

Poland survey on the health of refugees from Ukraine

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Content



- Background
- Overview collaboration, methodology, monitoring
- Selected key health findings 2022 vs 2023 surveys on the health of the refugee from Ukraine

More than a billion people are on the move, globally

300 M

International Migrants
(2022 estimate)

100 M

Forcibly Displaced
(May 2022)

36 M

Children
(2020)

At no time have more people been on the move

Let's make their health needs visible to achieve health for all

Ukraine emergency—by numbers

27.1^{*} M Border crossings from Ukraine

17.3^{*} M Border crossings to Ukraine

6.5 M Refugees recorded across world (6.0 million in Europe)

1.0 M Refugees from Ukraine in Poland/under temporary protection

3.7 M Internally displaced

“Health does not begin or end at countries' borders”

* <https://www.statista.com/statistics/1310270/number-of-refugees-from-ukraine/#:~:text=Total%20number%20of%20border%20crossings%20from%20and%20to%20Ukraine%202022%2D2023&text=As%20of%20September%2012%2C%202023,invasion%20of%20the%20country%20began.>

Health of Refugees from Ukraine in Poland

The 2022–2023 surveys and data innovations: a collaborative effort

Collaborative effort between health and statistical agencies demonstrates the immense gains for partnership in advancing data-driven humanitarian responses, ensuring that no one is left behind in times of crisis.

This is even more remarkable when striving to develop innovative solutions to understand and address health challenges of mobile populations.



Health of Refugees from Ukraine in Poland

The 2022–2023 surveys and data innovations: a mixed-method approach

Quantitative – in 2023, collected data from 4800 refugees in households, and temporary accommodation establishments and at the Polish-Ukrainian border.

Qualitative - To get a better understanding of the experiences the refugees have had with health care services; qualitative behavioural insights research was undertaken by carrying out 30 in-depth interviews with a selected group of questionnaire respondents to elicit further information about health service needs and access.

Integrated - Data integration of three kinds of data sources – survey, administrative records and the big data – the latter in turn includes both the geospatial data through mobile network operators for locating the mobile populations, as well as payment card operator data to get precise expense pattern of healthcare by the Ukrainian refugees **(Big Data!)**.

Health of Refugees from Ukraine in Poland

Monitoring of refugees – general assumptions

- The primary source of information is the questionnaire „Health of refugees from Ukraine”.
- It is a questionnaire-based survey, carried out at selected border crossings using by interviewers the face-to-face interview method.
- The survey of refugees is a representative survey conducted at 4 border crossings on the Polish-Ukrainian border: Korczowa, Medyka, Budomierz and Hrebenne.
- Participation in the survey is voluntary.
- We interview Ukrainian citizens leaving Poland who declare themselves as refugees.

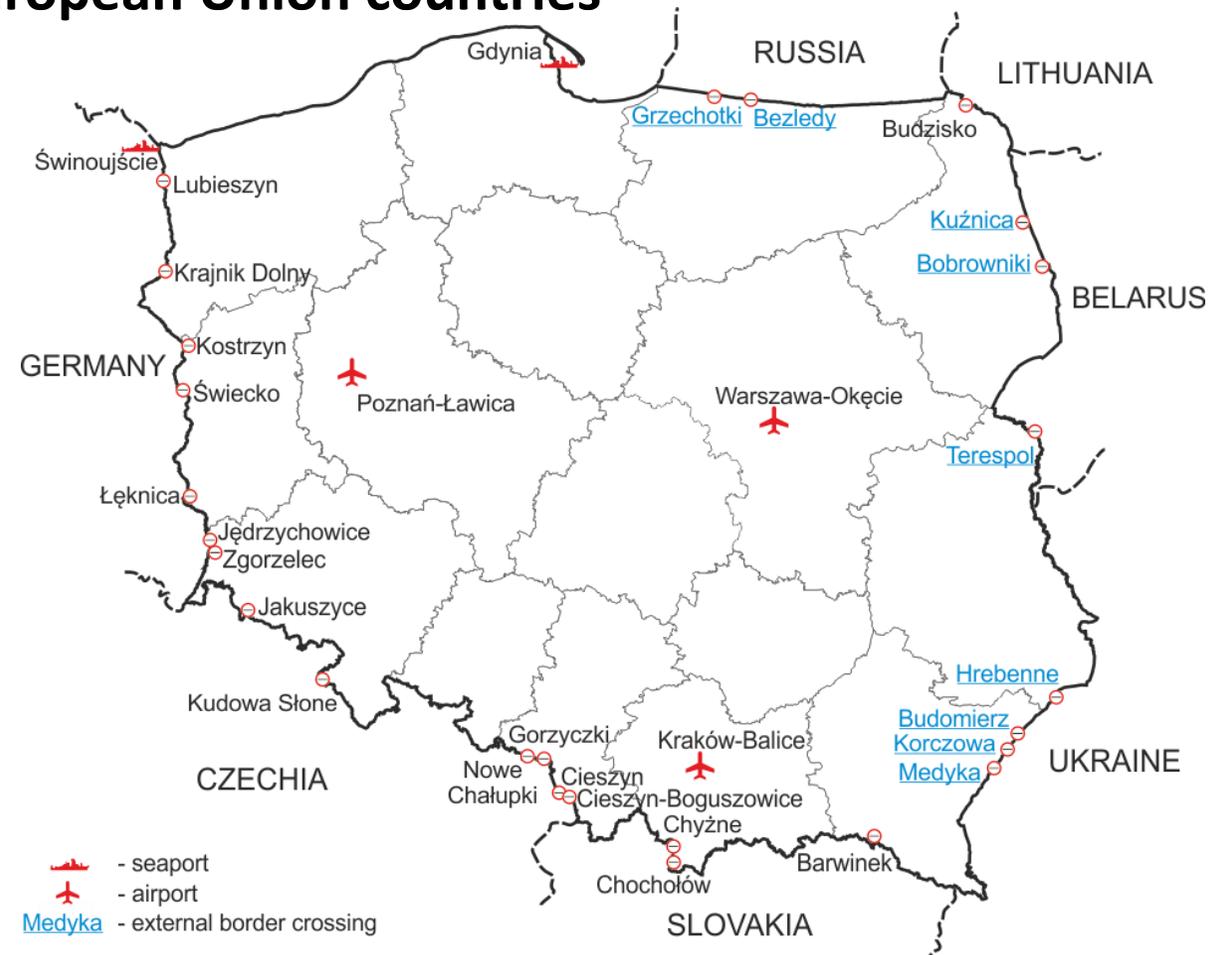
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Monitoring of refugees as a module

