

2016

# HUMANITARIAN NEEDS OVERVIEW

PEOPLE IN NEED

3.1M

NOV 2015



UKRAINE

This document is produced on behalf of the Humanitarian Country Team and partners.

This document provides the Humanitarian Country Team's shared understanding of the crisis, including the most pressing humanitarian need and the estimated number of people who need assistance. It represents a consolidated evidence base and helps inform joint strategic response planning.

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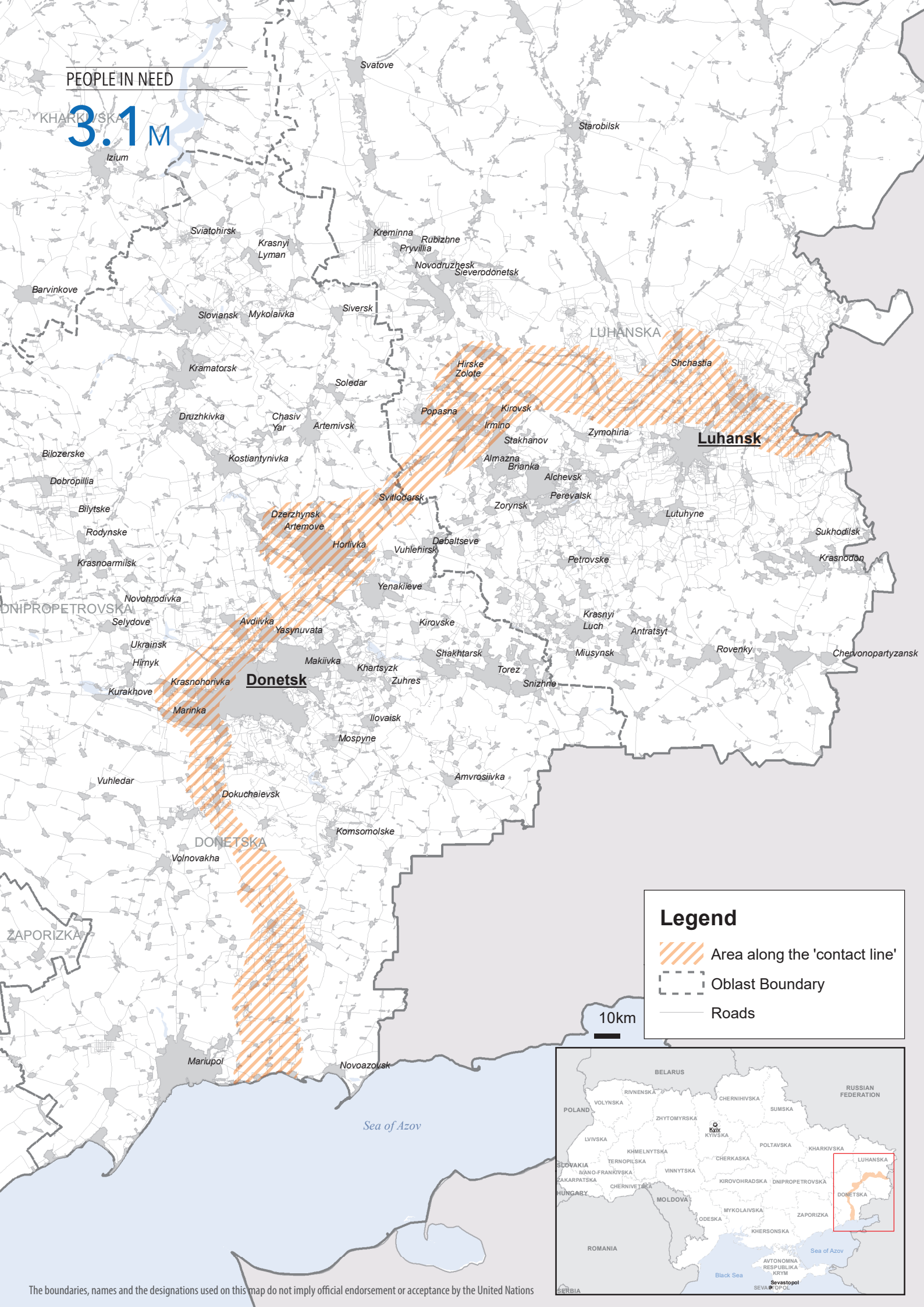
[www.humanitarianresponse.info/en/operations/ukraine](http://www.humanitarianresponse.info/en/operations/ukraine)

# PART I: SUMMARY

- 
-  Humanitarian needs and key figures
  -  Impact of the crisis
  -  Breakdown of people in need
  -  Severity of need

PEOPLE IN NEED

3.1M



**Legend**

- Area along the 'contact line'
- Oblast Boundary
- Roads

10km

The boundaries, names and the designations used on this map do not imply official endorsement or acceptance by the United Nations

**HUMANITARIAN**

# NEEDS & KEY FIGURES

The conflict that started in eastern Ukraine in April 2014 and intensified towards early 2015 resulted in significant human loss, extensive suffering and significant civilian displacement. Despite the signing of Minsk II Agreements in February 2015, insecurity continued in several locations along the 'contact line' between Government forces and armed groups. The September 2015 renewed ceasefire agreed by parties to the conflict to enable the start of the school year has been largely holding and marked a significant reduction in clashes and shelling, bringing partial relief for people who had been living under the threat of violence for many months. Nonetheless, the conflict is yet to be resolved and continues to have a disproportionate impact on civilians living in affected areas. Humanitarian organizations estimate that, as of October 2015, at least 3.7 million people have been affected in Ukraine both directly and indirectly, and 3.1 million of them need humanitarian assistance. The reduced number of people in need of humanitarian assistance in comparison to the estimates of HRP 2015 is a result of a more accurate reflection of assessments and population data analysis.

## HUMANITARIAN NEEDS

**1 Protection**  
The conflict is having a disproportionate impact on civilians who are paying the highest price with lives lost, major displacement and enormous suffering endured. Armed clashes and indiscriminate shelling resulted in civilian deaths and injuries; massive displacement; significant damage and destruction of housing, property and infrastructure hampering access to water, health and social services. People's right to freedom of movement has been of significant concern due to the presence of armed actors and security constrains. While the level of violence has reduced, civilians continue to lose lives due to UXO and mine contamination spread across civilian settlements, agricultural fields, roads and bridges. Stretched resources and burden on communities hosting IDPs lead to social tension.

**2 Access**  
Since the end of 2014 access to commercial supplies of food and medicines, as well as social services and welfare payments has been suspended for civilians living in the areas along the 'contact line' and beyond Government control. A number of basic infrastructure facilities have been damaged or destroyed, further hindering access of civilians to basic services. At the same time, bureaucratic impediments by parties to the conflict have been severely curtailing humanitarian access.

**3 Emergency Water, Food, Health & Shelter**  
Time-critical humanitarian needs of conflict-affected population in water, food, health and shelter continue to be acute, especially for those living close to the 'contact line'. Security concerns for population remain and the situation is of special concern as the population in conflict-affected areas braces for the second winter when the temperature can drop to minus 20 degrees Celsius.

**4 Access To Critical Basic Services, Markets**  
Ukraine's capacity to provide basic services exists, this has been put at severe strain by the conflict. Critical infrastructure such as water, gas, electricity and heating, which are highly interdependent and serve both sides of the 'contact line', are severely weakened and suffered damages. Markets and financial services are disrupted, especially in areas beyond Government control. Complementary humanitarian and longer term actions are urgently required to avoid the further deterioration of the humanitarian situation. The basis for rehabilitation of infrastructure, human capacity and economic, social and legal resources need to be laid down today.

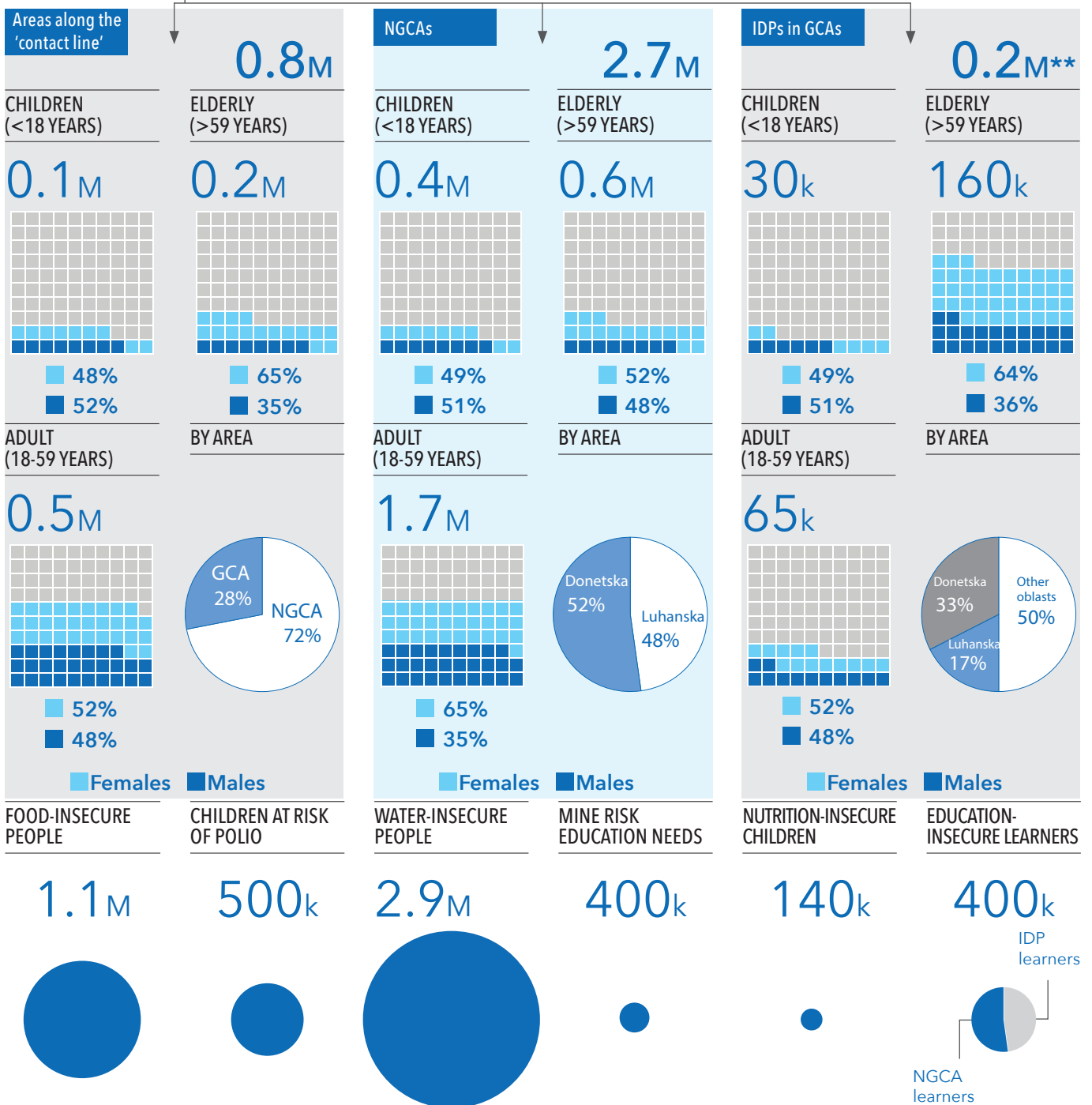
TOTAL POPULATION



NUMBER OF PEOPLE AFFECTED



NUMBER OF PEOPLE IN NEED OF HUMANITARIAN ASSISTANCE



\* Based on population estimates by the Ukrainian Statistics Service as of 2013

\*\* MoSP registered 1.6 million IDPs, countrywide. All of them need different type of assistance. Between 0.8 and 1 million IDPs reside permanently in GCAs, while others move frequently across the 'contact line' and, for the purpose of the HNO, are accounted for in the population figure of those living in NGCAs. Among those living in GCAs, 0.2 million IDPs, the most vulnerable, are in need of life-saving humanitarian interventions.

## IMPACT OF THE CRISIS

In the eyes of the world the humanitarian consequences of the armed conflict in Ukraine are largely invisible, despite the ongoing loss of civilian life and deepening hardship for the people. Since April 2014, the conflict has resulted in substantial humanitarian suffering across Ukraine, notwithstanding the 'Full package of measures' agreed in Minsk on 12 February, and the recent renewed ceasefire.

This conflict is happening on Europe's doorstep; it is political in nature and requires a political solution, only then will the humanitarian crisis diminish. Fragmentation of powers within the political hierarchies of the State and *de facto* authorities add to the volatility of the situation. Lack of trust between parties to the conflict, and increasingly within society at large, creates an additional layer of concern. Furthermore, the conflict has exacerbated the pre-existing systemic inequalities and poor status of infrastructure and services. The situation is further compounded by the country's current economic downturn, political instability, fragile decentralization and reform processes and widespread corruption.

Currently, the population affected by the crisis is estimated at approximately 3.7 million people. Of these, the humanitarian community is most concerned about the plight of the 0.8 million people living in areas close to the 'contact line' (of which 0.2 million are in Government controlled areas), who continue to face insecurity, poor access to services, movement restrictions and severe protection concerns. Some 2.7 million people living in non-government controlled areas (NGCAs) have seen their freedom of movement, access to life-saving services, goods, social entitlement and pensions and banking, postal and notary services disrupted since November 2014, owing to Government decisions. Many people also fled the conflict area, within Ukraine and abroad. While official Government statistics indicate a higher number, the humanitarian community estimates that approximately 0.8 million people are based in Government controlled areas of Ukraine. Many others frequently travel across the 'contact line' towards NGCAs to check on family and property or to GCAs to access pensions, social entitlements, or services and goods. A

number of displaced people have returned in the recent weeks owing to a lull in hostilities. To avoid double counting, these two latter groups are accounted for in the NGCAs population figures.

