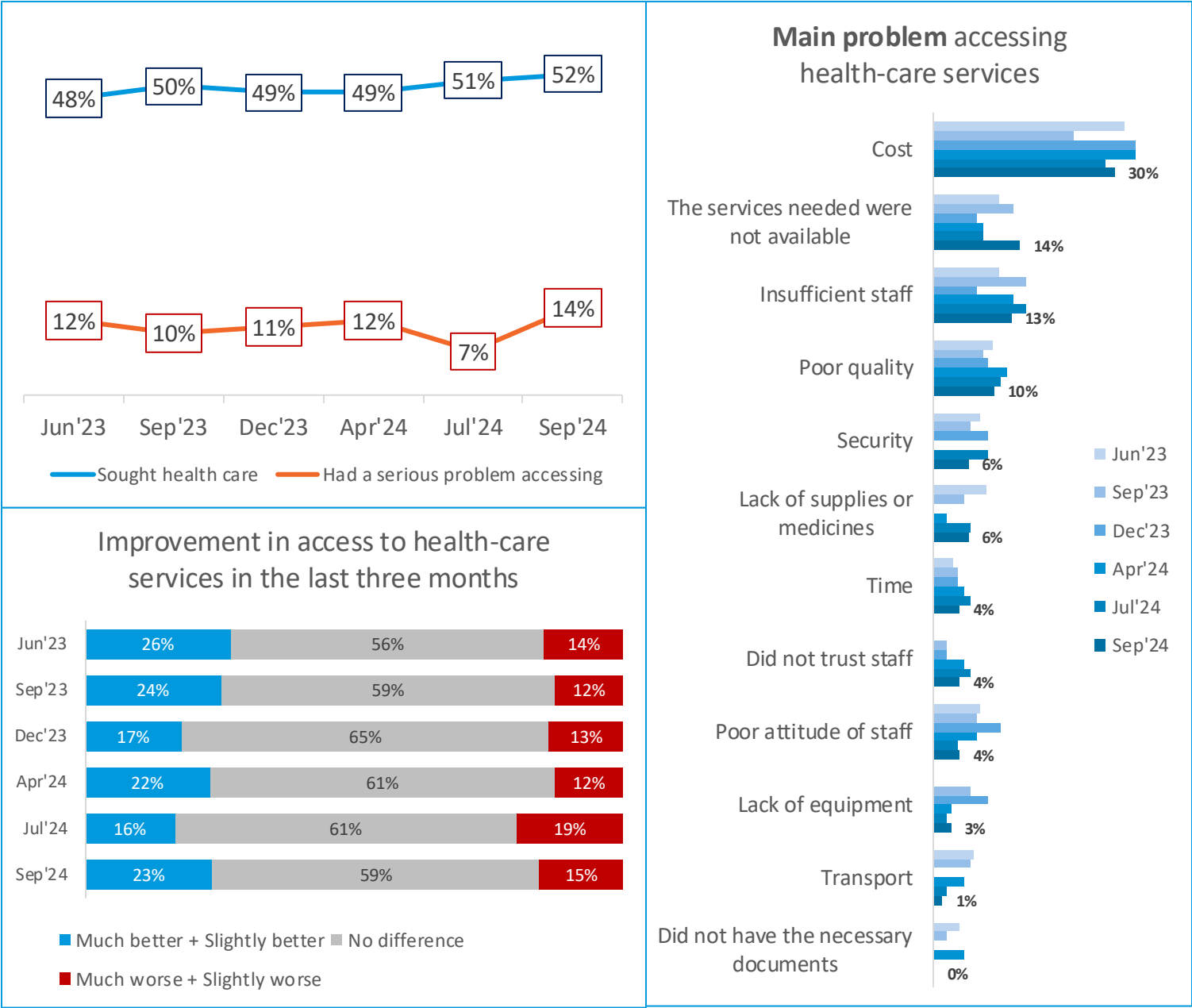


Over the reporting periods, respondents’ perceived health status showed slight fluctuations. The proportion of respondents reporting "Very good" health remained relatively stable, with an increase noted in September 2024. However, the "Good" health category saw a decline from June 2023 to September 2024. The "Average" health category consistently had the highest proportion of respondents, peaking in December 2023. Notably, there was an increase in respondents reporting "Poor" health (10%) in July and September 2024.

When examining the perception of health improvement over the last three months, the data reveal varied trends. The proportion of respondents reporting "Much better" or "Slightly better" health has generally decreased, with an uptick in September 2024. The majority of respondents reported "No difference" in their health status, while there was an increase in those reporting "Slightly worse" health in September 2024.

Jun'23: n=1642	Apr'24: n=1045
Sep'23: n=1646	Jul'24: n=733
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Access to health-care services in the last three months