Travels of non-residents to Poland. The movement of vehicles and persons at the Polish border with the European Union countries

Crossings in 2024 survey:

- 17 land border crossing points at the internal EU border,
- 9 land border crossings at the external EU border,
- 3 airports,
- 2 seaports.

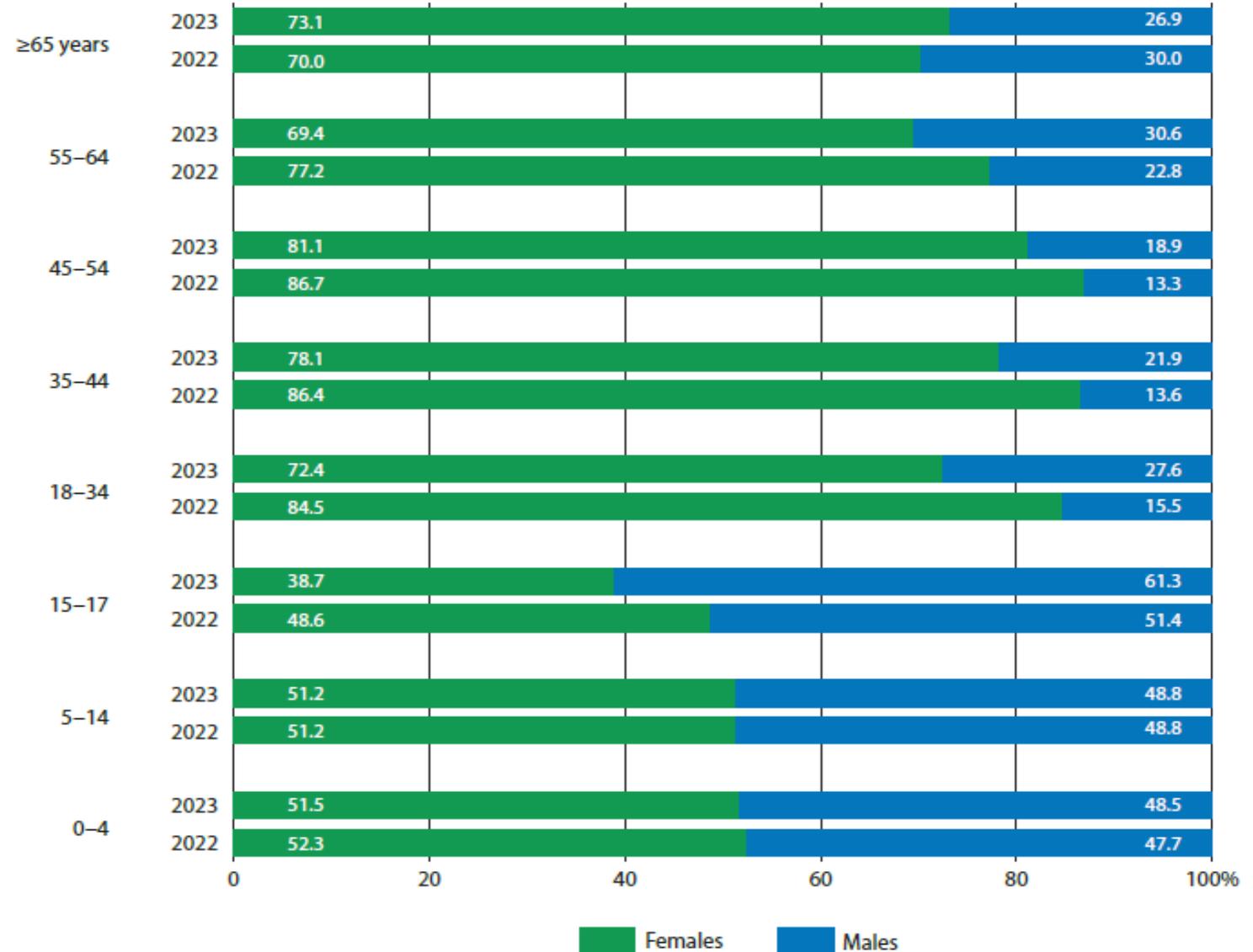


Health of Refugees from Ukraine in Poland

Comparative findings from 2022-2023 surveys

Demographics of the refugee population in Poland