Across all these groups, the level of resilience and solidarity is incredibly high: communities welcomed and supported individuals as they were forced to leave their homes and seek refuge. Doctors, teachers, volunteers and social workers provided services, often unpaid. The society mobilized networks of support to collect and distribute items through social setups and internet-based mechanisms, while – with few exceptions – there is a growing level of frustration for the absence of authorities' leadership in the response.

Following the unrecognized March 2014 referendum in the Autonomous Republic of Crimea (ARC) 4,000 civilians left for mainland Ukraine. Donetsk and Luhanska oblasts witnessed intense fighting between May 2014 and September 2015, with spikes of violence in June-August 2014 and again

### CASUALTIES

 **8 500** people killed

 **18 000** people injured

### PEOPLE IN NEED

Total people in need  
**3.1 MILLION**  
out of them  
**2.5 MILLION**  
are elderly, women and children



### IMPACT OF CONFLICT

**2.7 MILLION** in NGCAs  
are deprived of  
freedom of movement  
basic services  
social and welfare support

in January-February and in July 2015.

Since April 2014, over 8,500 people (military and civilians) have been killed, and at least 18,000 injured in the conflict zone because of fighting<sup>1</sup>. Despite the ceasefire, insecurity continues to loom in eastern Ukraine and loss of life and injury continues: in September 2015, there were 43 civilian casualties recorded (nine killed and 34 injured)<sup>2</sup>. The main risk threatening the lives of civilians shifted from direct violence to Explosive Remnants of War (ERW) and Improvised Explosive Devices (IEDs), which accounted for 81 per cent of all civilian casualties in September<sup>3</sup>, and other risks related to military presence in the conflict area. Similarly, human rights and protection concerns remain. The breakdown in law and order, impunity and lack of accountability, and the loss of basic services are becoming more entrenched; community cohesion, family unity and well-being are becoming increasingly fragmented, and the economic and social fabric of Ukraine is becoming more fragile. Protection of civilians is a major priority, amid efforts to permanently stop the fighting and to find a sustainable solution to the conflict.

Multiple attempts to broker a political solution to the conflict and agree on a lasting and mutually-observed ceasefire were the subject of the 'Minsk ceasefire' signed between the Government of Ukraine, Russian Federation, and the non-state actors in September 2014. This ceasefire deal, however, collapsed within days of its signing. Renewed negotiations resulted in another ceasefire deal on 12 February 2015, but the truce did not last as indiscriminate shelling, including in densely populated areas

and against civilian infrastructure continued to be recorded. A relative calm around the 'contact line' in eastern Ukraine came into effect in September 2015, when the new school year began, with only sporadic violations of the ceasefire reported. The parties to the conflict recently started enacting a withdrawal of heavy weaponry as stipulated in the Minsk ceasefire deal. The situation, however, is still fragile as lack of trust between parties still runs high. The significant reduction in violence has nonetheless brought a major relief for civilians for whom insecurity, shelling and suffering have been a daily fact of life for the last year and half of conflict. Nevertheless, the absence of a political solution brings uncertainty and impacts on the life of many civilians who are either living close to the 'contact line' or in areas beyond Government control, or who have been displaced.

Since the end of 2014, Government legislation restricting freedom of movement of people and goods, payment of salaries and pensions, making hospitals, schools and other services in non-government controlled areas (NGCAs) 'illegal' continue to create undue hardship for civilians. A further 'order' imposes limitation on trade and commercial traffic across the 'contact line' since June 2015 that resulted in disruption of the market links, inability to sell agricultural and industrial products, and increased consumer prices, especially for food commodities in the NGCAs. In October 2015 the High Administrative Court of Ukraine upheld the first and second court decisions ruling the Cabinet of Minister resolution 595 to discontinue pension payments for people living in the NGCAs illegal and obliged the Government to resume payments.

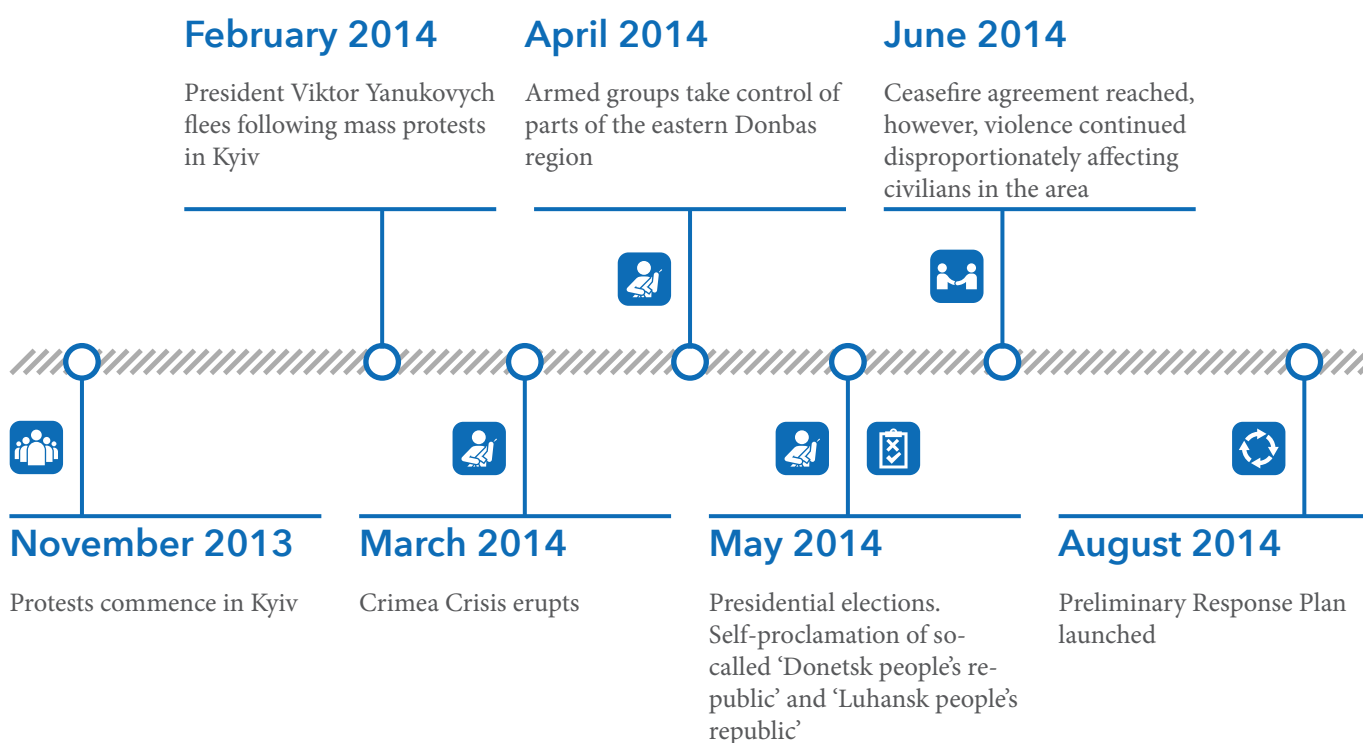
According to UNDP Socio-economic vulnerability and risk assesment "Ukrainian economy shows signs of the further de-

1. Source: UN Human Rights Monitoring Mission in Ukraine (UN HRMMU) - Data refers to recorded cases between April 2014 and 27 October 2015

2. Ibid.

3. Ibid.

## TIMELINE OF EVENTS



cline...<sup>4</sup>. The state is weakened by systemic neglect, compounded by the current economic downturn and potential energy crisis. Services in the conflict areas are severely weakened and the much needed rehabilitation of infrastructure, human capacity and economic, social and legal resources remain unaddressed. The burden of hundreds of thousands of displaced people – families, children, those with special needs and specific vulnerabilities - cannot be carried solely by the state and is not provided for by Government policies and legislation.

The burden of hosting displaced people and families affects the service delivery and economic stability of the residents. The relationship between host communities and IDPs is progressively strained, and this is leading to tensions, divisions and accusations. The relationship between communities and IDPs is severely strained, and this is leading to tensions, divisions and accusations. To avoid a breakdown and division of the civil and social structure, a comprehensive strategy that looks to a longer-term peace and the reconciliation of society, communities and families is required. This needs to be supported with combined humanitarian-recovery efforts.

### General insecurity, lack of trust and absence of durable political settlement is the main driver of the humanitarian crisis

The underlying cause of increasing vulnerability of the population of eastern Ukraine is insecurity, particularly along the 'contact line' between the Government and armed groups, and in densely populated urban settings. People living in areas where fighting has been a fact of life since April 2014, including those not directly affected by insecurity, are facing unreliable

4. VRA January 2016.

or disrupted services, with water, gas and electricity supply and transportation badly affected. Health service provision continues to deteriorate due to shortages of medical supplies and personnel. One of the aspects that makes the crisis in Ukraine unique compared to other situations is the disproportionately high percentage of elderly people<sup>5</sup> and working age adults who lost their jobs<sup>6</sup> while not being eligible for Government or humanitarian support among the most vulnerable. Should the ceasefire be broke again, it is possible that more people decide to flee, including those who returned, services further disrupted, and more significant infrastructure and economic losses recorded.

### Protection of Civilians is a major concern

The civilian population is paying the highest price in this conflict. Protection of civilians is an overarching concern: a high number of civilian casualties and injuries, breakdown in trust between communities, and displacement are becoming more protracted. There has been a marked disregard for the principles of international humanitarian law: with indiscriminate shelling into residential areas resulting in deaths and injuries of civilians and destruction of property and infrastructure, including water, hospitals and schools; property unlawfully seized; and landmines and booby-traps used. Human rights violations continue to be recorded throughout Ukraine. As the conflict becomes entrenched, the life and dignity of populations in the conflict areas, IDPs, returnees, host communities, minorities and vulnerable persons – women,

5. Prior to the conflict people aged 60 years old and above amounted to 21 per cent of the total population, countrywide. According to a HelpAge assessment in Luhanska and Donetsk Oblast in July 2015 (60 per cent of the respondent in NGCAs), 61 per cent of the population is represented by people aged 60 years and above of which 74 per cent are older women.

6. This has been confirmed through focus group discussions with affected communities.

## December 2014

Crisis in Donbas continues with major humanitarian implications. SRP launched



## September 2014

Minsk protocol signed

## February 2015

Minsk II signed. Provisions include facilitation of humanitarian assistance. Revised HRP launched



## January 2015

A Temporary Order by GoU limits Freedom of Movement and introduces ban on commercial supplies of goods and services to NGCAs

## July 2015

*De facto* authorities require 'accreditation/registration' in NGCAs. Humanitarian aid delivery to NGCAs is suspended



## May 2015

Hostilities increase

## September 2015

Revamped ceasefire marks the start of the school year



## November 2015

UN distributions to NGCAs of Luhanska oblast resume / Hostilities increase

children, the elderly and the disabled – are increasingly at risk. Women’s traditional gender role as carers, looking after the elderly and disabled, two of the most vulnerable population groups affected by the conflict, restricted by their mobility has increased. Roles of men as ‘providers’ and ‘protectors’ have led to an increased in harmful behaviors (e.g. alcohol consumption, drug addiction and high-risk sexual activities). Moreover, the conflict has further undermined the ability of males to respond to the societal expectations, resulting in increasing reports of domestic violence. Female-headed households face particular problems and stigma and trigger untimely and possibly unsafe returns. In addition, there are reports of women and girls engaging in survival sex.

### The conflict, coupled with the lack of economic resources at family level constrains access to basic goods and services<sup>7</sup>

Several factors are straining the Ukrainian economy, including corruption and mismanagement of state funds; lack of investment; high unemployment; increased spending on military operations; and destruction of infrastructure, property and livelihoods in the Donbas region. Inflation, reduced purchasing power and significant price hikes have increased the vulnerability of the local population and diminished the ability of the state to respond adequately to humanitarian challenges. In addition, Government authorities discontinued social benefits and salaries to people remaining in the areas held by non-state actors since July 2014. The lack of social transfers and services has particularly increased the vulnerability of those with limited mobility, like elderly and disabled people, who are unable to leave the conflict zone. Since the start of the conflict, annual consumer price inflation had risen to 60.9 per cent by April 2015, food inflation to 54 per cent and gas prices to 188 per cent. Given Ukraine’s high inflation, wage rates continued to shrink and had reduced by 30 per cent since the same time last year<sup>8</sup>. Income of over 75 per cent of the rural population is lower than national average wages<sup>9</sup> and the level of unemployment in NGCAs has now reportedly increased from 10 to 25 per cent<sup>10</sup>. Income or cash is frequently cited as a priority need<sup>11</sup> and multiple assessments all point to the main common expenditures of food, rent and utilities, NFIs/clothing and healthcare<sup>12</sup>. Post-distribution monitoring of the multipurpose cash assistance to date has shown high levels of beneficiary satisfaction with the provision of cash to meet needs<sup>13</sup>. The situation of people living in the areas directly affected by active conflict is particularly difficult, due to the considerable breakdown and disruption of the economic infrastructure and social services. The availability of healthcare in those areas is increasingly limited, with particu-

larly serious consequences for the most vulnerable. In densely populated urban settings, basic services such as centralized water, gas, heating and electricity systems are highly inter-dependent and systems in place serve people across the ‘contact line’. This means that any disruption to one or another system – owing to destructions, inability to carry out repairs, availability of spare parts or staff or cash will automatically affect the whole setup, and the civilians who are highly dependent from these services, especially in winter.

