Ukraine        June 2023

Human Impact Assessment
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# Abbreviations and acronyms

<table>
<thead>
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<th>Acronym</th>
<th>Description</th>
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<tr>
<td>AIDS</td>
<td>Acquired immunodeficiency syndrome</td>
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<tr>
<td>CARI</td>
<td>Consolidated Approach for Reporting Indicators of Food Security</td>
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<td>CATI</td>
<td>Computer Assisted Telephone Interviews</td>
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<td>CRSV</td>
<td>Conflict-Related Sexual Violence</td>
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<td>CWG</td>
<td>Cash Working Group</td>
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<td>FAO</td>
<td>Food and Agriculture Organization</td>
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<td>FCS</td>
<td>Food Consumption Score</td>
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<td>FGD</td>
<td>Focus Group Discussion</td>
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<td>GBV</td>
<td>Gender-Based Violence</td>
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<td>GDP</td>
<td>Gross Domestic Product</td>
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<td>GoU</td>
<td>Government of Ukraine</td>
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<td>HIA</td>
<td>Human Impact Assessment</td>
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<tr>
<td>HIV/AIDS</td>
<td>Human Immunodeficiency Virus / Acquired Immunodeficiency Syndrome</td>
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<td>HNO</td>
<td>Humanitarian Needs Overview</td>
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<tr>
<td>IDP</td>
<td>Internally Displaced Person</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<td>INGO</td>
<td>International Non-Governmental Organization</td>
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<td>IOM</td>
<td>International Organization for Migration</td>
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<td>IT</td>
<td>Information Technology</td>
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<tr>
<td>LGBTQIA+</td>
<td>Lesbian, gay, bisexual, transgender, queer or questioning, intersex, asexual, and more</td>
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<tr>
<td>MEB</td>
<td>Minimum Expenditure Basket</td>
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<tr>
<td>MHPSS</td>
<td>Mental Health and Psychosocial Support</td>
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<td>MSNA</td>
<td>Multisectoral Needs Assessment</td>
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<td>NNGO</td>
<td>National Non-Governmental Organization</td>
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<td>OCHA</td>
<td>Office for the Coordination of Humanitarian Affairs</td>
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<td>ODIHR</td>
<td>Office for Democratic Institutions and Human Rights</td>
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<tr>
<td>Abbreviation</td>
<td>Description</td>
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<tr>
<td>OECD</td>
<td>Organisation for Economic Co-operation and Development</td>
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<td>OHCHR</td>
<td>Office of the High Commissioner for Human Rights</td>
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<td>OSCE</td>
<td>Organization for Security and Co-operation in Europe</td>
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<td>PIN</td>
<td>People in Need</td>
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<td>rCSI</td>
<td>Reduced Coping Strategies Index</td>
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<td>RDNA</td>
<td>Rapid Damage Needs Assessment</td>
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<td>SCORE</td>
<td>The Social COhesion and REconciliation Index</td>
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<td>SDR</td>
<td>Secondary Data Review</td>
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<td>SHARP</td>
<td>SCORE-inspired Holistic Assessment of Resilience of Population</td>
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<td>SMEB</td>
<td>Survival Minimum Expenditure Basket</td>
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<td>SRHR</td>
<td>Sexual and Reproductive Health and Rights</td>
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<td>SSSU</td>
<td>State Statistics Service of Ukraine</td>
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<td>UAH</td>
<td>Ukrainian Hryvnia</td>
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<td>UN</td>
<td>United Nations</td>
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<td>UNAIDS</td>
<td>Joint United Nations Programme on HIV and AIDS</td>
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<td>UNDP</td>
<td>United Nations Development Programme</td>
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<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>UNHCR</td>
<td>United Nations High Commissioner for Refugees</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children's Fund</td>
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<tr>
<td>UXO</td>
<td>Unexploded Ordnance</td>
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<tr>
<td>WASH</td>
<td>Water, Sanitation, and Hygiene</td>
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<td>WFP</td>
<td>World Food Programme</td>
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<td>WHO</td>
<td>World Health Organization</td>
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Acknowledgements

This assessment is a UNDP-led joint initiative of the United Nations, implemented at the request of the Government of Ukraine. The report was developed by IMPACT Initiatives and Centre for Sustainable Peace and Democratic Development. Representatives from the following United Nations agencies contributed to Human Impact Assessment report development: UNICEF, WFP, FAO, OHCHR, UNFPA, UN Women, IOM, UNDP, UNAIDS, UNHCR, WHO, and OCHA with the Resident Coordinator’s Office support. The agencies co-leading HIA pillars are:

1. Living Standards, Health, and Education: **UNICEF – WHO – UNHCR**
2. Social Inclusion: **UNDP – OHCHR**
3. Livelihoods: **UNDP – IOM**
4. Gender Equality: **UN Women – UNFPA**
5. Food Security: **WFP – FAO**

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We are grateful to the partners, the USAID-funded Democratic Governance East (DG East) and The Partnership Fund for a Resilient Ukraine (PFRU) for enabling the use of SCORE and SHARP data in this report.

The opinions and conclusions expressed in the report are the views of the authors of the publication and do not necessarily coincide with the official position of UNDP or other UN agencies.
Executive summary
The full-scale Russian invasion in Ukraine has had wide-reaching social and economic consequences, including those stemming from large-scale displacement, physical damage to buildings and infrastructure, and increased civilian casualties. It is estimated that the war has the potential to push more than 71 million Ukrainians below the poverty line and an additional 3.7 million close to it.\textsuperscript{1} Furthermore, the estimated number of people in need of humanitarian assistance increased to 17.6 million at the end of 2022, with the most severe conditions in the Southeastern macro-region and Dnipropetrovska oblast in the Central macro-region.\textsuperscript{2,3} Now, more than one year from the full-scale invasion, these effects continue to be felt by populations across the country, with concrete repercussions for individuals’ wellbeing and resilience.

Against the backdrop of these changes, this report assesses the impact of the war in Ukraine on people, their living conditions, health, access to education, livelihoods, food security, social status, gender equality and women’s empowerment. It considers the varied effects of the war on people living in different geographic regions of Ukraine, as well as the needs of population groups who are at particular risk of falling into poverty or otherwise experiencing negative effects because of the war. The analysis is based on a secondary data review, as well as qualitative and quantitative primary data collection, and concludes with recommendations for national non-governmental organizations (NGOs), international non-governmental organizations (INGOs), the United Nations (UN), and the Government of Ukraine.

**Key findings**

**Living standards, health, and education**

Living conditions, while initially affected by a variety of factors, have largely stabilized with access to basic services recovering at the national level after the first few months of fighting. Living standards faced a setback in winter 2022/2023 because of country-wide utility disruptions. The education system in Ukraine has remained functioning, albeit with disruptions caused by the war, with online learning becoming the norm in all regions except the Western macro-region, where in-person learning has resumed. Availability of health services quickly resumed after the start of the full-scale invasion, but the use of negative coping strategies by households, such as postponing care or reducing other expenses, increased due to the unaffordability of health services and medicines.

Households in the Southeastern and Northern macro-regions experienced the largest deterioration in living conditions due to damage to utility infrastructure, residential units, and health and education facilities. The groups most affected in this pillar have been households compounding displacement with other conditions of vulnerability such as older persons, large families, and persons with chronic illnesses or disabilities. Households remaining in areas directly affected by the war, mostly comprising of older persons, have experienced a more marked deterioration in their living conditions.

**Livelihoods**

Most households reported that the work of their household members had been affected since the start of the full-scale invasion, primarily due to job loss, salary cuts, and reduced working hours. Most households reported a decrease in income, with internally displaced persons (IDPs) and returnees being particularly vulnerable in this respect. There has been a decrease in access to paid work, as well as an increase in reliance upon humanitarian and government assistance, alongside support from friends and relatives (including remittances) as primary sources of income. Most households reported engaging in economically driven coping strategies to meet essential needs, such as spending savings, acquiring
additional work, and reducing health expenditure to meet other essential needs. Households reported that they could continue engaging in taking on additional work, but could not continue spending savings, reducing essential health expenditures, or taking on debt. Geographically, the impact of the war on livelihoods has been felt most greatly in the Southeastern macro-region.

**Food security**

The war in Ukraine has posed several risks to food and agricultural markets and trade, including risks related to logistics, price, production, and energy. Active fighting in parts of the country, lack of available labour, high production costs, and low farm-gate prices resulted in reduced cereal production, while mines and other remnants of the war in fields also constrained fertilizing and harvesting activities, leading to large areas of unharvested crops. While 2022 production volumes were sufficient to cover domestic needs, if agricultural production were to deteriorate further this could result in limitations to food availability in Ukraine. Despite sufficient food availability at national level, lack of household economic capacity has been the primary driver of food insecurity. Additionally, households faced a lack of physical access to food near the front line in the Southeastern macro-region due to undermined security, damage to infrastructure, and pockets of limited market functionality. Over the course of 2022, the proportion of households with inadequate food consumption increased from a fifth to a third, with the Southeastern macro-region being most negatively affected over time. The demographic groups most vulnerable to food insecurity include displaced households, households with a member with a disability, single parent households headed by women, households with people with chronic illnesses, and households with unemployed members.

**Social inclusion**

The number of individuals at risk of social exclusion and who require assistance has risen since February 2022. This includes IDPs, as well as veterans and persons with disabilities. The war has had disproportionate effects on those belonging to more than one target group, such as those who are displaced and live with disabilities, are older, or who are members of the Roma community. Certain groups have faced social stigma in dealing with the effects of the war, including Roma, persons living with human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS), and members of the lesbian, gay, bisexual, transgender, queer or questioning, intersex, asexual, and more (LGBTQIA+) community. Damage to national infrastructure has negatively affected inclusivity and accessibility of services, creating challenges in access to health care especially for groups with vulnerabilities. Experts also identified that unequal access to services particularly affects persons with disabilities, older people, low-income households, and the wider Roma community, as well as pointed to geographic disparities – namely, for those living in, or closer to, frontline or temporarily occupied regions.

**Gender equality**

The war has exacerbated the risk of gender-based violence (GBV), with experts and evidence pointing to increased reports of domestic or intimate partner violence and a heightened risk of conflict-related sexual violence, existing against the backdrop of difficulties accessing protection services. Both men and women have become more actively involved in NGO activities and initiatives to improve their communities, and although in the immediate period following the start of the full-scale invasion several women’s organizations were not fully operational, women’s leadership and their role in decision-making has somewhat increased at the family and community levels. However, when it comes to formal political and administrative decision-making processes, experts note that women are still underrepresented. In
terms of financial security, women respondents reported a lower household monthly income and were more reliant on aid and social welfare. Although gendered impacts on service access were not identified in this assessment, experts pointed to the intersectional challenges and discrimination faced by displaced Roma women, particularly regarding their access to health care, protection, and other basic services.

**Overall recommendations for resilience and recovery**

- Support the Government of Ukraine to implement its international commitments to protect the rights, and meet the needs of, all groups experiencing the effects of the war.
- Support households and local communities to rebuild the resources they have exhausted to mitigate the effects of the war.
- Continue the measures put in place to reduce barriers to accessing government-led social protection systems and ensure the adequacy and transparency of existing programmes.
- Ensure that interventions are cohesive and inclusive at the national level, while considering the specific needs encountered in each region and building linkages to area-based recovery plans.
- Adapt recovery efforts in line with the changing needs of remaining and returning populations.
- Establish conditions for safe and sustainable return and reintegration.
- Prioritize building inclusive societies during the war and in the immediate post-war period.
- Engage INGOs, national civil society organizations, donors, and international financial institutions in social inclusion efforts.

**Sectoral recommendations**

- Establish policies and interventions aimed at restoring agricultural production.
- Invest in education and skills training initiatives to bolster Ukraine’s human capital and increase labour productivity.
- Prioritize livelihoods interventions which reflect the economic and demographic changes that are taking place in Ukraine.
- Create an enabling environment for women and displaced persons to work outside the home, engage in home-based livelihoods activities, and participate in activities delivered by development and humanitarian actors.
- Ensure that survivors of GBV, harassment, and war-related trauma have access to appropriate support services.
- Develop policy and legal frameworks to facilitate access to affordable and appropriate housing opportunities.
- Continue the health reform aimed at increasing access to health services and medicines.
1 • Methodology
The objective of this Human Impact Assessment (HIA) is to evaluate the overall impact of the war in Ukraine on the population; their living conditions, health, access to education, livelihoods, food security, and social status; gender equality and women’s empowerment; and multi-dimensional poverty and human development.

Area of study and population of interest

This report considers the impact of the war across all areas of Ukraine which were under the control of the Government of Ukraine (GoU) at the time of assessment. It includes all population groups in both rural and urban areas, with a particular focus on selected groups (women, IDPs, older persons, persons with disabilities, LGBTQIA+, and Roma communities).

The macro-regional stratification chosen for this assessment aligns with the GoU’s agenda for recovery, and the regions referenced during the Ukraine Recovery Conference held in Lugano, Switzerland in July 2022 (see Annex 2 for a map of assessed oblasts).

Analysis overview

This assessment employed a mixed methods approach to gathering data and analysing the impact of the war on people in Ukraine. The findings reflect an extensive secondary data review (SDR), as well as a nationwide primary data collection exercise covering 3,239 households across 24 oblasts (excluding areas beyond the control of the GoU). It is representative with a 95 percent confidence level and 5 percent margin of error at the macro-regional level. Qualitative data collection included 10 focus group discussions (FGDs) and 23 key informant interviews (KIIs), specifically covering topics related to gender and social inclusion.

Identification of data sources and gaps

As part of the HIA methodology, an SDR was conducted to construct a baseline for understanding the pre-war situation in Ukraine, and to identify comparable data produced in the period since February 2022, based on the core themes outlined in the Guidelines for Assessing the Human Impact of Disasters. This analysis is constructed around five core pillars: Living Standards, Health, and Education; Livelihoods; Food Security; Social Inclusion; and Gender Equality. In addition, selected groups with vulnerabilities identified at the research design phase in consultation with the GoU and civil society organizations (CSOs) were assessed across these pillars; however, the HIA is unable to provide a comprehensive overview on all groups with vulnerabilities within Ukraine.

Alongside this SDR, representatives of 12 United Nations agencies contributed to the development of the HIA: UNICEF, WFP, FAO, OHCHR, UNFPA, UN Women, IOM, UNDP, UNAIDS, UNHCR, WHO, and OCHA, with support from the Resident Coordinator’s Office. The agencies co-leading HIA pillars are:

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3. Livelihoods: UNDP – IOM
4. Gender Equality: UN Women – UNFPA
5. Food Security: WFP – FAO
From these pillar consultations, the team produced an indicator framework for assessing the impact of the war in each area. Sources identified during the SDR were mapped across the indicator framework (see Annex 1), to identify relevant data sources pre- and post-February 2022, as well as gaps in the available data. This indicator mapping exercise yielded the following data gaps, which served as the basis for developing the HIA primary data collection tools:

**Table 1: Summary of data gaps resulting from the SDR, by pillar**

<table>
<thead>
<tr>
<th>Living Standards, Health, and Education</th>
<th>Data were available across nearly all indicators, though the existing data could not always be disaggregated for target population groups.</th>
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<tbody>
<tr>
<td>Livelihoods</td>
<td>The available data could not always be disaggregated due to limited sample sizes, and the availability of data for certain indicators such as sources of income and damages to household assets was limited. Data on the use of certain coping strategies were not available for the post-February period.</td>
</tr>
<tr>
<td>Food Security</td>
<td>There were gaps identified in nationwide pre-February data availability for specific household food security indicators – such as the food consumption score (FCS) and the reduced Coping Strategies Index (rCSI) – that are typically collected in humanitarian response settings.</td>
</tr>
<tr>
<td>Social Inclusion</td>
<td>Existing research did not include certain data points related to access to public services.</td>
</tr>
<tr>
<td>Gender Equality and Women’s Empowerment</td>
<td>Post-February data gaps were identified around the evolution of household-level decision-making and protection-related indicators.</td>
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The tools for primary data collection were developed with the aim of filling these specific data gaps and to complement other existing large-scale post-February datasets.

**Selection of primary data sources**

Two main types of data sources were referenced for this assessment, which served as the basis for much of the analysis:

- Nationwide primary datasets, including:
  - The primary data collected by IMPACT specifically for the HIA (including a household survey as well as KII and FGDs to target particular demographic groups);
  - The REACH Initiative and WFP’s 2022 Multi-Sector Needs Assessment (MSNA);
  - The Centre for Sustainable Peace and Democratic Development’s (SeeD’s) Social Cohesion and Reconciliation Index (SCORE);
  - The SeeD SCORE-inspired Holistic Assessment of Resilience of Population (SHARP); and
  - Datasets from the State Statistics Service of Ukraine (SSSU).

These datasets were selected based on their geographic coverage, methodological rigour, size of the sample, as well as the ability of the assessment team to conduct additional analysis in line with the needs of the HIA. Methodology notes for these datasets (excluding those produced by the SSSU) are included as annexes to this report (see Annexes 2, 3, 4 and 5).

- Reports and analysis from United Nations agencies, including the World Food Programme (WFP), UNDP, the Food and Agriculture Organization (FAO), the International Organization for Migration (IOM), the United Nations High Commissioner for Refugees (UNHCR), the United Nations Children’s Fund (UNICEF), the World Health Organization (WHO), the United Nations Population Fund (UNFPA), UN Women, and the Office of the United Nations High Commissioner for Human Rights (OHCHR); as well as the Rapid Damage and Needs Assessment (RDNA) and the OCHA-coordinated Humanitarian Needs Overview (HNO).
The data sources above are not an exhaustive list of those referenced in this report; they represent only a selection of the information reviewed. A full list of sources is referenced in the endnotes.

The final stages of the assessment included consultations with each of the pillar lead agencies to validate the findings and recommendations, as well as with CSOs, the Cabinet of Ministers, and the Presidential Office.

**Challenges and limitations**

Given the complex security situation in Ukraine, as well as the evolution of the data landscape across the country, this assessment has certain limitations. This includes:

- Many of the data sources which existed prior to February 2022 are no longer maintained, and similarly many of the post-February data sources do not have a directly comparable pre-February counterpart. Therefore, this assessment can only provide a summary of the observed impact across key sectors and indicators and cannot provide directly comparable analysis of statistics or individual data points.
- Similarly, the sample sizes, assessment methodologies, and phrasing of indicators varied across data sources. Every effort was made to provide this context for each data point; however, all comparisons should be considered indicative and cannot be statistically verified.
- The geographic macro-regions selected for analysis align with the GoU but are not consistently used across humanitarian and other actors in Ukraine. This limits the ability for macroregional aggregations and comparisons to be made across data sources that were not directly analysed by the assessment team.

Further limitations which specifically relate to HIA primary data collection activities (see Annex 2 for a detailed methodology note) include:

- The quantitative survey was sampled at the household level and administered to a single respondent per household, answering on behalf of the household, including questions about individual family members. All the questions were answered by the head of household (or an adult household representative), who was assumed to report accurate information on behalf of the household as a whole and on individual members. While such a strategy allows analysis to be generalized to the broader household unit, bias may be introduced where other household members hold different views and experiences from the survey respondent.
- The sampling strategy for the quantitative data collection exercise focused on surveying households residing in areas under the control of the GoU at the time of assessment. However, no Global Positioning System data could be collected, as data were collected by phone using computer-assisted telephone interviews, so the actual location of households could not be independently verified.
- Large areas of the Southeastern macro-region were not under the control of the GoU at the time of data collection, and therefore were excluded from the survey sample. The HIA survey findings for this macro-region only represent the views of households in the remaining areas, which in general were either heavily conflict-affected or had been outside of the control of the GoU for certain periods.
- Data collection took place over the months of December 2022 and January 2023, when the power grid of Ukraine was experiencing frequent cuts. This required the data collection team to limit working hours and meant that a higher proportion of phone calls were not answered, requiring the team to extend the data collection period to reach the full sample of households.

Every effort was made to account for and mitigate the potential effects of these limitations on the findings of the assessment.
2 • Context of the socio-economic situation
Purpose of the HIA

By joining the 2030 Agenda for Sustainable Development in 2015, Ukraine set targets and objectives for sustainable social progress geared toward eradicating poverty, reducing inequalities, and making improvements related to health and well-being, education, gender equality, clean water and sanitation, access to decent work and economic growth. However, since February 2022, the political agenda of Ukraine has been led by the war. It is estimated that the war has the potential to push more than 71 million Ukrainians below the poverty line and an additional 3.7 million close to it. In this context, it is essential to ensure that the needs of individuals, particularly those most vulnerable to the impacts of war and whose situation was already weakened by the pandemic and protracted conflict in the east since 2014, are not obscured and that no one is left behind.

This report focuses on the impact of the war on populations, to draw out implications and priorities for recovery. It is intended to highlight the specific needs of the population groups more at risk of falling into, or experiencing a deepening of, multi-dimensional poverty as a result of the war. These vulnerabilities can both come from, and combine with, socioeconomic, geographic and demographic characteristics; the 2017 Ukraine Baseline National Report on the Sustainable Development Goals (SDGs) identified large families and rural households to be the most at risk of falling into poverty. Prior to the war, groups with vulnerabilities included IDPs, veterans, older persons, single-headed households, persons with disabilities, persons with chronic illnesses, and children living close to the contact line, among others. The war has increased the size of these groups and amplified pressure on other groups – such as households of veterans and families of fallen soldiers – at risk of becoming further marginalized. These groups are likely to have unique needs with specific recovery and reconstruction implications.

Ukraine’s economic structure and regional landscape

Before February 2022, the primary humanitarian and recovery needs were concentrated in eastern Ukraine. People in those areas were under regular shelling and subject to precarious security conditions. Gaps in social services were becoming more acute in areas close to the contact line, and the health situation was deteriorating, even ahead of the COVID-19 pandemic. The 2022 Ukraine HNO, focused on affected Donetska and Luhanska oblasts and IDPs, estimated that at the end of 2021, 2.9 million people needed humanitarian assistance. The largest humanitarian needs were estimated to be: access to water, sanitation and hygiene (2.5 million people); protection from the physical and/or psychological harm resulting from violent or crisis situations (2.5 million people); health (1.5 million), and food security and livelihoods (1.1 million).

Back in 2021, Ukraine’s gross domestic product (GDP) growth was comparatively low (3.4 percent year-on-year) when considered to that of Central Europe and the Balkans, which was 6.1 percent year-on-year. Like its neighbours, Ukraine also experienced COVID-19 lockdown-induced contractions of GDP at a rate of -3.8 percent, compared to the average of -3.4 percent for Central Europe and the Balkans as a whole.

