In October 2023, 101 848 people were reported to have crossed into Armenia, and this number has not changed as of 27 November. The total number of people affected, including refugees and the local population, is 196 000. It is reported that 48% of the refugees are males and 52% are females.

- The largest vulnerable groups are children (29%), older people (12%) and persons with disabilities (2%).
- UNFPA has reported that there are 2070 women currently pregnant and an estimated 1380 will give birth in the next six months.

Fig. 1. Map of the registered refugee population in Armenia as of 11 December 2023
Health needs and priorities

The results of an inter-agency community-level rapid risk assessment revealed concerns regarding the lack of medicines to manage chronic diseases, assistive devices for persons with disabilities, medical equipment in health-care facilities, and mental health and rehabilitation services.

According to the latest national data, the region hosting the largest number of refugees is Kotayk with 22 350 people, followed by Ararat.

The process of refugee registration for primary health-care services in Armenia is slowing down. During the period from 15 November to 11 December 6324 refugees registered at polyclinics and outpatient clinics, bringing the total registrations to 63 524.

As of 11 December, there are 21 burn patients still hospitalized following the fuel depot explosion on 27 September. They are all receiving treatment at the National Burn Center.

In the period from 27 November to 3 December, 68 COVID-19 cases and zero deaths have been reported. In the period from 4 to 10 December, 81 COVID-19 cases and one death have been reported.

Eligibility for all routine services is granted upon registration. Refugees with documented vaccination records will be entered in the ArMed health information system. Those without documented evidence of vaccination will be vaccinated according to the national catch-up immunization schedule used for children who have missed doses. Vaccine administration has begun across primary health-care centres where refugees have been registered. The Karabakh region has historically had very high immunization coverage, but many refugees lack documentation and will be considered unvaccinated by Armenia by policy.

Initial priorities for the health response are outlined in the Public Health Situation Analysis (PHSA).
WHO actions to date

Leadership

- On 2 October 2023, WHO designated the refugee situation a **Grade 2 emergency** and activated emergency procedures.
- Periodic operational reviews are carried out to allow for performance evaluation, course adjustments, and adequate resource allocation.

Partnerships and emergency medical teams (EMTs)

- Under the leadership of the Ministry of Health (MoH), WHO and the International Organization for Migration (IOM) are co-chairing the health sector response to ensure that emergency response activities are coordinated amongst health partners.
- The WHO Country Office in Armenia continues to co-lead the Health Coordination meetings with IOM. As part of the health sector coordination, WHO is collecting 5W data to map activities being carried out by all health sector partners. During the meeting, a map of current ongoing activities based on geographic location and activity type was presented to all health sector partners. The map is being regularly updated and will be used for response planning activities.
- An EMT Coordination Cell (EMTCC) was established by WHO under the leadership of the MoH of Armenia to support the ongoing medical support for burn survivors. As of 28 October, the EMTCC has been deactivated with a total of four EMTs that had been deployed. All EMTs have left the country. Overall, EMTs carried out nearly 600 surgical procedures, dressing changes, and supported early physical rehabilitation.

Health information

- WHO continues to carry out event-based surveillance monitoring from open sources.
- WHO is supporting the rollout of quantitative indicators for the reporting of health sector partners under the Refugee Response Plan.

Health operations

- Between 2 October and 27 November, WHO deployed 29 surge staff to Armenia, including WHO leadership deployments, as part of WHO’s support for the emergency response.
- WHO continues mental health and psychosocial support (MHPSS) activities for refugee and host populations with the support of implementing partners.
  - WHO established a MHPSS mobile team – a multidisciplinary team that includes a social worker, a child and adult psychiatrist, and psychologists.
  - Between 16 October and 25 November, 541 people received MHPSS consultations (of which 16% were children and 35% were older people). WHO continues to build the capacity of the existing MHPSS hotline. From 13 October to 23 November, a total of 714 calls were received.
  - In the period from 7 October to 25 November, 149 people received MHPSS support at the National Burn Center in 629 sessions: 96 burn patients (463 sessions), 32 family members (98 sessions) and 21 medical staff (68 sessions).
• Between 3 and 10 December, WHO conducted a basic psychosocial skills and self-care training for 120 nurses in the Kotayk province, as well as approximately 100 nurses from Yerevan, as part of a training series that reached approximately 300 nurses in the Yerevan, Ararat, Gegharkunik and Kotayk provinces.