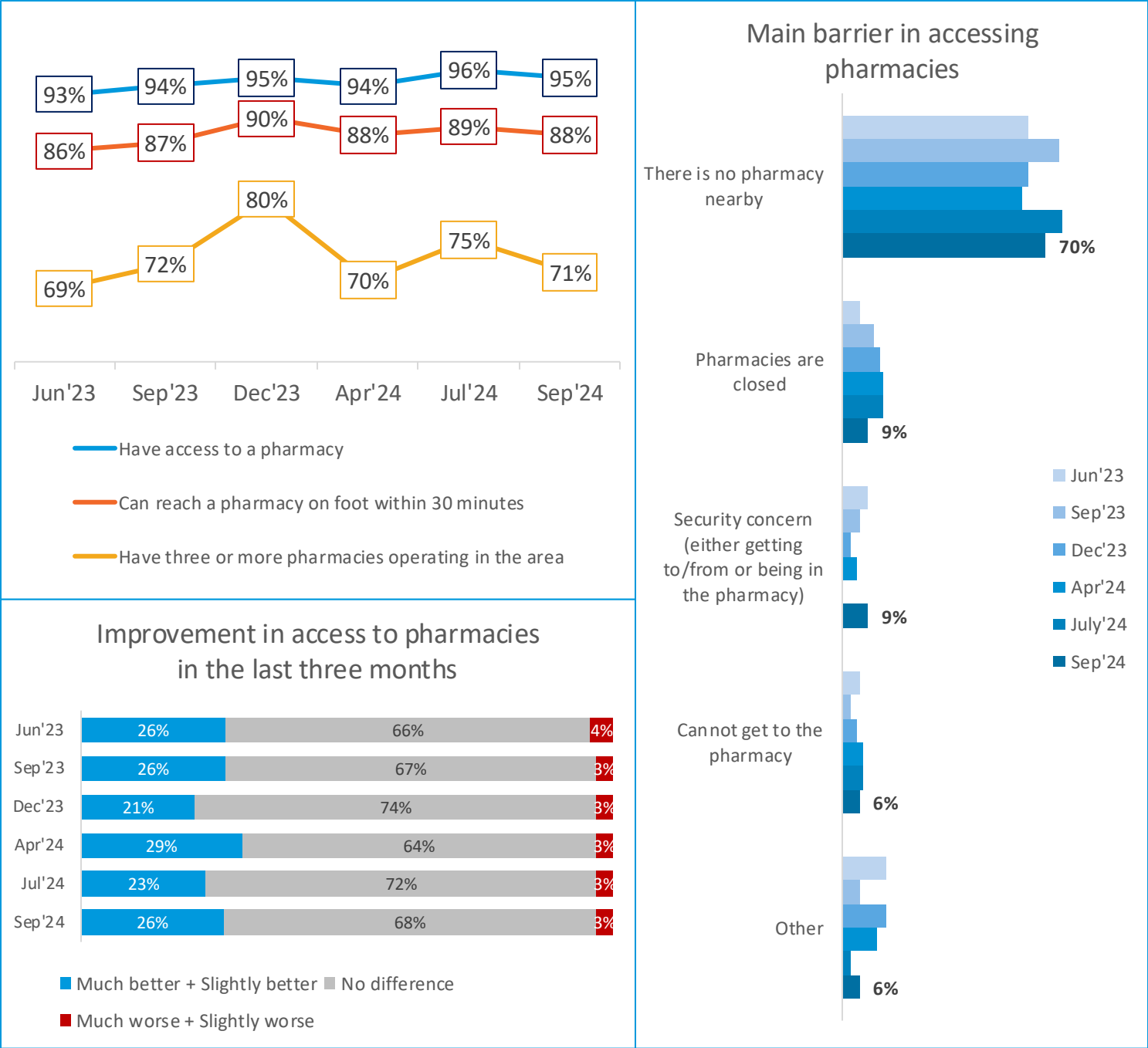


Access to health-care services has shown some improvement over time. The proportion of respondents seeking health care has gradually increased, reaching 52% in September 2024. Cost remains the primary barrier to accessing health-care services, consistently reported as the most significant issue, peaking in December 2023. Other significant barriers in September 2024 included unavailability of needed services (14%), insufficient staff (13%), and poor quality of services (10%).

Perceived improvement in access to health-care services has varied. The proportion of respondents reporting improvements in access to health-care services was the highest in June 2023 (26%) and September 2024 (26%), and larger than the proportion of respondents reporting that access had worsened. The majority reported "No difference" in access to health-care services in general.

Jun'23: n=1642	Apr'24: n=1045
Sep'23: n=1646	Jul'24: n=733
Dec'23: n=857	Sep'24: n=987

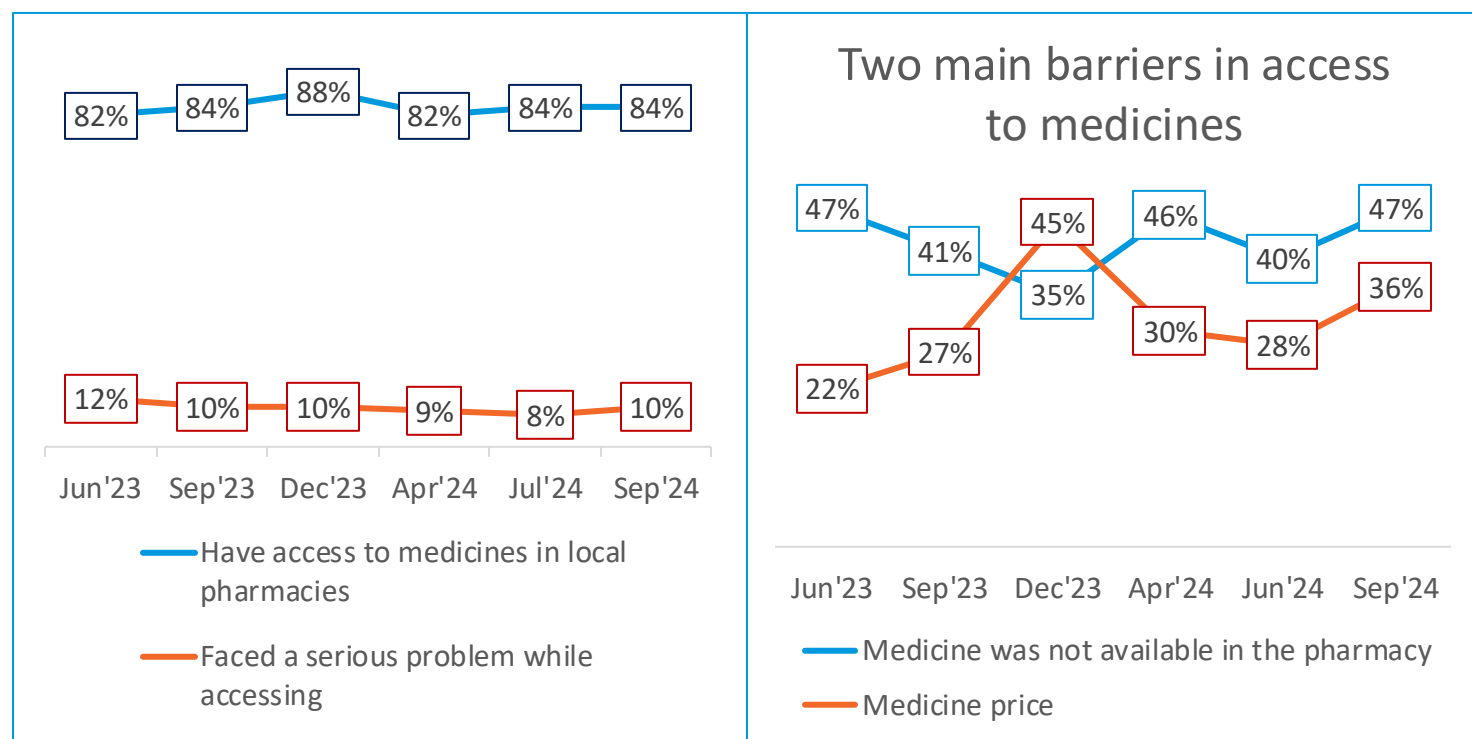
Access to pharmacies



Access to pharmacies has remained relatively stable, with a high percentage of respondents reporting having access to pharmacies, and increased over the reporting periods. The main barrier to accessing pharmacies was not having a pharmacy nearby (70%), followed by security concerns (9%) and transportation issues (6%). Perceived improvement in access to pharmacies has not shown significant changes, with the highest proportions of respondents reporting improvements in June 2023 and September 2024. The majority, however, reported "No difference" in access to pharmacies.