### In addition, provision of winter packages, including emergency shelter and NFIs, food and other items in preparation of a harsh winter is a key concern

Minus 20 degree Celsius temperatures in the conflict-affected area require ‘quick fix’ repairs for roofing and glazing to winterise collective centres and family homes to help vulnerable people get through the winter. In addition, up to 300,000 people residing along the ‘contact line’ require distribution or renewal of warm blankets, solid fuel, clothes, shoes and, if feasible, cash assistance. As temperature drops, food security needs intensify as people need a substantially increased food intake. Health risks will increase in winter, particularly for those without adequate shelter or heating.

### In the meantime, humanitarian access remains severely constrained in non-government controlled eastern Ukraine

Since the beginning of the crisis, Government-imposed undue bureaucratic restrictions slowed considerably humanitarian operations and despite constructive dialogue, requirements remain heavy for humanitarian actors to deliver aid close to the ‘contact line’, including in Government controlled areas, and in NGCAs. A major breakdown of humanitarian aid delivery occurred in July 2015, when the *de facto* authorities of Donetsk and Luhansk imposed equally daunting restrictions and eventually stopped operations until such time as organizations were ‘registered’. While minor progress has been observed, and a handful of organizations resumed operations, access to aid for some 2.7 million civilians living in NGCAs has been severely curtailed. As of mid-October 2015, some 16,000 metric tons of humanitarian assistance, including food, shelter and non-food relief supplies, is ready for immediate delivery. Many hospitals cannot perform surgery because they lack anesthetic. Patients’ lives are at risk without essential medicines such as insulin and tuberculosis vaccines. Some 150,000 people are not receiving monthly food distributions, 1.3 million people’s access to water is at risk, and more than 30,000 people have not received shelter materials and the household items they urgently need.

7. Ukraine MSNA, March 2015. UNDP Socio-Economic Vulnerability and Risk Assessment, June 2015

8. UNDP Socio-Economic Vulnerability and Risk Assessment, June 2015

9. FAO SEINA (Socio Economic Impact and Needs Assessment), September 2015

10. WFP-CWG Cash in NGCAs Delivery Analysis, Donetsk, October 2015

11. IRC Needs Assessment, Donetsk Oblast, March 2015 and other assessments throughout 2015; HNO workshops, 8-9 October 2015

12. MSNA; Triangle Rapid Multi Sectorial Assessment July 2015; Shelter Cluster Cash Assistance PDM, June 2015; IOM Preliminary Results of Cash Assistance PDM to IDPs in 10 Regions, October 2015

13. IOM Preliminary Cash Assistance PDM

## BREAKDOWN OF

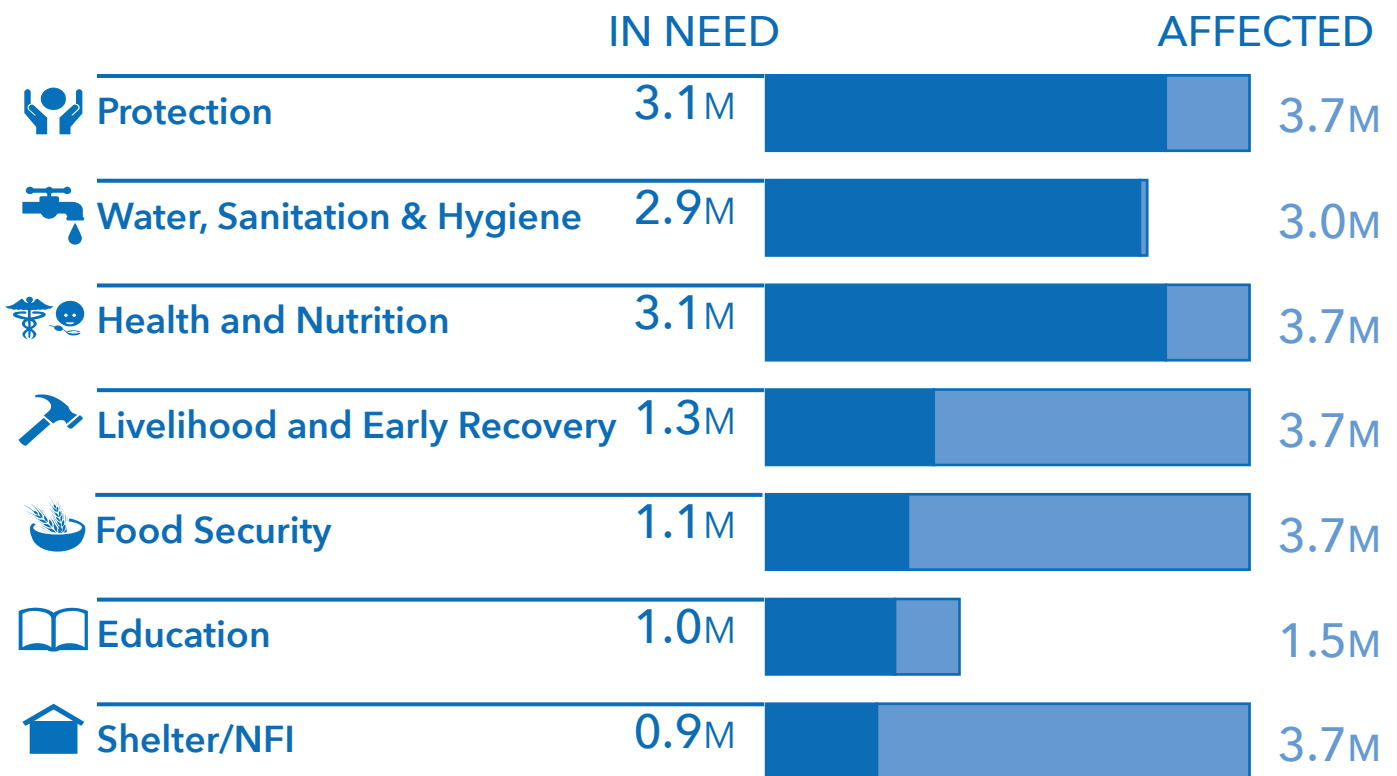
## PEOPLE IN NEED

Based on the latest population data triangulated through available datasets of Ministry of Social Policy, Ministry of Education and Sciences and a number of assessments, 3.7 million people were affected by conflict in eastern Ukraine of which 3.1 million are in need of humanitarian assistance.

2.7 million people representing the vast majority of people in need, reside in non-government controlled areas, including those living along the 'contact line'. Another 200,000 people live along the 'contact line' in the areas under Government control. At least 0.8 million people are displaced and residing in Government controlled areas of which 30 per cent require emergency assistance. These number does not account for those regularly crossing the 'contact line', which are computed in the NGCAs population figure.

## NUMBER OF PEOPLE IN NEED

3.1M

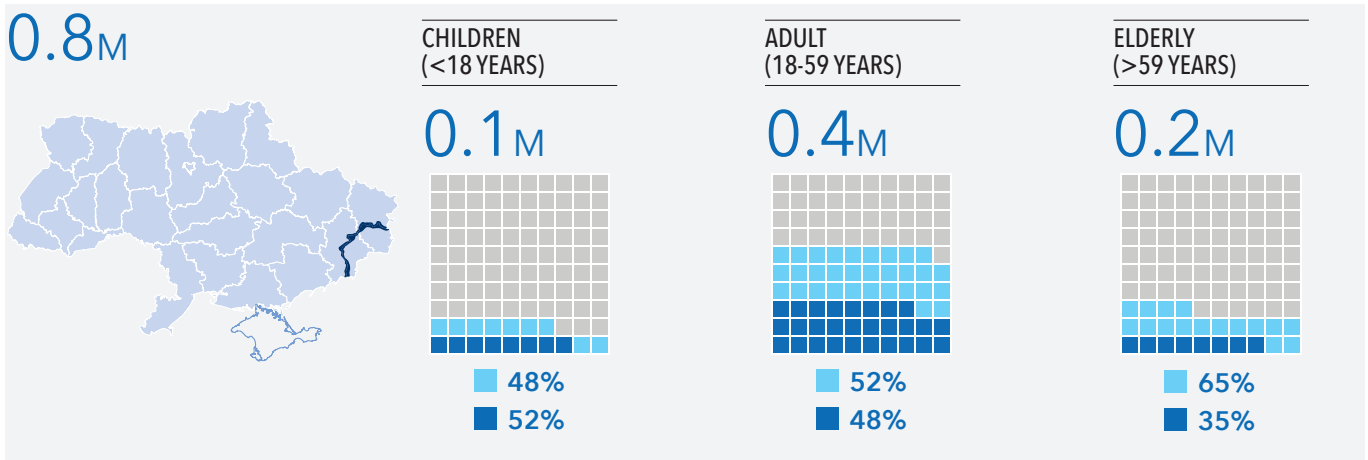
NUMBER OF PEOPLE IN NEED BY SECTOR<sup>14</sup>

14. The numbers in the table are identified through analysis of available information combining available datasets, field reports and assessments carried out between July and September 2015. Additional analysis and information is required.