In the last decade, the national economic structure of Ukraine, previously heavily focused on the export of goods, progressively shifted to include a strong service economy, with an emphasis on information technology (IT) services, which made up 39 percent of service exports in 2021 (compared to 14 percent in 2014). The service sector employed most of the workforce in 2021 and accounted for half of GDP. In contrast, agriculture made up only 11 percent of national GDP in 2021 and 14 percent of employment but a large proportion of total exports (43.9 percent). As one of the major grains and vegetable oil producers in the world, Ukraine played a critical role in ensuring global food security.
The labour market had structural weaknesses, such as a relatively high and persistent unemployment rate (10.1 percent for women and 9.5 percent for men in 2021), a sustained gender gap, as well as a shrinking labour force due to an aging population and outflow migration. When considered alongside the fact that Ukraine’s population was already aging, demographic projections estimated that thirty years from now, Ukraine’s population could fall by up to a third. Such a large decrease would have structural consequences for Ukraine’s economy and implications for social protection systems within the country.

The International Labour Organization (ILO) also highlighted “elevated youth unemployment and inactivity, and a notable skills mismatch”. In addition, there was a high degree of informality in the labour market (21 percent of the workforce in 2019), mainly in the agriculture, wholesale and trade, and construction sectors. Informal work is often associated with lower or absent social protection, meaning that millions of Ukrainian workers were not covered by most of the benefits accessible to formal workers. Pandemic-induced lockdowns forced many small- and medium-sized businesses to close, which led to an immediate reduction in working hours from March to June 2020 and a more sustained trend of reducing labour costs.

Before the war, Ukraine was characterized by increasing inequality with Kyiv city, the central oblasts (Dnipropetrovska, Poltavsk) and some eastern oblasts (Kharkivska, Zaporizka) on a faster track of economic growth than conflict-affected areas, and western and central parts of the country. While the cities of Kyiv and Kharkiv attracted most of the IT and financial service activities, eastern oblasts had higher concentrations of industrial activities, and regional centres in those oblasts attracted most of the national and international investment. This led to growing income disparities between those areas and the rest of the country, further exacerbated by increased labour migration from western oblasts to neighbouring countries. This disparity was indeed reflected in the labour market, with lower unemployment rates in southern and eastern oblasts in addition to Dnipropetrovska and Kyiv. The conflict-affected areas of Donetska and Luhanska oblasts were excluded from these regional dynamics. In 2021, the highest unemployment rates were found in the areas of Luhanska and Donetska oblasts under the control of the GoU (15.9 percent and 15.3 percent respectively).

Widening socio-economic vulnerabilities since February 2022

One immediate consequence of the war was large-scale population displacement. From 1.5 million in 2021, the number of IDPs peaked at 7.1 million in April 2022, according to IOM, and it had fallen to 5.4 million by January 2023 (which may be explained by increasing patterns of return observed through 2022 and into 2023). In addition, UNHCR recorded some 8 million Ukrainian refugees across Europe at the end of January 2023. High levels of displacement, especially outside Ukraine, have heightened already existing demographic concerns about Ukraine’s shrinking skilled labour force, especially as 2 million children have left Ukraine and are expected to remain abroad in other parts of Europe. As a result of the war, Ukraine is likely to have more female-headed households, a larger proportion of single earner households, and increasing numbers of households with individuals with disabilities.

The estimated number of people in need of humanitarian assistance increased from 2.9 million at the end of 2021 to 17.6 million at the end of 2022. The humanitarian sector with the largest people in need increase was shelter and non-food items (NFIs), with an additional 8.1 million people in need. The war changed the demographics of people in need, with a relatively lower share of older persons (22 percent in the 2023 HNO, 76 percentage points less than the 2022 HNO), and slightly decreasing share of adults (54 percent in the 2023 HNO, 3 percentage points less than the 2022 HNO) and an increasing share of children (23 percent in the 2023 HNO, 10.4 percentage points more than the 2022 HNO), with more severe conditions in the Southeastern macro-region and Dnipropetrovska oblast (see Figure 1). Across all humanitarian sectors, women and girls were found to be more in need than men and boys.
Figure 1: Estimated severity of needs by macro-region in 2022, as a percentage of people in need

Source: Ukraine humanitarian needs overview 2023 (data based on assessments and analysis conducted between February and October 2022).

Economic situation and recovery needs

The war also affected the work of many industries in eastern oblasts, shutting down aerial freight and disrupting supply chains. The government introduced capital controls and fixed the exchange rate to avoid additional financial implications. By the end of 2022, GDP had declined by 29.2 percent and the inflation rate stood at 26.6 percent. The trade deficit more than doubled between December 2021 and December 2022. As of October 2022, the ILO estimated that 2.4 million jobs had been lost compared to the pre-February period. Businesses reportedly still expect to reduce their workforce in 2023 but at a slower pace than in 2022. However, given the scale of the shock and the occupation of up to 24 percent of Ukraine’s territory in 2022, the economy showed considerable resilience through the continuance of goods and services provision in major cities, as well as production in areas where it remained possible, and the economic outlook for 2023 is projected to be more favourable.

Large-scale population displacement, combined with conscription, has resulted in imbalances in the labour market. Most Ukrainian refugees abroad, according to UNHCR monitoring, are highly employable, resulting in shortages of highly skilled workers within Ukraine. These workforce demographic changes will be particularly important when looking ahead to labour market recovery, which will need to account for the loss of highly skilled workers and help facilitate integration of IDPs into local labour markets.

The RDNA estimated in February 2023 that in one year, direct damage to buildings and infrastructure amounted to $135 billion, while the total estimated amount of recovery and reconstruction needs reached $411 billion. The geography of damage to physical capital was skewed towards the Northern and Southeastern macro-regions. The main sectors damaged were housing (38 percent of all damage), transport (26 percent), energy (8 percent), commerce and industry (8 percent), and agriculture (6 percent). Physical damage and land contamination with mines reduced Ukrainians’ access to basic services and livelihoods. The war has also resulted in major setbacks in Ukraine’s progress toward poverty reduction, with the poverty rate rising from 5.5 percent in 2021 to 24.1 percent in 2022.
The war in Ukraine initiated a sizable multilateral response from the GoU, the international community, the Ukrainian diaspora, and residents of Ukraine. Bilateral aid, including financial, military, and humanitarian aid, was estimated to have reached $144 billion as of January 2023. OCHA reported that $4.3 billion of funding was allocated to the Ukraine response in 2022 (compared to $170 million in 2021). Before the war, Ukraine was the largest recipient of remittances in Europe and Central Asia with record-high inflows of $18.2 billion (9 percent of GDP) in 2021. In November 2022, it was projected that remittance inflows to Ukraine would increase to $18.4 billion in 2022. However, according to the National Bank of Ukraine estimates, remittance flows to Ukraine stabilized and stopped growing over the course of 2022.

### Population groups most at risk

Groups with vulnerabilities are already generally less able to absorb the shock of the war to their living conditions and livelihoods (see box below). Some of these groups were also likely to have been displaced two or more times, given that key areas for resettling from the conflict in eastern Ukraine were in close proximity to the frontline throughout 2022.

The situation in cities contrasts with that in rural settlements. Rural households, which accounted for 30 percent of the population before the war, in general were more socially disadvantaged in livelihoods and living conditions, although they were more food secure as they could consume their own farm produce; they tended to experience higher unemployment rates, lower access to social services, and a more acute gender gap. Moreover, rural households engaged in agriculture have been affected by the war, with a quarter of respondents to a representative survey conducted by FAO at the end of 2022 mentioning stopped or reduced their agricultural activity at the time of data collection as a result of the war. Urban households have mostly taken place toward urban centres. Damage to infrastructure and housing has also been predominantly focused on urban areas, resulting in safety and security risks for civilians and putting pressure on local transportation and housing infrastructure, two of the most damaged sectors since the war started.

#### Spotlight on groups with vulnerabilities

The groups with vulnerabilities identified as being particularly at risk of war-related impacts are single-headed households, large families, persons with disabilities, older persons, persons with chronic illnesses, members of the Roma community, and members of the LGBTQIA+ community.

**Single-headed households and large families.** Single-headed households tend to be reliant on fewer sources of income, and therefore are more vulnerable to shocks which affect the labour market and employment opportunities. Women who are single heads of household may have additional pressures resulting from care responsibilities. Similarly, large families tend to be more economically vulnerable.

**Persons with disabilities, older persons, and persons with chronic illnesses.** These groups have been particularly affected by insufficient physical and financial resources to move outside conflict-affected areas. Persons with disabilities and older persons are more likely to have difficulty accessing bomb shelters, even more so with utility disruptions. People with chronic illnesses have faced difficulties accessing regular care and affording the cost of medicines.
Displacement can lead to worsening health conditions and additional barriers to accessing health services. People belonging to those groups who stayed in conflict-affected areas reported feeling trapped.\(^5\)

The Roma community located primarily in western and southern Ukraine, has been marginalized for decades, with limited representation in public life, low access to services, and economic engagement characterized by informal activities. Even alongside visible institutional progress such as the Roma Action Plan 2020, qualitative evidence from the HIA pointed to a lack of access to basic services among Roma populations.

The LGBTQIA+ community, are more likely to be subject to stigma and negative perceptions in Ukrainian society, although some large cities have been more inclusive. The war has resulted in more barriers to basic services, difficulties coping with income loss, and displacement-related challenges while being more at risk of protection violations.\(^6\)

\(^3\) Victoria Andrievska and Kristy Siegfried, ‘I just can’t stand aside if I know that I can help.’ 23 June 2022, UNHCR Ukraine.
3 • Key findings on living standards, health, and education
Key messages

At the national level, while access to basic services were restricted at the beginning of the war, living standards rapidly recovered and maintained relative stability since then. Country-wide utility disruptions throughout the winter of 2022/2023 resulted in a setback to living standards. Regional differences also exist, with the Northern and Southeastern macro-regions most affected by utility disruptions and damage to accommodation since the start of the war.

The education system in Ukraine has remained functioning, with online learning becoming the norm in all regions except the Western macro-region, where offline learning still prevailed. Attendance at general secondary school was less affected than preschool education.

Availability of health services quickly resumed further in 2022, but the use of negative coping strategies (such as postponing care or reducing other expenses) by households has increased and negatively affected access, as households have struggled to financially meet basic needs since the start of the war.

Households in the Southeastern and Northern macro-regions experienced the largest deterioration in living conditions due to damage to utility infrastructure, residential units, and health and education facilities. Most recorded civilian casualties also occurred in these macro-regions.

The groups most affected in this pillar have been households affected by multiple factors increasing vulnerability: displacement, older persons, large families, children, and persons with chronic illnesses or disabilities. Households remaining in areas directly affected by the conflict, mostly comprised of older persons, have experienced a more marked deterioration in their living conditions.
Context

The HIA framework for understanding the impact of the war in Ukraine on living standards is based on the Multidimensional Poverty Index, which focuses on three dimensions of deprivation: standard of living, health, and education. Ukraine had previously ranked highly in most international ranking systems considering these dimensions. In 2021, Ukraine was also on the list of countries with a high Human Development Index. While multidimensional poverty remained low before the war, the conjunction of the conflict in eastern Ukraine with the pandemic led to increasing challenges for groups with vulnerabilities in accessing services and inadequate support by the state.

Living standards

Before the war, Ukrainian households experienced a two-decade-long improvement in living standards. Between 2001 and 2021, the national GDP per capita increased from $8,243 to $12,944, although from a comparative perspective it remained the lowest across Europe. Households commonly reported owning durable assets that are considered indicators of prosperity, such as colour televisions, washing machines and refrigerators. In the last decade, households tended to own more durable assets, especially ITC assets such as computers, laptops, tablets, and smartphones.

Access to utilities was consistent across most of Ukraine before February 2022, with nationwide electricity, gas, district heating, water and sanitation, and telecommunications networks. Before the war, 100 percent of households had access to electricity. Despite this largely consistent availability, infrastructure networks were in need of investment to improve energy efficiency and the quality of service. Throughout the country, the price of utilities, combined with poor insulation of buildings and inefficiencies in the district heating system, were preventing 17 percent of households from heating their accommodation adequately during winter. Access to and quality of water have also been a long-standing challenge for households in Ukraine. In 2020, 89 percent of the population reportedly had access to safely managed drinking water. However, only 26.5 percent of rural households had access to a centralized water supply in the same period. In Donetska and Luhanska oblasts, water quality was limited by environmental pollution caused by heavy industries, and the area faced water management issues from 2014.

The start of the conflict in 2014 caused a deterioration in living standards for many households from eastern oblasts. Nearly half of the households in areas of Donetska and Luhanska oblasts which were under the control of the GoU reported having sporadic electricity outages. In the areas of active conflict, 55,000 houses were destroyed and 1.7 million people were displaced and an unknown quantity of assets lost. Of the 2.9 million people in need in 2021, 1.1 million were in the GoU-controlled areas of Donetska and Luhanska oblasts, 1.6 million in areas beyond the control of the GoU, and 0.2 million were internally displaced. This conflict-affected population included 54 percent women and girls, 13 percent children, 13 percent persons with disabilities, and 30 percent older persons (60+) categorized as being particularly vulnerable.

Health

Prior to February 2022, the national health system, characterized by a dense network of public health care facilities across the country, struggled to achieve universal coverage. The main gaps identified in the health care system were high out-of-pocket payments, and high incidence of impoverishing and catastrophic expenses related to lack of coverage of prescribed medicines and dental care.
Out-of-pocket expenses made up on average more than half of total household health expenditure (51 percent in 2019) nationwide, far above the Organization for Economic Co-operation and Development (OECD) average (14 percent in 2019). Therefore, lower-income households were disproportionately limited in access to health care services, even when going to public facilities. Rural households also had more difficulty accessing health services which were often located in cities; in 2021, 24 percent of rural households indicated the absence of a medical institution or pharmacy near their dwelling.

When considering international comparisons, Ukraine fell behind against several health-related indicators. As of 2020, the country had one of the lowest life expectancies at birth for men (66 years) and a substantial gap compared to women (76 years). Prevalence of AIDS and tuberculosis were also among the highest in Eastern Europe, mainly due to drug usage. As in other countries around the world, the COVID-19 pandemic put further pressure on the national health care system with the exhaustion of care workers and shortages of essential medical supplies.

In addition to these more systemic challenges, the conflict in eastern Ukraine resulted in numerous civilian and military casualties, mostly in 2014 following the outbreak of the conflict. Between 2014 and 2022, 3,404 civilian casualties were recorded and between 7,000–9,000 injuries. The conflict also destroyed or damaged health facilities and equipment in these oblasts, in some cases compelling practitioners to flee conflict-affected areas, leaving gaps in medical coverage for the remaining inhabitants. The 2022 HNO estimated that 1.5 million people required care (of whom 31 percent were over 60 years old) in Donetsk and Luhansa oblasts. A COVID-19 outbreak at the end of 2021 put even more pressure on health services in these areas. Conditions were particularly acute for older persons and persons with disabilities living close to the ‘contact line’, facing markedly lower levels of ability to access health care services.

After several years of conflict in eastern Ukraine, mental health was a growing concern amongst vulnerable groups, including children, youth, older persons, military members, and IDPs. Research conducted in 2017 suggested that mental health disorders could affect up to 30 percent of Ukraine’s population in their lifetime. The rate of suicide, especially among men, was high compared to international averages (6.5 for every 100,000 people amongst women and 39.2 for men in 2019, compared to the OECD average of 5.4 for women and 19.4 for men). At the country level, mental health services were not commonly available and were often stigmatized and poorly understood. Additionally, awareness about service availability was low: 83 percent of respondents to a 2018 representative survey in areas of Donetsk and Luhansa oblasts under GoU control, reported that they were unaware of psychosocial support centres in their area.

**Education**

While school attendance is free and mandatory for children aged 5-17 in Ukraine, the enrolment rates before February 2022 were markedly below 100 percent. In 2021, the enrolment rate from primary to tertiary education remained below that of developing country standards (79 percent compared to the OECD average of 90 percent). This was particularly driven by the low enrolment rate for children over 15 years old, which stood at 50.4 percent in 2021. In addition, rural households had a lower enrolment rate for primary education (40 percent) compared to urban households (71 percent) according to 2021 data. The main barriers to accessing education were the cost and transport to school. Children from Roma families were found to have a lower enrolment rate (particularly girls), and the majority did not finish school.

Quality was often identified as the main problem in the education sector before the full-scale invasion. Despite public and private expenditures on education as a share of GDP being higher in Ukraine than in the United Kingdom, South Korea, or the United States (national public spending represented 6 percent of GDP in 2018), the quality of education was reflected poorly in Ukrainian student performance in international rankings.
According to the 2018 OECD Program for International Student Assessment, 15-year-old students in Ukraine scored lower than the OECD average in reading, mathematics and science. The shift toward online learning due to the COVID-19 pandemic was also a contributing factor in compromising the quality of education in Ukraine in the years leading up to the war.

The situation for education in conflict-affected areas of eastern Ukraine was distinct from the rest of the country. Primarily, access to education was jeopardized by frequent shelling and a tense security situation. As a result, many schools in these areas introduced online courses or were unable to ensure the continuity of teaching because they could not provide a safe space for children. Before February 2022, it was estimated that 229,000 boys and girls were in direct need of humanitarian assistance in the education sector near the ‘contact line’ and in areas of Donetska and Luhanska oblasts not under the control of the GoU.

Aggregate impact

According to the OHCHR, which only partially records war-related casualties, 20,271 civilians were killed or injured between 24 February 2022 and the end of 2022 (compared to 10,404-12,404 between 2014 and 2021). Thousands of injured persons, often with long-term physical rehabilitation needs, are struggling to receive support from already-strained health services and social protection systems.

The largest impact in this pillar can be found in the Northern and Southeastern macro-regions, as households closer to the front line are more likely to experience deprivation in the three dimensions of living standards, health, and education due to destruction of, and damage to, infrastructure, assets and residential units. The war led to the internal displacement of seven million people, many of whom were vulnerable households, less able to absorb such a shock. Negative spillover effects were also observed in the Western and Central macro-regions, which were subject to increased consumer prices, water and electricity outages, supply chain disruptions affecting access to durable goods, and inflows of IDPs putting pressure on education and health facilities and the housing market.

Living standards

Living conditions throughout the country were affected by the targeting of utility infrastructure, which led to nationwide power outages and major utility service disruptions during the winter of 2022/2023. Access to utilities was largely restored across the country by February 2023, except in more war-affected areas. More acute disruptions were experienced during winter in the Northern and Southeastern macro-regions, in addition to major regional centres such as Lviv, Dnipro, and Poltava. The 2022 MSNA found that 77 percent of households in the Northern and Southeastern macro-regions experienced utility disruptions, compared to 41 percent nationally in the month before data collection (between September and November 2022). Shortages of water, which did not exist in Ukraine before the war, were more likely to be experienced by urban households in the Southeastern and Western macro-regions during the same period. The disruption of utilities was challenging for older persons and persons with disabilities, who may have had to rely on support to buy contingencies and store water. Moreover, some persons with disabilities stressed that they could not leave their houses during power outages, including to go to bomb shelters, because of the lack of electricity to run elevators. Civil society actors warned about the potential marginalization of persons with disabilities in public spaces, which curtailed their access to humanitarian assistance.
Households have also been affected by damage and destruction to accommodation and belongings. Frequent shelling has led to considerable destruction of residential units in some parts of the country. While an estimated 55,000 residential units were damaged between 2014 and 2021 in Donetska and Luhanska oblasts, this had reached an estimated 1.4 million residential units nationwide across the first year of the war.\textsuperscript{105} According to the HIA household survey, 44 percent of internally displaced households and 28 percent of households residing in the Southeast macro-region reported their accommodation was directly damaged in the war (compared to 13 percent nationally); more damage was reported by households in urban areas than in rural areas. Affected households were likely to have sold or lost durable goods due to displacement, destruction, or looting; according to the 2022 MSNA, one in three households was forced to abandon valuable assets during their displacement journey. By March 2022, 179 government residential institutions had been evacuated due to damage and destruction, displacing 4,894 children.\textsuperscript{106}

Marginalized groups reported being discriminated against in the search for accommodation after displacement. Some communal shelters reportedly did not accept members of the Roma community, while members of the LGBTQIA+ community faced harassment.\textsuperscript{107}

People living in collective sites, although making up only 3 percent of IDPs as of January 2023, tended to be more vulnerable at household level. Indeed, nationwide profiling of households in collective sites conducted in November 2022 showed that 40 percent of households had at least one member with a vulnerability and only 13 percent of assessed heads of households reported having a permanent paid job.\textsuperscript{108} The primary needs were shelter and household items (51 percent of respondents reported severe needs and above) and health care (31 percent of respondents reported severe needs and above).\textsuperscript{109}

**Health**

The war has affected provision of and access to health care in Ukraine through two main channels. Firstly, pressure has been put on facilities and staff. Secondly, economic resources have been reduced in value by inflation and compounded with losses of livelihoods.