Among the refugees, 65.4% were females, comprising 74.9% of adults and 48.5% of children under 18 years old. The majority of women fell between the ages of 18 and 54 years



Health of Refugees from Ukraine in Poland

Comparative findings from 2022-2023 surveys

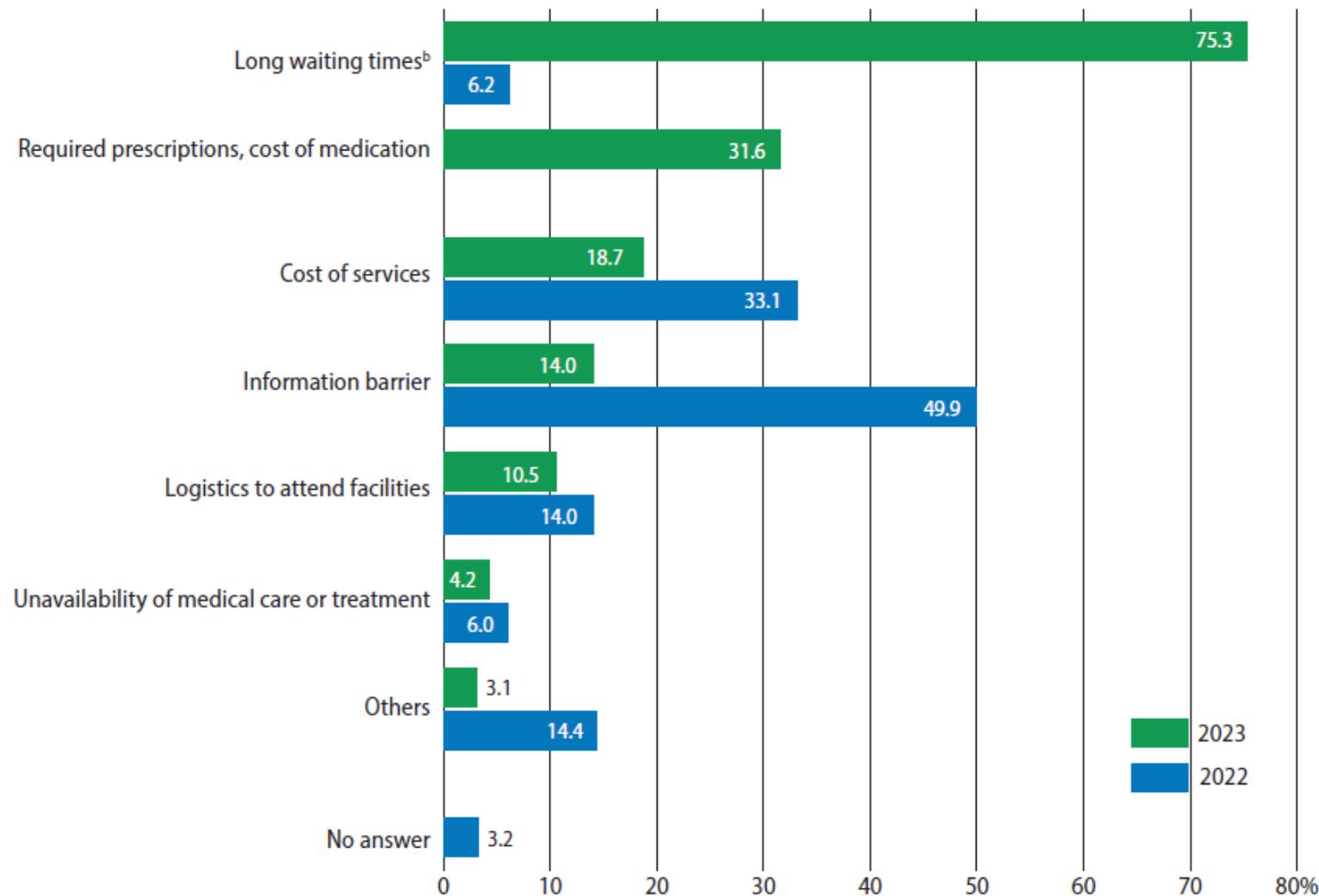


The healthcare needs reported in the 30 days preceding the interviews marked an increment of 12.1 percentage points, which could reflect a shift in healthcare needs and information-seeking behavior.