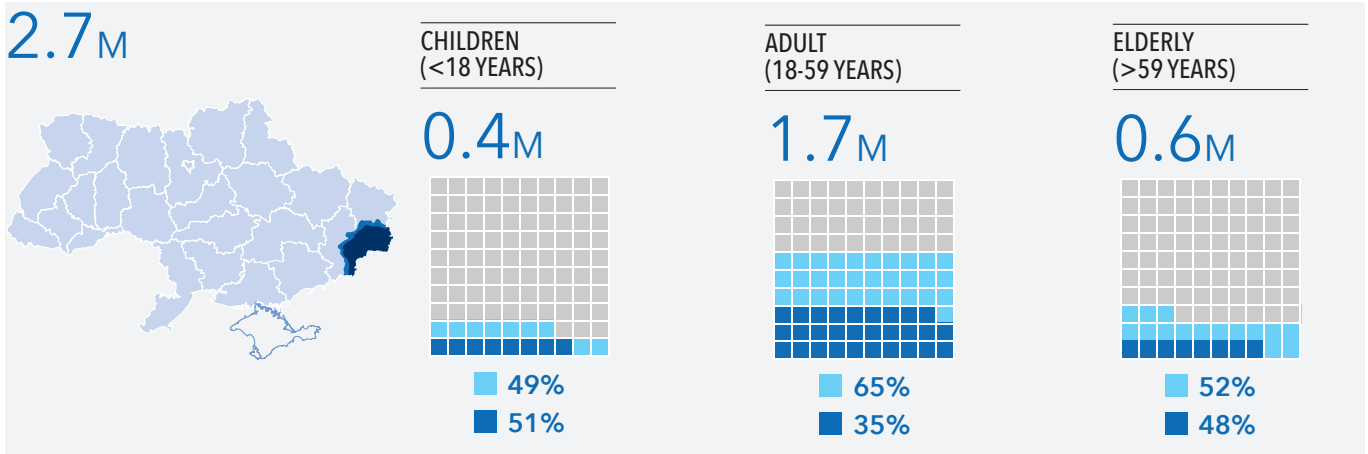
BY AGE & SEX

### AREAS ALONG THE 'CONTACT LINE'

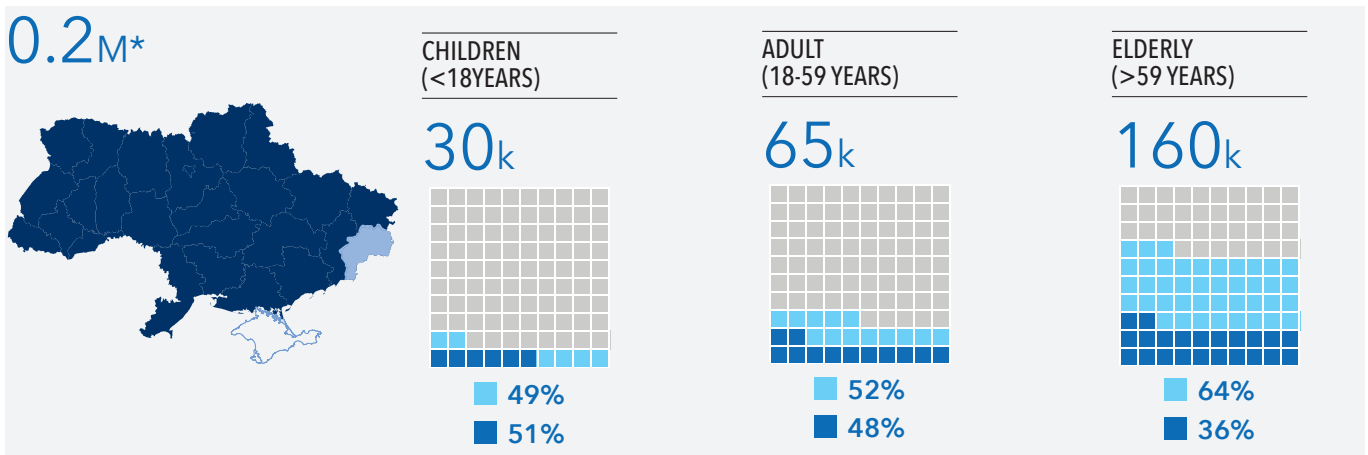
■ Females ■ Males



### NON-GOVERNMENT CONTROLLED AREAS



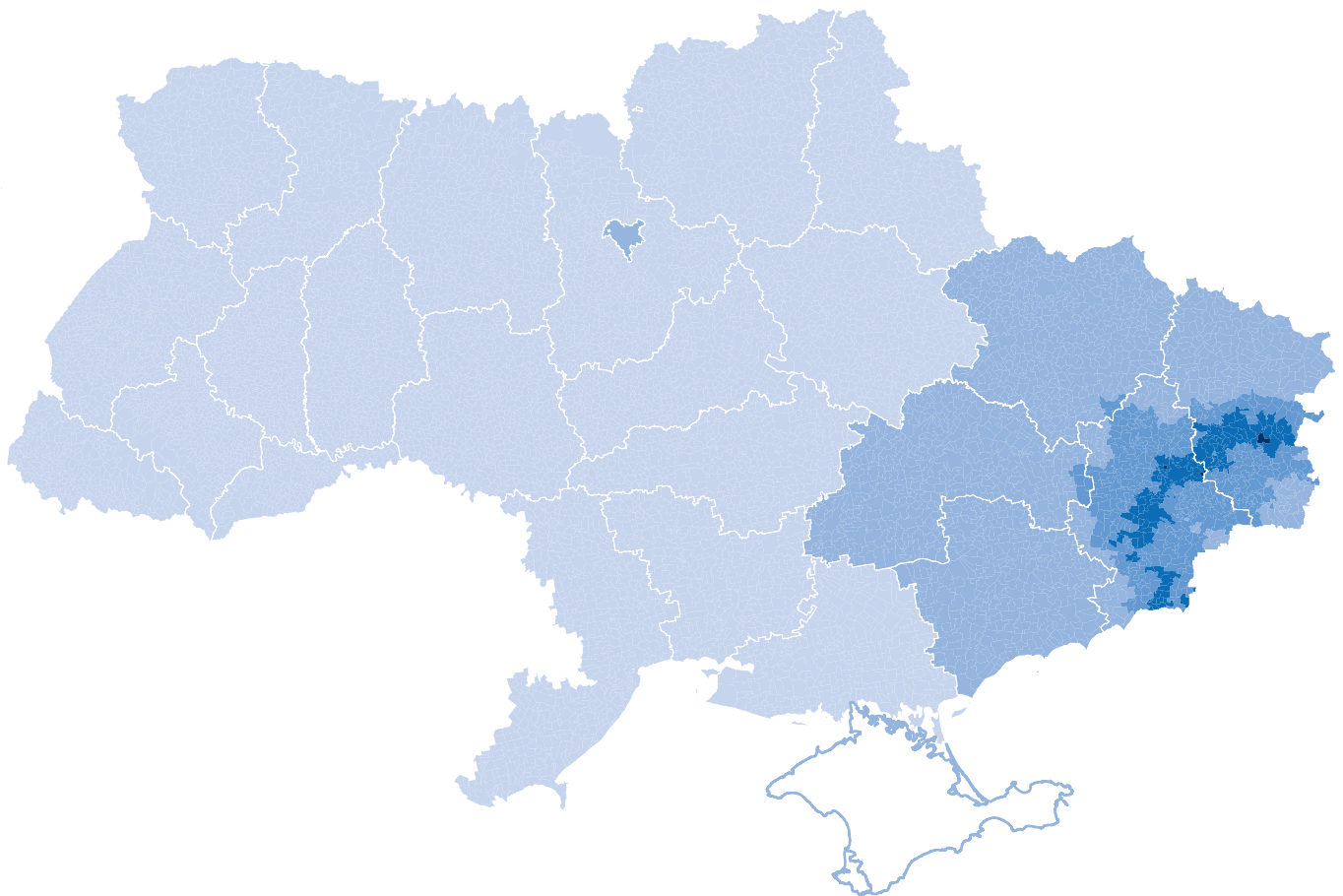
### IDPs IN GOVERNMENT CONTROLLED AREAS



\* MoSP registered 1.6 million IDPs, countrywide. All of them need different type of assistance. Between 0.8 and 1 million IDPs reside permanently in GCAs, while others move frequently across the 'contact line' and, for the purpose of the HNO, are accounted for in the population figure of those living in NGCAs. Among those living in GCAs, 0.2 million IDPs, the most vulnerable, are in need of life-saving humanitarian interventions.

**SEVERITY OF****NEED**

Clusters have assessed the severity of needs across the country using the Needs Comparison Tool. The composite severity levels map was developed based on the average severity score of all sectors. The map illustrates the highest magnitude of needs in the areas along the 'contact line' and adjacent areas of NGCAs of Donetsk and Luhansk oblasts. In addition, there are considerable needs in areas of high concentration of IDPs in three eastern oblasts of Dnipropetrovska, Kharkivska and Zaporizka.

SEVERITY MAP<sup>15</sup>

15. The map is indicative and drawn on the basis of the combination of severity mapping provided by Clusters.

## PART II:

# NEEDS OVERVIEWS

## BY CLUSTER

### INFORMATION BY CLUSTER



Protection



Water, Sanitation and Hygiene



Health and Nutrition



Livelihood and Early Recovery



Food Security



Education



Shelter/NFI



Logistics

### INFORMATION GAPS AND ASSESSMENT PLANNING

## PROTECTION

### OVERVIEW



People living along both sides of the 'contact line', including returnees experienced insecurity for a long period of time. Among the heaviest shelling has been at locations near the 'contact line'. Parties to the conflict have demonstrated a widespread disregard for the principles of proportionality and distinction, resulting in excessive harm to civilians and human rights violations. Persons remaining at these locations face risk of Explosive Remnants of War (ERW) which pose a challenge to daily life. Since April 2014, over 8,500 people (civilian and military) have been killed, and at least 18,000 injured in the conflict zone because of fighting but also mine and UXO contamination, especially near check-points at the 'contact line', where often a functioning local administration is lacking. As of October 2015, 287 mine-related accidents were recorded, including 19 accidents with 40 child victims (8 killed and 32 injured) and 268 accidents with 584 adult victims (204 killed and 380 injured).

Children are particularly vulnerable since their protective environment is weakened through family separation and extreme stress on their caregivers as well as breakdown of the social fabric in general. Of particular concern is the situation for children with disabilities and children in institutions<sup>16</sup>.

People in NGCAs are living in economic isolation as social entitlements payments are suspended and movement of people and goods across the 'contact line' is restricted. In some villages along the 'contact line' women account for the majority of the population over the age of 18 years, with almost 30 per cent of households being female-headed. Almost 30 per cent of households comprise at least one older person<sup>17</sup>.

The Government of Ukraine's Temporary Order and the suspension of public transport hinder civilians from leaving conflict-affected areas, isolate people, impact family unity and limit access to social entitlements and services, and humani-

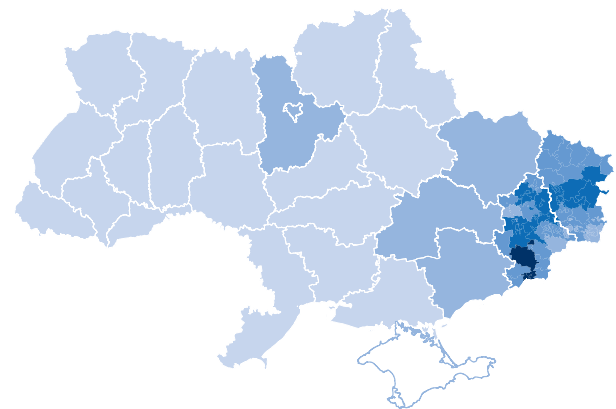
16. An estimated 88,000 children are in institutions, countrywide of which approximately 6,000 in NGCAs.

17. Triangle Rapid Multi Sectoral Assessment, July 2015

### NO. OF PEOPLE IN NEED

# 3.1M

### SEVERITY MAP



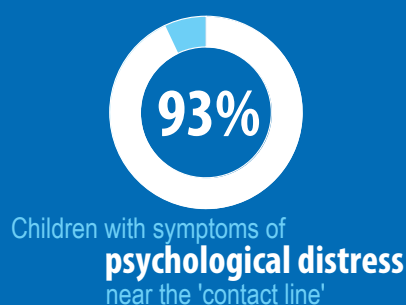
tarian assistance. Access restrictions imposed by the *de facto* authorities in NGCAs have further complicated the delivery of humanitarian aid and protection activities, especially as mine risk education, psychosocial support and legal aid have been impeded. The absence of the rule of law has resulted in human rights violations, including reports of sexual violence, and has reduced space for civil society and free media.

Destruction and illegal occupation of property as well as looting and vandalism has also been reported in conflict-affected areas. Men and boys are at risk of pressure to join armed groups and there has been reports of recruitment efforts in educational institutions. Of high concern is the situation of people living in institutions as these continue to function albeit without financing and depend on humanitarian aid. The available data shows a deteriorating humanitarian situation in residential care facilities. Humanitarian actors report a constant shortage of medicine and hygiene kits, and some-

### MINE CASUALTIES



### CHILDREN IN PSYCHOLOGICAL DISTRESS



### GBV: BROKEN REFERRAL PATHWAY



times food. After the beginning of the conflict, the number of staff decreased considerably as people fled the area, especially experienced and specialised staff like doctors.

While not all IDPs are vulnerable, displacement increases vulnerability, especially for those already at risk. Protracted and multiple displacement resulted in exhaustion of coping mechanisms and savings. Poor job opportunities compound the situation. Many IDPs resort to selling their belongings or borrowing. Some IDPs are facing discrimination in accessing services and tensions with host communities. Women and children constitute the large majority of registered IDPs. Many IDP children show signs of severe psychosocial distress which impacts their ability to integrate into their new living environment.

The breakdown of the rule of law and the economic hardship increased vulnerability to sexual violence and trafficking. There is an increase in anecdotal reports of women and girls who have resorted to survival sex as a means of providing the basic needs for their families. This may have psychological and life-threatening health implications given the high HIV infection rates in Ukraine, particularly in conflict-affected areas. In addition, it severely undermined men's ability (especially for IDP males and servicemen) to fill their traditional gender role as "providers" and "protectors" of the family. This in turn triggered an increase in domestic violence, neglect and alcohol abuse.

IDPs and persons living in NGCAs are facing increasing problems to obtain/restore civil documentation from the Ukrainian authorities. Displaced children without legal guardians cannot register as IDPs and this impedes their access to social services. Children born in NGCAs are unable to receive a Ukrainian birth certificate and are at risk of statelessness. Denial of state registration of civil status acts (births and deaths) is an increasing problem which is evidenced by a sharp increase in the number of court cases (almost 200 since April 2015) in Donetsk and Luhansk oblasts related to establishing the facts of birth/deaths.

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## AFFECTED POPULATION

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- People living along both sides of the 'contact line', including returnees.
- People living in NGCAs, including returnees
- Vulnerable IDPs
- Within all three "geographical" categories set out below, special consideration needs to be paid to vulnerable groups such as people with disabilities, female-headed households, ethnic, religious or sexual minorities and people living with HIV and AIDS. The situation in

Ukraine differs from many other humanitarian contexts in its high number of older persons (60+) affected by the conflict and in need of assistance, with the majority being women. Older persons face significant challenges in accessing services and assistance.

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## HUMANITARIAN NEEDS

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- There is an urgent need for mine action activities. Activities needed include (i) demining (emergency clearance and/or survey) (ii) mine risk education for some 200,000 at risk school-age children, parents, educators and civil society organizations in Donetsk and Luhansk oblasts (both GCAs and NGCAs); (iii) victim assistance and (iv) advocacy towards increased focus on mine action activities from relevant authorities.
- There is an urgent need to strengthen the capacity of service providers to respond to cases of GBV and prevent future acts of violence using a survivor-centred approach. Providers rarely refer beyond their own service, which severely limits a survivor's access to HIV prevention treatment (PEP), protection, psychosocial support and legal redress. Survivors of violence and those at risk of violence need to have access to "safe spaces". Women, girls and boys experiencing domestic violence and other forms of violence are forced to remain in unsafe living environments because there are no alternatives.
- Psychosocial support services need to be scaled up to meet growing demands. The number of individuals, in particular children, who need specialised one-on-one care has greatly increased due to the crisis. Support is urgently needed for specialised support services such as psychologists/social workers as well as for community-based support mechanisms, including training on positive parenting skills to help children and families cope with the stress associated with and due to the conflict.
- Life-saving information on access to services needs to be systematically shared with the affected populations. Limited access to NGCAs and a very mobile IDP population have led to a fragmented means of disseminating information about essential life-saving services and access to legal services relating to human rights violations, including detention and missing persons.
- There is a need to ensure life-saving protection by presence through monitoring and reporting on protection concerns and human rights violations, including in institutions that host children and other vulnerable groups, especially where local civil society is operating within a lack of rule of law.
- Support measures for access to justice, legal aid and legal

services are needed, particularly in areas with a lack of rule of law and when it comes to legal advice regarding detention and missing persons and counselling on housing, land and property issues. Access to documentation and legal advice to ensure that birth, death, marriage, divorce and temporary or permanent legal guardianship of children separated from their parents in NGCAs are registered by the Ukrainian Government must be addressed.