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Access to medicines



Medicines that households found difficult to access

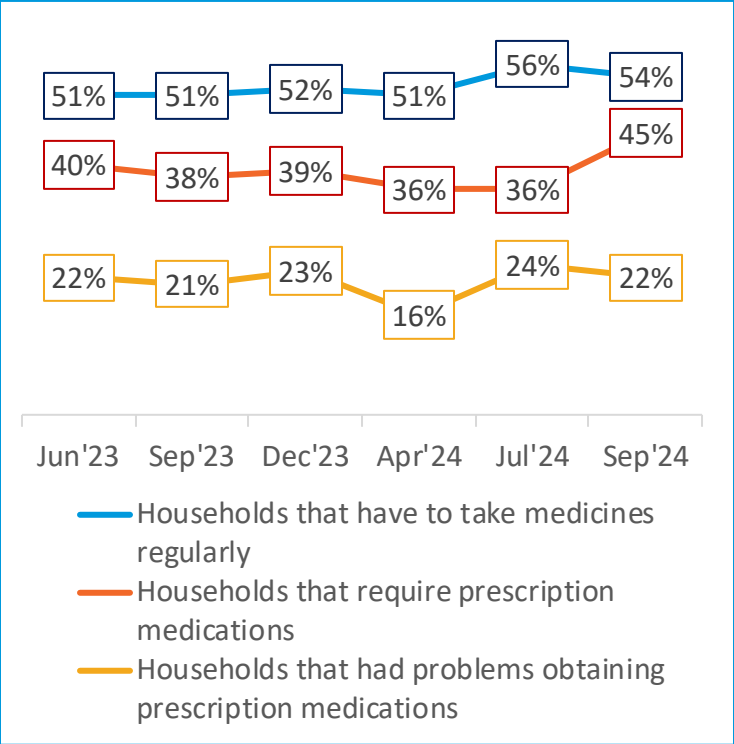
	Jun'23 (n=195)	Sep'23 (n=170)	Dec'23 (n=85)	Apr'24 (n=97)	Jul'24 (n=58)	Sep'24 (n=102)
Pain medicine	38%	24%	29%	31%	33%	26%
Antibiotics	33%	28%	28%	28%	31%	24%
High blood pressure medicine	21%	21%	20%	25%	38%	20%
Heart medicine	21%	22%	29%	29%	43%	23%
Fever medicine	17%	20%	26%	20%	21%	15%
Mental health medications	15%	9%	18%	16%	10%	14%
Antiseptics	11%	8%	9%	9%	3%	11%
Medications for pulmonary disorders	8%	3%	7%	12%	10%	8%
Diabetes medications	8%	8%	14%	10%	21%	12%
Prefer not to answer	7%	14%	5%	12%	7%	11%
Birth control	6%	7%	4%	9%	5%	4%
Other	22%	20%	18%	19%	19%	22%

Access to medicines in local pharmacies has also been relatively stable, with a high percentage of respondents reporting access to medicines and with no significant increase over the reporting periods. The main barriers to accessing medicines in September 2024 were unavailability of medicines (47%) and high cost of medicines (36%). Perceived improvement in access to medicines has varied, with the highest proportions of respondents reporting improvements in April 2024 (25%) and September 2024 (21%). The majority reported "No difference" in access to medicines.

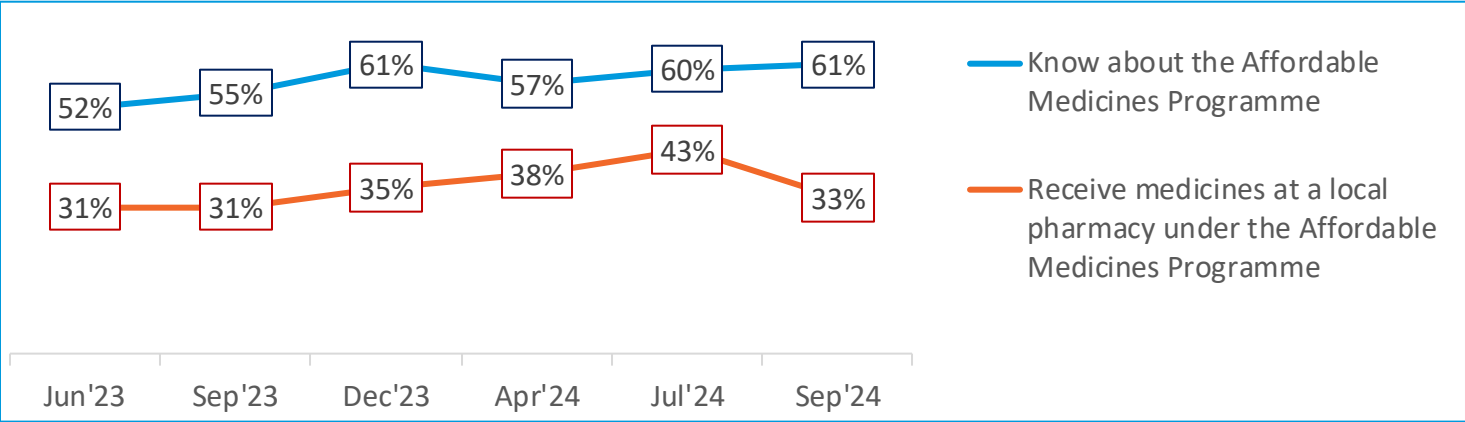
The four most difficult-to-obtain medications were pain medication, antibiotics, blood pressure and heart medication. Access to these medications has not changed significantly over the course of the survey rounds.