In the first year of the war, 1,574 health facilities were damaged or destroyed by shelling, most of which were situated in the Southeastern and Northern macro-regions.\textsuperscript{110} As of February 2023, one in ten of Ukraine’s hospitals had been directly damaged from attacks, with damages most heavily concentrated in Kharkivska, Donetska, Luhanska, Khersonska, and Kyivska oblasts.\textsuperscript{111} Many health care workers have been displaced by the war, leaving health facilities short of staff.\textsuperscript{112}

After initial challenges resulting from the war, availability of services improved in most parts of the country under government control, but health services remain sporadic in areas closer to the frontline. Hospitals were still likely to experience an increased caseload, especially in areas absorbing large numbers of IDPs or serving as reception points for injured military personnel and civilians along the frontline. For example, a rapid assessment conducted in April 2022 showed that one in three respondents faced serious problem accessing services.\textsuperscript{113} In the WHO’s Health Needs Assessment (HNA),\textsuperscript{114} the health services reported to have the most access difficulties for households were linked to chronic conditions (9.9 percent), pregnancy (9.6 percent), children (7.9 percent) and injury (7.5 percent). In areas affected by active hostilities, the primary barrier to health care is the cost of medicine and treatment.\textsuperscript{115}

The main reported barriers to accessing health care is related to cost of consultation, medicines, and physical difficulties reaching health facilities. The overall decrease in household income after the war may be a primary cause of this (further discussed in the livelihoods chapter below), or the difficulty might be attributable to inflation and rising transportation costs. IOM’s General Population Survey (GPS) found that 31 percent of the population noted at least one barrier to accessing medical services, while 35 percent experienced barriers to accessing medicines.\textsuperscript{116}
For households reporting difficulties accessing health care in the 2022 MSNA, the main barriers reportedly faced were related to the cost of consultation (28 percent), medicines (23 percent), and not having access to a functional health facility nearby (14 percent). Among youth (ages 14-35) concerns about health (their own or that of loved ones) increased to 50 percent compared to 35 percent in 2021.\textsuperscript{117}

According to the 2022 MSNA, groups most vulnerable to health care needs included households with older members, displaced persons, and those with a member with a disability. A primary challenge to accessing services for such households was the cost of health care services. The WHO HNA reported that 22 percent of households spent more than a quarter of their monthly income on health care services. Only 37 percent spent less than 10 percent of their income on health care services and medicines, while before the war, national data measured that health amounted to 4.7 percent of average household monthly expenditure in 2021.\textsuperscript{118}

While changes in measurement can play a role, this shift could also be related to inflation, or to a reduction in incomes paired with unchanged costs in health services. The data showed no clear geographic pattern regarding access to care or households reporting their ability to afford care, except for affordability being above the national level in Kyiv city and below in areas closer to the front line. IDPs have also faced lower access to primary health care, with 20 percent reporting having no access to a family doctor, as compared to only 5 percent of those who remained in their home communities.\textsuperscript{119}

War has also affected mental health and has the potential to lead to increasing prevalence of psychological trauma for adults and children.\textsuperscript{120} In the 2022 MSNA only a limited number of households reported that individuals with mental health conditions were accessing mental health care. For those who did access such services, more than a quarter could not access mental health services and medications consistently.\textsuperscript{121} In the WHO HNA, 13.9 percent of households reported having at least one member too upset or worried to do their usual daily activities at the time of the assessment (20 percent of respondents 60+ years old). According to research on the impact of the war on youth in Ukraine, mental health concerns for youth (14-35) (their own or that of loved ones) have increased: 22 percent versus 11 percent in 2021. But while 22 percent of young people are concerned about the issue of mental health, only 12 percent indicate that they need psychological help.\textsuperscript{122}

The Ministry of Health estimated that close to 15 million persons would require psychological support, of whom 3 to 4 million persons need medication.\textsuperscript{123} Mental health practitioners and experts have warned about the potential mental health crisis in Ukraine, with a new generation born during the conflict, millions of displaced persons, and increasing numbers of veterans.\textsuperscript{124}

**Education**

The education sector was disrupted by the war and damage to educational facilities, although the enrolment rate remained fairly stable. As of February 2023, 2,638 education facilities were damaged and 437 destroyed, primarily in the Southeastern and Northern macro-regions (see Figure 2). An estimated 43,000 children were sent home from boarding schools, returning to parents or guardians without prior assessment or support, potentially putting children more at risk of violence, abuse, and neglect.\textsuperscript{125}

While the war has resulted in the departure of two million children from Ukraine, displacement within Ukraine of both students and teachers has also been a source of stress on the education system.\textsuperscript{126} Indicative findings from an education assessment from February 2023 found that 77 percent of teachers and 41 to 60 percent of students in Donetska and Khersonska oblasts were reportedly displaced since February 2022.\textsuperscript{127}
After February 2022, teaching has mainly been conducted online or through hybrid modalities. This has limited students’ ability to interact with other students and teachers, affecting the quality of education and most likely adolescent mental health. As of January 2023, 31 percent of education took place offline, 34 percent online, and 36 percent in a hybrid modality, according to the Ministry of Education and Science (MoES). Teaching modalities are decided at the local level and approved by regional military administrations, depending on the security situation and the availability of bomb shelters with the capacity to host children and staff during air alarms. Only a few oblasts in the Western macro-region mainly functioned offline; the situation was more mixed in the Northern and Central macro-regions, while education was mostly online in the Southeastern macro-region. In addition to the security situation, the continuity of education has been further complicated by utility disruptions at schools and for teachers and students following online classes.

Access to Ukraine’s adapted education system in the face of war is not equally experienced by all groups. IOM’s GPS found that 17 percent of IDP households reported that their children lacked access to education in the 2022-2023 school year. Furthermore, students with disabilities tend to experience challenges due to adapted approaches to education. Some students with disabilities struggle to access bomb shelters in schools or are unable to participate in online learning.

Households in the Southeastern macro-region face additional barriers to education. An assessment in Zaporizka, Donetska and Khersonska oblasts found that a lack of internet connectivity was a crucial barrier to online classes. Some parents reported that their children faced barriers as they could not afford the proper equipment for online education, especially parents of children with disabilities who needed specialized equipment. Households also suggested that children experienced increased anxiety due to the security situation and negative behavioural consequences of online learning, such as difficulties concentrating. This issue is further echoed in research on the impact of the war on youth in Ukraine, where 14-35 year olds were asked “What personal problems bother you the most today?”, and 11 percent of respondents mentioned lack of access to quality educational services.
Coping mechanisms

Living standards

Displacement has been one of the main effects of the war, with damage or destruction of residential units a major push factor cited by displaced households, just after security concerns. As of January 2023, 60 percent of IDPs had been able to find accommodation in the private sector while 21 percent reported staying with friends or relatives, limiting the number of persons in collective sites. However, despite the small share of displaced households remaining in collective sites (160,000, or 3 percent), they were likely to be the most vulnerable. For households remaining in war-affected areas, coping mechanisms included measures such as protecting their windows and converting basements into shelters.

When faced with utility disruption, household respondents to a WASH needs assessment in oblasts in the Northern and Southeastern macro-regions reported postponing (or reducing in the most affected settlements) laundry, showers, and other activities for which electricity or water are needed. Households also increasingly reported storing water for drinking and other uses, other strategies involving selling durable goods were only used by a minority of households. According to the 2022 MSNA, only 4 percent of households reported having sold household assets in the 30 days prior to data collection.

Health

In existing assessments, many households reported reducing health care expenses, by postponing care, increasing consultations with pharmacists, or self-medication. According to the 2022 MSNA, reducing health care expenses was more often reported in the Southeastern macro-region (29 percent of households, compared to Northern (19 percent), Western (16 percent), and Central (11 percent)). A recent health needs assessment conducted in several oblasts where households reported that they reduced their use of health care facilities confirmed this trend. The WHO HNA found that around 38 percent of households did not visit a health care facility when a member was ill, but rather engaged in self-treatment with medications, traditional remedies, or seeking information for treatment online. However, it is not clear if these tendencies may have begun during the COVID-19 pandemic, as delaying care was a growing issue ahead of the war.

Other sources reflect emerging patterns and increased usage of negative behavioural coping strategies. A rapid needs assessment from the International Medical Corps on mental health and psychosocial support observed that self-medication and increased alcohol ingestion were the most common coping strategies. A child protection assessment conducted in Dnipropetrovska, Kharkivska, and Khersonska oblasts found that even at a very young age, boys and girls were at risk of smoking, falling into addiction, and engaging in physical violence. Affected people have also utilized positive coping strategies, such as strengthening community-based support networks, staying active, and facilitating post-traumatic personal growth.

Education

At the institutional level, the main coping strategy for the effects of the war has been the shift to online education in a third of the country. While many schools have begun to resume in-person education, they are required to be equipped with bomb shelters, resulting in mixed approaches to teaching, including in-person, online, or blended, depending on the local security situation.
In an assessment conducted in Zaporizka, Donetska, Mykolaivska and Khersonska oblasts in February 2023, surveyed teachers frequently mentioned cancelling classes in the past month (64 percent of respondents) and not being able to cover the entire curriculum (33 percent of respondents).

At the household level, the 2022 MSNA found that only 6 percent of households reported reducing expenditures in education to meet their basic needs. In inaccessible areas of the Southeastern macro-region, indicative findings from the 2022 MSNA showed that only a few respondents knew children who dropped out of school. In this case, the main reasons mentioned were the lack of schools in the community, and protection risks while commuting to school and at school. In a child protection needs assessment in Dnipropetrovska, Kharkivska, and Khersonska oblasts, 14 percent of girls and 11 percent of boys (aged 9 to 13) reported a risk of child labour, which could increase, particularly in rural areas.
4 • Key findings on livelihoods
Key messages

In the HIA survey, 60 percent of all surveyed households and 73 percent of IDPs reported that the work of their household members had been affected in one or more ways since the start of the war, primarily by job loss, salary cuts, and reduced working hours.

The HIA survey also found that most households reported their livelihoods/income earning activities had been affected by safety and security concerns since the start of the war. Nearly half of households with members with disabilities located in the Southeastern macro-region have had their livelihoods greatly affected by safety and security.

More than half of households surveyed for the HIA reported a decrease in income (65 percent) – this was highest for IDP households (74 percent) and returnee households (73 percent). At the same time, HIA respondent households reported a decrease in access to paid work as a primary source of income.

Households surveyed for the HIA reported changes in their primary sources of income since the start of the war. This was primarily in the form of reduced access to paid work: 67 percent of households reported paid work as a primary source of income before February 2022, decreasing to 53 percent after February 2022.

There has been an increased reliance on state transfers, humanitarian assistance, and financial support from friends or relatives since the start of the war. The proportion of households relying on state transfers increased from 53 percent before to 60 percent after the start of the war. Humanitarian assistance was a primary source of income for 1 percent of households before, and 21 percent of households after February 2022, and the proportion of households relying on financial support from friends or relatives increased from 5 to 13 percent.

Approximately 60 percent of households surveyed for the HIA reported engaging in coping strategies to meet essential needs. The top livelihoods coping strategy was spending savings, followed by acquiring additional work, and reducing health costs. Most households who did engage in coping strategies stated they could continue taking on additional work, but that they could not continue spending savings, reducing essential health expenditures, or taking on debt.

The effects of the war on livelihoods have been felt most in the southeast. Households in this macro-region reported higher instances of decreased income and access to paid work, increased reliance on humanitarian assistance, greater engagement in livelihood coping strategies, and higher rates of negative livelihoods effects from safety and security.
Context

Employment and income

Ukraine has undergone a number of economic shocks since its independence: first during the economic transition period from 1991-1999, during the global financial crisis of 2009; again following the start of the 2014 conflict in eastern Ukraine (which worsened economic conditions within Ukraine and marked the start of a period of increased dependence on labour migration and remittances) and finally, during the COVID-19 pandemic and quarantine restrictions starting in 2020.147 Ahead of the war, Ukraine was experiencing its highest unemployment rate in the last decade, at 9.8 percent of the total labour force in 2021. The economic crisis stemming from the start of the conflict in eastern Ukraine in 2014 caused unemployment rates to jump from 7.2 percent in 2013, to 9.3 percent in 2014. This was further compounded by the COVID-19 pandemic beginning in 2020, worsening the unemployment rates ahead of the war.148 The 2021 Labour Force Survey reported that unemployment amongst men (9.5 percent) was slightly lower than for women (10.1 percent), and that it was marginally higher in rural areas (10.6 percent) than in urban areas (9.5 percent).149 However, in the last two decades Ukraine made strides to decrease the number of households facing extreme poverty, bringing down the proportion of the population living on less than $3.65 per day from 17 percent in 2002 to less than 1 percent by 2008.150 The percentage of the population living on less than $6.85 per day also notably decreased from the early 2000s to 8 percent in 2013, increasing to 15 percent in 2015 and 2016, and then returning to a low of 7 percent in 2020.151

Progress has not been evenly spread across the country. Since 2014, armed conflict in the east of Ukraine exposed households to daily security risks, limited access to food and essential basic services, and limited livelihood opportunities. The protracted nature of the conflict has led to loss of lives, concerns over the protection of civilians, and extensive damage to critical infrastructure in conflict-affected areas. According to the 2021 MSNA, in areas of Donetska and Luhanska oblasts under the control of the GoU (within 20 km of the ‘contact line’), only 28 percent of household members across the assessed area were reportedly engaged in paid work.152

Barriers to accessing livelihoods

Aside from nationwide economic and labour market conditions, household-level data pertaining to barriers to accessing livelihoods prior to February 2022 are most notably available in relation to conflict-affected areas of Donetska and Luhanska oblasts. The 2021 MSNA found that the ongoing conflict and location of the contact line within densely populated urban areas had disrupted economic activity, employment markets, financial services, and thus household economic security. Many young, working-age people left these areas, “leaving the area within 20 km of the contact line with a higher concentration of people with vulnerabilities than in other parts of the country”.153 Older persons made up 64 percent of the population in these areas and were predominantly reliant on pensions for income.154 Barriers to accessing livelihoods were further exacerbated by COVID-19, as the Ukrainian economy at large experienced a downturn, which especially affected households in conflict-affected areas and lowered household purchasing power.155

Productive assets

In terms of the structure of household resources and income across Ukraine, productive assets have played a small role in comparison to cash income. In 2021, 93.6 percent of Ukrainian household resources came from monetary income; 59.9 percent of which came from wages, 20.2 percent from state transfers followed by income from entrepreneurship and self-employment (5.5 percent), amongst others.156 However, regional variations in these figures exist, with the share of income from entrepreneurship larger in some western regions, such as Zakarpatska, Ivano-Frankivska and Chernivetska oblasts being higher

Key findings on livelihoods
than in other parts of the country.\textsuperscript{167} Income from the sale of agricultural products accounted for 2.5 percent of income (8 percent for rural households), and income from household consumption (that is, the value of goods produced and consumed by households themselves) for 3.1 percent (8.3 percent for rural households).\textsuperscript{158}

However, there is a high degree of informality in the Ukrainian labour market, which suggests a high proportion of individuals being self-employed or running micro-enterprises, and therefore likely underreported in official Ukrainian state statistics on household resources. Estimates for the nation’s shadow economy (defined by underreported income, employees, and wages) range between 23.8 percent to 38.5 percent of GDP.\textsuperscript{159} Informality was especially reported in the retail, manufacturing, construction, services, and wholesale sectors.\textsuperscript{160}

Entrepreneurs made up a substantial share of the economy, especially in the service sector for urban households. In 2021, 1.4 percent of Ukraine’s employed population (0.9 percent of women and 1.8 percent of men in the employed population) fell under the category of “employers” (meaning they engaged one or more employees to work for them) and 14.7 percent (12.9 percent of women and 16.3 percent of men) were self-employed.\textsuperscript{161} In 2021, there were close to 1.9 million business entities registered with less than nine employees, mainly in wholesale and retail trade (40 percent of registered micro entities) and information and communication (15 percent).\textsuperscript{162}

Land and other agricultural assets are also a central productive asset in Ukraine for rural households. 13 million rural Ukrainians – a third of the population – live in rural areas and were engaged in small-scale agricultural production, with households accounting for approximately 32 percent of agricultural production and the remainder led by enterprises.\textsuperscript{163} This small-scale agricultural production is important for ensuring food security for local communities, as well as access to income and livelihoods.

### Aggregate impact

#### Loss of employment opportunities

Since February 2022, changes in the labour market have reflected both the outflow of the working-age population and the economic difficulties directly linked to war. The ILO estimates that employment is now 15.5 percentage points lower than during the pre-war level.\textsuperscript{164} At the same time, the National Bank of Ukraine’s latest inflation report predicts an unemployment rate of 18.3% for 2023, an improvement on the previous forecast of 26.1% for the same period. The top employment sectors that households in the HIA primary data collection reported being engaged in generally reflect those reported in national statistics pre-war, dominated by the services sector (including wholesale and retail, industry, education, and agriculture) followed by health and social work, suggesting that the war has not for now changed the production structure of the economy.\textsuperscript{165} A national business survey showed that in the fourth quarter of 2022 the sectors with the highest wage contractions on an annual basis were construction; agriculture, forestry and fishing; transportation and storage; and manufacturing. In contrast, wages in wholesale, retail trade and repairs; information and communication; and human health and social work, have largely followed inflation trends, increasing by about 27 percent.\textsuperscript{166}

The 2022 MSNA found that of all households surveyed, 46 percent reported income from regular employment while 52 percent reported income from pensions. The average household income from regular employment in the 30 days prior to data collection was notably higher for households headed by men (15,856 UAH) than households headed by women (13,400 UAH), particularly in the Central macro-region. Average household income from pensions was also higher in households headed by men (5,629 UAH) than women (4,521 UAH).\textsuperscript{167}
Households nationwide have experienced decreases in income, with the Southeastern macro-region particularly affected. This is also reflected in national poverty levels, which increased from 5.5 percent to 24.1 percent in 2022 (based on the poverty line of $6.85 per person per day). The decrease in income was derived mainly from job loss, salary cuts, and reduced working hours: 60 percent of all surveyed households and 73 percent of IDPs reported that the work of their household members had been affected in one or more ways since February 2022. Overall, 65 percent of households surveyed for the HIA primary data collection reported a decrease in income since February 2022, while 30 percent reported incomes remaining stable, and 6 percent that they had increased. Households in the Southeastern macro-region reported a decrease in income at higher rates than other macro-regions (73 percent). IDP and returnee households reported decreases in income at higher rates than other groups, at 74 percent and 73 percent respectively.

IOM’s GPS found that 57 percent of IDP and 64 percent of non-IDP respondents had sought after February 2022. The top challenges cited by these groups while searching for a job included: a lack of jobs in their areas matching their interest and expertise (mentioned by 91 percent of IDPs and 84 percent of non-IDPs) a lack of work due to the war in a location (82 percent of IDPs and 76 percent of non-IDPS) and low offered salary (45 percent of IDPs and 76 percent of non-IDPs).

Safety and security concerns also inhibited livelihoods. Most households reported that their livelihoods had been negatively affected due to safety and security concerns resulting from the war. When asked whether households had lost access to livelihoods and/or income-earning activities due to safety and security concerns, 57 percent of households responded “somewhat” (31 percent) or “greatly” (26 percent). Households in the Southeastern macro-region reported that their livelihoods had been affected “greatly” at higher rates (38 percent) than the Northern (25 percent), Central (23 percent), and Western (19 percent). Nearly half of households with members with disabilities in the Southeastern macro-region reported that their livelihoods were “greatly” affected by safety and security concerns. Rural households also reported that their livelihoods had been less affected by safety and security concerns than urban households.

Death of a household income earner as a direct result of the war had been experienced by 2 percent of households at the time of data collection in December 2022 and January 2023.

Increasing reliance on income sources other than paid work

Households surveyed for the HIA reported both high rates of unemployment and decreasing rates of paid work as a primary source of income. Approximately 39 percent of households reportedly had no members working. However, of households with working-age members (aged 18-59), 74 percent had at least one member working, while 26 percent had no members working. For households with at least one member employed, 79 percent were engaged in paid work, 21 percent in part-time or temporary work, and 11 percent in a self-owned business in the 30 days prior to the survey. HIA respondent households reported that prior to February 2022, 67 percent relied on paid work as a primary source of income, decreasing to 53 percent since. At the macro-regional level, the greatest decrease in reliance on paid work as a primary source of income was in the Southeastern and Northern macro-regions. From a gender perspective, the 2022 MSNA found that household income from regular employment and pensions were notably higher for households headed by men than households headed by women, particularly in the Central macro-region.

There has been a reported increase in reliance on humanitarian assistance as a primary source of income. Only 1 percent of HIA survey respondents reported that humanitarian assistance was a primary source of income prior February 2022, increasing to 21 percent since then. The biggest increases in reliance on humanitarian aid were amongst those in the Southeastern macro-region and displaced households: from 1 percent to 50 percent for IDPs, and from 1 percent to 40 percent for those in Southeastern.
HIA respondent households also reported an increased reliance on state transfers since February 2022. Most households (53 percent) reported reliance on government income (such as pensions, assistance from social protection mechanisms, and so on) as a primary source of income ahead of the war, increasing to 60 percent since then. The post-February 2022 figure is similar to 2022 MSNA results, which found 58 percent reliance on pensions as a primary source of income for households headed by men, and a 45 percent reliance on pensions for households headed by women. These findings may be reflective of a combination of factors: the GoU’s extension of social safety nets,171 and the scaling up of humanitarian assistance, alongside decreasing access to income from employment since February 2022. This could also be an effect of displacement, with economically active households moving elsewhere, with the remaining households more likely to be reliant on government assistance.

While the top three sources of income since February 2022 have been state transfers, paid work, and aid from humanitarian organizations, the fourth most commonly cited primary source of income was financial support from friends or relatives (including remittances). Before February 2022, 5 percent of households surveyed for the HIA reported such support as a primary source of income, compared to 13 percent of households since February 2022. Macro-regionally, the increased reliance on this type of support was most pronounced in the Southeastern macro-region, where 4 percent of households reported financial support from friends or relatives as a primary source of income prior to February 2022, compared to 16 percent of households since February 2022.

**Damage, destruction, or liquidation of productive assets**

According to FAO, damage to small-scale farming has been extensive: lack of access to usable land, including contamination of at least part of that land by unexploded ordnances (UXO), mines, bombshells, and debris; destruction of agricultural equipment and facilities; damage to livestock and crops; stolen farm inputs and outputs, and the need for recultivation of land.172 Rural households hosting IDPs are also vulnerable to disruption of livelihoods and agricultural production.173

In terms of damage to agricultural assets, the HIA survey did not capture the extent of loss of access to productive land, or illness and death in livestock. The survey found that 9 percent of rural households had lost access to livelihoods resulting from a loss of usable land due to displacement, mines or UXO, or an environmental hazard stemming from the war. The proportion is even smaller when considering the loss of livestock. Of rural households, 60 percent owned livestock, though only 6 percent of those households (or 65 households) stated that the war had caused illness or death in their livestock. The economic downturn combined with displacement has also led businesses to close and self-employed individuals to lose their productive assets. A number of studies have cited operational challenges negatively affecting businesses in the face of the war, including: interruptions to electricity, water and heating; increased cost of inputs; disruption to supply chains, and reduction in demand, and danger while working.174 There has been a relatively moderate contraction of active registered businesses: 6 percent at national level between November 2021 and 2022, 9 percent in the Southeastern, and 7 percent in the Northern macro-regions, compared to 3 percent in the Western and Central macro-regions.175 However, this picture is incomplete given that many businesses reported operating below capacity and expressed negative output expectations for the next 12 months as of the fourth quarter 2022.176
Coping mechanisms

War has affected the economy through the destruction of productive assets and the decline of demand, leaving most households unable to meet their basic needs due to inadequate income. The 2022 MSNA found that 44 percent of households nationally faced challenges in having the economic ability to meet the needs of the household. Particular groups of concern included households without any working members, displaced households, households headed by a member aged 60+, and households headed by women.\textsuperscript{177}

Consequently, households have employed strategies available to them, reflective of their level of needs.\textsuperscript{178} The 2022 MSNA found that 50 percent of households engaged in livelihood coping strategies (see Figure 3) and 28 percent engaged in crisis and above coping strategies. The highest share of households employing coping strategies was reported in the Southeastern macro-region. Target groups tending to report being more likely to use livelihood coping strategies included IDPs (63 percent), returnees (58 percent), and households with members with chronic illness and serious medical condition (62 percent).