- There is a need to ensure equal access of all people to humanitarian aid, without discrimination based on disability categories or other aspects of vulnerability, including gender, age or geographical location.
- Vulnerable women, girls and boys should be targeted for livelihood activities to counter possible harmful survival practices.
- Promotion of interventions to prevent displacement including targeting of community empowerment projects to locations in grey areas. This includes robust expansion of assistance delivery in the NGCAs, where possible.

## WATER, SANITATION & HYGIENE

### OVERVIEW



Centralized water supplies in Donetsk and Luhanska oblasts serve an estimated 4.4 million people. Although the situation is different from one location to another and cannot be generalized, some characteristics are common.

The main water supply lines cross and/or run along the conflict zone, where exchange of hostilities have repeatedly inflicted damages to infrastructure, reducing or stopping operations. Armed forces or groups are reportedly present at a number of water facilities, making these a target. Mines and UXOs hamper access to the infrastructure for inspection, maintenance and repair. Water supply to populations on both sides of the 'contact line' is partly disrupted, restricted, and remains highly exposed. Water supply and sanitation utilities lack sufficient resources for necessary maintenance and repairs, as well as equipment, supplies and materials to ensure adequate water and wastewater treatment, and quality monitoring; the situation is compounded by the presence of mines and UXOs and limitation of access.

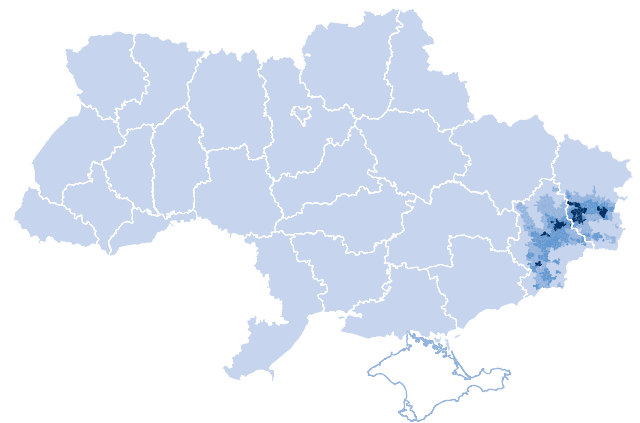
The quality of water provided through public and private utilities directly affects the entire population connected, as do water supply disruptions. Reduced pumping capacity due to damages or electricity cuts results in lack of access to piped water at specific locations. In order to cope with such situation, different strategies are followed, including water trucking, use of alternative sources, restricting distribution to a few hours or alternative days etc. In many cases, households are forced to store water in sufficient quantity to bridge periods of interruptions, the length of which may be unknown; secondary contamination can occur, as well as compromised hygiene behaviours.

Water supply is intrinsically connected with central heating systems, electricity supply, livelihoods, and sanitation. The winter will further strain contextual coping mechanisms when

### NO. OF PEOPLE IN NEED

# 2.9M

### SEVERITY MAP



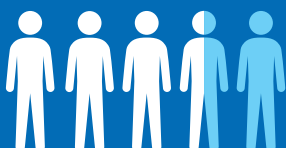
basic services such as gas, water and heating supplies may get interrupted, more permanently cut, or become prohibitively expensive to vulnerable households.

Many households, care homes and other social institutions reportedly cannot source essential personal hygiene items.

The presence of cholera in the environment, unreliable water treatment and supply, weak immunisation levels, and limited disease surveillance and response capacities pose an increased risk to public health, especially in the areas along the 'contact line'. Recently detected polio cases in the country call for more stringent monitoring of effluents from wastewater treatment plants.

### CENTRALIZED WATER SUPPLY

**3.5** out of **5**  
are at risk of **water shortages**



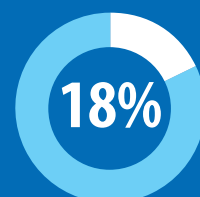
### WATER AND HEATING CONCERN

**4.4** million people  
in Donetsk and  
Luhanska oblasts



served by  
**centralized water supply,**  
which suffered damages

### WATER SHORTAGES RISK



IDPs have  
**no access to running water**

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## AFFECTED POPULATION

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- Approximately 2.9 million people living predominantly in urban areas in and along the 'contact line' and in NGCAs are most at risk due to their dependency on single sources of water.
- The elderly, women and children are considered vulnerable due to their specific needs, particularly in regards to hygiene.
- Some residential care homes and other social institutions in the areas along the 'contact line' and NGCAs require material assistance in the form of additional storage capacity, and supplies for personal hygiene, cleaning and disinfection.
- The situation of IDPs varies, and specific WASH needs are present in some locations.

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## HUMANITARIAN NEEDS

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- Ensure a reliable supply of safe water to conflict-affected people, focusing on restoring conflict-damaged water supply networks and treatment plants whilst supporting provision of emergency supplies.
  - Support to production, treatment and distribution of water, including through advocacy and coordination to ensure unimpeded and timely access of relevant utilities / service providers to inspect and repair infrastructure prior to winter and protection of water and related infrastructure, including electricity. Resource mobilisation to support relevant utilities / service providers to carry out crucial repair and maintenance of infrastructure, including protection from freezing.
  - Continued support to water trucking and where absolutely necessary, bottled water, to ensure minimal water supply, including distribution of relevant NFIs.
- Assist in responding to identified contingency preparedness gaps including interventions such as boosting storage capacity at health facilities and other social infrastructure sites. Develop and maintain relevant contingency plans, and pre-position equipment, supplies and materials in case of additional needs (industrial accident affecting water quality, new population movement, water-borne disease outbreak).
  - Ensure access to the Ukrainian market for consumables, materials, supplies and equipment related to safe and reliable water supply provision.
  - Provide support to cover critical gaps in the provision of chemicals, reagents, materials, supplies and equipment at treatment stations and laboratories.
  - Identify most vulnerable populations and locations, and support through individual interventions such as provision of point-of-use water treatment options.
  - Coordinate with health authorities, including the Health Cluster, efforts to strengthen water quality monitoring, surveillance, early warning and early response systems.
  - Assist in keeping minimal sanitation services operational: ensure sufficient water supply to keep sewage systems functioning and ensure treatment of wastewater including access to disinfectants and quality monitoring.
  - Enable identified vulnerable groups to practice good hygiene behaviour through provision of hygiene materials (or, where feasible, vouchers or cash); dissemination of key messages to select individuals and institutions.

## HEALTH AND NUTRITION

### OVERVIEW



By the end of September 2015, 18,000 people were injured across the conflict zone, including 194 children (136 in Donetsk and 58 in Luhansk). Lack

of capacity and equipment hampers adequate rehabilitation of war-injured persons. Hospitals cannot ensure trauma care management because of lack of support. This could result in additional complications, further permanent impairment, as well as exclusions and isolation, especially in winter.

Out of the 708 primary and secondary health facilities in both GCAs and NGCAs of Donetska and Luhanska oblasts, 220 health facilities were assessed<sup>18</sup>. Of these 20 are partially functional and eight are not functional due infrastructure damages, unavailability of staff, lack of medicines and supplies. Poor water and sanitation has been recorded in 15 health facilities. More than 50 per cent of the population lacks adequate access to healthcare because of the remoteness or unavailability of health services. Some 40 per cent of the population lack access to drugs and services because of high prices of medicines and closure of pharmacies.

Vaccination coverage is a major issue countrywide. Two polio cases were detected through the Early Warning System in Zakarpattia (western Ukraine) and confirmed on 28 August 2015. Pre-crisis vaccination coverage was less than 20 per cent and has further reduced as no vaccination has been undertaken since the start of the conflict. There is a high risk of disease outbreaks among the children, and/or spill-over into neighbouring countries.

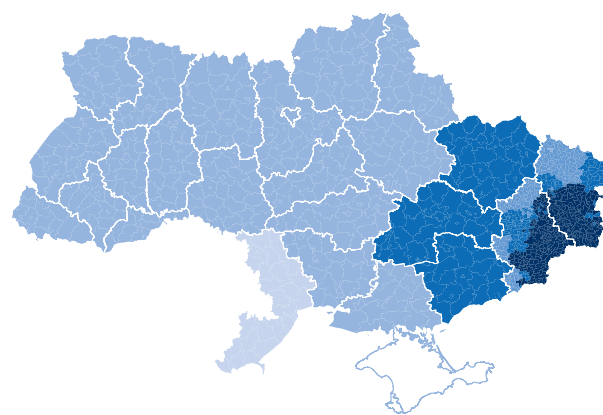
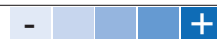
In GCAs, access to primary health care for IDPs and vulnerable residents remains a concern, especially in rural areas. Health services are either provided through ambulatory services and 200 rural primary health care centres. Health partners are providing support through 30 mobile teams,

18. Source: WHO field assessments, Cluster Partners Assessments, OSCE reports

### NO. OF PEOPLE IN NEED

# 3.1M

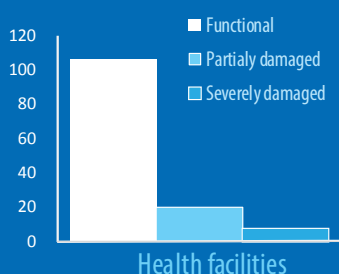
### SEVERITY MAP



prioritising areas along the 'contact line' and areas with high concentration of IDPs<sup>19</sup>. These teams performed as of October 2015, over 64,000 consultations, out of which 72 per cent were for IDPs. Access to tertiary health care in Donetska and Luhanska oblasts remains a major concern as these health facilities are only available in Donetsk and Luhansk cities. Availability of free of charge maternal services, especially for complicated deliveries, and restoring broken referral pathways remains an issue. GBV and SBV remain underreported, while existing health services have serious staffing and drug availability/affordability gaps in this field. IDPs and host communities alike, including former combatants, are dealing with

19. 61 per cent of the total consultations were provided to age-group 18-60 years (women representing 66.7 per cent), 4.7 per cent to 1-5 years old (60 per cent boy) and 23 per cent for elderly (55 per cent women). Around 10 per cent of the patients have been referred to first level primary health care and 10 per cent to secondary/tertiary health facilities.

### NGCAs HEALTH FACILITIES STATUS\*



\* 220 health facilities assessed out of 708 in Donetska and Luhanska oblasts

### NGCAs NEED IN LIFE-SAVING DRUGS

**30 000** diabetics  
**300** cancer patients  
**100** haemodialysis patients  
**8 000** TB and HIV and AIDS patients

### POLIO VACCINATION COVERAGE IN UKRAINE

**4 out of 5**  
 children  
 are not vaccinated



stressful conditions affecting their mental health. Very limited mental health services are offered to IDPs in collective centres.

In NGCAs, the risk of communicable disease outbreaks is particularly high in view of the poor water and sanitation conditions, low immunisation rates and the total disruption of the disease surveillance system. Health risks will increase in winter, particularly for those without adequate shelter or heating.

In order to address the gaps in health service delivery to affected population an agreement was made with the Ministry of Health in December 2014 to deliver the basic emergency health services and ensure the referral pathway through Mobile Emergency Primary Care Units (MEPUs). The Mobile units are operational in NGCAs covering more than 100 locations and providing an average of 20,000 consultations per month. Mental health and psychosocial support for 30,000 people has been suspended since mid-July 2015. Hospitals in large cities across NGCAs<sup>20</sup> are operational and 70 per cent have the required medical personnel to perform minimum treatment. Some 14 health facilities in smaller cities are not functional/damaged in Donetsk and 22 in Luhanska oblast. Issues revolve around lack of specialists, fuel for ambulances and supplies. In Luhanska and Donetsk oblasts 20 hospitals are able to partly fulfil the maternity, cardiology and mental health needs, but there is a severe lack of specific drugs. Water supply for the patients and for cleaning purposes is often unavailable.

In Donetsk city, shortages of medicines are reported for regular treatments, surgery, reproductive health and paediatric care. Donations from the Russian Federation cover only generic drugs and antibiotics. Across NGCAs, according to the latest assessment done in 28 cities through informants interviews, in three cities pharmacies are all closed, in 19 cities pharmacies are partially closed (up to 90 per cent of the pharmacies in some cities), only 20 per cent in others, mainly due to out-stocking, and in six cities pharmacies work normally.

Commercial supplies of medicines to NGCAs have been blocked by the Government since June 2015. Pipeline break of insulin deprived 30,000 patients of life-saving treatment. Similarly, haemodialysis treatment supplies are not available putting 100 patients. Emergency operations are being performed without anaesthesia because anaesthetics and narcotics are depleted. Maternity wards/hospitals lack medical drugs and consumables for conducting care for complicated deliveries. People living with HIV/AIDS or TB and people who use drugs

are at high risk for interruption of care and control services<sup>21</sup>, and 750 patients already have interrupted Opioid Substitution Therapy (OST) that should be provided by the authorities. Prevention programmes are at a standstill, increasing the risk of spread of these diseases. With interruption of treatment, HIV-positive persons face increased risks of developing drug resistance and may progress to full blown AIDS. Pregnant HIV-positive mother's treatment cessation could increase risk of infections through mother-to-child. Severe laboratory reagent shortages are recorded.

The allocated budget for the health care in Donetsk oblast NGCAs covers only up to 30 per cent of the needs (food for patients, medicines, equipment maintenance, salaries, fuel for ambulances and generators). More than 270 health facilities in NGCAs need to find local alternatives to cover the gaps, such as supplies and food for the patients, often procured at the expense of staff salaries. The suspension of humanitarian activities in July 2015 had a serious impact on food supplies for patients, and are now unavailable. Food donations are estimated at 30 per cent of food needs. The situation in NGCAs of Luhanska oblast is reportedly more problematic because of the limited international assistance received.