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Prescription medications and the Affordable Medicines Programme



Medicines used by households regularly						
	Jun'23 (n=829)	Sep'23 (n=835)	Dec'23 (n=444)	Apr'24 (n=538)	Jul'24 (n=414)	Sep'24 (n=529)
High blood pressure medicine	42%	39%	48%	36%	42%	44%
Pain medicine	43%	40%	41%	40%	36%	38%
Heart medicine	32%	32%	37%	34%	35%	32%
Antibiotics	19%	16%	19%	19%	16%	20%
Diabetes medicine	12%	10%	11%	9%	13%	12%
Mental health medications	10%	9%	10%	9%	11%	11%
Antiseptics	11%	11%	7%	7%	10%	9%
Fever medicine	3%	5%	3%	5%	7%	7%
Birth control	4%	6%	5%	4%	4%	5%
Medications for pulmonary disorders	5%	5%	5%	7%	5%	4%
Prefer not to answer	4%	4%	4%	3%	2%	2%
Other	22%	23%	17%	19%	20%	17%



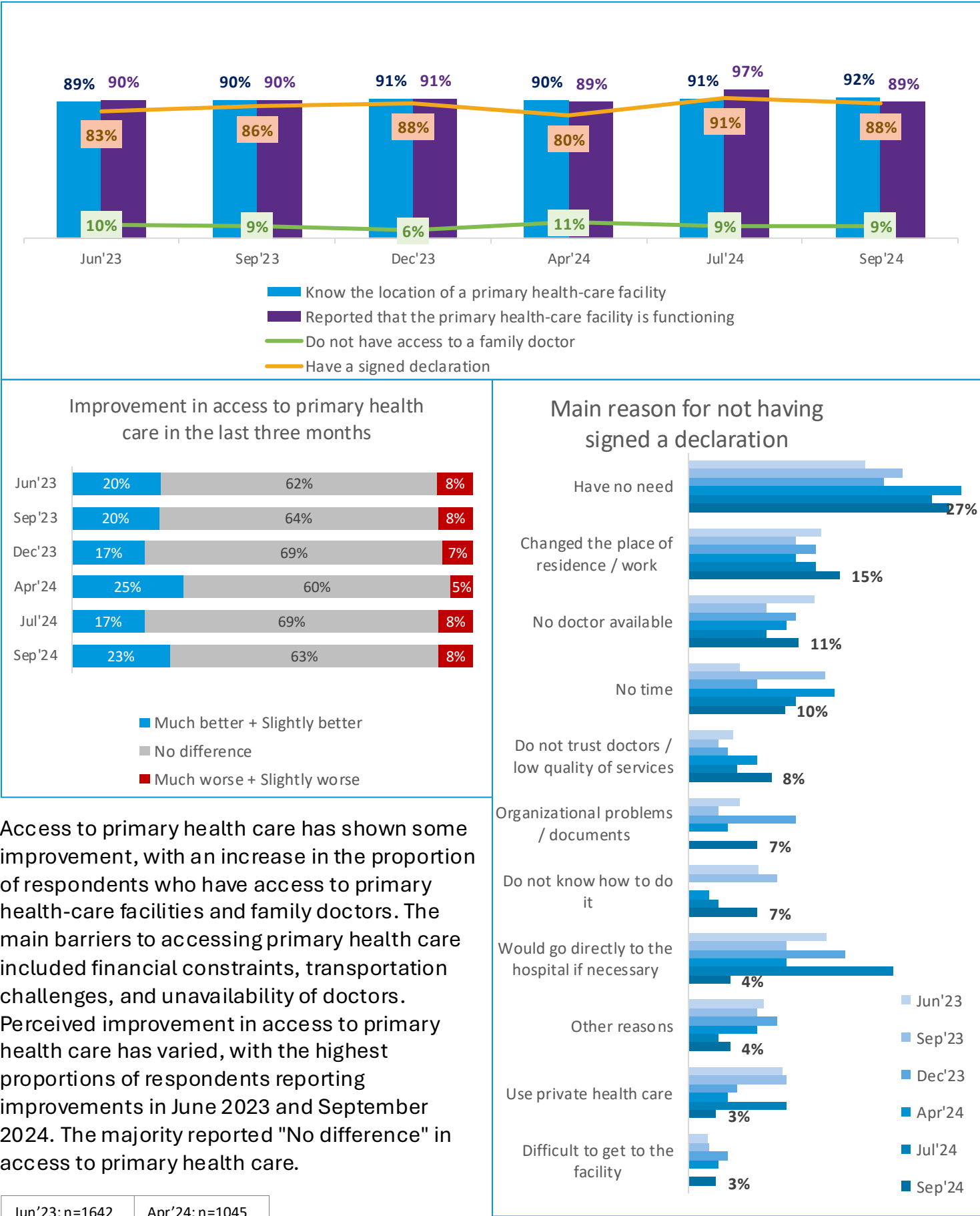
Half of the surveyed households reported regular use of medications, with more than one third requiring prescription medications. By September 2024, this proportion increased to 45% compared to 36–40% in the previous periods. On average, one in five households encountered difficulties in accessing prescription medications.

Medications for high blood pressure, pain, and cardiovascular conditions were the most common types of medications.

In September 2024, 61% of respondents who regularly take medications were aware of the Affordable Medicines Programme, and one third reported successfully obtaining medications through this programme at their local pharmacy.