Comparative findings from 2022-2023 surveys

Barriers to accessing healthcare

The 2023 survey identified long waiting times as the most frequent obstacle to accessing health care. A plausible explanation for the rise might be the increased use of public health services and specialized care by refugees, as Polish citizens also reported experiencing this issue.

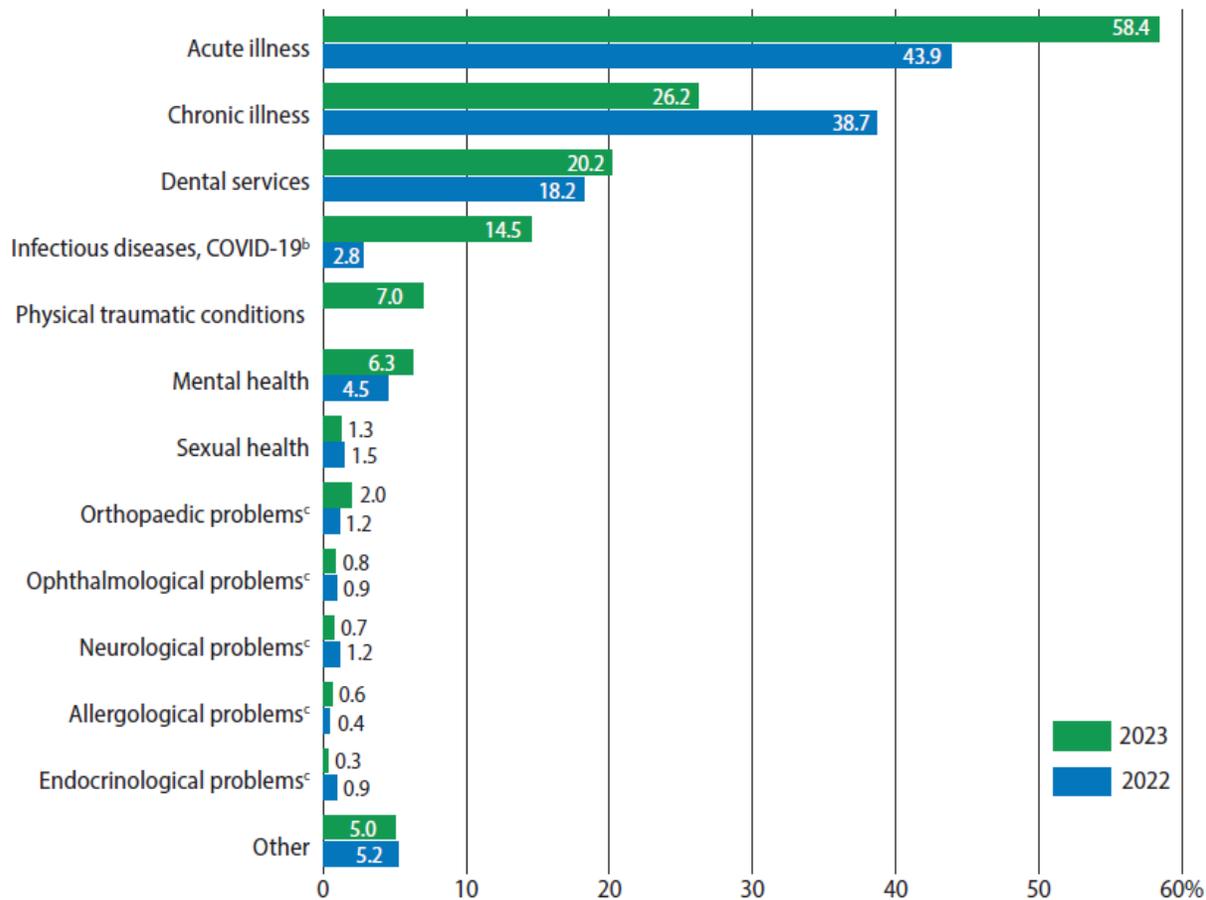


a Refers to people needing health care in the 30 days prior to the survey. The respondent could give more than one answer.
b In 2022, the most frequent responses from the "other" category; in 2023, a separate category.