Nutrition does not appear to be a major issue across the east of Ukraine. Surveys targeting IDPs indicate a one per cent prevalence of acute malnutrition in children aged 6-23 months (emergency threshold is 15 per cent). There are, however, suboptimal breastfeeding practices recorded: 14-25 per cent exclusive breastfeeding among children aged 0-5 months; 70 per cent bottle feeding; 32-53 per cent continued breastfeeding at 1 year. About half of the mothers who stopped breastfeeding early report conflict-related stress as the main reason. Despite the Cluster and Government efforts, some local organisations are still indiscriminately distributing infant formula to children under 12 months of age.

## AFFECTED POPULATION

- NGCAs population, people living close to the 'contact line' whose access to health services is curtailed, returnees
- In GCAs: vulnerable groups, IDPs and IDP hosting communities.
- People with disabilities and injuries, including IDPs.
- People with chronic conditions (30,000 diabetics, 300 cancer patients, 100 haemodialysis patients).

20. 207 hospitals of which 139 in Donetsk and 68 in Luhanska oblast.

21. Report from the AIDS Center Donetsk says that in total 15,852 patients with HIV are registered at the center among these registered 6,538 are on Antiretroviral Therapy (ART) treatment. Treatment of 2,300 patients is interrupted due to lack of delivery of Aluvia to the center. 1,500 TB patients and about 350 MDR-TB patients in the Donetsk oblast NGCAs and about 500 TB patients and 160 MDR-TB patients in the Luhanska oblast NGCAs are at risk. Pre-XDR and XDR-TB treatment is not covered. Diagnosis particularly rapid test of TB is not covered.

- Around 500,000 children at risk of polio<sup>22</sup>.
- 8,000 TB and HIV/AIDS patients.
- 15 per cent of pregnant women, including IDPs, in five eastern regions and NGCAs need maternal healthcare services, including free of charge medicines and supplies.
- 5 per cent of adult population in five most affected regions require STI treatment and condoms for 20 per cent of sexually active men across the east.
- Estimated 82,000 infants and young children aged 0-23 months (IDPs and residing in NGCAs); of whom approximately 60,000 are children aged 6-23 months who require complementary food assistance.
- Elderly, especially those above 60 years of age.
- 100 per cent of pregnant and lactating women (3.7 per cent of population) residing in NGCAs and areas adjacent to the conflict zone.

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## HUMANITARIAN NEEDS

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- Immediate polio vaccination for children up to 10 years of age (1.7 million doses of OPV) to mitigate the outbreak in NGCAs.
- Strengthened Early Warning and Response Network (EWARN) for timely detection, reporting and response to avoid outbreaks. Priority diseases which need attention include acute respiratory infections, especially Acute Flaccid Paralysis, pneumonia, diarrhoea, meningitis, measles, HIV and TB. Water quality monitoring and treatment, awareness campaigns to avert risk of water-borne diseases.
- Additional mobile teams where health services are unavailable, including referral services for effective service

delivery, awareness campaigns on available health services, training including on post-traumatic psychological care, medical supplies and consumables. Mobile health services will be increasingly important during winter, especially for people whose mobility is already limited.

- Specialised care: life-saving treatment of communicable (such as TB, HIV, STI) and non-communicable diseases (cardiovascular illness, diabetes, acute respiratory and chronic diseases, cancer, etc.). Mental health support through deployment of psychiatrists and mental health workers to address issues of post-traumatic stress disorders, schizophrenia, alcoholism etc. as well as referrals, including training.
- Reproductive health care for pregnant and lactating women, especially prenatal and postnatal care.
- Rehabilitation care at primary and secondary levels.
- User friendly health services for GBV survivors, including post rape care, enhanced referral pathways. Training for syndromic management of STIs for primary level service providers.
- Repair/substitution of critical, life-saving medical equipment and training to operate the equipment.
- Increase coverage of age-appropriate baby food basket distribution. Training and support to mothers on breastfeeding and complementary feeding in pre-natal, perinatal and post-natal periods through health services.
- Expanded training for more than 200 primary healthcare workers and mobile team staff, including self-care and stress management.

22. Targeted children for polio vaccination in Donetsk and Luhansk oblasts amount to 370,000 (250,000 U6 and 125,000 U6), 41,000 U10 in Donetsk and 20,000 U10 in Luhansk.

## LIVELIHOODS AND EARLY RECOVERY

### OVERVIEW



Livelihoods and early recovery is critical to laying the foundation for successful rebuilding crisis-affected communities. In light of the lack of a peace settlement on the ongoing crisis, there are few reliable statistics on socio-economic indicators available in NGCAs and areas surrounding the 'contact line', due to access constraints and insecurity. Therefore, an immediate priority is to conduct rapid and flexible needs assessments through community consultations, focus group discussions, key informant interviews and/or surveys. This is essential for establishing a robust evidence base for developing area plans for targeted integration of early recovery programming, resource allocations, implementation and monitoring.

As a result of the crisis 10-24 per cent of population in GCAs<sup>23</sup> and in NGCAs<sup>24</sup> have no work. Assessments show that the main source of income for almost half the vulnerable population in GCAs is pensions and social benefits<sup>25</sup>. Some 88 per cent of the registered IDPs receive some form of social protection assistance, while Government survival minimum monthly expenditure value of UAH 1,218 (UDS 53.00) which is below the real cost of living<sup>26</sup> that Ukrainian Government estimates at UAH 1,330 (USD 57.82).

Market in GCAs needs strengthening to supply wider range of basic needs such as hygiene items, medicines and construction materials and farming inputs in support to recovery<sup>27</sup>.

Despite full market functionality in GCAs, earlier in the year some commodity chains were found to be less integrative than

23. REACH Survey, input from CWG

24. Roughly corresponds to the "Analytical Report" of Partnership for Progress, at 22% (Source: Consolidated analysis of humanitarian needs of the Donetsk region in 2016, Analytical Report. Partnership for Progress, Donetsk 2015, page 7), and 2015 Vulnerability Risk Assessment report page 2 at 23% unemployment among IDPs in places of joint residences.

25. FAO Socio Economic Impact and Needs Assessment (SEINA), September 2015

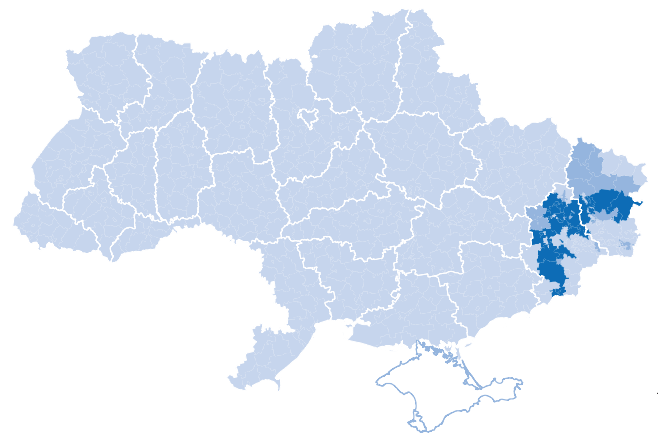
26. CWG Cash in NGCAs Delivery Analysis (to add sections on income and markets - 2nd trip)

27. Save the Children Rapid Assessment for Market (RAM), Slovyansk and Kramatorsk, March 2015

### NO. OF PEOPLE IN NEED

# 1.3M

### SEVERITY MAP



others, such as for hygiene items, medicines and construction materials, which affect appropriateness of cash modality<sup>28</sup>. The market system in NGCAs has undergone a period of rapid change in recent months, including currency switch and many cases a take-over of ownership and disruption of the trade links with the rest of Ukraine. The situation appears more stable than previous months but it still remains fluid and dependent on the future of the trade ban and political situation. In contrast, functionality of markets in the 'contact line' area remain constrained owing to insecurity, access, frequent closures, availability of products and prices<sup>29</sup>.

Much of the productive capacity of the coal, steel and con-

28. Save the Children Rapid Assessment for Market (RAM), Slovyansk and Kramatorsk, March 2015

29. Triangle Rapid Multi Sectorial Assessment

### COSTS INCREASED IN NGCAs\*



\* Compared to the same period in 2014 (January to September)

### REDUCED INCOME

Salaries in **NGCAs are 25% lower** than equivalent in GCAs



### UNEMPLOYMENT IN NGCAs



struction enterprises in NGCAs has been compromised by the conflict, leading to the loss of employment and livelihoods in several crisis affected communities. The commercial agricultural producers, which account for both permanent and seasonal employment, have been reducing investments and abandoning land. This resulted in reduced income for those depended on seasonal employment.

This has contributed to the large-scale displacement of local populations into neighbouring regions. Damage to transport, water and energy infrastructure is extensive along the 'contact line'. The exact scale of infrastructure rehabilitation remains unknown, but needs to be urgently assessed and prioritized for repair and restoration of critical public utilities and services.

There are approximately 4 million people in the GCAs, NGCAs and in the areas along the 'contact line' whose early recovery needs have not been adequately assessed, addressed or resolved. The exact degree of vulnerability of the population requires follow-up assessment to complement findings of the FAO Socio Economic Impact and Needs Assessment (SEINA) carried out in the rural areas in order to better target socio-economic recovery programming via an area-based approach. Consultations with local authorities, civil society organizations, communities, IDPs, amongst other stakeholders, have emphasized the need for immediate support for livelihoods recovery, particularly on employment and micro-to-small business development, as well as restoration of critical public infrastructure and social services. The populations at most risk due to decrease in economic wellbeing are host communities of Donetsk and Luhanska oblasts; particularly IDPs living in joint residences<sup>30</sup>.

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#### AFFECTED POPULATION

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- 1.3 million people deprived of their sources of income since the crisis in GCAs, NGCAs, and areas along the 'contact line', including female and elderly-headed households, disabled, women, and youth, where damage or use to local infrastructure is extensive, and/or have no access to basic services.

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#### HUMANITARIAN NEEDS

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- Area-based Early Recovery Planning and Response. Due to a general lack of transparency on community engagement in local planning processes, it is imperative that a robust evidence base be established to assist local authorities and service providers in prioritizing and delivering strategic and catalytic interventions to meet early recovery

needs of at-risk groups and vulnerable communities. This requires an inclusive and participatory approach that integrates conflict-sensitive, human rights based and gender responsive approaches for developing area-recovery plans for mobilizing local and international resources to deliver targeted interventions that meet the needs of the most vulnerable populations in conflict affected areas.

- Livelihood and stabilization needs. The degree of economic decline in the conflict-affected region and the country was greater than anticipated in 2015. The World Bank estimates that GDP will contract by 12 per cent in 2015 with lacklustre growth of 1 per cent forecasted for 2016. Unemployment is high at 9-10 per cent (with higher incidence among IDPs), and business environment for small and medium enterprise (SME) development is limited. Many IDPs are unemployed and compete for local jobs and resources. Cash shortages restrict people's ability to procure supplies. There is a critical need to inject cash for jump starting local economies by creating jobs through referrals and job placements and supporting micro or small businesses, support the recovery of the small and medium scale commercial agricultural sector, creation of emergency/ temporary employment schemes, particularly in restoring public infrastructure and services such as well as waste and debris management.
- Cross-line early recovery programming for restoring critical public utilities such as electricity and clean water is essential for stabilizing conflict affected communities along the 'contact line' and NGCAs. Emergency or temporary employment schemes must be integrated with targeting delivery of critical services to transient populations that regularly move across the 'contact line', and supporting cross-line early recovery programming opportunities that effectively leverage the coping mechanisms, skills and resources of individuals and target communities for building their resilience.
- Restoration of critical public infrastructure. The conflict in Donbas has caused extensive damage to socio-economic infrastructure, including medical and educational facilities, as well as water and energy supply systems. Based on preliminary reports, the greatest need for immediate restoration of public infrastructure are along the 'contact line' and NGCAs, while loss of jobs are greatest in the GCAs.

30. Estimation of vulnerability risks of Ukraine: Results of the survey's 1st wave. A consultancy report prepared by GfK Ukraine. July 2015.

## FOOD SECURITY

### OVERVIEW



Although the needs in NGCAs and along the 'contact line' are of the highest importance, these exist also in areas of high IDP concentration as their coping strategies are exhausted and the situation is further exacerbated by the country's economic crisis.

Since the onset of emergency, the cost of living has significantly increased across Ukraine. The food basket cost was 41.7 per cent higher in July 2015, compared to July 2014. Overall, 57.4 per cent of the households have difficulties in accessing markets, with a higher share recorded in NGCAs (69.1 per cent) compared to GCAs (45.7 per cent). In NGCAs, most of the food items are available at functional markets, yet they are out of reach due to the increasing prices, rising poverty and diminishing purchasing power of population.

In NGCAs, the situation is compounded by the ban on commercial supplies of food and medicines coupled with restricted humanitarian access. Prices of food commodities have been soaring up and are recorded to be 70 per cent higher than the national average<sup>31</sup>. In parallel, increase of prices of agricultural inputs and services have soared by on average 86 per cent, reducing the capacity of rural households to invest into subsistence crop production and maintenance of live-stock, further impacting food security, the availability of food on the markets and the food prices.