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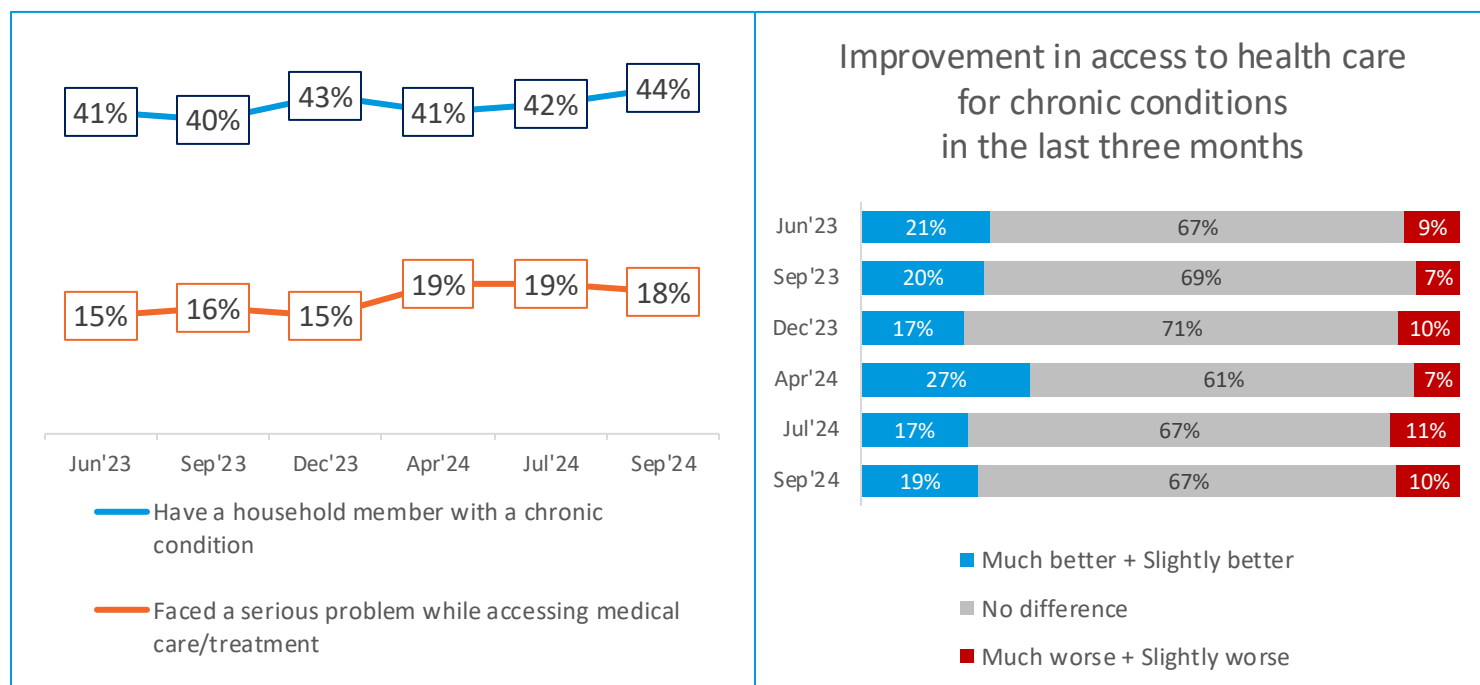
Access to primary health care



Access to primary health care has shown some improvement, with an increase in the proportion of respondents who have access to primary health-care facilities and family doctors. The main barriers to accessing primary health care included financial constraints, transportation challenges, and unavailability of doctors. Perceived improvement in access to primary health care has varied, with the highest proportions of respondents reporting improvements in June 2023 and September 2024. The majority reported "No difference" in access to primary health care.

Jun'23: n=1642	Apr'24: n=1045
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Access to health care for chronic conditions



Barriers in accessing health care/treatment for chronic conditions

	Jun'23 (n=101)	Sep'23 (n=105)	Dec'23 (n=57)	Apr'24 (n=81)	Jul'24 (n=59)	Sep'24 (n=76)
Not enough money to pay for treatment/diagnostics/medicine	40%	42%	40%	30%	39%	49%
Price of the service too high	29%	37%	40%	25%	53%	47%
Doctor not available	22%	15%	39%	22%	19%	26%
Diagnostics not available	19%	16%	9%	12%	27%	24%
Too dangerous to try to receive care and/or treatment	15%	4%	12%	11%	12%	12%
Could not get to the health-care facility/no health-care facility nearby	13%	12%	12%	7%	3%	7%
Limited working hours of the health-care facility	12%	13%	12%	9%	14%	9%
Health-care facility closed	10%	9%	5%	12%	3%	5%
Other reasons	8%	11%	7%	16%	10%	12%

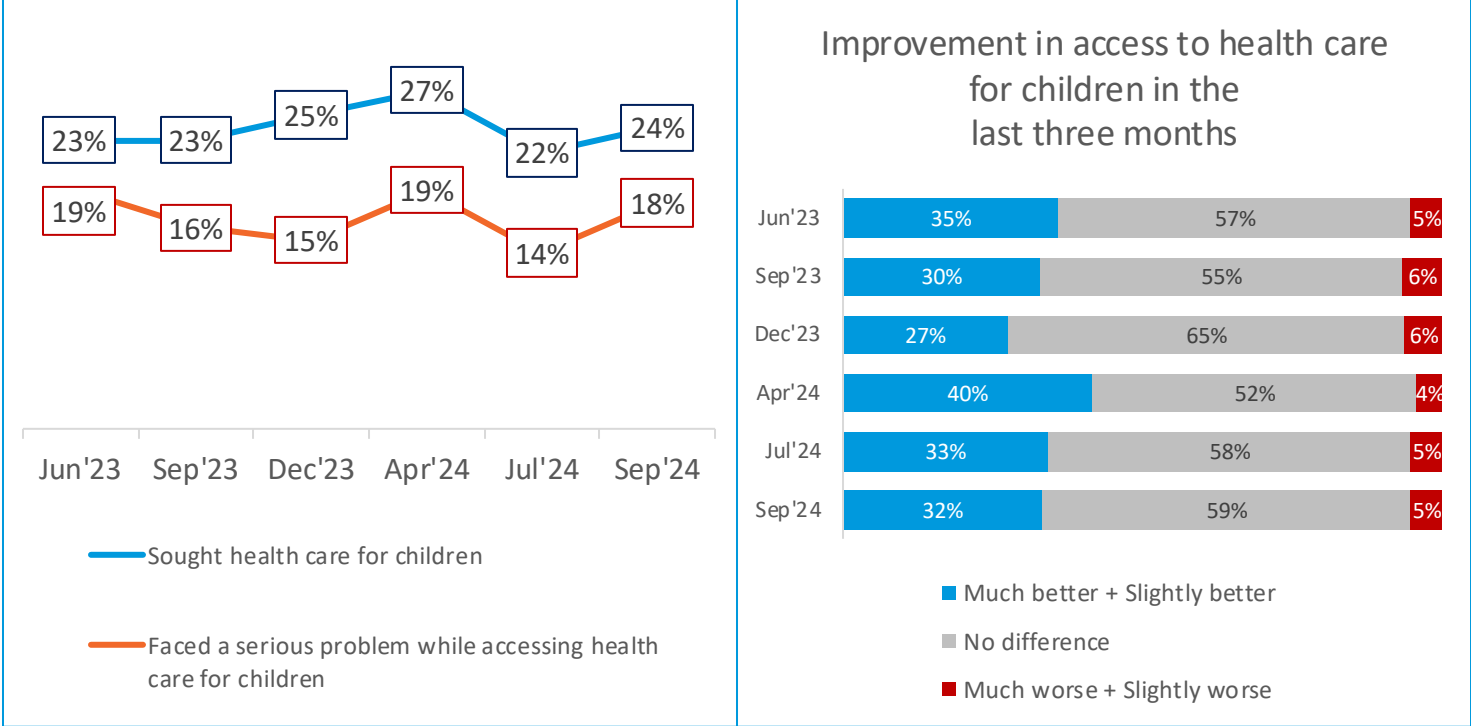
Access to health care for chronic conditions has shown both stability in prevalence and persistent challenges over time. The proportion of households with at least one member suffering from a chronic condition remained consistently high, fluctuating between 40% and 44%. Similarly, the percentage of households reporting serious problems in accessing medical care or treatment increased slightly, from 15% in June 2023 to 18% in September 2024.