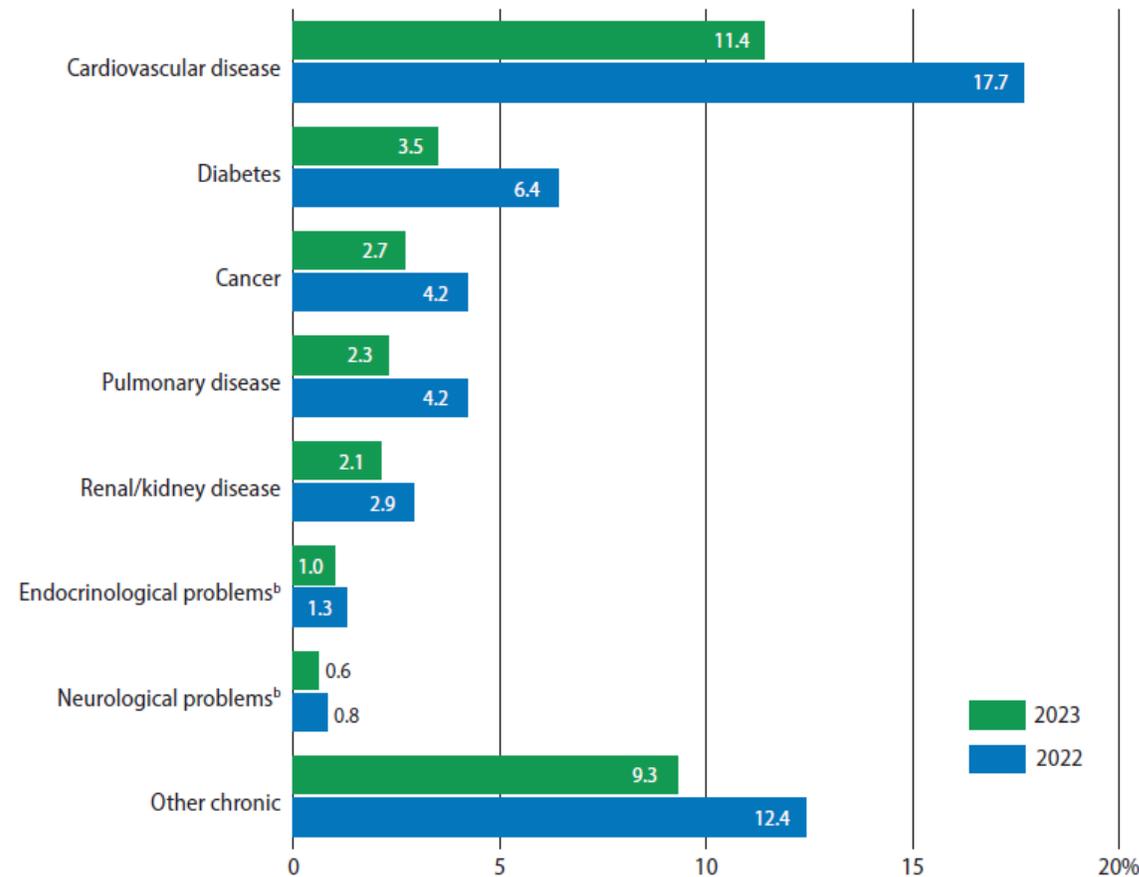
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Comparative findings from 2022-2023 surveys