FAO SEINA<sup>32</sup> revealed that more than a third of the rural population in the last six months relied on assistance from their social support network. More than 40 per cent of the rural population provided support to friends and relatives. Pensions and irregular social benefits have become the most important income (67 per cent in GCAs; 53 per cent in

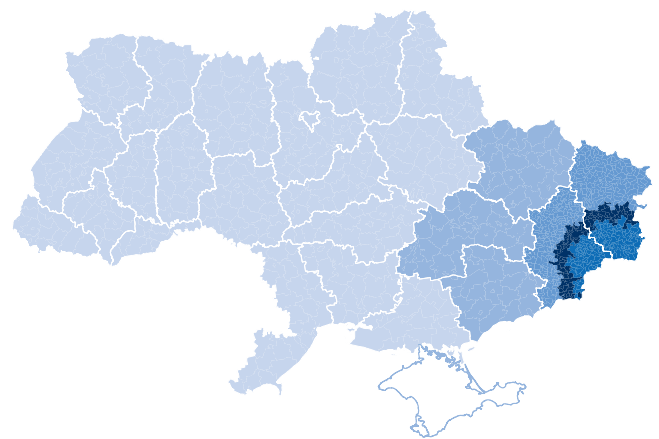
31. WFP VAM market update for the month of July 2015

32. SEINA in Donbas, Ukraine. FAO, September 2015

### NO. OF PEOPLE IN NEED

# 1.1M

### SEVERITY MAP



NGCAs)<sup>33</sup>. About 6 per cent of the IDPs' income is generated through casual labour, and humanitarian assistance accounts for 7.6 per cent. The main source of income has changed for about 9 per cent of people living in GCAs and 13.6 per cent in NGCAs<sup>34</sup>, mainly due to lower employment rates in the private and public sectors as well as lower activities in the self-employment sector. The debt burden increases continuously, as the households are not able to generate enough cash in order to cover their basic needs and repayment of debts in GCAs and NGCAs.<sup>35</sup>

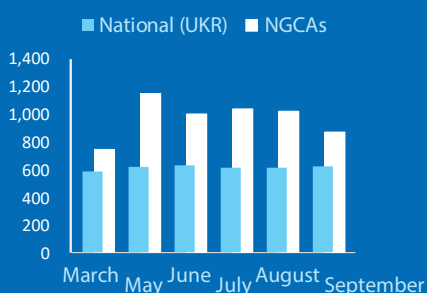
### The Multi Sector Needs Assessment (MSNA – March 2015)

33. Assessed by Save Children in June in IDP concentrated areas; and re-affirmed by SEINA in Donbas, Ukraine. FAO, September 2015

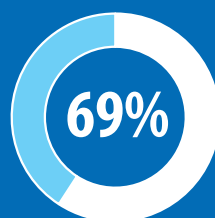
34. SEINA in Donbas, Ukraine. FAO, September 2015

35. Ibid.

### BASKET FOOD PRICES (UAH) 2015



### MARKET ACCESS IN NGCAs



Households have difficulties in **accessing markets**

### FOOD CONSUMPTION SEASONALITY

**Food security needs intensify** as temperature drops

**Energy requirements** increase by per person per day **100 kcal** with every drop of 5°C below 20°C

identified that 88 per cent of people living in NGCAs adopted negative coping strategies: spent savings, reduced food intake, reduced food and non-food expenditures, and seeking humanitarian assistance. These intensified as freedom of movement of goods was further restricted since June. The same assessment revealed that female-headed households had the poorest food consumption score. Preliminary findings from an ongoing food security assessment provided similar evidence.

Aside of pensions, agriculture is the second important livelihood source after industries in the Donbas region - 5.8 per cent of households cited it as their first source of income, and 15.8 per cent as second source. Small farmers practice agriculture on smaller holdings, mainly growing potatoes, wheat and seasonal vegetables/fruit, and keep a few heads of livestock like cattle (21 per cent), pigs (16.7 per cent), goats (15.7 per cent) and poultry (60.8 per cent). Kitchen gardening is a key coping strategy among these families, which is mainly for family consumption as 95 per cent of the rural households own land and 88 per cent engage in plant production. The agricultural production supplements not only household level food security and nutrition, but also generates cash for families through the sale of produce and keeping the market supplied and limiting the increase of prices.

A higher share of people living in the rural and suburban areas of NGCAs rely on subsistence farming to enrich their diet and generate some income compared to the GCAs. A considerably higher proportion of households in NGCAs (94 per cent) use animals and animal products exclusively for home consumption compared to GCAs. This indicates a greater degree of subsistence farming and may also indicate less opportunities to other income sources in the NGCAs, reinforced by the fact of the higher migration rate reported in this area<sup>36</sup>.

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## AFFECTED POPULATION

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- 0.8 to 1 million IDPs, 0.8 million people living along the 'contact line' and 2.1 million people living in NGCAs where the cost of living has increased manifolds and the food security situation has worsened.
- 200,000 families engaged in agricultural based livelihoods affected from the crisis.

36. SEINA in Donbas, Ukraine. FAO, September 2015

- Economically vulnerable host communities and host families.

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## HUMANITARIAN NEEDS

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- The cross triangulation of different available sources identified 1.1 million people in need of food security assistance throughout 2016. The major needs are found in areas along the 'contact line', followed by non-government controlled areas of both oblasts, and vulnerable displaced population and host communities (50,000) in different geographical areas of Ukraine. Moreover, an estimated 60,000 smallholders in the same identified categories (people living in the conflict zone, displaced population and host families) are in need of immediate agricultural assistance, both in terms of providing them with basic inputs for resuming crop production practices as well as for maintenance of their productive assets (livestock) for sustainably improving their household food security needs.
- Ukraine is known for its severe temperature drops during winter (November through March), when the food security needs intensify with substantially increased energy requirements (increased by 100 kcal per person per day, with every drop of 5°C below 20°C). Additionally, availability and access to food will be immensely affected due to the current ban on commercial food supplies to NGCAs. Since the period of five months from November to March represents a significant portion of the year, the food security interventions will consider the extended winterisation needs in the approach and response strategy during 2016.

## EDUCATION

### OVERVIEW



The conflict in Ukraine has caused and continues to cause major disruption to the education sector.

According to the most recent data from the MoSP, some 200,000, or around 13 per cent of all registered IDPs are children. October 2015 enrolment data from the MoES provides additional insights on the numbers and locations of enrolled IDP children<sup>37</sup>. These corroborating data sets reveal that a staggering 1 out of every 4 children living in the Government controlled areas of Luhanska and Donetska oblasts are IDPs.

The widespread displacement of students and their families, teachers and education personnel, uncertainty in the country has affected the education quality, the teaching and learning process for both IDP and hosting populations, and caused months (up to 48 school days) of lost school days (REACH assessment 2015). While the impact has been felt across Ukraine it is most palpable in the east. An assessment conducted by a cluster partner in October 2015 shows that 9 per cent of school-aged children living along the 'contact line' and areas of high IDP concentration in Government controlled areas are currently not attending school. The drop in enrolment from 99 per cent at this same time two years ago is alarming.

The MoES data did not indicate a major reduction of enrolled IDP children this school year, whereas there has been a 25 per cent and seven per cent increase in Government controlled areas of Luhanska and Donetska oblasts respectively. This adds pressure on the already strained education facilities of these oblasts.

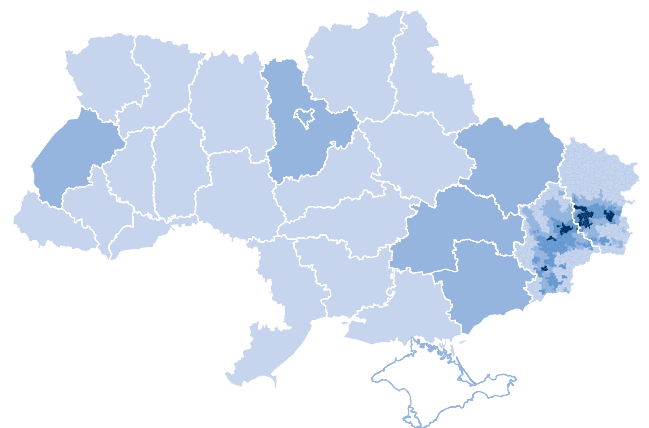
Educational facilities have been damaged by the conflict. In the NGCAs, nearly 200, or one of every five schools, has been damaged or destroyed. Where schools are still functioning, many are not prepared for the winter. Schools will be unfit

37. <http://data.worldbank.org/indicator/SE.PRM.ENRL.TC.ZS> According to World Bank ratios, the pupil to teacher ratio is 16, and the number of enrolled pupils is divided by the number of teachers.

### NO. OF PEOPLE IN NEED

# 1.0M

### SEVERITY MAP



for children if they are cut off from the damaged public utility systems (heat, water, electricity). The existence of mines and UXOs at or on the way to school limits access further. Mine risk education is required for all learners and educators. Of particular concern is the lack of access to kindergartens. In NGCAs, the most recent assessment (October 2015) by the Rinat Akhmetov Foundation found that only 58 per cent of pre-school age children were attending kindergarten due mainly to lack of available facilities. This is most pressing for IDP families with very young children. If one parent, usually the mother, must stay home to care for children, the family cannot get back to work and restart their lives.

Learners, teachers and hosting communities have suffered extreme psychosocial distress and the general breakdown in the social structure around the educational system. Many of the

### SCHOOLS DAMAGED OR DESTROYED



### CHILDREN DISPLACED IN DONETSKA AND LUHANSKA OBLASTS



### CERTIFICATES



IDP children have experienced violence before their displacement, and continue to express symptoms of psychological distress, reducing their ability to concentrate and to learn. In this context, well-trained teachers play a crucial role in providing a protective environment where learners can return to normalcy. Hosting communities are fatigued and conflicts have arisen between hosting and IDP communities. Teachers and students must learn to mitigate and avert conflict in the classroom.

Teaching and learning materials have become prohibitively expensive for parents due to drops in income, employment and increase in the costs of goods. The direct and indirect costs of education are heightened for families with many young children.

Currently, the school certificates issued by the *de facto* authorities are not recognised by Ukraine. The long-term consequences for the 180,000 learners remaining in the NGCAs that will need to have their certificates recognised in the future are not clear.

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## AFFECTED POPULATION

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- 194,000 IDP learners, 210,000 learners in NGCAs, over 50,000 learners in GCAs of Donetska and Luhanska oblast, over 56,000 teachers, over 450,000 in hosting communities.

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## HUMANITARIAN NEEDS

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- Support to physical access to education by restoring educational and recreational facilities for children, clearing dangerous roads to educational facilities, increasing the number of spaces for kindergartens.
- Advocacy for recognition of school certificates.
- Support restoring educational activities that ensure that schools are protective environments through catch-up classes, life skills including mine-risk education, conflict mitigation (learning to live together) and psychosocial support, provide teaching and learning materials for children in affected areas so children can learn.

## SHELTER/NFI

### OVERVIEW



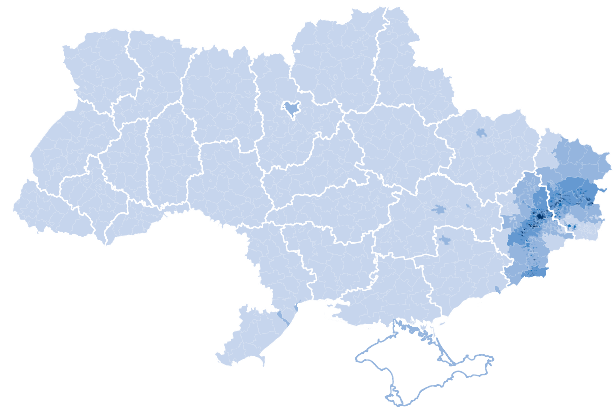
The greatest concentration of need for life-saving aspects of shelter/NFI assistance is in NGCAs, where dignified and adequate shelter is also required. There, an estimated 12,000 to 15,000 private houses have been damaged, out of which some 11 per cent are completely destroyed. In term of destruction, as the 'contact line' did not significantly move in 2015, there has been wide coverage of light and medium repairs by local populations and humanitarian actors. The main concern is serious structural damages and completely destroyed housing, for people experiencing a second winter living in unrepaired private housing or in unsustainable conditions. Trade ban, lack of jobs and sources of income hampers the ability of families' to repair premises, including through temporary sealing off. Returning families who have completely depleted their savings are in a similar condition. IDPs in NGCAs are living either in host families or rented accommodations or, to a lesser extent, are housed in collective centres. Close to insecure areas along the 'contact line' those who decided to remain or could not flee have been living for long periods in "bomb shelters", in inadequate living conditions.

In GCAs, access to adequate shelter remains a concern. In rural areas, 46 per cent of IDPs live in poor to extremely inadequate shelter conditions. In urban areas, 25 per cent of the IDPs are sheltered in overcrowded accommodations or are experiencing protection-related issues. Over 83 per cent of the IDPs accommodated in private housing (56 per cent in rented and 27 per cent in free-stay solutions). The number of IDPs staying in collective centres and collective-like accommodation has reduced since spring 2014. Over 24,000 people are still living, as last resort, in up to 300 collective centres, mostly near the 'contact line' or in large urban centres as they are unable to pay high rental prices. In Kyiv and other urban centres, the occupancy rate of collective centres is over 90 per cent. Integration or mid-term approach for IDPs in 'protracted'

### NO. OF PEOPLE IN NEED

# 0.9<sub>M</sub>

### SEVERITY MAP



situation and those who do not wish to return is urgent. This is particularly important for the over 50 per cent of the IDP population declaring incomes of less than US \$100 against a backdrop of severe erosion of coping mechanisms.