Figure 3: Reported household use of livelihood coping strategies in the 2022 MSNA, by macro-region

<table>
<thead>
<tr>
<th></th>
<th>Emergency</th>
<th>Crisis</th>
<th>Stress</th>
<th>No coping</th>
</tr>
</thead>
<tbody>
<tr>
<td>Southeast</td>
<td>35%</td>
<td>25%</td>
<td>30%</td>
<td>11%</td>
</tr>
<tr>
<td>North</td>
<td>52%</td>
<td>22%</td>
<td>23%</td>
<td>5%</td>
</tr>
<tr>
<td>Central</td>
<td>61%</td>
<td>20%</td>
<td>15%</td>
<td>5%</td>
</tr>
<tr>
<td>West</td>
<td>51%</td>
<td>23%</td>
<td>20%</td>
<td>7%</td>
</tr>
</tbody>
</table>

Source: 2022 multi-sector needs assessment

The three most commonly reported coping strategies included spending savings (25 percent of households), taking on additional work (19 percent) and reducing health costs (19 percent) in the 30 days prior to the survey.\textsuperscript{179} For households that did engage in such strategies, only between 8 and 16 percent reported then being capable of meeting their essential needs, while most reported that they were able to meet some of their needs but not all (see Figure 4). Separately, between 23 and 31 percent of households reported remaining unable to meet basic needs even with the use of coping strategies. Most households who reported having spent savings, reduced essential health expenditures, or taken on debt/borrowed money, stated that they could not continue using these strategies to meet their needs. IOM’s GPS (Round 11) supports the finding that households could not continue spending savings, with 42 percent of IDPs having exhausted savings more than 30 days prior to survey, compared to 27 percent of both non-IDPs and returnees.
Those who reported having taken on additional work predominantly reported that they were able to continue using this coping strategy. Furthermore, a concerning proportion of people with chronic illnesses (29 percent) reported reducing essential health expenditure, of which over two-thirds reported that they did not believe they could continue using this coping method to meet their needs.

**Figure 4:** Proportion of households reporting that use of coping strategies allowed them to meet their basic needs, by macro-region

![Proportion of households reporting that use of coping strategies allowed them to meet their basic needs, by macro-region](image)

*Source: 2022 multi-sector needs assessment*
5 • Key findings on food security
Key messages

Ukraine is a large, net-exporting agricultural economy. The war has posed several risks to food and agricultural markets and trade, including risks related to logistics, price, production, and energy. Active fighting in parts of the country, lack of labour, high production costs, and low farm-gate prices led to cereal production being 30 percent lower than the five-year average in 2022. Mines and other remnants of the war also constrained fertilizing and harvesting activities, leading to unharvested crops in large areas. Nonetheless, 2022 production volumes were still sufficient to cover domestic needs. However, if agricultural production deteriorates further, this could result in gaps in food availability in Ukraine.

While food availability did not emerge as an issue at national level, a lack of economic capacity to access food has been the primary driver of food insecurity in Ukraine since the start of the war, with most households struggling to meet their essential needs. The primary coping mechanisms used by households to meet these needs included buying cheaper food, spending savings, and reducing essential health expenditure.

While economic access constraints are the primary driver of food insecurity nationwide, areas near the front line have been negatively affected in terms of security, damage to infrastructure, access to basic services, and pockets of limited market functionality, all of which contribute to lack of physical access to food for households in these areas.

Over the course of 2022, the proportion of households with inadequate food consumption increased from one fifth to one third, with the Southeastern macro-region the most negatively affected.

The demographic groups most vulnerable to food insecurity include displaced households, households with members with disabilities, single parent households headed by women, households with people with chronic illnesses, and those who are unemployed.
Context

Food access, availability, and food security outcomes

Vast and varied agricultural production has enabled Ukraine to be a net exporter of food commodities. Prior to February 2022, the agricultural sector accounted for 40 percent of export revenue and domestic products met 90 percent of the population’s food needs.\(^{180}\) Hence, food availability was not of particular concern, and at the national level Ukraine did not have high levels of food insecurity. According to FAOSTAT, the prevalence of severe chronic food insecurity in the total population (three-year average) between 2017 and 2021 in Ukraine remained between 1.6 and 3.2 percent.\(^ {181}\) The prevalence of moderate or severe chronic food insecurity in the total population (three year average) was somewhat higher between 2017 and 2021, at between 18.3 and 22.7 percent.\(^ {182}\)

Already before 2022 Ukrainians tended to eat an unbalanced diet overall due to lack of economic access to more expensive foods (including meat, milk, fish, and eggs) resulting from the economic downturn associated with the start of the 2014 conflict in eastern Ukraine.\(^ {183}\) Household spending on food was relatively high, averaging 54.6 percent of total household cumulative spending.\(^ {184}\) These data suggest that prior to 2022, many Ukrainians faced challenges affording a diversified diet.

However, households residing in eastern regions affected by conflict since 2014 were worse off than the general population of Ukraine prior to 2022. The 2021 HNO highlighted a confluence of factors in Luhanska and Donetska oblasts which negatively affected access to and availability of food, including heightened food prices, COVID-19 movement restrictions, and low agricultural productivity.\(^ {185}\) In 2021, about 1 in 10 households in areas under government control in Donetska and Luhanska oblasts were found to be moderately to severely food insecure when looking specifically at acute food insecurity.\(^ {186}\) Incidence was slightly higher among households headed by women and households reporting having at least one member with a vulnerability (including those with a chronic illness affecting the quality of life, persons with disabilities, and single parents).\(^ {187}\)

Aggregate impact

Food access, availability, and utilization

The active fighting in parts of Ukraine, lack of labour, high production costs, and low farm-gate prices led to cereal production being 30 percent lower than the five-year average in 2022. Mines and other remnants of the war in fields also constrained fertilizing and harvesting activities, leading to unharvested crops in large areas. Despite decreased cereal production, food availability at national level is reported to be adequate.\(^ {188}\) Ukraine experienced its lowest harvest in 10 years, with farmers harvesting about 70 million tons of grains and oilseeds, in comparison to about 106 million in 2021.\(^ {189}\) Nonetheless, these volumes fully covered domestic needs, at the level of 18 million tons of grains.

While food availability at national level was not an issue throughout 2022, the impact of the war on Ukraine’s economy has significantly affected access to food for households throughout the country. Findings from the 2022 MSNA suggested that the primary driver of food insecurity in accessible areas of Ukraine was lack of economic access, as most surveyed households reported struggling to economically meet their essential needs.\(^ {190}\) Food security monitoring data from throughout 2022 also showed that households with unstable or no income were more likely to have inadequate food consumption.\(^ {191}\)
Even prior to February 2022, Ukraine had been grappling with elevated levels of food price inflation due to the conflict in the eastern regions. As of February 2022, annual food price inflation was at 14.3 percent, but it surged, reaching 35.1 percent by November 2022. The rise in energy costs, coupled with high unemployment rates and limited livelihood opportunities, further eroded households’ purchasing power. In the 2022 MSNA, 44 percent of surveyed households reported facing challenges obtaining money to meet their needs. Households reported that the main challenges for obtaining money were low salaries and lack of work opportunities.

Most households surveyed in the 2022 MSNA had consumption expenditures below the minimum expenditure threshold (the minimum expenditure basket, or MEB), suggesting they were economically struggling to meet basic consumption needs. Furthermore, nearly one in five surveyed households had consumption expenditure below the lower-end threshold, or survival MEB (SMEB), signifying even higher levels of economic deprivation. IDPs, single parent households headed by woman, and households with persons with (registered) disabilities were more likely to fall below the MEB or SMEB.

While lack of economic access has been the primary factor driving food insecurity since February 2022, other factors have also had an impact on food security conditions in Ukraine. Disruptions to supply chains and market functionality countrywide were a concern at the beginning of 2022, but restoration happened quickly, in part thanks to government initiatives incentivizing continued affordability and functioning of the private sector. Product scarcity in local markets, for example, was reported by more than half of households nationally early in 2022, but quickly recovered.

However, while markets resumed functioning in most of the country and availability of, and physical access to, food was no longer a major concern, in areas close to frontline the situation may differ. In these areas where hostilities continuously affect security, infrastructure and basic services, pockets of limited market functionality (including difficulty accessing functioning banks and ATMs) and limited-to-no access to services (such as gas, water, and electricity) continue to affect daily life and prevent households from accessing markets and essential services that would enable them to purchase and prepare foods.

Agriculture plays a leading role in Ukraine, not just as a source of livelihoods but also in supplying food to local markets. The war has disrupted Ukraine’s agricultural economy, with a quarter of rural households (38 percent in areas along the front line) stating that they had “suspended or reduced agricultural production as a result of the war”. This mainly resulted from disruptions to value and supply chains as well as increased production costs for crops and livestock, which has reduced the incomes of rural households. Most of the surveyed rural households rely on their own production as a source of food (almost 50 percent of the respondents), while slightly over 40 percent rely on markets and shops. In terms of food expenditure, the analysis showed that on average more than half the rural households surveyed spent over 50 percent of their total expenditure on food. This proportion was higher for rural households in areas along the front line, where almost 60 percent reported spending half of their total expenditure on food. Of most concern, around 20 percent of the rural population in these oblasts reported spending over two-thirds of their total expenditure on food. Further analysis also revealed a strong causal relationship between food expenditure, decreases in income, and suspended or reduced agricultural production. In fact, the share of food expenditure of rural households tends to increase because of decreased income levels and suspended or reduced production. While food insecurity is at present predominantly driven by issues of economic access, the continued effects on rural agricultural livelihoods could lead to a further deterioration in food availability.
Food security outcomes

The 2022 MSNA, building on the Consolidated Approach for Reporting Indicators (CARI) of Food Security console of food security indicators, found that a quarter of the surveyed households were acutely food insecure, with a higher proportion in the Southeastern macro-region (up to 31 percent). Notably, the majority of these households, or 23 percent of the total, were found to be in the moderately food insecure category, and only 2 percent severely food insecure. The survey found that certain sociodemographic groups were slightly more likely to experience food insecurity than the national average, including displaced households, households with members with disabilities, single parent households headed by women, and households with members with chronic illnesses. Unemployment also affects food security outcomes, with 56 percent of food insecure households reporting having an unemployed (actively job hunting) head of household.

Throughout 2022, there was a steady increase in the proportion of households with food consumption gaps, as measured by the seven-day recall consumption indicator of the food consumption score (FCS), with the Southeastern macro-region having the worst outcomes over time. Oblasts in the Southeastern macro-region showed the greatest food consumption gaps, though data collected by WFP show a notable increase in insufficient food consumption in the Central macro-region in the last months of 2022. This may be partly driven by an increased number of displaced persons and returnees, taking into account the smaller sample size in this region, also possibly influencing results.

Figure 5: Proportion of households with insufficient food consumption (poor or borderline FCS score), by month and macro-region in 2022

Source: World Food Programme

Over the course of 2022, the difference in food consumption between displaced and non-displaced households widened. In the first quarter of 2022, poor and borderline FCSs were reported by 18 percent of displaced and 19 percent of non-displaced households. In the fourth quarter of 2022, 33 percent of displaced households reported insufficient food consumption, compared to 26 percent of non-displaced households.
When looking at the aggregate impact of the war in Ukraine since February 2022, it is also important to consider the potential role that governmental and humanitarian aid has most likely had in preventing further deterioration of food security outcomes. In the 2022 MSNA, 35 percent of surveyed households reported having received some form of humanitarian assistance between February and December 2022, alluding to the large presence of humanitarian aid. A monitoring exercise targeting recipients of WFP’s cash assistance concluded that cash had helped to “prevent people from falling deeper into food insecurity”, but that the war had strained respondents’ capacities to cope, which could signal a risk of further deterioration of households’ ability to meet needs. The 2022 MSNA showed that food was the main priority need, mentioned by four in ten households. Food security findings should therefore be considered alongside a recognition of the role that the ongoing response has played in households’ abilities to meet their needs.

### Coping mechanisms

According to the 2022 MSNA, 43 percent of households reported engaging in consumption-based coping strategies. The main consumption-based coping strategies reported for households at the national level (in the seven days prior to the MSNA survey) were relying on eating cheaper food (reported by 53 percent of households), followed by limiting portions (18 percent), borrowing food (14 percent), reducing the number of meals (13 percent), and reducing adults’ consumption (3 percent).

The highest reported use of coping strategies to meet food needs was found in the Southeastern macro-region. Findings from the 2022 MSNA suggest that chronic illness and disability status played a greater role in the use of consumption-based coping strategies than displacement status. Usage of consumption-based coping strategies was largely consistent across displaced populations (with 48 percent of households with medium or high rCSI scores), returnees (44 percent), and host communities (42 percent). However, 57 percent of households with at least one member with a disability had medium or high rCSI scores, as opposed to 40 percent of households without a member with a disability. Similarly, 53 percent of households with a member with a chronic illness or serious medical condition had medium or high rCSI scores, as opposed to 39 percent of households without.

#### Figure 6: Reduced coping strategies index (rCSI) by macro region

<table>
<thead>
<tr>
<th>Macro Region</th>
<th>High</th>
<th>Medium</th>
<th>Low</th>
</tr>
</thead>
<tbody>
<tr>
<td>Southeast</td>
<td>50%</td>
<td>42%</td>
<td>8%</td>
</tr>
<tr>
<td>North</td>
<td>54%</td>
<td>37%</td>
<td>9%</td>
</tr>
<tr>
<td>Center</td>
<td>64%</td>
<td>33%</td>
<td>2%</td>
</tr>
<tr>
<td>West</td>
<td>59%</td>
<td>35%</td>
<td>7%</td>
</tr>
</tbody>
</table>

Source: 2022 multi-sectoral needs assessment
Though geared toward households’ essential needs rather than exclusively food-based coping strategies, the livelihoods coping strategies indicator (also discussed in the livelihoods chapter) is highly relevant for understanding households’ medium-to long-term capacity to cope, in response to an inability to purchase food. Findings demonstrate that around half of households (especially in the Southeastern macro-region) are spending savings, taking on more work, reducing health expenditure and, in some cases, borrowing food. This indicates that such strategies are commonplace to maintain consumption and meet essential needs.

The war has also had a unique effect on coping strategies among rural households. FAO’s national assessment of the impact of the war on agriculture and rural livelihoods found that rural households reported having sold productive assets and reduced expenditures on fertilizers, pesticides, animal feed and veterinary services, which not only negatively affected household-level resilience, but also agricultural productivity within Ukraine. FAO’s analysis found that households who rely on agricultural production as a source of income were 10 percent more likely to adopt crisis or emergency level coping strategies than other households.

Finally, it is important to acknowledge that while much of the data relating to food security provide a snapshot of the situation of households towards the end of 2022, the food security and livelihoods situation in Ukraine is actively evolving as the war continues. Households surveyed for this HIA reported that they were not capable of continuing to use livelihood coping strategies to meet their needs, suggesting that further deterioration of food access and availability could put a larger strain on coping capacity of households in the future.
6 • Key findings on social inclusion
Key messages

Starting February 2022, the number of individuals at risk of social exclusion and who require assistance has risen. The number of IDPs has more than tripled. Moreover, Ukraine’s veteran community and their families (including families of fallen soldiers and veterans with disabilities) has also expanded and the number of civilians with disabilities, including children, is growing.

Certain demographic groups have been disproportionately affected by the war. Displaced target groups (persons with disabilities, older persons, and members of the Roma community) have experienced compounding vulnerabilities during the war, including reduced income levels and difficulties receiving administrative services and welfare payments.

The war has caused damage to Ukraine’s civil infrastructure and energy system, putting inclusivity and accessibility of services at risk. Access to medicine and specialized medical services, essential for persons with disabilities and older persons, has fallen.

Despite most people continuing to have access to digital services, thus facilitating the provision of administrative services, some groups are finding access difficult. Children were expected to attend school online, offline, or via mixed methods, with attendance varying depending on the security situation in the oblast.

The degree to which vulnerable groups felt that the Ukrainian authorities represent their concerns and views has increased since 2021; however this progress may be short-lived. Sustaining this positive trend in the long term will require continued efforts from the authorities to address the needs and priorities of all members of society, including the most marginalized and vulnerable.

Vulnerable groups primarily point to self-reliance and community resilience as their main coping mechanisms. Some groups – including Roma communities, individuals living with HIV and AIDS, and members of the LGBTQIA+ community – face stigmatization and are particularly disadvantaged in dealing with the impacts of the war.
This chapter of the report considers the impact of the war on disadvantaged groups, according to the two dimensions of unequal access to basic services and resources, and denial of opportunities. Findings on the aggregate impact of the war build heavily upon the qualitative findings of the HIA primary data collection, which captured the experiences of groups with vulnerabilities, often invisible in other household surveys.

In line with the availability and accessibility of data, HIA primary data collection focused on the following target groups: IDPs, persons with disabilities, older persons, Roma communities, women, men (both analysed in detail in the Gender Equality section of this report), rural and urban populations, as well as populations in macro-regions, including those living in communities along the front line. Relevant information was also gathered on children, individuals identifying as LGBTQIA+, and persons in need of long-term treatment care (including those living with HIV and AIDS).

In Ukraine, as in many other transition countries, the issue of inclusivity, in its instrumental sense and measurable qualities, came late to the local development agenda. During 2021, social inclusion was an issue of a growing importance for the GoU and the Office of the President (referred to as a barrier-free environment). Despite continuous improvement in the accessibility of goods and services over the last decades, groups with vulnerabilities continued to face barriers in access to basic services such as social support, legal aid, and health care. The integral index of subjective well-being, indicating accessibility of goods and services, grew consistently since 1996. However, it shows long-term disproportion: legal support and health care remained the least accessible services among 20 other indicators, particularly for more vulnerable groups.

Accessibility of social assistance, administrative services, and internet access was improving during the pre-war period, according to the SCORE report, which compared data between 2016, 2018 and 2020. This had positive effects on all groups and regions, albeit to varying degrees. According to SCORE21, the lowest reported income level was found for older persons (3.0 – on a scale from 0 to 10, where 0 – the phenomenon is not at all present, and 10 – the phenomenon is highly present), persons with disabilities (3.0), and in areas near the ‘contact line’ (3.4, in comparison to the national average of 4.3). Provision of services facilitating access to justice was lower in rural areas (4.2, in comparison to the national average of 4.7), and provision of administrative services was lower around the ‘contact line’ (5.4 compared to the national average at 6.8).
Access to legal services and health care was found to be on a less positive trend. According to SCORE21, access to services facilitating access to justice was considered inefficient across the country,\textsuperscript{220} and health care was less accessible in the Southeastern macro-region.\textsuperscript{221}

According to SCORE21, employment opportunities were lower among persons with disabilities (2.0), older persons (2.2), people living along the ‘contact line’ (2.5), and in rural areas (2.9, in comparison with the national average at 3.4). Marginalization was low overall (0.4),\textsuperscript{222} but slightly higher among persons with disabilities (0.6) and IDPs (0.7).\textsuperscript{223} The subjective estimation examining the degree to which a respondent felt that Ukrainian authorities represented their concerns and views, equally cared about all parts of Ukraine, and were ready to listen, was lower around the ‘contact line’ (1.5) and among persons with disabilities (2.0), than the national average (2.6).

Ukraine faced increasing pressure on its social safety net in the last decade, challenged by the conflict beginning in 2014 and the growth of the population in need.\textsuperscript{224} According to the Ministry of Social Policy, prior to 2022 there were 2.7 million persons with disabilities in Ukraine (6 percent of the population) and nearly 1.6 million registered IDPs.\textsuperscript{225} OCHA reported in 2021 that after years of displacement aggravated by COVID-19, IDPs from eastern Ukraine remained in need of housing solutions and predictable income. In addition, IDP households with older members or members with disabilities required assistance with improving their access to, and the affordability of, health care services, including mental health support.\textsuperscript{226} According to the WHO, the main barrier to people’s access to health care was the cost of medicine and treatment. In areas experiencing active hostilities there are still serious concerns about the deteriorating access to health care,\textsuperscript{227} something which disproportionately affects the most vulnerable (less mobile) groups.

Fast progress in digitalization was an important instrument of ensuring universal access to e-technologies and e-services. This progress has made e-technologies more available, accessible, and affordable. According to the SSSU, 86 percent of urban households and 66 percent of rural households had access to the internet in 2020.\textsuperscript{228} Households with children had the highest rate of internet access among the observed groups (nearly 99 percent), while the lowest internet access was reported in households without employed family members (unemployed and older persons). According to the MoES, of 15,000 secondary schools in Ukraine, only 3 percent had no internet access in 2020.\textsuperscript{229} Although the COVID-19 pandemic was an impetus for accelerating digitalization of services, a UNDP study demonstrated that means of providing electronic services in Ukraine were often partially or completely inaccessible to various groups of users, including those with disabilities.\textsuperscript{230}

**Aggregate impact**

**Statistics of vulnerability**

Between February and March 2023, OCHA estimated that nearly 18 million people were in need (6.3 million IDPs located throughout the country, 6.9 million people who remained in their homes, and 4.4 million returnees).\textsuperscript{231} Of these, 11.1 million were in urgent need of humanitarian assistance and protection.\textsuperscript{232}

On 1 January 2022, there were approximately 500,000 veterans in Ukraine. According to the Ministry of Veterans Affairs of Ukraine, by May 2023 this number had grown to 770,000.\textsuperscript{233} The projected number of veterans (including persons with disabilities resulting from the war), family members, and families of fallen soldiers that will need support in the post-war period is estimated at between 3 million and 5 million people (10-15 percent of the total population of Ukraine).\textsuperscript{234}
According to a survey conducted by UNDP and the Ministry of Digitalization, the proportion of the population belonging to at least one vulnerable group increased from 34 to 45 percent in the last year. This increase was primarily amongst IDPs (whose proportion increased from 2 to 14 percent), persons with disabilities (from 8 to 10 percent), and single parents (from 3.5 to 7 percent). The largest category remained older persons (20 percent, the same as in 2021), with the vast majority of this age group being women.

According to SHARP22, 23 percent of the respondents were displaced. Displaced people were among the most vulnerable of the surveyed groups: they had lower incomes and much higher personal exposure to adversities than stayers. The displaced were likely to rely on welfare payments and experienced a shortage of housing to rent or buy. They were also more likely to personally experience adversities caused by the war. Eleven percent of the respondents were also returnees. The largest number of the surveyed returnees were from liberated areas (mainly from Kyiv and Kyiv oblast). Most respondents intended to stay at their current localities during the survey period. Only 5 percent planned to return to their native localities where they lived before the war (mainly to Donetska, Luhanska, Khersonska, and Kharkivska oblasts). Most of them have personally experienced war-related adversities and war crimes. They also more often than those who were never displaced rely on welfare payments.