Refugees' health conditions and care sought

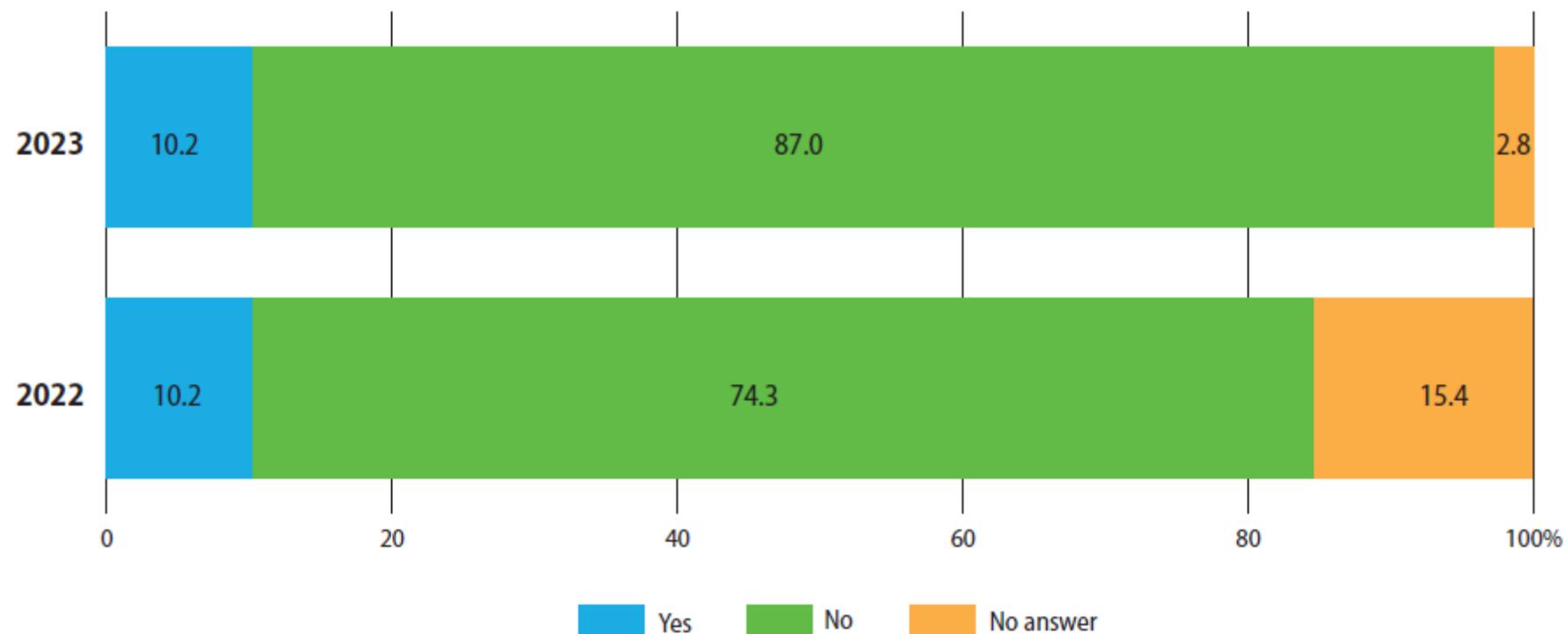


Refugees' health conditions and care sought for chronic illnesses



Comparative findings from 2022-2023 surveys

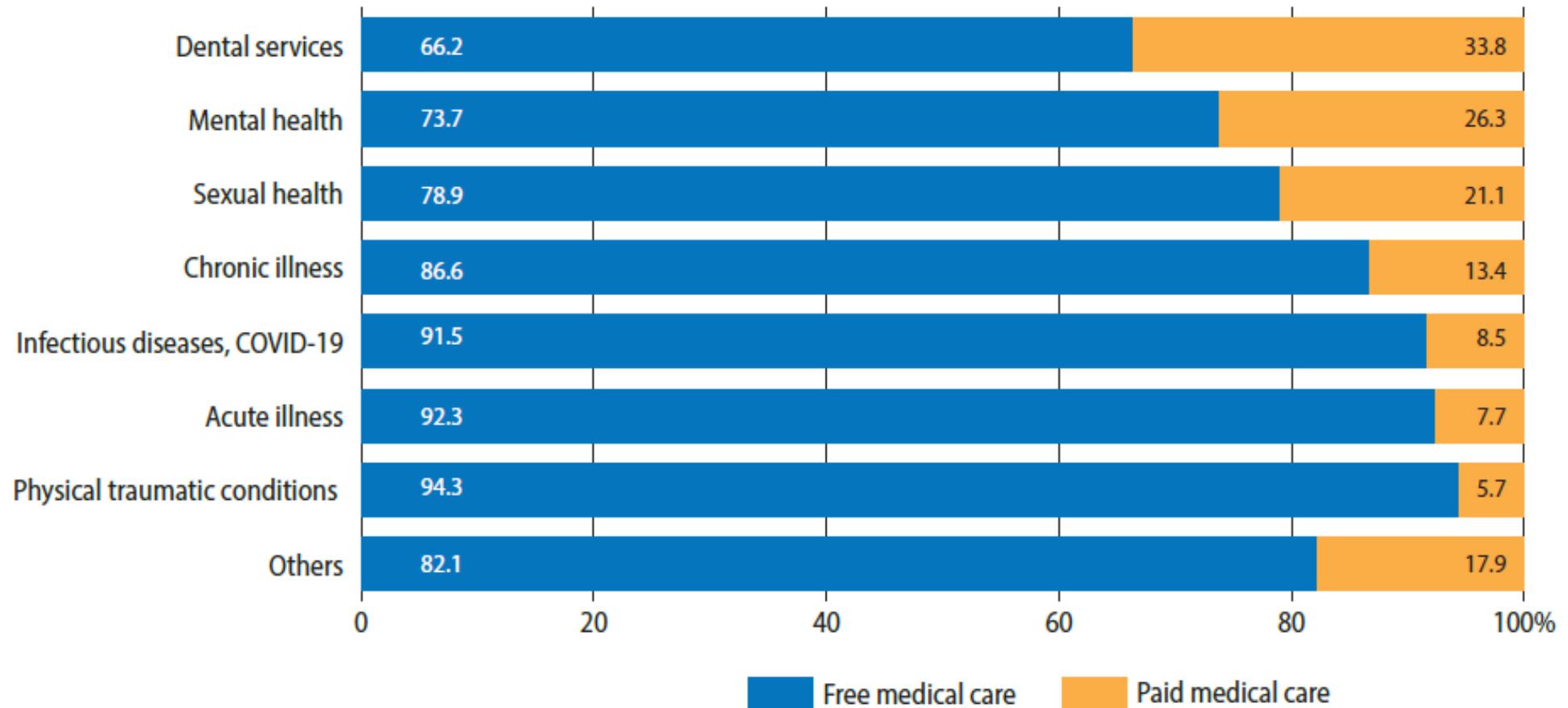
Share of income/savings spent on health care costs



The comparison of 2022 and 2023 surveys showed a clear reduction of out of pocket expenses. However, out-of-pocket costs for some health care services and medicines pose a substantial financial burden, a challenge they share with Polish citizens.