### AFFECTED POPULATION

- Displaced persons including 'stable' displaced in GCAs unwilling to return in the short-term or wishing to integrate; those crossing regularly between NGCAs and GCAs; and those displaced within NGCAs.
- IDPs whose financial resources are exhausted or have no job opportunities, especially single-headed households caring for young children, elderly, or persons with disabilities.

### SHELTER DAMAGE IN NGCAs



up to **15 000** private houses **damaged**  
**11%** out of them  
**destroyed**

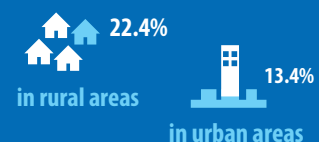
### IDPs SHELTER CONDITIONS

1 out of 2 IDPs live in  
**poor shelter conditions**  
 in rural areas



### AVAILABILITY OF HEATING AMONG IDPs

**IDPs who neither own  
 nor share a heater:**



- Returnees to conflict-affected areas in GCAs or NGCAs may be returning to shelters in need of repair, or be financially vulnerable having exhausted resources in displacement.
- Exhaustion of resources is also a concern for hosting families, leading to possibility of unsustainable hosting arrangements for displaced families.
- Non-displaced with damaged shelter in 'frontline' or former frontline areas are in need of repair to houses, and dependent on community-level localised context may lack access to functioning markets.
- Smaller groups of particular concern include those living in collective centres, and in bomb shelters in 'frontline' areas – circumstances that are a last resort triggered by economic or security factors respectively, and should not be considered long-term shelter solutions.
- Within NGCAs, extremely economically vulnerable population, even if not displaced and with otherwise adequate shelter, may be in need of a partial extension of winterisation support in order to avoid triggering displacement.
- Individuals with special needs (e.g. elderly, persons with disabilities or chronic illness, and female-headed households) living along the 'contact line' for whom restricted movement and market access are problematic; or those with limited ability to self-recover, lacking skills and capability to physically conduct repairs;
- Persons of working age unregistered as IDPs with no income, who fall outside Government's social safety nets.
- Depending on the evolution of conflict, need for repair of shelter damages will vary by location, with possible continued need for acute emergency shelter assistance along the 'contact line'. Need for dignified and adequate shelter in NGCAs will be linked initially with light and medium repairs for households who either stayed or have returned.
- Seasonal life-saving assistance will still be needed especially along the 'contact line' where disruption of market and facilities may seriously impact the most vulnerable. In villages along the 'contact line', up to 30 per cent report that they will not be able to stockpile supplies for winter 2015-2016, with fuel the most difficult item to access. In terms of lifesaving need, access to sufficient NFIs and heating as well as shelter insulation is of particular concern over the winter. Dependent on recovery of the local economy, access to specific items may remain limited.
- Addressing sub-standard and over-crowded accommodation is of particular concern for children, elderly, persons with disability or chronic illness, and for women at risk of sexual violence.
- Attention will be increased on finding transitional shelter solutions for population stranded in displacement, for IDPs who choose to not return but not able to secure dignified and adequate housing. In protracted displacement, humanitarian assistance will still be needed, along with a shift towards recovery (support of rent, transitional measures etc). The need for advocacy on integration will remain a priority, including on housing, land and property and other issues related to long-term concerns.

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## HUMANITARIAN NEEDS

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Two broad categories of shelter/NFI needs are identified, with differing emphasis in NGCAs and GCAs:

- Life-saving assistance: a) along the 'contact line' for communities experiencing ongoing conflict; b) for vulnerable groups in winter 2016-2017.
- Dignified and adequate shelter: a) for displaced populations in protracted displacement or seeking integration; b) repair to damaged housing.

## LOGISTICS

### OVERVIEW



Under the current situation in the conflict area, the need for delivery of humanitarian items remains high. The fact that transportation of commercial cargo by road as well as commercial delivery of various products such as food and medicines are prohibited by the Ukrainian legislation, makes the situation substantially more volatile. Although the fighting has decreased, the presence of UXOs on roads resulted in the closure of a few main access roads to NGCAs of Luhanska and Donetsk oblast. Only five official check-points are established by the Ukrainian authorities for entering to NGCAs, and only two of those can be practically used by humanitarian organisations. Procedures for 'importing' humanitarian cargo are complicated requiring a huge number of documents.

Despite the high number of available logistics companies in Ukraine, only few are ready to provide transport services to NGCAs due to the high risk of trucks damage or life risks. The requirement for truck drivers to have access permits for NGCAs reduces the number of available service providers and available equipment.

Limitation imposed by *de facto* authorities of so-called 'DPR' and 'LPR' for humanitarian organisations to operate on its territories reduced the delivery of humanitarian assistance to the affected population. Besides the humanitarian assistance provided from the Russian Federation, only few international humanitarian organizations are able to move the humanitarian cargo.

### HUMANITARIAN NEEDS

- There is a need to facilitate transportation of life-saving items including food, health, WASH, shelter materials and other non-food items from humanitarian organisations for further distribution to the affected population in NGCAs. Since its activation, the Logistics Cluster transported so far the total of 1,700 m<sup>3</sup> of humanitarian cargo.

As of October 2015, about a double amount of this volume has been registered for the Logistics Cluster pipeline for upcoming months. There is a big amount of cargo to be delivered to NGCAs which has not been registered but is in organizations' plans. There is a probability that the number of requests for cargo delivery to the NGCAs will increase during the winter months for possible assistance with food, shelter, health materials since the humanitarian needs might increase. If the UN and other humanitarian organisations are allowed to operate on NGCAs, a big volume of cargo will need to be urgently transported to Donetsk and Luhansk. Only two access points will make this task challenging.

- An additional access to NGCAs is foreseen through the railway delivery to Luhansk. The recently amended 'Temporary Order of the Security Service of Ukraine (SSU) on control of Movement of People, Auto Vehicles and Cargo along the 'contact line' in Donetsk and Luhansk Region' allows now delivery of humanitarian cargo by train. This mode of transportation would allow transporting big amounts of cargo (from 1 up to 50 wagons of 70 metric tons each) at once directly to Luhansk. The direct deliveries to Luhansk are currently challenging not only for political restrictions but also because of restricted physical access (risk of UXOs, no fiscal check-points, etc.), passage through the so-called 'DPR' is also risky due to security constraints. Since no humanitarian cargo delivery has yet been undertaken by train, facilitation in transport arrangement, handling and preparation of paperwork may be required for humanitarian organisations.
- There are limited warehouse service providers in NGCAs due to the ongoing conflict. Currently, the Logistics Cluster has got a capacity to provide approximately 2,000 m<sup>2</sup> of storage space in Donetsk and the same capacity in Dnipropetrovsk – a 'staging area' in the Government controlled areas for short storage of cargo prior to its

### INTER-AGENCY STORAGE CAPACITY



**2000 m<sup>2</sup>** storage space **Donetsk**

**2000 m<sup>2</sup>** storage space **Dnipropetrovsk**

### RELIEF ITEMS IN STOCK

**1500 m<sup>2</sup>** relief items in stock  
in Dnipropetrovsk

as of October 2015

### RAILWAY DELIVERY



**Railway delivery**

is foreseen

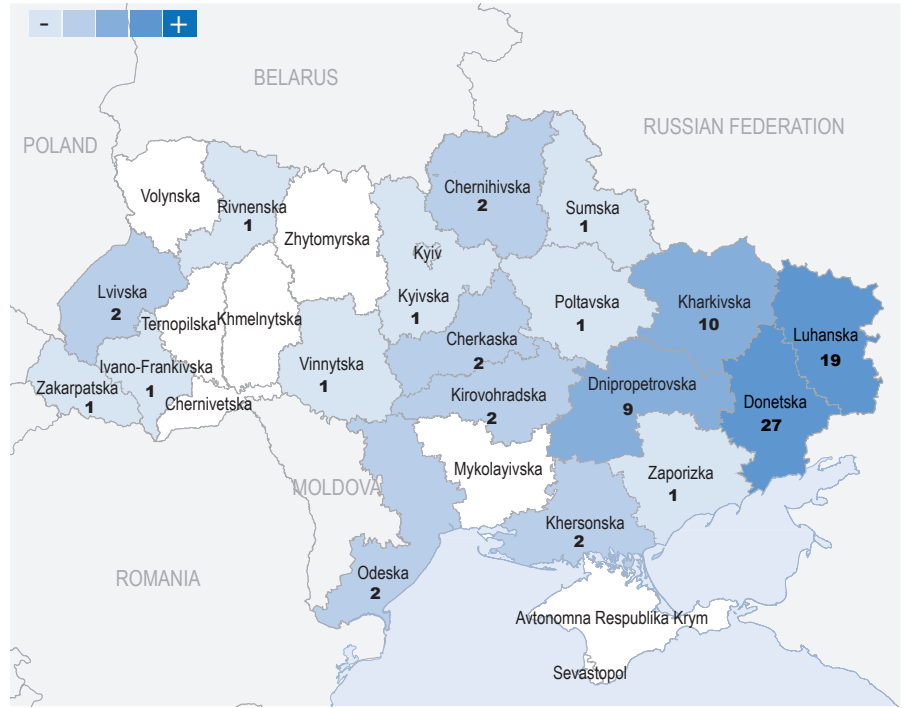
**to NGCAs Luhansk**

dispatch to NGCAs. In October 2015, approximately 1,500 m<sup>3</sup> of relief items are in stock in Dnipropetrovsk warehouse for further delivery to NGCAs. If humanitarian organisations resume their operations in NGCAs, they may face challenges establishing storage facilities: most of warehouses are not functioning because of lack of personnel or profit (due to decreased import of commercial cargo). Some are located in dangerous areas close to the 'contact line' and some were heavily damaged or destroyed. There may be a need for safe warehouse facilities to be operating in key locations of NGCAs – Donetsk and Luhansk. The opening of a railway corridor to Luhansk may also require warehouse facilities for humanitarian organisations for further distributions in Luhansk area. These facilities may be required in proximity to railway station.

- The flow of humanitarian cargo in NGCAs may also require coordination of deliveries to avoid congestion at access points. Coordination and information sharing on logistics gaps and logistics efforts of more than 30 humanitarian organisations may be needed to avoid duplication of work. Standard information management products such as situation updates, various maps including the access constrains map, logistics capacity assessment information will be required. Humanitarian actors may need a forum to discuss logistics issues and exchange their experience and concerns.

## INFORMATION GAPS & ASSESSMENT PLANNING

One of the major information gaps has been the lack of precise IDP figures impacting planning and programmes. Moreover, security constraints and lack of sustained access to areas along the ‘contact line’ and NGCAs have limited the scope, geographic coverage and detailed density of assessments. This has impacted the ability of partners and sector to conduct a deeper qualitative analysis, which will need to be further investigated and improved in the next cycle. In addition, lack of access and other constraints have severely limited consultations with affected women and men, boys and girls in affected communities, which will be taken up in the next humanitarian programming cycle.



NUMBER OF ASSESSMENTS

64

NUMBER OF PARTNERS

151

MULTICLUSTER



EDUCATION



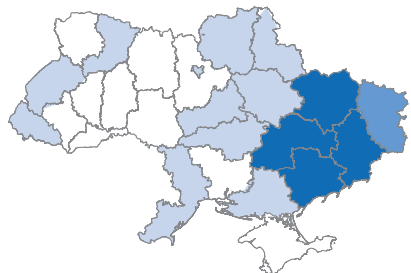
FOOD SECURITY



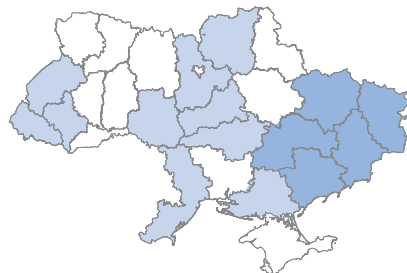
HEALTH AND NUTRITION



PROTECTION





























SHELTER/NFI



WASH



## NUMBER OF ASSESSMENTS BY LOCATIONS AND BY SECTOR

	Education 	Food Security 	Health/ Nutrition 	Multiclus- ter 	Protection 	Shelter/NFI 	WASH 	TOTAL
 CHERKASKA					1	1		<b>2</b>
 CHERNIHIVSKA					1	1		<b>2</b>
 DNIPROPETROVSKA					7	2		<b>9</b>
 DONETSKA	5	5	2	5	6	2	2	<b>27</b>
 IVANO-FRANKIVSKA						1		<b>1</b>
 KHARKIVSKA	1			1	6	2		<b>10</b>
 KHERONSKA					1	1		<b>2</b>
 KIROVOHRADSKA					1	1		<b>2</b>
 KYIV					1			<b>1</b>
 KYIVSKA						1		<b>1</b>
 LUHANSKA	2	2	2	2	5	2	4	<b>19</b>
 LVIVSKA					1	1		<b>2</b>
 ODESKA					1	1		<b>2</b>
 POLTAVVSKA					1			<b>1</b>
 RIVNENSKA					1			<b>1</b>
 SUMSKA					1			<b>1</b>
 VINNYTSKA						1		<b>1</b>
 ZAKARPATSKA					1	1		<b>2</b>
 ZAPORIZKA					6	2		<b>8</b>
<b>TOTAL</b>	<b>8</b>	<b>11</b>	<b>4</b>	<b>9</b>	<b>42</b>	<b>20</b>	<b>6</b>	