The SHARP study revealed that commonly reported adversities related to the war included witnessing fighting or shelling, family separation, and home or property damage. IDPs appeared to have been particularly vulnerable to these adversities. HIA primary data collection findings demonstrated the toll of job loss, which was highest among IDPs and people living in Southeastern macro-region; IDPs are also among those likely to change jobs in 2022, move to unofficial employment, or whose salaries were cut, or paid late.

### Unequal access to resources

According to SHARP22, income levels were lower among older persons (3.0 out of 10), persons with disabilities (3.3), and IDPs (3.5, compared to the national average of 3.9). IDPs showed the largest decrease in income in 2022 among the groups with vulnerabilities. The provision of administrative services was lower among people living near the ‘contact line’ (6.2), older persons (6.9), and in rural areas (6.9 in comparison with the national average of 7.1). Provision of welfare payments, was lower among people living near the frontline (6.8 compared to national average at 7.3). People living near the frontline also had the lowest “authorities care” score (4.9 compared to the national average at 5.8).

Access to internet and digital services remained high in the post-2022 period (though it deteriorated significantly due to attacks on energy infrastructure and related blackouts during the autumn 2022 and winter months of 2022-2023). The share of the population that reported using the internet over the past 12 months stood above 80 percent in all macro-regions (see Figure 7), however, it was lower in rural areas (77 percent compared to 88 percent in urban areas) and among older persons (56 percent). Internet and mobile connectivity remained essential for providing information for security and humanitarian needs to all demographic groups. However, HIA FGD participants pointed out existing barriers to accessing information for some groups, particularly older persons, and persons with disabilities. Indeed, both qualitative and quantitative data collected for the HIA found that not all groups had equal access to smartphones, which are necessary for securing access to certain public services. Notably, only 49 percent of older respondents of the HIA household survey used smartphones; access is also lower in rural areas (68 compared to 83 percent in urban areas). Even with internet, certain groups face challenges accessing necessary services. Also, learners with disabilities have become particularly at risk of educational setbacks in the shift to online learning.
The service websites of our government and local services rarely provide information about architectural accessibility.
- KII, Expert in advocacy for persons with disabilities, Kyiv

There are no important announcements and information in large print for visually impaired people to read, for example, in banks and other institutions.
- KII, Social Expert, Khmelnytskyi

People who don’t have money to buy a smartphone or older people who can’t understand how to use the app find themselves in a disadvantaged position.
- KII, Expert in employment, Pryluky

They (elderly) do not know how to use online administrative services. They cannot use the Dilia application. It is very difficult for them to adapt to the conditions that have arisen since the beginning of the war.
- KII, Expert on persons with disabilities’ rights, Kyiv

**Figure 7:** Reported access of household members to information services in 2022, by type of information service and macro-region

According to FGD participants, access to health care and health security remained a challenge for most groups with vulnerabilities, such as low-income individuals, older persons, and those living in rural areas. Accessible medicine was also a concern for FGD participants. While the cost of medicine was a pressing issue for older and low-income individuals, access to specialized medical services was a challenge for all groups of respondents in rural areas (see the living standards chapter).

**Denial of opportunities**

Housing remained a primary issue for IDPs. According to REACH collective site monitoring from November 2022, the average length of time that households reported living in collective sites was 7.5 months. People remained in collective sites longest (the majority of whom were women, including women with children and elder relatives) were the most vulnerable, as institutionalized life prevented integration into host communities. IDPs unable to afford independent housing faced the risk of having to stay for longer periods in collective centres.
According to a REACH assessment of government-led social assistance programmes, most IDPs received housing allowance 2 to 3 months after applying, and around one third received it in less than 1 month. Only 45 percent of households, according to the HIA survey, could easily afford rent without assistance. Based on the average consumer prices for goods and services in Ukraine in 2022, the housing allowance is a lot less than rents in many areas. This disproportionately affects those on low incomes such as older persons and persons with disabilities. Qualitative findings from the HIA indicated that some groups (as indicated below) risked being evicted from or were not allowed into collective centres and faced other forms of stigmatization (for example, at checkpoints or when accessing services).

The livelihoods chapter discussed the effects of the war on employment and income generating activities of households, especially by displacement status and macro-regions. The qualitative findings of the HIA provided further information on how IDPs perceived their difficulties in finding a job, and registering as unemployed, as well as the experiences of other groups with vulnerabilities. IDPs reported facing challenges competing with local applicants. Some informants mentioned that their IDP status prevented them from taking up certain positions, such as jobs with fiscal responsibilities (as such jobs require a permanent address in an area). Another obstacle to employers when considering displaced candidates was the challenge of validating their work experience due to a lack of supporting documents. Additionally, there might be difficulties terminating the employment of an employee with IDP status. Women from the Roma community described a lack of economic opportunities for members of this community in Odesa. Although overall discrimination against Roma was reported by FGD participants as low and decreasing since the war, particularly in urban areas, biases towards members of the Roma community persist.

Interviewees reported that women, in general, experienced more challenges than men in finding employment, largely due to juggling multiple responsibilities and the added burden of wartime conditions, including the burden of caring for dependent family members. It was noted that women often had to juggle these caregiving responsibilities alongside the absence of men who were drafted for military service. In the context of ongoing military mobilization, some men reportedly were more inclined to seek informal employment to avoid registering with local authorities. Conversely, women tended only to opt for informal employment when formal job opportunities were scarce.
Coping mechanisms

Coping mechanisms of groups with vulnerabilities mainly involved self-reliance (the ability to independently meet their own needs and take care of themselves without relying heavily on external assistance or support) and community resilience (which involves the ability of community members to support one another and adapt to adversities). However, as both strategies require having some essential skills, certain groups may have limited coping capabilities. Certain individuals, especially older persons, and those with severe disabilities, may face difficulties in effectively communicating their needs, potentially resulting in their exclusion from crucial humanitarian assistance. Certain groups such as young families without children and unemployed individuals who live alone but are below retirement age, often find themselves overlooked for humanitarian aid, prompting them to seek alternative opportunities abroad. Recognizing and addressing these specific needs is crucial for ensuring inclusive assistance.

A sense of marginalization among groups, and tension between host communities and IDPs, were relatively low. According to SHARP data, in 2022 80 percent of respondents at national level strongly or somewhat disagreed that there were tensions between IDPs and host communities, however there have been challenges and tensions: access to essential items, public services, and accommodation have been the subject of dispute; as well as the difficulty of political, cultural, and language differences; it appears that biased stereotyping (beliefs about anti-social behaviour and draft evasion by displaced men) exist in oblasts hosting a large number of IDPs. These tensions should be monitored to ensure that they do not evolve into bigger societal rifts.

Although the data confirmed that social cohesion and a sense of unity were increasing, adopting different coping strategies such as hoarding resources, or forming alliances based on shared statuses and interests, while serving immediate survival needs, can create divisions and increase tensions between groups. As the war continues, potential tensions could occur between, and within, distinct groups over access to resources or inclusivity. These tensions could occur due to displacement status (between those who remained in host communities and returnees, and between host communities and IDPs), or over issues of resistance and mobilization (between those who participated in resistance and those who stayed in the occupied territories, between reintegrating veterans and those who are perceived to have avoided army service).

Interviewed experts recommended keeping the focus on addressing structural issues faced by groups with vulnerabilities (including, but not restricted to, those that are displaced), and advocating for political participation and self-governance, including participation in budget processes on national and local levels. Use of hotlines, email addresses, QR codes, and direct engagement with communities was recommended for collecting feedback. For groups with vulnerabilities to effectively cope with trauma and stress, access to psychological support is essential.
7 • Key findings on gender equality
Key messages

Women and men experienced increased financial insecurity since the start of the war, and female respondents reported lower monthly household income and higher reliance on aid and social welfare.

The war has exacerbated the risk of gender-based violence and brought new challenges, including increased domestic violence rates, a lack of access to protection services, and heightened risks of conflict-related sexual violence. Displacement and destruction affect women’s access to housing, schooling, mental health, sexual and reproductive health, and rights (SRHR), and medical services, legal assistance, food, and protection.

Both men and women have become more actively involved in NGO initiatives and in initiatives aimed at improving their local areas.

The war has had multifaceted effects on gender norms: experts noted that war can reinforce harmful norms, empower women to take on new roles, or do both simultaneously, and have no effect on the patriarchal status quo.

There were no gender differences observed in access to services.
Context

Prior to the war, Ukraine had achieved moderate progress on SDG 5: achieve gender equality and empower all women and girls.248 According to the Gender Inequality Index, gender-based inequality in Ukraine in 2019 was lower than in Europe and Central Asia overall, and Ukraine placed 52nd out of 189 countries on the index.250 Of the four subindices of the World Economic Forum’s 2021 global gender gap index, the lowest score in Ukraine was in “political empowerment”, at 0.147 on a 0 to 1 scale.251 In 2021, just 20.8 percent of the seats in national parliament were held by women, and although this marked an increase over the two preceding decades, it lagged behind the 50 percent target.252

Ukraine has made significant strides in the protection of women’s rights, and the Constitution and laws of Ukraine253 have provisions to safeguard equal rights and opportunities for women and men.254 Ukraine has ratified or joined most major international agreements on gender equality, and has subsequently approved numerous relevant National Action Plans,255 including the National Action Plan to implement United Nations Security Council Resolution 1325 “Women, Peace and Security” (NAP 1325) for the periods up to 2020 and 2025.256 In 2022, the NAP1325 was revised and it now includes key provisions on prevention and response to conflict-related sexual violence (CRSV) and against trafficking, and it emphasizes the additional needs of women in times of conflict.

In June 2022, the Verkhovna Rada of Ukraine also ratified the Council of Europe Convention on Preventing and Combating Violence Against Women and Domestic Violence (the Istanbul Convention).257 In 2019 Ukraine made a global commitment to implement its national policies based on a newly developed legislative framework in order to ensure that all survivors of domestic and GBV are aware of their rights, and have access to quality and comprehensive services, including: legal protection, social and psychological and health care support and rehabilitation, while society in Ukraine develops zero tolerance for violence and actively counteracts this horrific phenomenon.258

Ukraine has adopted its first State Strategy on Equal Rights and Opportunities of Women and Men by 2030, the National Strategy on Decreasing the Gender Pay Gap, and the Strategy for Gender Equality in Education 2030. Another crucial step forward was the joint commitment made by the GoU and the United Nations to prevent and respond to CRSV within a Framework of Cooperation signed in May 2022. The agreement and its implementation plan use a gender-sensitive policy approach and include important gender-responsive provisions, such as ensuring protection for women and girls at risk of human trafficking, strengthening the capacity of the security/defence sector, and providing holistic assistance and access to justice for survivors.

Nonetheless, women faced unequal access to the labour market and were more at risk of falling into poverty. Although women and men have been achieving equal years in education since 2011, women’s labour force participation stood at 74.5 percent of men’s in 2019.259 A gender wage gap had been observed in all sectors of economic activity,260 equivalent to 23 percent in 2019 (19 percent in 2021),261 and in 2019 the gender pension gap stood at 32 percent.262 Before the war, women comprised a larger portion of the population than men, particularly in the population over 65, of whom two thirds were women.263 Women were more dependent on social assistance and social services, making up the largest proportion of the low-income population that applied for state benefits,264 while single mothers made up 95 percent of single-parent households.265 Women were most often the primary caregivers for children, older family members and those who were ill or living with disabilities.266 The proportion of women of reproductive age whose access to family planning services had been met using modern methods of contraception was 68 percent in 2012, far from the 100 percent target.267

SCORE results in 2021 found that women reported higher levels of subjective poverty and economic insecurity268 and experienced lower employment rates, despite having equal educational attainment to men.
The women most vulnerable to economic fragility were older and more likely to be based in rural areas; these women reported suffering from poor health outcomes, facing barriers in access to services and feeling disenfranchised from the state and their personal role in civic life. Women experienced poorer physical health and mental wellbeing, both of which were exacerbated by economic fragility and insufficient access to medical services.

Even before 24 February 2022 GBV, including sexual violence, was widespread and systematic in Ukraine and was a significant risk for women, children, and adolescents, especially in the conflict-affected areas in eastern Ukraine. According to the Organization for Security and Cooperation in Europe (OSCE), in 2019 17 percent of women in Ukraine had experienced sexual harassment over the previous year (compared to the European average of 21 percent). According to La Strada Ukraine, the average number of calls to the National Hotline on Prevention of Domestic Violence, Human Trafficking and Gender Discrimination was 1,600-1,700 per month (though this doubled during the COVID-19 lockdowns). According to national crime statistics in 2019, women and girls constituted the majority of registered victims of rape (86.3 percent), domestic violence (78.1 percent) and human trafficking (55 percent). In 2019, 2,086 criminal cases of domestic violence, 276 cases of rape, 319 cases of grievous bodily harm, and 429 murders committed against women were registered by Prosecutor’s General Office in Ukraine.

While self-reported exposure to physical and psychological forms of domestic abuse was similar for both women and men in the SCORE 2021 sample, women had lower personal security (60 percent of women felt safe in their everyday lives, compared to 68 percent of men). Data from 2021 also pointed to the particularly vulnerable situation of women living near the ‘contact line’ in Donetska and Luhanska oblasts at the time: 13 percent had reported experiencing verbal abuse at home (compared to 9 percent among women from the representative nationwide sample), 6 percent experienced physical abuse (compared to 5 percent), and 33 percent did not feel safe from violence in their daily lives. The level of reporting is higher when survivor is able to reach a safer environment with better access to services.

**Aggregate impact**

In addition to a complex impact on gender equality, the ongoing war is expected to have a lasting impact on Ukraine’s population structure and demographic dynamics, with projections of continuous population decline and ageing until 2052 and estimates that the number of women-headed households will increase. The changing demographic landscape is further affected by the 5.3 million registered IDPs in Ukraine, and the 8.1 million Ukrainians who have fled the country as of January 2023, of whom an estimated 90 percent are women and children.

In the 2023 HIA survey, 29 percent of women and 27 percent of men reported that their involvement in household decision-making had changed since the war; 59 percent of women and 60 percent of men said this had increased (differences not detected by macro-region). Every fifth woman (23 percent) reported spending 50 or more hours per week on domestic chores, and 52 percent reported spending 50 or more hours per week on childcare; corresponding to 13 percent and 31 percent of men respectively. Thirty-three percent of men and 35 percent of women reported an increase in childcare and domestic chores, since February 2022. There were no differences between single-headed households and those headed by cohabiting adults, or between respondents in different macro-regions. The 2023 HIA survey also found that 23 percent of surveyed women said that they had household members with disabilities, and 29 percent had household members with chronic illnesses (compared to 25 percent and 22 percent of men).
Figure 8: Percentages of responses from the 2023 HIA survey

Do you feel that the full-scale war has affected your involvement in household decision-making?

<table>
<thead>
<tr>
<th></th>
<th>Women</th>
<th>Men</th>
</tr>
</thead>
<tbody>
<tr>
<td>69%</td>
<td>29%</td>
<td></td>
</tr>
</tbody>
</table>

- No, my involvement in decision-making has not changed
- Yes, my involvement in decision-making has changed
- I do not want to respond

Approximately how many hours per week do you spend on household work?

<table>
<thead>
<tr>
<th>Hours per Week</th>
<th>Less than 15 hours</th>
<th>15-20 hours</th>
<th>21-30 hours</th>
<th>31-49 hours</th>
<th>50 hours or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women</td>
<td>47%</td>
<td>19%</td>
<td>14%</td>
<td>7%</td>
<td>23%</td>
</tr>
<tr>
<td>Men</td>
<td>32%</td>
<td>18%</td>
<td>15%</td>
<td>12%</td>
<td>13%</td>
</tr>
</tbody>
</table>

Approximately how many hours per week do you spend on childcare?

<table>
<thead>
<tr>
<th>Hours per Week</th>
<th>Less than 15 hours</th>
<th>15-20 hours</th>
<th>21-30 hours</th>
<th>31-49 hours</th>
<th>50 hours or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women</td>
<td>24%</td>
<td>19%</td>
<td>15%</td>
<td>11%</td>
<td>31%</td>
</tr>
<tr>
<td>Men</td>
<td>14%</td>
<td>11%</td>
<td>13%</td>
<td>10%</td>
<td>19%</td>
</tr>
</tbody>
</table>

Key findings on gender equality
Women consistently reported a lower monthly household income than men, although men were more likely to report a loss of income due to the war. According to these respondents, 22 percent of women said their household earned under UAH 4,000 in the past month, compared to 13 percent of men, while 7 percent of women said their households earned over UAH 20,000 in the past month, compared to 19 percent of men. Household income had reportedly decreased for 60 percent of women since 24 February 2022 compared to 71 percent of men; this trend remained when focusing only on households which received income from paid work or business, where 67 percent of women said their household income had decreased, compared to 74 percent of men. Over half of women (54 percent) said that their household had lost access to livelihoods or income due to safety or security concerns, compared to 64 percent of men; for households receiving income from paid work or business, these figures corresponded to 57 percent of women and 67 percent of men. More than half (54 percent) of women said they had lost access to their dwelling, compared to 40 percent of men.

**Figure 9:** Average household income reported in the 30 days prior to data collection, by gender of respondent

![Average household income reported in the 30 days prior to data collection, by gender of respondent](image)

**Source:** 2023 HIA survey

After February 2022, 56 percent of men cited paid work as a primary household income source, along with 17 percent who mentioned their own businesses, compared to 51 percent and 7 percent of women respectively, indicating that a lower proportion of women live in households obtaining a regular source of paid income. In contrast, women reported more reliance on aid or social assistance: 65 percent of women cited government pensions or social protection as a primary household income source, compared to 52 percent of men, while 23 percent of women said their household relied on humanitarian aid, compared to 19 percent of men. Both men and women reported a decrease in primary income from paid work since February 2022 (12 and 16 percentage point decreases respectively). Both men and women reported an increase in primary household income from government assistance (7 and 8 percentage point increases respectively) and from humanitarian aid (18 and 22 percentage point increases respectively). According to the 2022 REACH MSNA assessment, women-headed households were more likely to report extreme or extreme+ needs across sectors, compared to households headed by men (46 percent compared to 38 percent). More specifically, households headed by women had higher needs in terms of food, medicine, and health care.
FGD and KII respondents highlighted that both men and women were heavily influenced by the increase in consumer prices and financial struggles, but the increased domestic responsibility and burden of care leaves women disadvantaged in the professional field and in decision-making, which puts them in a particularly vulnerable financial and social position.

The constant burden of childcare prevents women from engaging in any other activities, such as going to meetings. Women who are taking care of small children and the elderly who need to be constantly looked after cannot even get humanitarian aid because they cannot go out and leave their children or elderly relatives by themselves.

The impact of war on traditional gender norms and stereotypes is multifaceted. In some respects, war enhances patriarchal dynamics and reinforces traditional gender norms, but it can also empower women and minorities, some note. The war simultaneously undermines gender equality in some respects and enhances it in others.

The war has exacerbated GBV and brought increased risks around CRSV. Since February 2022 multiple forms of GBV, including intimate partner violence, sexual exploitation and abuse, sexual harassment, forms of sexual violence including CRSV, and economic abuse, are being reported, exacerbating the pre-war situation. Women and girls on the move, at border crossing points and transit/collective centres, and in bomb shelters face particularly elevated risk. In February 2023, 3.6 million people needed GBV prevention and response service assistance; about 39 percent of these were in the east and south of Ukraine, according to the United Nations Population Fund (UNFPA).

On average in 2022, according to La Strada, the monthly level of appeals fluctuated between 1,586 and 4,684, with the total annual number at 38,472 appeals, of which 77 percent were made by women. In contrast, according to JurFeme, the number of calls to the National Police of Ukraine in the first half of 2022 fell by 27.5 percent compared to the same period of 2021. This could be reflective of people’s inability to make reports due to displacement or war-related services effects, rather than indicate a direct decrease. However, the general tendency that women constituted 83 percent of survivors remained. In addition, in 2022, it is reported that the National Police of Ukraine and social protection bodies received 251,829 calls related to domestic violence, of which 244,381 were identified and registered.

Overall, consensus is that GBV has increased compared to 2021, particularly in the context of the number of refugees and displaced persons, and the proportion of citizens with limited access to telephone or mobile connection in certain areas in Ukraine. As the war continues, and people, particularly those on the frontlines, suffer trauma and increased mental health problems as a result, an increase in the prevalence of GBV, including intimate partner violence, might consequently take place.

A UN Women and Internews report from 2022 suggested that 23 percent of surveyed women aged 18-29 had experienced sexual harassment in public spaces since February 2022. Over half (56 percent) of women surveyed in the same study reported military attacks as the main threat to their safety, and 29 percent were concerned about the elevated risk of GBV, including sexual harassment, sexual assault, rape, and human trafficking. While the feeling of safety had decreased among both women and men, this drop was more pronounced among women, who continued to experience lower physical safety than men. The proportion of respondents who felt safe in their daily lives, constituting 60 percent of women and 68 percent of men according to SCORE in 2021, decreased to 45 percent of women and 59 percent of men according to SHARP in 2022.

According to national crime statistics from January to December 2022, women and girls constituted the majority of registered victims of rape (50.8 percent), domestic violence (78.4 percent) and human trafficking (54.5 percent). In 2022, 2,581 cases of domestic violence, 120 cases of rape, 199 cases of grievous bodily harm, and 376 murders committed against women were registered. These figures compared to 2,086 cases of domestic violence (78.1 percent of registered cases), 276 cases of rape (86.3 percent of
registered cases), 319 cases of grievous bodily harm, and 429 murders committed against women in 2019. In all, this marks an increase of 495 annual registered cases of domestic violence against women from 2019 to 2022. Annual registered cases of rape committed against women decreased (by 156), as did the number of registered grievous bodily harm cases against women (by 120) and the number of registered murders (by 53). The decrease in total cases may be ascribed to difficulties accessing support and protection services.

KIIs with Ukrainian gender experts further pointed to a rise in domestic violence rates, the lack of access to protection services, and heightened risk of sexual violence from Russian militias (showcasing the particular vulnerability of those living near the front lines and/or in temporarily occupied territories) experienced by women since February 2022.

The displacement crisis triggered by the war, has created conditions that put displaced women and women refugees are at heightened risk of GBV. A recent Office for Democratic Institutions and Human Rights (ODIHR) household survey conducted in January 2023, 1 in 22 Ukrainian refugee women experienced sexual harassment, 1 in 50 experienced domestic violence, and 1 in 500 experienced sexual violence. KIIs with gender experts also drew attention to increased risk of trafficking.