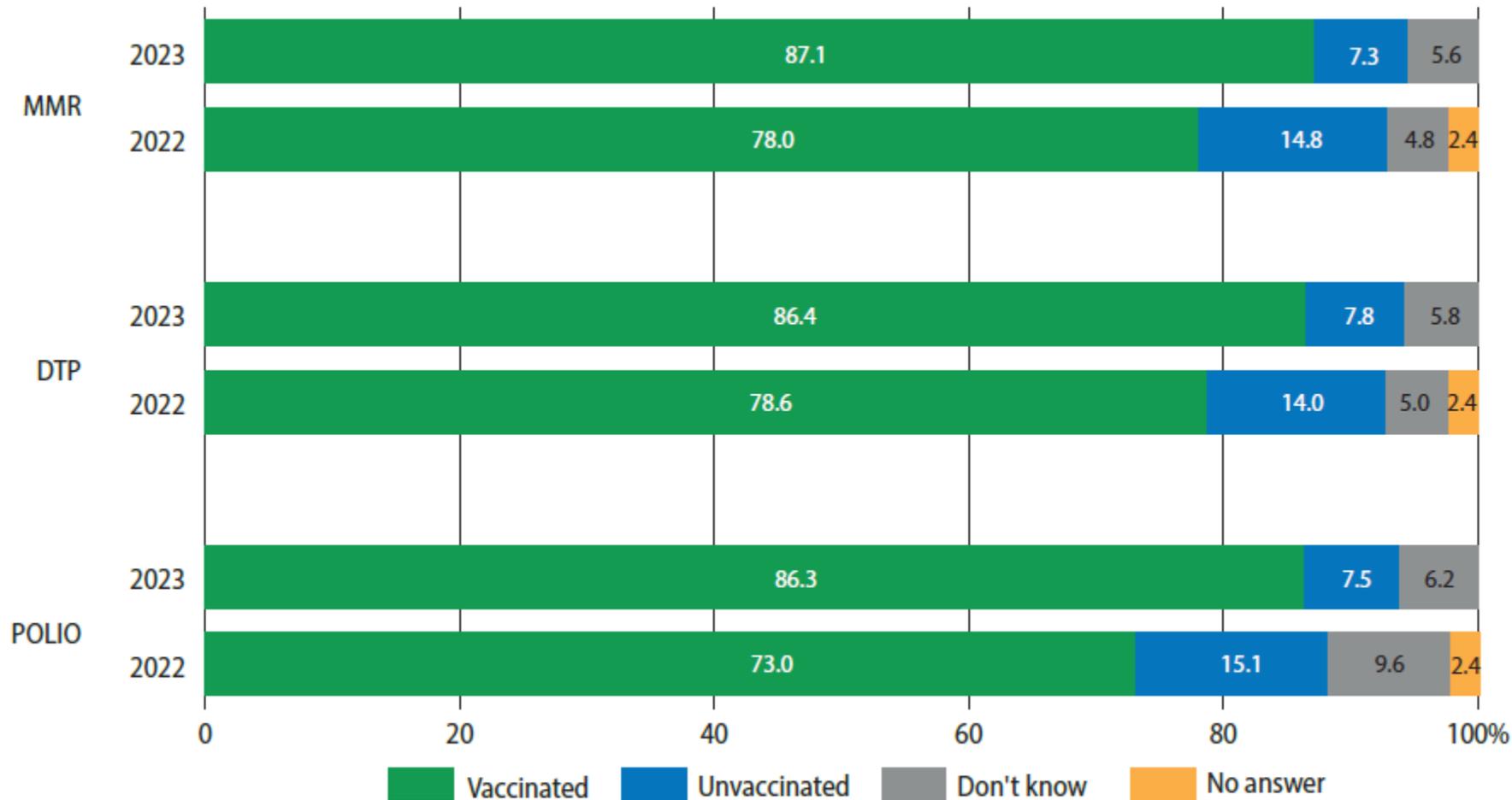
Health care services in 2023 survey

Types of health care: share of out-of-pocket expenses



Comparative findings from 2022-2023 surveys

Declared vaccination status of children aged 1–4 years



The percentage of unvaccinated children decreased by 50%.

Comparative findings from 2022-2023 surveys

Mental health and psychological support

Limited use MHPSS services (possibly perceived lack of need/ cultural factors / reluctance to acknowledge the need for therapy).

Fig. 17. "Is there anyone in your household currently so upset and anxious that it affects the person's daily functioning?"