Barriers to accessing health care for chronic conditions have remained consistent, with financial and systemic issues being the most frequently cited obstacles. In September 2024, nearly half of the respondents (49%) reported lacking the financial means to pay for treatment, diagnostics, or medicines, which represents an increase from 40% in June 2023. Similarly, the proportion identifying the high cost of services as a barrier rose significantly, from 29% to 47% during the same period.

Systemic challenges, including unavailability of doctors, small range of diagnostic services, and limited health-care facility hours, persist as critical impediments to care.

Jun'23: n=1642	Apr'24: n=1045
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Access to health care for children



Barriers in accessing health care for children						
	Jun'23 (n=70)	Sep'23 (n=60)	Dec'23 (n=27)	Apr'24 (n=53)	Jul'24 (n=23)	Sep'24 (n=42)
Price of the service too high	30%	27%	41%	19%	22%	26%
Not enough money to pay for treatment/diagnostics/medicine	27%	22%	41%	17%	22%	24%
Doctor not available	19%	28%	30%	19%	35%	19%
Limited working hours of the health-care facility	16%	18%	11%	19%	4%	17%
Diagnostics not available	13%	17%	22%	11%	13%	14%
Too dangerous to try to receive care and/or treatment	21%	3%	15%	17%	17%	12%
Health-care facility closed	16%	12%	0%	11%	4%	12%
Other reasons	13%	5%	7%	15%	17%	7%
Could not get to the health-care facility/no health-care facility nearby	10%	13%	7%	13%	13%	7%

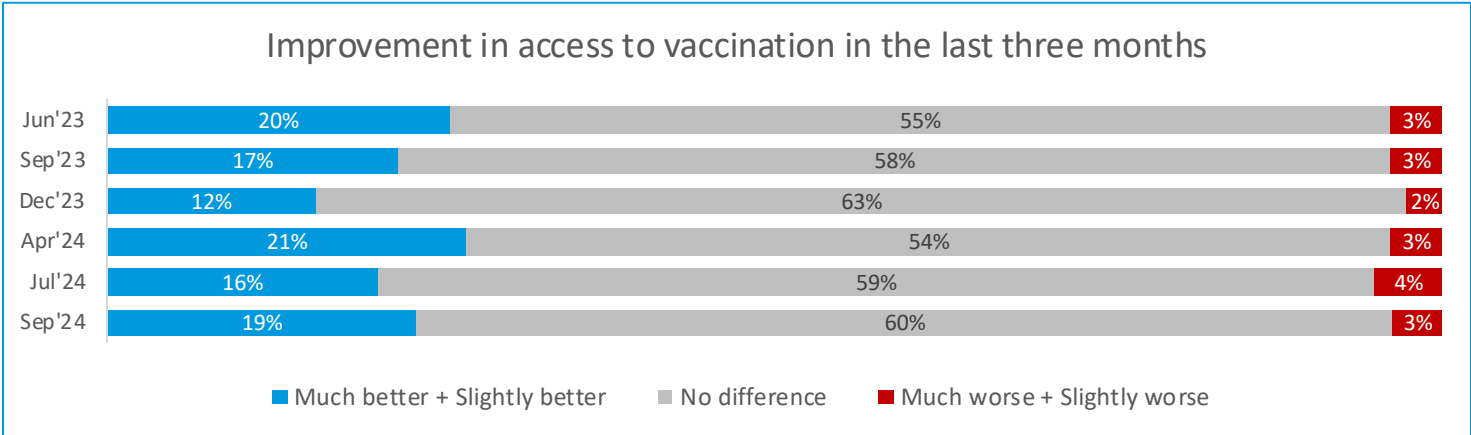
The findings indicate that 24% of households sought health care for children in September 2024, consistent with previous survey periods, where the percentage ranged from 22% to 27%. Among these, 18% faced serious problems in accessing health care, representing a decrease from earlier periods, such as 19% in June 2023. While the proportion of households seeking health care for children remains stable, barriers to access persist, affecting a significant subset of families.

Key barriers reported by respondents include financial constraints and resource availability. The proportion of households citing high price of services as a barrier has remained relatively stable, at 25–27% across survey periods. Similarly, inability to pay for treatment, diagnostics, or medicines was reported by 24% of households in September 2024. Notably, the percentage of respondents mentioning unavailability of doctors as a challenge has decreased from 35% in June 2023 to 19% in September 2024. Other barriers, such as limited working hours of health-care facilities and unavailability of diagnostics, have shown little variation, remaining consistent at around 14–18%. However, one third of the households mentioned improvement in access to health care for children in September 2024.