• A scale-up of the response to the ongoing measles outbreak in the country is under way. A nationwide catch-up immunization effort will be conducted from 17 October to 17 December to vaccinate children who have fallen behind schedule and to fill immunity gaps in the domestic population.

• Around 20 000 copies of measles, polio and HPV factsheets have been produced and will be distributed to primary health-care facilities.

• WHO visited the Nor-Nork and Shengavit Elderly Care Centre as part of the WHO-MoH Influenza Vaccination Campaign, aimed at raising awareness about infectious diseases and providing influenza vaccinations for the beneficiaries of social care centres, including refugees.

Risk communication, community engagement and infodemic management (RCCE-IM)

• WHO co-developed a package of RCCE-IM materials with the MoH. The package includes a set of materials on mental health, access to health care, health-care system navigation, ways to stay healthy in fall/winter and respond to the spread of influenza, COVID-19 and other respiratory viruses. In addition, WHO launched a social media campaign to promote these RCCE-IM messages and materials. The following materials were developed:
  o seven factsheets on stress, dementia, suicide, postnatal depression, mental health disorders, and mental health myths and facts;
  o one information brochure and one poster on the spread of influenza and acute respiratory infections;
  o one information brochure and one poster on access to health care and on health-care system navigation for refugees; and
- one [Frequently Asked Questions (FAQ)] page on the provision of medical care for refugees – posted on the MoH website.
- A social media campaign on mental health continues. The campaign includes up to 17 social media posts with a call to action on the most pressing mental health issues, including self-care, stress, depression, dementia, mental health myths and realities, importance of mental health, and information on where to seek help.
- WHO, in collaboration with the MoH, created an animation on access to health care for refugees. The animation was posted on the MoH Facebook page, with a reach of around 90 000.
- WHO regularly shares media monitoring reports with the MoH to facilitate informed planning and implementation of RCCE-IM activities.
- WHO developed a social media campaign to promote the FAQ page on the provision of medical care for refugees.

**Emergency communications**

- WHO published Armenia refugee response situation report No. 6 on the [WHO/Europe website](https://www.euro.who.int/privacy-policy) and social media channels: Facebook, X/Twitter, LinkedIn, Instagram.

**Supplies and logistics**

- WHO had prepositioned trauma supplies for over 200 patients at the end of August 2023.
- On 6 and 7 October, WHO delivered 10 burn modules from TESK kits to support advanced care needs for 500 burn patients, in addition to five noncommunicable disease modules comprising medicines and insulin that will cover three months of treatment for up to 50 000 people.
- Since mid-September, WHO has dispatched 1672 kilograms of supplies valued at over US$ 71 300.

**Resource mobilization**

- The WHO Regional Office for Europe has established an Emergency Donor Appeal for Armenia for a total of US$ 2.9 million for the next six months.
- UN Armenia has requested US$ 97 million as part of the [Armenia Refugee Response Plan](https://www.euro.who.int/privacy-policy) to provide urgent humanitarian aid and protection to refugees and those generously hosting them in Armenia, in support of the government-led response.
  - The health sector has expressed the need for over US$ 10.5 million for the health sector interventions to be conducted under the overall coordination of the MoH.
  - WHO received funding from the Central Emergency Response Fund to implement priority health activities as outlined in the Refugee Response Plan. It focuses on mental health, health workforce capacity building, immunization, and procurement of medication supply and equipment.

**Next steps**

- Extend the existing MHPSS programme to affected refugee and host populations.
- Enhance surveillance and response for disease outbreaks (such as measles in Armenia).
- Expand risk communication and community engagement activities.
- Increase immunization activities for measles, polio and COVID-19.