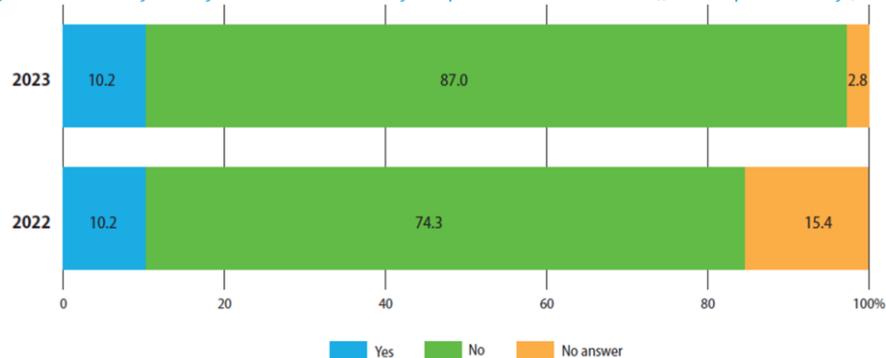
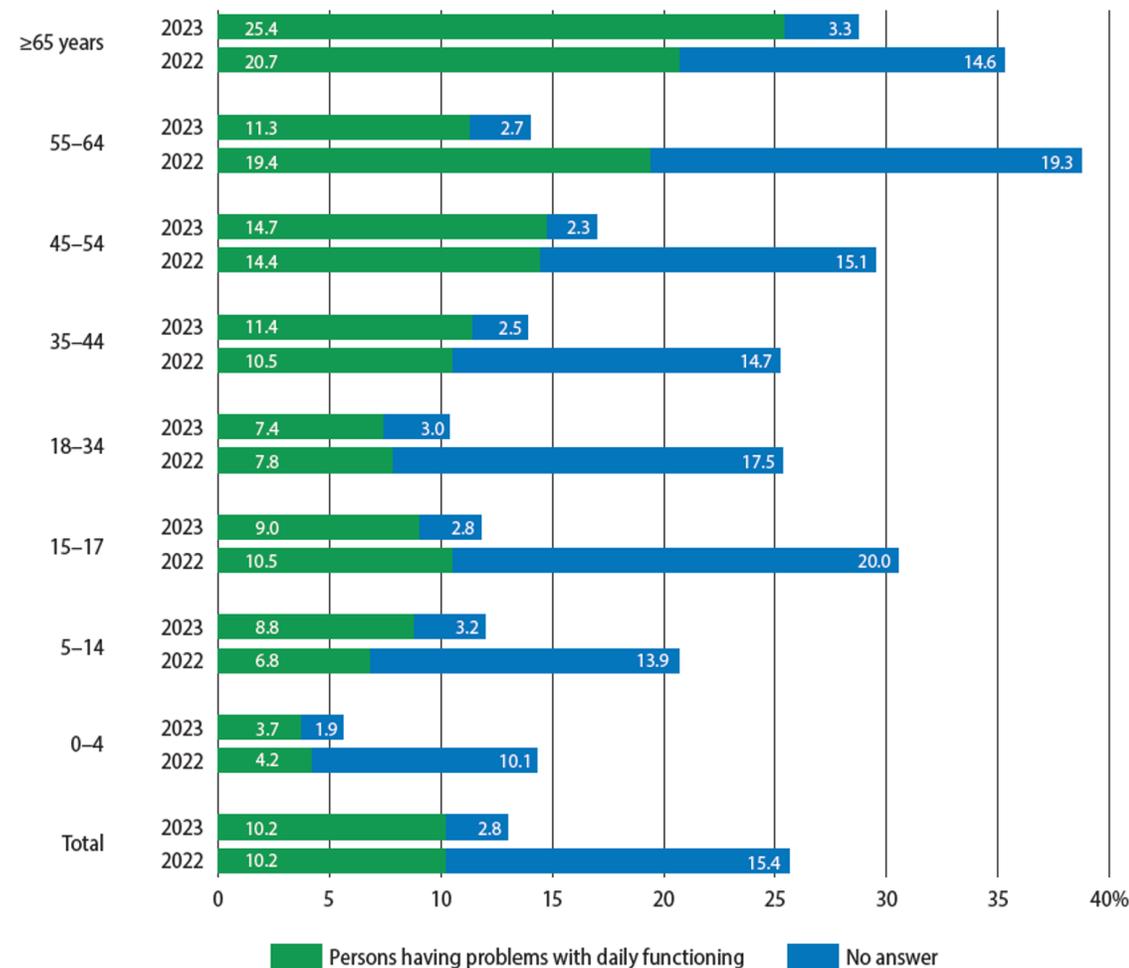


Fig. 18. People having problems with daily functioning by age group



Inequality lens – Refugees in temporary versus permanent accommodations

Access to healthcare

More likely to cite the barriers of requiring prescriptions and the high costs of medicines and services than refugees in permanent residences.

Financial burden

Proportion of refugees spending >25% of their income/savings on health care for refugees in temporary accommodation is twice as high as among refugees in permanent accommodation (24.5% and 12.7%, respectively).

Mental health

Refugees in temporary accommodation face almost double the mental health issues as those in permanent one (19.3% and 10.1% respectively).



Thank you

For more information:

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