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Access to vaccination

	Attempted to obtain routine vaccination for a child	Received routine vaccination for a child	Attempted to obtain tetanus diphtheria vaccine for adults	Received tetanus diphtheria vaccine for adults	Attempted to obtain COVID-19 vaccine	Received COVID-19 vaccine
Jun'23	16%	85%	9%	75%	14%	80%
Sep'23	16%	87%	10%	82%	12%	85%
Dec'23	14%	89%	6%	83%	8%	86%
Apr'24	12%	80%	9%	71%	11%	74%
Jul'24	10%	92%	30%	67%	8%	86%
Sep'24	16%	87%	11%	69%	11%	81%

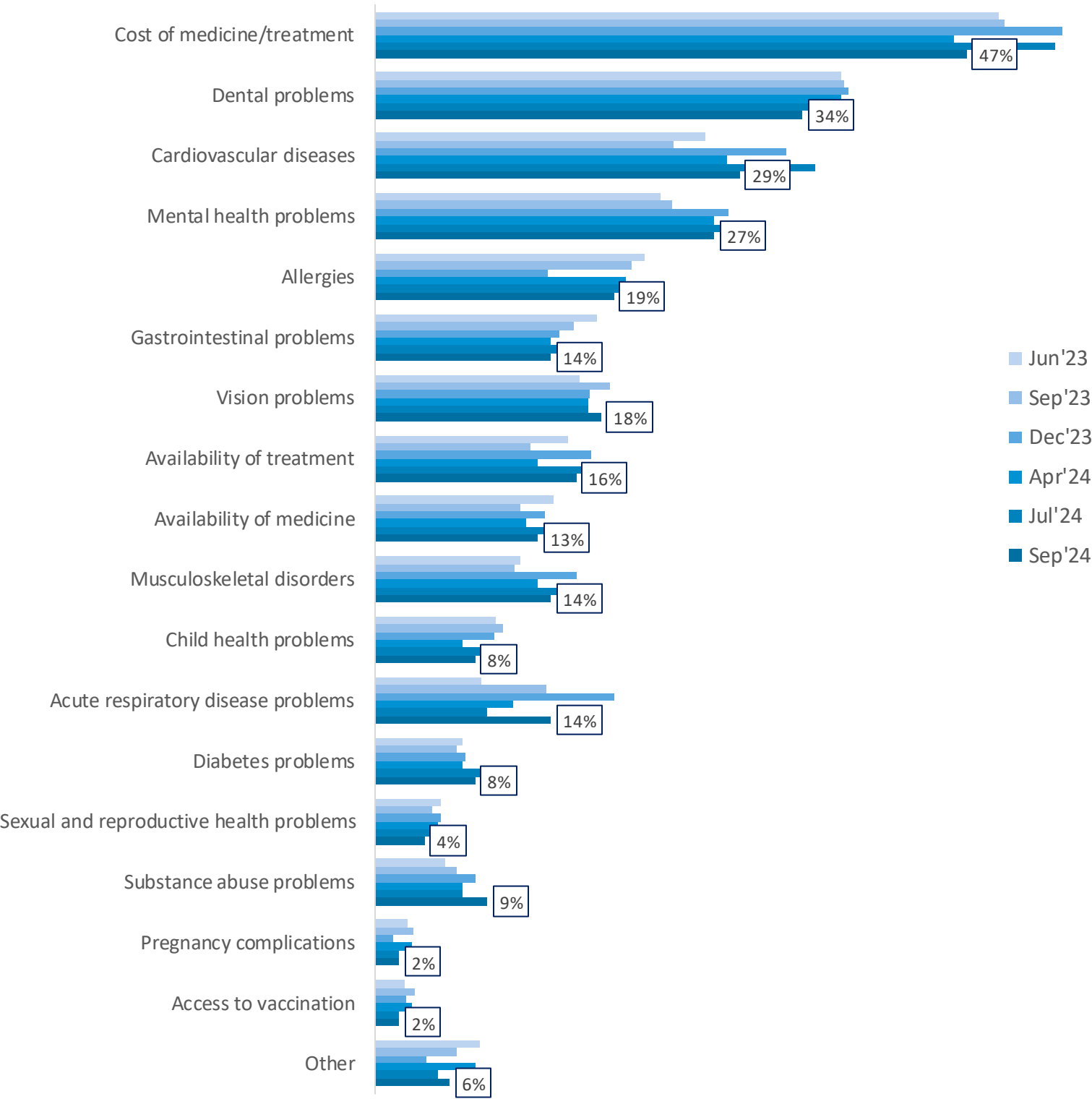


The data on vaccination access highlight trends in respondents’ efforts to secure routine and COVID-19 vaccinations, as well as perceived changes in access over time. The proportion of people attempting to obtain routine vaccinations for children has remained consistent, with 16% in both June 2023 and September 2024. Among those who attempted, success rates for receiving routine vaccinations remained high, at 86–92% across the survey periods. Similarly, attempts to obtain tetanus vaccinations for adults have fluctuated slightly, with the proportion declining from 10% in June 2023 to 8% in September 2024, though success rates for those who tried remained relatively stable at 67–83%.

The COVID-19 vaccination data indicate that efforts to obtain these vaccines have decreased, from 14% attempting in June 2023 to 11% in September 2024. Among those who attempted, the proportion receiving the vaccine was consistent at 81–86%. This suggests that access for those seeking COVID-19 vaccinations remains stable, though overall demand appears to be declining over time. The data also reflect respondents’ perceptions of access to vaccination over the last three months. In September 2024, 19% reported improved access, an increase from 16% in July 2024, while the majority (66%) perceived no difference in access during this period.