Interviews with gender experts and representatives from the Roma community also evidenced the challenges faced by displaced Roma women, who have encountered intolerance and hate speech both in Ukraine and abroad. Experts noted the disproportionate effect of the war on the living conditions of Roma women, their access to health care, protection, and other basic services. They also pointed to longstanding inequality in access to education for Roma women and girls, stating that conditions could worsen as the war continues, existing alongside extreme difficulties for Roma women and men to find employment (even prior to the war) that were noted by the focus group participants.

FGD participants did not identify a gendered impact of the war on access to services. Even among IDP men and women, few participants expressed an inability to access services, and most rated access as sufficient. Rather than gendered impacts, KIIs identified that unequal access to services particularly affected persons with disabilities, older people, low-income households, and the Roma community, as well as pointing to geographic disparities – namely, for those living in, or closer to, front-line or temporarily occupied regions.

Coping mechanisms

In terms of positive coping mechanisms, both women and men participated in more NGO activities from 2021 to 2022 and in activities to improve their local areas, and both women and men in the FGDs expressed a strong desire to contribute to supporting Ukraine. The war initially affected the operation of many CSOs; immediately following the war, the number of fully operational women’s organizations had halved, although only one in five of the public and charitable associations operating before the full-scale invasion stopped their operations (on average for four months) and then resumed operations; 80 percent did not stop their operations at all. Since the full-scale invasion, there has been an overall reduction in the number of new public associations (PAs) being established in Ukraine but a drastic increase in the number of new charitable organizations (COs). Crucially, data from the SSSU indicates that the proportion of CSOs led by women has increased slightly from 27.8 percent in 2020 to 28.4 percent in 2022.
According to the Rapid Gender Assessment by UN Women and CARE, women CSOs are at the front line of the humanitarian response. Women’s leadership and their role in decision-making has increased at family level and partially at community level. However, when it comes to formal political and administrative decision-making processes, women are underrepresented.

On negative coping mechanisms, the 2023 HIA survey identified that 28 percent of women said that their households have had to spend their savings to cover basic needs (compared to 34 percent of men), 24 percent have had to reduce health expenditures (23 percent of men), and 14 percent have had to take on additional work (23 percent of men). This indicates a gendered impact in the type of coping mechanisms employed, with women and men equally likely to reduce vital expenditure or borrow money, but men more likely to take on additional work or spend savings, two factors which may be influenced by gendered roles in caregiving and managing household finances. A survey by IOM in 2022 found that just over half (53 percent) of vulnerable people – that is, those who would accept one or more risky job offers abroad or in other settlements in Ukraine – were women. The survey found that just 29 percent of women could confidently say that exploitation, human trafficking, or abuse and violence would never happen to them (compared to 35 percent of men).
For notes
8 • The composite picture of the human impact
The methodology and analysis included in this report have been shaped by the Guidelines for Assessing the Human Impact of Disaster, which aims to analyse indicators impacting human development pre- and post-disaster. While this report aims to inform medium-to long-term recovery and development planning by providing an overview of the war’s impact since February 2022, it is important to point out that the report has not been written in a “post-disaster” context as the war in Ukraine is ongoing. The data collected and analysed in this report – published between February 2022 and April 2023 – provide only a snapshot of conditions, and the corresponding initial effects on people’s access to basic needs, livelihoods, food security, gender equality and social inclusion.

This concluding chapter reflects on findings from the five core pillars of the HIA and synthesizes the most important data points identified in the analysis. After presenting the composite picture of those indicators, the remaining part of the chapter considers the potential implications of these effects on the country’s SDG and development targets.

### Composite picture of impact and deprivations

The boxes below present the composite picture of the impact of the war, in summary form, based on data points presented in the chapters above. These data points represent information from nationwide or representative surveys only and provide an overview of the quantitative impacts; more nuanced interpretations of these figures, along with findings from other types of data sources, are covered in the following sections.

| Deprivations in living standards, education, and health | 13% of households reported that their accommodation was directly damaged by the war; country-wide utility disruptions throughout winter 2022/2023 resulted in living standards setbacks. | 11% of youth identified a lack of access to quality educational services as a primary problem in their lives. | 22% of households spent more than a quarter of their monthly income on health care services. |
| Deprivations in livelihoods | The predicted unemployment rate for 2023 is 18.3%, compared to the pre-war average of 9.8% in 2021. | 65% of households reported a decrease in income since February 2022. | The proportion of households engaged in paid work as a primary source of income has fallen (67% to 53%), while the proportions of households reliant on state transfers and humanitarian aid have risen (from 53% to 60% and 1% to 21%, respectively). |
| Deprivations in food security | Lack of economic access drives food insecurity in Ukraine, with 44% of households unable to obtain enough money to meet essential needs. | The proportion of households with inadequate food consumption has trended upward, from one fifth, to one third, of the population. | 43% of households reported engaging in consumption-based coping strategies, mostly including eating cheaper food, but also limiting portions, borrowing food, and reducing number of meals. |
### Deprivations in social inclusion

<table>
<thead>
<tr>
<th>Deprivations in social inclusion</th>
<th>IDPs, persons with disabilities and older persons experienced the lowest income levels; with IDPs showing the biggest decrease in income among groups with vulnerabilities.</th>
<th>IDPs and members of Roma communities were more likely to face discrimination in looking for a job or accommodation.</th>
</tr>
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<tbody>
<tr>
<td>45% of the population belongs to at least one vulnerable group (+11 percentage points in 2022 compared to 2021).</td>
<td>55% of women did not feel safe in their daily life, compared to 40 percent of women pre-war.</td>
<td>23 percent of women reported spending 50 or more hours per week on domestic chores, compared to 13 percent of men.</td>
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### Deprivations in gender equality

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<tr>
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<th>3.6 million people needed GBV prevention and response services in February 2023.</th>
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### Macro-regional dynamics of deprivations

While the war has affected the whole country over the last year, acute needs have been most concentrated in the Northern and Southeastern macro-regions. Livelihoods conditions were most severe in the southeast, where households reported the negative effects of safety and security on livelihoods, less access to paid work and increased reliance on humanitarian assistance as a primary source of income, decreased incomes, and greater rates of use of livelihood coping strategies.

In terms of the geographic nuances of food security conditions, most households across Ukraine are struggling to meet their essential needs. However, households in the Southeastern macro-region showed the greatest food consumption gaps over the course of 2022, with the Central macro-region showing increased food consumption gaps toward the end of the year.

### Deprivations experienced by targeted groups

Pre-existing vulnerabilities were the most important predictors of a household’s level of hardship in the post-February period. Although the increased number of IDPs shed light on the multi-dimensional effects of war on this group and identified IDPs as likely to experience greater hardship than the general population, their situation is largely heterogeneous, and only a limited proportion are at imminent risk of falling into poverty. When looking at living conditions, most IDP households, or households who stayed in settlements near the front line, experienced direct damage to their residential units. In terms of livelihoods, older persons, persons with disabilities, and IDP households reported decreased incomes, increased reliance on humanitarian assistance (which may be driven by decreased incomes), and greater rates of use of livelihood coping strategies.

Households with older persons, members with chronic illnesses, or a disability have also experienced disproportionate effects of the war. Households with a member with a disability in the Southeastern macro-region were more likely to report that their livelihoods had been “greatly” affected by safety and security. Furthermore, households with a member with chronic illness or disability were more likely to use consumption-based coping strategies than the displaced and other vulnerable groups. The population of disabled civilians (including children) has grown. Households with older persons have faced specific difficulties with utility disruptions and access to bomb shelters.
Roma communities, already experiencing high levels of discrimination in Ukraine before February 2022, have reported increased discrimination since then, especially when looking for jobs, and seeking housing and accommodation. Notably, the lack of identification documents among the Roma is one of the obstacles for inclusion. Key informants also noted less access to health care, protection, and other basic services for members of the Roma community since February 2022.

**Impact of the war on poverty**

This report has provided an overview of the different ways in which the war has affected households in Ukraine. Each chapter provided assessment findings based on geography and household characteristics that compound pre-existing vulnerabilities with new ones caused by the war. War has had a negative effect on monetary and nonmonetary aspects of poverty, most profoundly on livelihoods and food security, but also limiting access to critical services and living conditions. In 2019, it was estimated that 107,000 persons were multi-dimensionally poor and an additional 184,000 were vulnerable to multi-dimensional poverty.285

**People at risk of poverty**

The World Bank estimated that the share of people living at or below the international poverty line ($6.85 per person per day) increased from 5.5 percent in 2021 to 24.1 percent in 2022, which represents 71 million people pushed into poverty.286 War-affected regions are expected to experience even higher poverty rates. The UNDP estimates the highest monetary poverty rates in Odeska, Luhanska, Khersonska, Kharkivska, and Rivnenska oblasts, which were among the poorest oblasts before the war.287 In the 2022 MSNA 28 percent of respondents reported that the total amount of their household income was below the statutory subsistence minimum in autumn 2022.288

This report has shown that deterioration in livelihoods contributed most to monetary poverty. The livelihoods chapter reported on the number of job losses, business closures, stoppage of agricultural production, and increased reliance on government support over paid jobs because of the war. Data from the 2022 MSNA also confirmed that the most severe household needs were in livelihoods, followed by humanitarian sectors associated with living standards such as shelter, NFIs and WASH. Those needs often overlap - for instance, 28 percent of households were found to have severe and above needs in livelihoods and at least one other sector, which corresponds to around 8 million people.289 The continuation of the war, therefore, may prevent the economy from rebounding and households from recovering their livelihoods.

Households in the regions directly affected by war experienced damage or destruction of their homes and hence faced deprivation of their living conditions. In areas close to the front line, there was a reduction in access to education, health, or basic services. The nationwide disruption of utilities during the winter of 2022-2023 had a largely temporary, though substantial negative effect, on households and businesses. Already in February 2023, the utility situation was improving in most parts of the country, although electricity remained a top concern in settlements close to the front line in the Northern and Southeastern macro-regions.290 Moreover, most households were able to repair their accommodation or move to a safer place; education transitioned online in areas with the most destroyed facilities; functioning health care facilities absorbed the extra caseload from the destruction of other facilities, increasing casualties, and population movement.
Household resilience relies on coping strategies, government and humanitarian assistance

Despite millions of people experiencing deteriorations in their living conditions and livelihoods, the impact of the war on poverty has been partially mitigated by households utilizing coping strategies. In the 2022 MSNA, about half of households reported using at least one livelihood coping strategy, with the most common being spending savings, getting an additional job, and reducing health costs. However, as the HIA survey showed, most households reported that they were close to exhausting the coping strategies they had been using since February 2022. Exhaustion of coping strategies leads to contagion effects; these could be economic, such as spending savings turning into borrowing money, and incurring debt, or reducing health care expenses resulting in increased health issues.

Government and humanitarian aid are playing a key role in mitigating the impact of war on poverty. the GoU extended social safety nets early in 2022 to provide immediate relief to directly affected households. It also eased documentation requirements for households which either have not had access to documentation because of displacement, or for which social protection offices were inaccessible. In addition, the humanitarian response has channelled billions of dollars of aid ($4.3 billion pledged from OCHA alone) in cash and in kind, to households and local relief actors, preventing households from falling further into poverty. In 2022, the Cash Working Group reported having supported 5.9 million people and transferring $1.2 billion, or on average $203 per person. Humanitarian cash interventions were designed to support households affected at the very beginning of 2022, but prolonged support would need to be channelled through the social protection system in order to consistently cover the estimated 7 million persons who are now estimated to be living below the poverty line.

Potential implications for Ukraine's progress towards SDGs

The following section provides an overview of the potential implications of the war for progress towards achieving the SDGs in Ukraine, taking into consideration the targets outlined in Ukraine's 2020 SDGs Monitoring Report. While the scope of this report was not to conduct an in-depth review of the specific indicators and sub-indicators which make up Ukraine's targets for achieving SDGs, this section provides a brief overview of what the findings from this study could mean for Ukraine's progress towards selected SDGs relevant to the HIA.

**SDG 1 – No Poverty**

SDG 1 has three targets: the first is reducing poverty, the second is extending the social safety net, and the third is related to the resilience of groups with vulnerabilities. By pushing millions of people into poverty, the war has further distanced Ukraine from reaching its target of reducing poverty by four times by 2030. The GoU eased access to social assistance programmes for the affected population which, combined with humanitarian assistance, has increased the share of poor households covered by some form of social assistance. However, this was done as a temporary measure; the long-term effects of this will depend on the future policy changes made by the GoU during recovery efforts. As for the third target, this report showed how the war has affected already groups with vulnerabilities; more are at risk of falling into poverty, especially IDPs, people with disabilities, single-headed households, and older people. Hence, the poverty level of groups with vulnerabilities would likely not be in line with goals previously laid out in Ukraine’s 2020 SDG Monitoring Report, considering the overall increase of poverty in Ukraine since February 2022.
SDG 2 – End Hunger, Promote Sustainable Agriculture

SDG 2 targets in Ukraine relate to improving access to balanced nutrition, increasing agricultural productivity, and reducing the volatility of food prices. While available data on food security in Ukraine since February 2022 do not directly correspond with these indicators, they may be indicative of broader trends related to progress toward ending hunger in Ukraine. For example, the proportion of households with insufficient food consumption has trended upward since the start of the war, indicating a decrease in balanced diets for households. A quarter of rural households reported that they had suspended or reduced agricultural production due to heightened costs of production (for crops and livestock), interrupted or suspended production, and decreased income. FAO noted a critical need to support rural livelihoods to mitigate against further deterioration of agricultural productivity, which plays an important role in providing food to households for their own consumption as well as providing food to local markets. Ukraine has also experienced some setbacks in terms of price volatility, as food prices have gradually increased since February 2022.

SDG 3 – Good Health and Well-being

SDG 3 is focused on reducing preventable mortality for certain target groups (including children under age 5), ending the epidemics of HIV and AIDS and tuberculosis, reducing serious injuries and deaths from road traffic accidents, ensuring universal immunization coverage, and reducing the prevalence of smoking. This report focused on access and barriers to health, which do not translate directly into an evaluation of SDG 3. However, data on the use of certain coping strategies highlighted increased substance abuse and smoking, which are likely to side-track progress towards the targets for this SDG. Moreover, one of the most common barriers to accessing health care was affordability, which suggests that continuing the health financing reform is crucial for ensuring universal health coverage for the population.

SDG 4 – Quality of Education

SDG 4 is focused on ensuring access to quality school, tertiary, and vocational education, improving the prevalence of knowledge and skills required for well-paid jobs, eliminating gender disparities among schoolteachers, and creating a modern learning environment in schools. Access to education has largely been maintained nationwide, with shifts to online schooling in the Northern and Southeastern macro-regions and widespread availability of internet access pre-war. Utility disruptions in winter 2022-2023 temporarily impeded the continuity of education in frontline areas. However, the war has not affected the enrolment rate of students in general secondary education and has only had a moderate effect on enrolment in preschool education. Given that Ukraine was not meeting preschool enrolment targets for children aged five years before 2022, any progress toward this is likely still on hold. Other specific SDG 3 targets were not examined in the report, but concerns about the risk of deteriorating quality of education, and the impact on children’s learning have been raised by experts and practitioners, especially for children primarily distance learning. In addition, access to inclusive education for learners with disabilities was reported to have stopped or become limited with distance learning, meaning that the share of secondary schools with this type of education has dropped because of the war, derailing progress towards this target.

SDG 5 – Gender Equality

SDG 5 is focused on ending discrimination toward women and girls; reducing GBV and domestic violence; encouraging shared responsibility for housekeeping and childrearing; increasing equal representation in political and public life; increasing access to family planning services; and expanding economic opportunities for women. While the HIA did not cover all indicators that comprise Ukraine’s targets for SDG 5, it did review data related to gendered inequalities in household and care work and exposure
to gender-based and domestic violence. The monthly number of cases reported to the national GBV hotline rose and incidences of domestic violence increased in 2022. Women responding to the HIA survey reported greater numbers of hours per week spent on both domestic chores and childcare than men. Such findings from the HIA may indicate that the war has led to stagnation in progress toward a more gender-equitable distribution of household and care work or lowering exposure to GBV, including domestic violence.

**SDG 6 – Clean Water and Sanitation**

SDG 6 is focused on increasing access to safe drinking water and modern sanitation systems, reducing discharge of untreated wastewater, increasing the efficiency of water use, and implementing integrated water resource management. The war temporarily disrupted access to safely managed water during the 2022-2023 winter period. According to 2022 MSNA findings, water and sanitation needs were mainly related to the lack of centralized sewage systems, although access to improved water sources was more difficult in the Southeastern macro-region, especially in Odeska and Mykolaivska oblasts. The share of the urban population with access to centralized water drainage was already substantially below the target in 2019, and the war will further delay closing this gap. Disruption to utilities is still ongoing in settlements close to the front line, which could set the country back on indicators related to access to clean water.

**SDG 8 – Decent Work and Economic Growth**

SDG 8 covers goals related to steady GDP growth: efficient production, increasing employment, reducing the share of unemployed youth, promoting safe work environments, and creating institutional and financial capacities for the self-realization of the potential of the economically active population. Ukraine’s economy and labour market have been heavily affected by the war, negatively affecting progress toward decent work and economic growth. Ukraine’s GDP declined by 29.1 percent in 2022 and is expected to grow by only 0.3 percent in 2023, with inflation standing at 26.6 percent. The ILO estimated that employment had fallen 15.5 percent below pre-war levels, although, for those employed prior to 2022, 33 percent reported losing their jobs. Economic productivity has been negatively affected by wide-scale damage to public infrastructure in Ukraine, with enterprises experiencing $9.7 billion in physical asset losses and the agricultural sector sustaining $4.3 billion in losses. Concerns related to the physical safety of employees (often related to lack of access to bomb shelters) have also been heightened as a result of the war, complicating business operations, especially for micro, small, and medium enterprises.

**SDG 10 – Reduced Inequalities**

SDG 10 is focused on accelerating growth of income for the poorest 40 percent of the population, preventing discrimination, ensuring access to social services, pursuing equitable remuneration policies, and reforming pension insurance based on fairness and transparency. Most of the SDG 10 targets are not directly covered in the HIA report, but the social inclusion chapter provides qualitative findings and indicators of the unequal access to resources and services experienced by specific social groups. The war has disproportionately affected target groups and has tended to exacerbate vulnerabilities across the country, especially regarding income. Access to administrative services, provision of welfare payments, and subjective appreciation of the level of care from authorities were largely maintained or increased in some instances, although at lower levels for households living near the front line. Continuity of social services was ensured online and made possible by high levels of internet connectivity, even among groups with vulnerabilities. Subjective assessment of welfare payment provision increased among all groups with vulnerabilities and regions. The number of respondents who felt that the authorities care also increased nationwide. Among groups with vulnerabilities, this was highest for IDPs, while representatives of the Roma community reportedly perceived a lack of trust towards them from the authorities.
Looking ahead

This assessment considered how Ukrainian households have experienced changes in living conditions, livelihoods, food security, and shifts related to gender equality and social inclusion since February 2022. At the time of writing, the largest human effects of the war have been concentrated in the Northern and Southeastern macro-regions, where humanitarian and emergency needs are still acute. Across Ukraine, the situation for households has stabilized somewhat since February 2022, though the country currently faces a substantial economic downturn, affecting households across the country.

Taking into consideration the magnitude of the socio-economic effects of the war, livelihoods stand out as a primary area of concern looking forward, with most Ukrainian households struggling to economically meet essential needs. Worrying developments were also outlined in terms of food access and availability, which has implications, not just for ensuring households have food to eat, but also for supporting the livelihoods of the many households engaged in agricultural activities throughout Ukraine, as well as global food security. While living conditions have remained somewhat stable since February 2022, households in the Southeastern and Northern macro-regions especially, have been negatively affected by the effects of damage to residential units, energy infrastructure, health, and education facilities, as well as mine contamination of land. Some health-related indicators, if they continue to deteriorate, have the potential to lead to longer-term effects such as rises in morbidity, mortality, decreases in birth rates, rises in death rates, or increases in the number of Ukrainians living with disabilities or facing mental health challenges.

In the face of such challenges, data in this report suggest that, thus far, households have been able to mitigate some of the potential effects of the war by employing coping strategies. However, these coping strategies are, in many cases, finite and temporary measures that cannot continue to be used to support meeting household needs. This report has provided an overview of the human impact of the war to date, but given that the war is still ongoing, households across Ukraine will continue to experience its effects. Future developments related to the themes discussed throughout this report will depend on many social, economic, and political factors which will be influenced by the evolution of the war in the coming months.
9 • Recommendations
The recommendations resulting from this HIA highlight key considerations for policy and programmatic interventions intended to positively support target groups experiencing the impacts of war across the five thematic pillars of living standards, health and education; livelihoods; food security; social inclusion; and gender equality. These recommendations are focused on supporting resilience building and pathways towards recovery; however early recovery and recovery efforts need to be carried out in tandem, and converge, with lifesaving humanitarian assistance. Working along the humanitarian-development nexus will be of key importance, as targeted life-saving interventions in the areas of basic needs, health, food security and others will continue to be required. Efforts must ensure that systems and solutions are put in place, and pursued, in a dedicated, linked-up, and well-coordinated manner, with the aim of enabling sustainable phasing out and longer-term transition from humanitarian support into a government-led response.

These recommendations were developed based on the findings of this report and validated by the United Nations agencies serving as pillar co-leads, CSOs, and the GoU. They are intended to supplement Ukraine’s National Recovery Plan and other key recovery plans and documents and suggest particular areas of consideration in light of the issues discussed throughout this report.

**Overall recommendations for resilience and recovery**

- **Support the GoU to implement its international commitments to protect the rights, and meet the needs of, all groups experiencing the effects of the war.** This includes providing budgetary support and technical assistance at the national, regional and community level to implement the country’s laws, policies and regulations that aim to support the most vulnerable. Implement measures to ensure transparency and accountability in decision-making and policy implementation and mitigate corruption.

- **Support households and local communities in rebuilding the resources they have exhausted to mitigate the effects of the war.** Households largely reported that they had utilized coping strategies such as spending savings, getting additional jobs, and reducing health costs to the point of exhaustion. To protect these households against future shocks, policy and programmatic interventions should focus on medium- and long-term solutions for rebuilding these household resources, alongside increasing labour market access and ensuring universal access to free health care. While humanitarian and government assistance have played a mitigating role, and supported households through the first phases of the war, they cannot be considered a long-term solution and if the war continues it is likely households will need to expand their use of, or continue to rely on, negative coping mechanisms.