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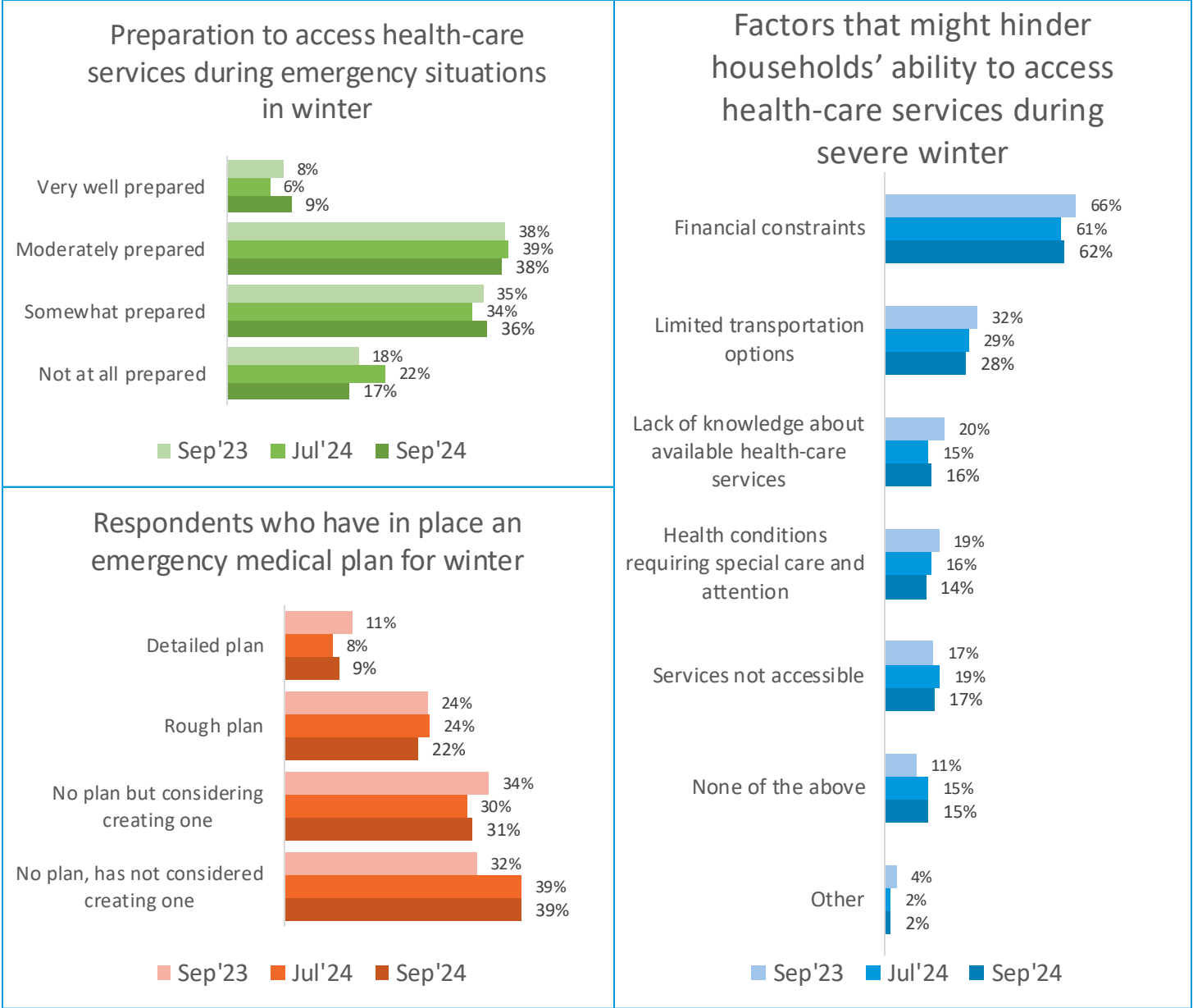
Main future health problems



Looking ahead, cost of medicine and treatment remains the most critical future health problem, consistently highlighted by respondents. Other significant future health problems include dental issues, cardiovascular diseases, and mental health issues.

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Winter preparedness



The findings from the Winterization Section highlight varying levels of household preparedness to access health-care services during emergencies in winter. While a small proportion of households reported being "very well prepared". The majority of respondents consistently identified as either "moderately prepared" or "somewhat prepared," with these categories remaining largely stable over time. Encouragingly, the percentage of households reporting that they were "not at all prepared" decreased from 22% to 17% over the same period. Barriers to accessing health-care services during severe winter conditions remain significant, with financial constraints continuing to be the primary challenge for most households. This factor affected 60% of respondents in September 2023, rising slightly to 62% by September 2024. Issues related to the accessibility of services and the need for specialized care remained relatively unchanged, reflecting ongoing systemic challenges.

Emergency medical planning remains an area of concern, with a considerable proportion of households lacking adequate plans to address health-care needs during winter emergencies. While the percentage of households with detailed emergency plans increased modestly from 11% in September 2023 to 15% in September 2024, a large number of households (39% as of September 2024) reported having no plan and no intention to create one. This marks a slight improvement from the 43% recorded in September 2023, but underscores the need for greater emphasis on preparedness.

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Limitations

The study team acknowledges that the emergency context places certain limits on the study and representativeness of the sample based on the available network of Premise contributors registered on the portal. It is expected that some population groups will not be reached, including older people, those with limited telephone access or with connectivity issues, as well as disadvantaged groups such as migrants, people who are homeless, or people with mental health problems. These population groups can bear a heavier burden from the emergency than the average Ukrainian citizen. The survey does not claim to represent their views, and the social benefit of the study may therefore decrease. Consequently, the findings of the investigation must be interpreted in this context.

A further limitation of the study is that the components included in the instrument were widely used in emergency situations. However, few of them were validated through a rigorous process in the context of war. This is due to the ethical principles of data collection during an emergency and priority setting for efforts, and it needs to be considered a limitation in the interpretation of the findings.

Self-reported behaviours may differ from actual behaviours because of the social desirability effect, and behavioural findings should be interpreted with this limit of reliability in mind.

Notwithstanding these limitations, these frontline area rapid assessment of health needs can bring and contribute important knowledge that will inform response and recovery planning.

Abstract

This study revealed variations in access to health-care services in frontline oblasts in Ukraine from June 2023 to September 2024, indicating a general trend of good or average health status and accessible health-care services. However, cost was identified as a significant barrier to accessing health-care services. Additionally, availability of medicines posed challenges, with 9% of respondents reporting difficulties in access.

Future health-care needs primarily revolved around concerns related to cost of medicines and treatment. Dental problems, cardiovascular diseases, and mental health issues were prevalent among the identified health-care needs.

These findings underscore the critical importance of addressing barriers to health-care access and enhancing the availability of medicines, particularly in affected areas.

Acknowledgements

This factsheet was prepared by the WHO Country Office in Ukraine: Denys Dmytriiev (Technical Officer (Behavioral and Cultural Insights)) and Nam-Mykhailo Nguen (Technical Officer (Health Surveys)). It was further revised by Dr Tobias Homan (Health Information Officer), Dr Emanuele Bruni (Acting, WHO Health Emergency Programme (WHE) Lead), and Dr Jarno Habicht (WHO Country Office in Ukraine Representative).