- **Continue the measures put in place to reduce barriers to accessing government-led social protection systems and ensure the adequacy and transparency of existing programmes.** The GoU could consider extending the temporary policies put in place at the start of the war including reduced requirements for documentation (for example the ability to register for social benefits outside of one’s place of residence) and smoother processes for registration for social benefits (such as pensions). Throughout the course of the war, and beyond, Ukraine’s most vulnerable households are likely to continue requiring dedicated support. Vulnerable groups lacking identification documents while subject to legal complications are often unable to access social benefits. With the inflation rate at 27 percent in 2022, it will be important to revise the statutory subsistence minimum, to align with price increases and support households living in poverty. Ensuring that vulnerable households can access these systems will require an efficient handover of the humanitarian caseload by the United Nations and INGOs to the government social protection system and national NGOs, in a manner that ensures that vulnerable households in need of support do not fall through the cracks.
• **Ensure that interventions are cohesive and inclusive at the national level, while considering the specific needs encountered in each region and building linkages to area-based recovery plans.** The impacts of the war have been more pronounced for people residing in the Southeastern macro-region, as well as for IDPs, older persons, and households with members with chronic illnesses or disabilities. However, these impacts vary based on the sector and nature of war-related changes. Therefore, it is key to ensure that all interventions are contextualized to the needs of the various parts of the country, account for the particular needs of different and diverse population groups, and are implemented in a human-centred, non-discriminatory, and participatory manner. It is also important to ensure that interventions are developed through consultations with, and with the participation of, affected communities, represented inter alia by organizations led by members of said communities.

• **Adapt recovery efforts in line with the changing needs of the remaining and returning populations.** It will be important to consider the new needs of the population and prioritize innovative solutions and alternative service delivery models which may improve the ability of services and infrastructure to meet these needs. These initiatives can support the modernization and economic growth of Ukraine, and simultaneously create pull factors enabling safe and supported returns.

• **Establish conditions for safe and sustainable return and reintegration,** by tackling the drivers of displacement, and barriers for return and reintegration, through a whole-of-society approach – in alignment with the National IDP strategy. Address the complex challenges of displacement in Ukraine, support sustainable reintegration, and foster social cohesion. Comprehensive, area-based durable solutions for IDPs and refugees are required, which take account of the needs of host communities in Ukraine and take a human-centred approach that leaves no-one behind, through dedicated interventions in areas of return and reintegration. Under the leadership of the GoU and sub-national authorities, support the development of a conducive regulatory environment ensuring durable solutions for displaced households, including safe conditions for return for households choosing to do so.

• **Prioritize building inclusive societies during the war and in the immediate post-war period.** Interventions should focus on economic resilience and poverty reduction; building tolerance and social cohesion; developing strategies to combat perceived threats from specific socio-political groups; communicating the dividends of dialogue and cooperation; creating zero tolerance in society for any manifestation of violence in the private and public spheres and overcoming widespread gender stereotypes. Initiatives aimed at increasing organic interactions and focused on including marginalized groups (socio-cultural events and activities, and thematic media coverage) could help foster horizontal cohesion and harmony. Enhance coordination with women-led organizations and women’s rights organizations as mediators, to ensure the inclusion of vulnerable groups.

• **Engage INGOs, national CSOs, donors, and international financial institutions in social inclusion efforts.** These organizations have the resources and expertise to provide support and assistance in key areas such as social protection and safety nets, and to improve the effectiveness of the GoU’s social protection system in a manner that capitalizes on efforts made during the humanitarian response. This international expertise can be built upon when developing GoU-led sustainable efforts for social inclusion, in the areas of social assistance, contributory schemes, and labour market policies. At the same time, combined advocacy on the part of these organizations will be key for ensuring effective use of both domestic, and international resource mobilization to meet the most pressing needs of Ukraine’s population.
Sectoral recommendations

- **Establish policies and interventions aimed at restoring agricultural production.** Contamination of agricultural land, reduced access to agricultural inputs due to both increases in prices and limited availability, and challenges related to land ownership could become barriers to recovery for households who rely on agricultural income. Agri-food supply chains and value chains will need ongoing support to re-establish or reinforce pre-war level functionality, expand capacity to address incremental demand, as well as recalibrate the needs of the shifting landscape of end-markets, including those for local and national consumption and for export. These barriers also have the potential to lead to a deterioration in household food security if left unaddressed. Efforts should also focus on modernizing to boost production.

- **Invest in education and skills training initiatives to bolster Ukraine’s human capital and increase labour productivity.** This could include ensuring rapid and sustainable re-integration of young veterans and youth affected by the war, through vocational training programmes and university grants. It should also include market-driven skills development enabling (self-)employment and income generation, and other educational opportunities for adults. It will be important to invest in higher education, both formal and informal, to ensure that people are enabled to (re)enter the post-war labour market.

- **Prioritize livelihoods interventions which reflect the economic and demographic changes that are taking place in Ukraine.** As a result of the war, Ukraine is likely to have more female-headed households, a larger proportion of single earner households, and increasing numbers of households with individuals with disabilities. Additionally, highly skilled individuals who have left during the war may be slow to return or choose to permanently settle elsewhere. Livelihoods interventions will need to be tailored to this new context, both in the sectors prioritized, as well as taking into consideration the unique circumstances of these households. As Ukraine’s population continues to age, combating the ‘brain drain’ and creating economic conditions which incentivize working age populations to remain in, and return to, Ukraine will be key for recovery. For those who choose to remain outside Ukraine in the longer term, policies which harness the development potential of migration and foster linkages with the diaspora should also be considered.

- **Create an enabling environment for women and displaced persons to work outside the home, engage in home-based livelihoods, and participate in activities delivered by development and humanitarian actors.** With the increased number of women single-headed families, women are absorbing the largest share of the care burden. More childcare and caregiving facilities are needed to facilitate conditions for working-aged women to engage in employment opportunities. Remote working opportunities will be increasingly important for ensuring livelihoods opportunities for displaced persons.

- **Ensure that survivors of GBV, harassment, and war-related trauma have access to appropriate support services.** The war has exacerbated instances of GBV and brought new risks related to CRSV. Ensuring that the survivors of these events and those otherwise exposed to harassment, gender discrimination and traumatic events affecting mental health and psychological wellbeing, have access to appropriate support and reporting mechanisms. Affordable specialized services, will be key to resilience and recovery efforts. Interventions of this nature should include continued support for the provision of these services based on a human-centred approach, and in compliance with the Istanbul Convention, as well as activities (awareness-raising, ensuring availability of services including universal design, addressing language and cultural needs, and disaggregation of target groups) to reduce access barriers and stigmatization. Equally, it is crucial to ensure that these services are accessible to, and reach, the most vulnerable of Ukraine’s population, such as persons with disabilities, ethnic and social minorities, elderly persons, and those near the front line. The allocation of necessary financial and technical resources to local actors in strengthening their GBV prevention and response should be ensured.
• **Develop policy and legal frameworks to facilitate access to affordable and appropriate housing opportunities.** The demographics of Ukraine’s housing market are changing, and prices are increasing, limiting the ability of certain subsets of the population to access the market. Ensuring safe, equal, and affordable access to housing will be a key element of Ukraine’s recovery, including incentivizing the safe return of refugees and IDPs. Policies to increase access to housing for people with disabilities should be specifically considered, alongside these broader reform efforts.

• **Continue the health reform aimed at increasing access to health care services and medicines.** This will entail improving efficiency of the health system, particularly, the Affordable Medicines Programme, alongside extending and expanding primary health care capacities and addressing war-induced health needs of Ukrainians.
Endnotes


3 People in need (PIN) is a metric calculated as part of the OCHA-coordinated HNO. The figure is first calculated by each humanitarian cluster independently for their sector of focus, and then aggregated to present a national estimation for the whole of Ukraine across all sectors. For more information, see Annex 4 of the HNO. OCHA. “Ukraine Humanitarian Needs Overview 2023,” December 2022. https://reliefweb.int/report/ukraine/ukraine-humanitarian-needs-overview-2023-december-2022-enuk.


5 The macro-regions in this report refer to the following groupings - Southeastern/Front line: Kharkivska, Luhanska, Donetsk, Zaporizhzhia, Khersonska, Mykolaiivska, and Odeska; Northern/De-Occupied: Kyivska, Chernihivska and Sumsa; Central/Support: Vinnytska, Cherkaska, Kirovohradska, Poltavaska and Dnipropetrovskova; and Western/Backline: Chernivetska, Zakarpatska, Ivano-Frankivska, Ternopilska, Khmelnytska, Lvivska, Volynska and Rivnenska.

6 The twenty-four regions covered in the HIA primary data collection included: Cherkaska, Chernihivska, Chernivetska, Dnipropetrovskova, Donetsk, Ivano-Frankivska, Kharkivska, Khersonska, Kirovohradska, Kyivska, Lvivska, Mykolaiivska, Odeska, Poltavaska, Rivenska, Sumsa, Ternopilska, Vinnytska, Volynska, Zakarpatska, Zaporizka, and Zhytomyrska.


14 Especially women (49 percent of the workforce for men and 75 percent of the workforce for women). The other half of the economy is dominated by industry (35 percent of men and 14 percent of the women in the workforce) and agriculture (16 percent of men and 11 percent of women in the workforce). ILO estimates. World Bank database.


19 Aging of the population has been more acute in Luhansk oblast and the central regions of the country, and more favourable in Kyiv city, western oblasts, and some southeastern oblasts; worst to be found in northern oblasts followed by central oblasts. See Mezentsev, Kostyantyn, Grygorii Pidgrushnyi, and Natalia Mezentseva. “Challenges of the Post-Soviet Development of Ukraine: Economic Transformations, Demographic Changes and


Ibid.


Ibid.

“To measure the severity of humanitarian conditions (the degree of harm brought by all combined humanitarian consequences) and to estimate people in need (PIN), the 2023 HNO analyzed and categorized needs along a five-point severity scale: none or minimal (1), stress (2), severe (3), extreme (4), and catastrophic (5).” HNO 2023: p5.


62 Ukraine is one of the countries with the highest energy consumption per capita due to energy losses, the aging building stock, and a carbon-intensive industrial sector. See Ivantsova, Anastasiia. “Energy Efficiency of
1.7 million people were internally displaced between 2014 and 2021; at the end of 2021, 854,000 people were still displaced. See Internal Displacement Monitoring Centre. Displacement data. Accessed 16/03/2023.

63

In 2021, 172 percent of households reported not having the income needed to maintain a sufficiently warm temperature in their home during winter. See: State Statistics Service of Ukraine, Households self-assessment of availability of selected goods and services in 2021, Table 1. https://ukrstat.gov.ua.

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1.7 million people were internally displaced between 2014 and 2021, at the end of 2021, 854,000 people were still displaced. See Internal Displacement Monitoring Centre. Displacement data. Accessed 16/03/2023.

72


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Ibid.

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Private insurance is not commonly accessible, it is only provided by a few large companies or contracted individually by high-income households.

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Ibid.
Human impact assessment


92 Ibid.


101 MSNA 2022 data collection spanned from 10 October to 21 December 2022.


108 This study captured the following vulnerability statuses: Persons with disabilities (registered and unregistered); pregnant and lactating women and girls; separated and orphaned children; female or male single parents; members of minority groups (Roma, LGBTQIA+), and those with a chronic illness or serious medical condition affecting the quality of life. REACH and Camp Coordination and Camp Management Cluster. “Ukraine: Multisectoral CCCM Vulnerability Index — Round 5 — Collective Sites Monitoring Household Survey (November 2022),” 29 March 2023, www.impact-repository.org/document/reach/ce5f497c/REACH_UKR_IDP-Collective-Sites-Monitoring-Household-Survey_Factsheet_November-2022.pdf.
level as of January 2023 (compared to 60 percent in 2021). Several explanations are possible; this could be due to the displacement of millions of children abroad, or to the increasing number of single-headed families more in need of pre-school education. See: Government of Ukraine. “Overview of the Current State of Education and Science in Ukraine in Terms of Russian Aggression (as of January 2023),” 19 March 2023. https://reliefweb.int/report/ukraine/overview-current-state-education-and-science-ukraine-terms-russian-aggression-january-2023-enuk.


146 It is estimated that 9.7 percent of children aged 5-14 worked in Ukraine in 2021; 97 percent were reported to be working in the agricultural sector. US Department of Labor. “Findings on the Worst Forms of Child Labor – Ukraine,” 2021. www.dol.gov/agencies/ilab/resources/reports/child-labor/ukraine.


It is important to note that this question specifically referred to the household's primary source of income. This means that reported increases in humanitarian aid as a primary source of income could be reflective of both households receiving increased amounts of aid, but also households whose other sources of income had decreased, leaving assistance as a higher proportion of the total income.
The Livelihood Coping Strategies is an essential needs indicator that provides data on households’ medium- and long-term coping capacity to meet essential needs and categorizes coping strategies by three stages of severity: stress, crisis, and emergency coping strategies. A stress strategy may be spending savings, while a crisis strategy may be selling a productive asset, while an emergency strategy may be selling one’s home. The 2022 MSNA asked households whether they engaged in following coping strategies: sale of household assets/goods; spending savings; purchase of food on credit or borrowed food; sending household members to eat elsewhere; sale of productive assets; reducing essential health expenditures; reducing education expenditures; sale house or land, moving elsewhere in search of work; use of degrading sources of income; taking on additional work; moving to a less adequate dwelling; and abandoning household/assets.


Ibid.


The Integrated Food Security Phase Classification (IPC) Global Partners. “IPC Technical Manual Version 3.1,” 2021. www.ipcinfo.org/fileadmin/user_upload/ipcinfo/manual/IPC_Technical_Manual_3_Final.pdf. These figures relate to chronic food insecurity in the Ukrainian population, which is defined as food insecurity persisting “over time mainly due to structural causes, including intra-annual seasonal food insecurity.” Such statistics are not directly comparable to existing post-February 2022 data on food security outcomes, which relate to acute food insecurity. Acute food insecurity is defined as food insecurity “at a specific point in time and of a severity that threatens lives or livelihoods, or both.” This report does not aim to make comparisons between the two but rather present what data is available before and after February 2022.


Households headed by women had a higher incidence of poor or borderline FCSs (14 percent) compared to those headed by men (8 percent). Households reporting having one member of the household with a vulnerability also had a higher incidence of poor or borderline FCSs (14 percent) than households who reported no vulnerability. See: REACH Initiative. “Household Economic Resilience Assessment: Government-Controlled


199 Ibid.  

200 Ibid.  

201 Ibid.  

202 World Food Programme. “Consolidated Approach for Reporting Indicators of Food Insecurity (CARI),” December 2021.  


204 Data on Food Consumption Scores (FCS) - the most commonly used food security outcome indicator in humanitarian settings - are unavailable for most of Ukraine prior to March 2022. World Food Programme. "Ukraine Food Security Trend Analysis: Key Trends 2022." World Food Programme Ukraine Research, Assessment and Monitoring Unit, February 2023.  


206 Ibid.


209 Ibid.

210 Based on the Reduced Coping Strategies Index (rCSI) indicator, which considers the frequency and severity of five pre-selected coping strategies (buying less expensive food; borrowing food / relying on help from others; limiting portion size; restricting consumption by adults for children; and reducing the number of meals in a day).


212 In the analysis in this chapter, we refer to the age group of 65 – the age requirement for social (non-contributory) pensions in Ukraine – and older.

213 It should be acknowledged that not all groups that need help were covered in the available data and are likely to be even more excluded as below radar of state (deliberately or not deliberately). This includes groups that are not fully accessible in the recently liberated and areas not under GoU control.

214 On 15 June Presidential Decree N°248/2021 appointed a Commissioner of the President of Ukraine for the barrier-free environment. The barrier-free concept envisaged five priorities for creating a barrier-free environment in Ukraine. This included 1) reforming legislation on the employment of people with disabilities, developing incentives for employers, reviewing approaches to the implementation of job standards, and strengthening the institutional capacity of public authorities in the field of employment; 2) establishing cooperation among various stakeholders, namely, representatives of central executive bodies, parliament, and business, which will facilitate the incorporation of barrier-free principles in all subsequent regulations; 3) raising awareness of business representatives about the importance of barrier-free principles, namely, spreading information materials, good practices, as well as informing on the benefits of being a non-discriminatory company; 4) attracting the best experience and approaches to creating a barrier-free environment, namely, improving digital accessibility, which is a prerequisite for ensuring public access to administrative, financial, and other services; 5) continuing the course on digitalization and simplification of the procedure for obtaining public services. In September 2022, to raise awareness about social inclusion, the First Lady of Ukraine presented the first online illustrated barrier-free handbook.

215 Institute of Sociology, National Academy of Sciences of Ukraine. “Ukrainian Society: 30 Years of Social Change Monitoring,” 2021. https://i-soc.com.ua/assets/files/monitoring/monitoring-2021dlya-tipografii.pdf. In this document, for all years of the survey (N=1800), starting from 1996, the Index of Subjective Well-being (consisting of material and non-material indicators) was below 40 until 2018 and in the pre-2022 period reached 40 points (which marked relative well-being) and consistently grew.

216 Within SCORE, respondents are asked about the degree to which one is satisfied with the welfare payments to those who are in need (e.g., disabled, unemployed, pensioners, scholarships) and well as the frequency of one’s personal usage of welfare payments in their locality).


218 Welfare payments lagged behind the national average (6.6) in Kyrovohradska (5.6) and Zakarpatska oblasts (5.9). Although administrative services score relatively high at the national level (6.8), it was lower than the national average in some locations, such as near the contact line of Donetska and Luhanska oblasts (5.6 and 4.9 respectively), Zakarpatska (5.9), Kirovohradska (6.1), Poltavska (6.1), Sumkska (6.1) and Odeska (6.3) oblasts. Tolerance towards LGBTQIA+, Roma and drug addicts remained low (respectively, 3.7 as the national average, 1.8 in Zaporizhhska and 2.2 in Zakarpatska oblasts for the first group; 4.9 as the national average, 1.8 in Lvivska and 2.5 in Ivano-Frankivska oblasts for the second group; 2.1 as the national average, 0.9 in Zakarpatska and 1.4 in Khersonska oblasts for the third group). See Dagli-Hustings, like, Marian Machlouzarides, Andrii Dryga, and Meltem Ikinci. “SCORE Ukraine 2021 Trends Report,” February 2022, https://api.scoreforpeace.org/storage/pdfs/PUB_SCOREUkr21_Trends_report.pdf.

219 As the living costs increase, individuals and households with low incomes face financial challenges and may struggle to meet their basic needs.

220 With a score of 4.7 out of 10 at the national level, and the lowest in Chernihivska (3.5), Cherkaska (4.0), and Odeska (4.1) oblasts.

221 Odeska, Kharkivska, Donetska and Luhanska oblasts had the lowest scores of health care service provision (4.8-5.0, with 5.6 as the national average).

222 Marginalization within SCORE is understood as the combined degree to which one feels treated unfairly because of their position in society (e.g., level of income, education) or identity.

223 Score out of 10. A difference of 0.5 points is considered significant.
224 For more on social safety network system in Ukraine, see: “Family and Social Policy in Ukraine as Social Safety Net”, April 2023. 4Liberty.EU. The report indicates that almost half of Ukraine’s population is enrolled in some form of social protection program. According to the World Bank, SSD budget spending for social assistance accounted for 3% of GDP prior to 2022, which is above the average for the Eastern European and Central Asian region of 17%. The war aggravated previous challenges that existed in the framework of family and social policies (including aging of population, high unemployment, considerable number of IDPs, as well as budget constraints.


233 Korogodsky, Yuriy. “Кількість Ветеранів Може Збільшитись До 5 Млн Осіб, – Лапутіна [The number of veterans may increase to 5 million, – Laputina].” LB.ua, 8 May 2022. https://lb.ua/society/2022/05/08/56086_kilkist_veteraniv_mozhe.html.


238 If not indicated otherwise, the figures presented from the SCORE and SHARP surveys indicate a score out of ten, where 0 represents the absence of the phenomenon and 10 represents a high presence of the phenomenon.

239 In the SHARP glossary, provision of welfare payments is the degree to which one is satisfied with the welfare payments to those who is in need (e.g., disabled, unemployed, pensioners, students).


Ukraine ranked 74th out of 156 countries, above other countries in the Eastern Europe and Central Asia region. During martial law, men aged 18 to 60 may be mobilized and have no right to leave Ukraine, while participants in the Roma focus group in Kharkiv demonstrated that engagement in volunteering fosters community integration and prevents discrimination, while participants in the Roma focus group in Uzhhorod shared accounts of discrimination.


Societal unity has increased but negative tendencies are observed. Kyrychenko, Irina. “Volodymyr Paniotto: The Unity of Society Has Increased Significantly, but There Are Also Negative Trends.” 2023. https://umoloda.kyiv.ua,number/3852/188/174868/?fbclid=IwAR0zC8Xur_EznLoL2nYQd7py52pveiy9-9-1FoDwqi15MaMM04/ nihil/IX_OI.


Ibid.
For a detailed description, please see SeeD's report “Gender Equality and Women's Empowerment in Ukraine”.


Ukraine, the Prosecutor General’s Office. Available at: www.gp.gov.ua/.


In 2022, 2,760 PAs were registered (in 2021 – 4,360, in 2020 – 3,739, in 2019 – 4,905), the number of registrations of new COs amounted to 6,367 (for comparison: 830 new COs were registered in 2021, in 2020 – 723, in 2019 – 654). The largest number of new COs and PAs in 2022 were established in Kyiv, Kyivska, Lvivska, Kharkivska, Dnipropetrovska, and Odeska oblasts. See Kyiv International Institute of Sociology. “Ukrainian Civil Society Under the War, December 2022-January 2023,” 2023. https://ednannia.ua/attachments/article/12447/Endnotes_93.pdf.


Endnotes

In MSNA 2022, the Statutory Subsistence Minimum value used was 2,589 UAH per capita, which was averaged for household characteristics.

There were around 14.7 million households before 2022 and around 3.2 million left the country. The number of persons is calculated based on an average household size of 2.5.


Ukraine, the Prosecutor General’s Office. Available at: www.gp.gov.ua/.


Annexes
Annex 1: Human impact assessment indicator list

Living standards, health, and education

<table>
<thead>
<tr>
<th>Sub-indicator</th>
<th>Pre-February 2022 data source</th>
<th>Post-February 2022 data source</th>
</tr>
</thead>
<tbody>
<tr>
<td>The number and/or proportion of households that had access to safe drinking water or water for household use in affected areas</td>
<td>SCORE21</td>
<td>MSNA 2022</td>
</tr>
<tr>
<td>Main reported source of drinking water for households in affected area</td>
<td>SSSU 2021</td>
<td>MSNA 2022</td>
</tr>
<tr>
<td>The number and/or proportion of households that had access to electricity in affected districts</td>
<td>MSNA GCA 2021</td>
<td>MSNA 2022, HSM (KI settlement level)</td>
</tr>
<tr>
<td>The number and/or proportion of households that had access to heating in affected districts</td>
<td>MSNA GCA 2021</td>
<td>MSNA 2022</td>
</tr>
<tr>
<td>The number and/or proportion of households that had access to information (radio, TV, phone), mobility (bike, motorbike, car, truck, animal cart, motorboat) or livelihood support assets (refrigerator, own agricultural land, own livestock)</td>
<td>SSSU</td>
<td>MSNA 2022 (coping strategies on selling assets)</td>
</tr>
<tr>
<td>The number and/or proportion of households reporting that their house was destroyed or damaged</td>
<td>HNO 2022</td>
<td>HIA data collection – Household survey 2023 MSNA 2022</td>
</tr>
<tr>
<td>The number of civilian deaths reported due to military action</td>
<td>OHCHR</td>
<td>OHCHR</td>
</tr>
<tr>
<td>The number of civilian injuries reported due to military action (trauma patients)</td>
<td>OHCHR</td>
<td>OHCHR</td>
</tr>
<tr>
<td>The number and/or proportion of individuals/households who have difficulties accessing health care services, disaggregated by type of health service</td>
<td>N/A</td>
<td>WHO periodic health needs assessment</td>
</tr>
<tr>
<td>Proportion of individual/household income spent on health care – including medications</td>
<td>SSSU</td>
<td>WHO periodic health needs assessment</td>
</tr>
<tr>
<td>The number and/or proportion of individuals/households who have access to primary health care services</td>
<td>SSSU</td>
<td>WHO periodic health needs assessment</td>
</tr>
<tr>
<td>Number of health facilities damaged or destroyed by the war</td>
<td>N/A</td>
<td>RDNA 2023</td>
</tr>
<tr>
<td>The number and/or proportion of men, women, boys, and girls who have access to mental health and psychosocial support services</td>
<td>N/A</td>
<td>WHO periodic health needs assessment</td>
</tr>
<tr>
<td>Number of education facilities damaged or destroyed by the war</td>
<td>N/A</td>
<td>MoES</td>
</tr>
<tr>
<td>Net enrolment rate of primary and secondary school children</td>
<td>SSSU</td>
<td>MoES</td>
</tr>
<tr>
<td>Net enrolment rate of preschool children</td>
<td>SSSU</td>
<td>MoES</td>
</tr>
</tbody>
</table>
### Livelihoods

<table>
<thead>
<tr>
<th>Sub-indicator</th>
<th>Pre-February 2022 data source</th>
<th>Post-February 2022 data source</th>
</tr>
</thead>
<tbody>
<tr>
<td>The number and/or proportion of households deprived of their income due to the war, as a result of unemployment, the loss of business, disruption, destruction of microenterprises or market closure, among other factors</td>
<td>SSSU 2021 ILO FAO 2021</td>
<td>HIA data collection – Household survey 2023</td>
</tr>
<tr>
<td>Percentage of HHs living beneath the poverty line of USD $6.85 / person / day</td>
<td>World Bank</td>
<td>World Bank</td>
</tr>
<tr>
<td>Percentage of HHs that rely on regular employment; government assistance; and humanitarian assistance as a primary source of income</td>
<td>SSSU 2021 (for regular employment and government assistance); No data for humanitarian assistance</td>
<td>HIA data collection – Household survey 2023</td>
</tr>
<tr>
<td>Percentage of HHs that reported increase or decrease in their income since February 2022</td>
<td>N/A</td>
<td>HIA data collection – Household survey 2023</td>
</tr>
<tr>
<td>Percentage of HHs who reported the work of their HH members had been affected in one of more ways since February 2022</td>
<td>N/A</td>
<td>HIA data collection – Household survey 2023</td>
</tr>
<tr>
<td>The number and/or proportion of households deprived of their productive assets and resources (financial)</td>
<td>SSSU 2021 data on resources of households in Ukraine</td>
<td>HIA data collection – Household survey 2023 MSNA 2022</td>
</tr>
<tr>
<td>The number and/or proportion of households deprived of their productive assets and resources (physical)</td>
<td>SSSU 2021 data on availability of selected durables in households</td>
<td>HIA data collection – Household survey 2023 MSNA 2022</td>
</tr>
<tr>
<td>The number and/or proportion of households deprived of their productive assets and resources (natural)</td>
<td>No data found</td>
<td>HIA data collection – Household survey 2023 FAO – Impact of the war on agriculture and rural livelihoods in Ukraine</td>
</tr>
<tr>
<td>The number and/or proportion of households reporting loss of access to livelihoods due to damage or destruction caused by the war</td>
<td>N/A</td>
<td>HIA data collection – Household survey 2023 Rapid Damage Needs Assessments 1 and 2</td>
</tr>
<tr>
<td>The number and/or proportion of households reporting loss of access to livelihoods due to safety and security concerns</td>
<td>MSNA in GCAs 2021 Household Economic Resilience Assessment (HERA) 2021 FAO FSL Assessment in GCAs 2021</td>
<td>HIA data collection – Household survey 2023</td>
</tr>
</tbody>
</table>
### Food security

<table>
<thead>
<tr>
<th>Sub-indicator</th>
<th>Pre-February 2022 data source</th>
<th>Post-February 2022 data source</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Food availability and access</strong></td>
<td>SSSU 2021, FAOSTAT 2021, MSNA in GCAs 2021</td>
<td>WFP – Ukraine food security trend analysis 2022, WFP Rapid Market Assessments 2022, FAO – Impact of the war on agriculture and rural livelihoods in Ukraine</td>
</tr>
<tr>
<td>Percentage of HHs suspending agricultural production as a result of the war</td>
<td>N/A</td>
<td>FAO – Impact of the war on agriculture and rural livelihoods in Ukraine</td>
</tr>
<tr>
<td><strong>Reduced Coping Strategies Index (rCSI)</strong></td>
<td>MSNA in GCAs 2021</td>
<td>MSNA 2022</td>
</tr>
<tr>
<td><strong>Livelihood Coping Strategies (LCS)</strong></td>
<td>MSNA in GCAs 2021 Household Economic Resilience Assessment 2021</td>
<td>MSNA 2022</td>
</tr>
<tr>
<td><strong>Food Consumption Scores (FCS)</strong></td>
<td>MSNA in GCAs 2021</td>
<td>WFP – Ukraine food security trend analysis 2022</td>
</tr>
<tr>
<td><strong>Food Insecurity Experience Scale (FIES)</strong></td>
<td>FAOSTAT 2021</td>
<td>No data found</td>
</tr>
<tr>
<td><strong>Economic Capacity to Meet Household Needs (ECMEN)</strong></td>
<td>No data on ECMEN indicator, but 2021 SSSU data on food expenditure as a portion of household spending</td>
<td>MSNA 2022</td>
</tr>
</tbody>
</table>
## Gender equality

<table>
<thead>
<tr>
<th>Sub-indicator</th>
<th>Pre-February 2022 data source</th>
<th>Post-February 2022 data source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Time or Part Time Employment Status</td>
<td>SCORE 2021</td>
<td>SHARP2022</td>
</tr>
<tr>
<td>The number and/or proportion of employed working-age individuals</td>
<td>SSSU 2021</td>
<td>No data</td>
</tr>
<tr>
<td>The number and/or proportion of hours spent on domestic chores per week</td>
<td>FAO 2021</td>
<td>HIA data collection – Household survey 2023</td>
</tr>
<tr>
<td>The number and/or proportion of hours spent on childcare per week</td>
<td>No data found</td>
<td>HIA data collection – Household survey 2023</td>
</tr>
<tr>
<td>The number and/or proportion of households headed by women over the age of 18</td>
<td>SSSU 2021</td>
<td>SSSU 2022</td>
</tr>
<tr>
<td>The number and/or proportion of individuals who agree that “men in the family should have the final word when important decisions are made”</td>
<td>SCORE 2021</td>
<td>HIA data collection – Household survey 2023</td>
</tr>
<tr>
<td>The number and/or proportion of individuals who say the war has affected their involvement in household decisions</td>
<td>N/A</td>
<td>UN Women 2022</td>
</tr>
</tbody>
</table>

### Civic engagement mean score

(Notes: Civic engagement is defined as the degree to which one participates in formal and informal civic, social, and political matters such as voting in elections, attending events organized by local authorities, volunteering, participating in activities aimed at improving one’s neighbourhood, etc.)

<table>
<thead>
<tr>
<th>Sub-indicator</th>
<th>Pre-February 2022 data source</th>
<th>Post-February 2022 data source</th>
</tr>
</thead>
<tbody>
<tr>
<td>The number and/or proportion of individuals who attend events of local authorities (civic engagement indicator)</td>
<td>SCORE 2021</td>
<td>SHARP2022</td>
</tr>
<tr>
<td>The number and/or proportion of individuals who participate in events of NGOs (civic engagement indicator)</td>
<td>SCORE 2021</td>
<td>SHARP2022</td>
</tr>
<tr>
<td>The number and/or proportion of individuals who participate in activities to improve their local area (civic engagement indicator)</td>
<td>SCORE 2021</td>
<td>SHARP2022</td>
</tr>
<tr>
<td>The number and/or proportion of individuals who say that the war has affected their involvement in community decisions</td>
<td>N/A</td>
<td>UN Women 2022</td>
</tr>
</tbody>
</table>

### Community cooperation mean score

<table>
<thead>
<tr>
<th>Sub-indicator</th>
<th>Pre-February 2022 data source</th>
<th>Post-February 2022 data source</th>
</tr>
</thead>
<tbody>
<tr>
<td>The number and/or proportion of individuals who can rely on members of their community/neighbors for help if they have a serious problem (Community Cooperation Indicator)</td>
<td>SCORE 2021</td>
<td>SHARP2022</td>
</tr>
<tr>
<td>Indicator</td>
<td>Source 1</td>
<td>Source 2</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>----------------------------------</td>
<td>----------------------------------</td>
</tr>
<tr>
<td>The number and/or proportion of individuals who say that in the last year people from their community actively solved common problems together (Community Cooperation Indicator)</td>
<td>SCORE 2021</td>
<td>SHARP2022</td>
</tr>
<tr>
<td>(Note: Community cooperation is defined as the degree to which one feels that people in their community care for each other and cooperate to solve common problems)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The number and/or proportion of women's CSOs that are fully operational</td>
<td>UN Women 2022</td>
<td>UN Women 2022</td>
</tr>
<tr>
<td></td>
<td>SSSU 2022</td>
<td></td>
</tr>
<tr>
<td>The number and/or proportion of cabinet of ministers who are women</td>
<td>Verkhovna Rada of Ukraine, 2019</td>
<td>N/A</td>
</tr>
<tr>
<td>The number and/or proportion of Verkhovna Rada seats held by women</td>
<td>Verkhovna Rada of Ukraine, 2019</td>
<td>N/A</td>
</tr>
<tr>
<td>The number and/or proportion of oblast councils led by women</td>
<td>CVK Ukraine, 2020</td>
<td>NA</td>
</tr>
<tr>
<td>The number and/or proportion of village councils held by women</td>
<td>CVK Ukraine, 2020</td>
<td>N/A</td>
</tr>
<tr>
<td>SDG5 Demand for family planning satisfied by modern methods, for women aged 15-49</td>
<td>SDG Report, 2012</td>
<td>No data</td>
</tr>
<tr>
<td>Maternal mortality ratio per 100,000 births</td>
<td>World Bank, 2017</td>
<td>No data</td>
</tr>
<tr>
<td>The number and/or proportion of individuals who report that health care services are provided somewhat, or very, efficiently</td>
<td>SCORE 2021</td>
<td>SHARP2022</td>
</tr>
<tr>
<td>The number and/or proportion of individuals who report that health care services are provided somewhat, or very, efficiently</td>
<td>SCORE 2021</td>
<td>SHARP2022</td>
</tr>
<tr>
<td>The number and/or proportion of individuals who report that health care services are provided somewhat, or very, efficiently</td>
<td>SCORE 2021</td>
<td>SHARP2022</td>
</tr>
<tr>
<td>The number and/or proportion of individuals who report that utilities (water, heating, electricity, waste disposal) are provided somewhat, or very, efficiently</td>
<td>SCORE 2021</td>
<td>SHARP2022</td>
</tr>
<tr>
<td>The number and/or proportion of individuals who report that administrative services are provided somewhat, or very, efficiently</td>
<td>SCORE 2021</td>
<td>SHARP2022</td>
</tr>
<tr>
<td>The number and/or proportion of women and girls aged 14-55 who have access to reproductive health services</td>
<td>OCHA, UNFPA</td>
<td>UNFPA, 2022</td>
</tr>
<tr>
<td>The number and/or proportion of women in need of prenatal and postnatal care who have access to services</td>
<td>OCHA, UNFPA</td>
<td>UNFPA, 2022</td>
</tr>
<tr>
<td>The number and/or proportion of women who have access to sanitation facilities for women and girls</td>
<td>OCHA, UNFPA</td>
<td>OCHA, UNFPA</td>
</tr>
<tr>
<td>The number and/or proportion of women who have access to protection services for women and girls, e.g., for the treatment of GBV</td>
<td>OCHA, UNFPA</td>
<td>OCHA, UNFPA</td>
</tr>
<tr>
<td>Total number of people in need</td>
<td>OCHA, 17 February 2022</td>
<td>OCHA, March – December 2022</td>
</tr>
<tr>
<td>The number and/or proportion of individuals who feel safe in their daily life</td>
<td>SCORE 2021</td>
<td>SHARP2022</td>
</tr>
</tbody>
</table>
### Social inclusion

<table>
<thead>
<tr>
<th>Sub-indicator</th>
<th>Pre-February 2022 data source</th>
<th>Post-February 2022 data source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Share of the population who reported using the internet over the past 12 months, % (by sex, age, type of residence)</td>
<td>UNDP, Ministry of Digitalization, KIIS SSSU 2020</td>
<td>HIA data collection – Household survey 2023 UNDP, Ministry of Digitalization, KIIS</td>
</tr>
<tr>
<td>The number and/or proportion of secondary schools with internet access</td>
<td>Ministry of Digitalization</td>
<td>Ministry of Digitalization</td>
</tr>
<tr>
<td>The average length of time that households report living in collective sites</td>
<td>No data</td>
<td>REACH Collective Sites Monitoring 2022</td>
</tr>
<tr>
<td>The number and/or proportion of households that can easily afford rent (one third of income)</td>
<td>No data</td>
<td>HIA data collection – Household survey 2023</td>
</tr>
<tr>
<td>The number and/or proportion of households having to limit consumption of other necessary goods (food/fuel) to pay rent</td>
<td>No data</td>
<td>No data</td>
</tr>
<tr>
<td>The number and/or proportion of households living in unregulated/inadequate houses/shelter</td>
<td>No data</td>
<td>HIA data collection – Household survey 2023</td>
</tr>
<tr>
<td>Provision of welfare payments to those in need</td>
<td>SCORE 2021</td>
<td>SHARP 2022</td>
</tr>
</tbody>
</table>

(Note: Provision of welfare payments is defined as the degree to which one is satisfied with the welfare payments to those in need (e.g. disabled persons, unemployed persons, pensioners, scholarship recipient))
<table>
<thead>
<tr>
<th>Indicator</th>
<th>Source</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>The number and/or proportion of households eligible for and receiving assistance (pensions, unemployment, IDP assistance etc.)</td>
<td>SSSU 2020</td>
<td>No data found</td>
</tr>
<tr>
<td>The number and/or proportion of households unable to access benefits due to lack of documentation</td>
<td>No data found</td>
<td>No data found</td>
</tr>
<tr>
<td>Presence of in-person registration facilities in different areas; time, and distance for people to go and register; and average waiting time for the benefit</td>
<td>No data found</td>
<td>No data found</td>
</tr>
<tr>
<td>Average reported time spent to register as IDP (in person and digitally), and average time between registration and first payment</td>
<td>No data found</td>
<td>REACH Social Protection Factsheet</td>
</tr>
<tr>
<td>The number and/or proportion of households unable to access employment/education due to lack of documentation</td>
<td>No data found</td>
<td>HIA data collection – FGDs and KIs</td>
</tr>
<tr>
<td>Access to information about decision-making processes</td>
<td>No data found</td>
<td>HIA data collection – FGDs and KIs</td>
</tr>
<tr>
<td>The number and/or proportion of households reporting using available complaints mechanisms</td>
<td>No data found</td>
<td>HIA data collection – FGDs and KIs</td>
</tr>
</tbody>
</table>
Annex 2:
Assessment methodology – human impact assessment primary data collection

Objective

The data collection for this assessment employed a mixed methods approach to assess the impact of the war on people in Ukraine. This included a nationwide primary data collection exercise covering households across 24 oblasts (excluding areas beyond the control of the GoU) aggregated for four macro-regions (see Map 1), alongside qualitative KIIs and FGDs conducted with experts, stakeholders, and members of target groups for this assessment. The purpose of the quantitative household survey was to fill gaps identified in certain indicators at the macro-region level, while the qualitative components sought to contextualize the broader assessment findings and ensure space to capture inputs from target groups that were otherwise not sufficiently represented in available data.

Map 1. Geographical scope of primary data collection
Data collection strategy

Structured household survey

The questionnaire used for the quantitative household survey was developed based on the results of the indicator selection process conducted with pillar leads, and a mapping of these indicators against existing data sources which were identified by the assessment team (see Annex 1). This questionnaire was not intended as a comprehensive multi-sectoral household survey; instead, a selection of key indicators from across certain pillars was included to fill specific data gaps.

Household-level primary data were collected to be representative for each macro-region by level of urbanization (two-stage stratified random sampling). The final sample comprised 3,239 household interviews across Ukraine. Data collection took place on 6-20 February 2023. The data were disaggregated by macro-regions aligned with those determined during the Ukraine Recovery Conference by the GoU in Lugano in July 2022 (De-Occupied, Support, Frontline, and Backline areas). For the purpose of this report, these regions are referred to by geographic designations which correspond as follows: Northern (De-Occupied), Central (Support), Southeastern (Front line), and Western (Backline).

Surveys were conducted remotely through randomly generated computer-assisted-telephone interviews (CATI) in partnership with the Kyiv International Institute of Sociology (KIIS). The number of interviews per macro-region and type of settlement (urban/rural) were stratified to meet a 95 percent confidence level and 5 percent margin of error.

<table>
<thead>
<tr>
<th>Stratification</th>
<th>Men</th>
<th>Women</th>
<th>Total</th>
<th>Share of total sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban HHs</td>
<td>454</td>
<td>1,169</td>
<td>1,623</td>
<td>63%</td>
</tr>
<tr>
<td>Rural HHs</td>
<td>618</td>
<td>998</td>
<td>1,616</td>
<td>37%</td>
</tr>
<tr>
<td>HHs with persons with disabilities and/or chronic illness</td>
<td>458</td>
<td>1,013</td>
<td>1,471</td>
<td>45%</td>
</tr>
<tr>
<td>IDP HHs</td>
<td>158</td>
<td>311</td>
<td>469</td>
<td>16%</td>
</tr>
<tr>
<td>Returnee HHs</td>
<td>69</td>
<td>182</td>
<td>251</td>
<td>9%</td>
</tr>
<tr>
<td>Host community HHs</td>
<td>532</td>
<td>1,143</td>
<td>1,675</td>
<td>50%</td>
</tr>
<tr>
<td>Neither displaced nor host community HHs</td>
<td>301</td>
<td>509</td>
<td>810</td>
<td>24%</td>
</tr>
</tbody>
</table>

Focus group discussions

Qualitative data collection of FGDs and KIIs took place between 26 January and 27 February 2023. A total of 10 FGDs were conducted with members of selected sub-national communities and/or vulnerable groups to validate and triangulate the findings of the quantitative analysis, to gather further information on the impact of the war on selected vulnerable groups, and to better understand why certain coping strategies were selected and implemented. The particular groups targeted in this data collection activity were persons with disabilities, women, men, members of the Roma community, and IDPs, with a specific focus on the southeast region.

The FGD tools were developed by SeeD to address the main information gaps identified in the gender equality and social inclusion chapters based on their expertise. The tools were then reviewed by the IMPACT Initiatives team and UNDP.
The FGDs were conducted by trained members of the IMPACT field team over the phone (4) and in person (6), depending on the security situation and availability of participants. Interviews and FGDs were recorded, transcribed, and translated into English by IMPACT.

Following training with the IMPACT Assessment Officer and SeeD on the purpose of the research and detailed review of the FGD questionnaire, IMPACT Field Officers and enumerators conducted a combination of in-person and online FGDs with relevant target groups depending on the safety situation and availability of participants. Enumerators took detailed notes during each FGD, and recorded audio where participants consented to doing so. Field officers and enumerators used audio recordings to review and enhance notes, and shared files with IMPACT translation. Once FGD notes were translated from Ukrainian or Russian to English, they were reviewed by the IMPACT Assessment Officer and shared with SeeD, which conducted qualitative data analysis.

Table 2: Summary of FGD participants by location, group affiliation, gender, and age

<table>
<thead>
<tr>
<th>Macro-region</th>
<th>Location</th>
<th>Target Group</th>
<th>Number of participants</th>
<th>% Women</th>
<th>Median age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northern</td>
<td>Zhytomyr</td>
<td>Men</td>
<td>7</td>
<td>0%</td>
<td>32</td>
</tr>
<tr>
<td>Northern</td>
<td>Kyiv</td>
<td>Persons with disabilities</td>
<td>6</td>
<td>50%</td>
<td>38.5</td>
</tr>
<tr>
<td>Western</td>
<td>Uzhhorod</td>
<td>Roma</td>
<td>8</td>
<td>63%</td>
<td>37</td>
</tr>
<tr>
<td>Western</td>
<td>Chernivtsi</td>
<td>IDPs</td>
<td>9</td>
<td>56%</td>
<td>48</td>
</tr>
<tr>
<td>Central</td>
<td>Dnipro</td>
<td>IDPs</td>
<td>8</td>
<td>50%</td>
<td>37.5</td>
</tr>
<tr>
<td>Southeastern</td>
<td>Kharkiv</td>
<td>Women</td>
<td>8</td>
<td>100%</td>
<td>47</td>
</tr>
<tr>
<td>Central</td>
<td>Dnipro</td>
<td>Men</td>
<td>8</td>
<td>0%</td>
<td>34.5</td>
</tr>
<tr>
<td>Southeastern</td>
<td>Zaporizhzhia</td>
<td>Persons with disabilities</td>
<td>10</td>
<td>50%</td>
<td>63</td>
</tr>
<tr>
<td>Southeastern</td>
<td>Kherson</td>
<td>Women</td>
<td>8</td>
<td>100%</td>
<td>45.5</td>
</tr>
<tr>
<td>Southeastern</td>
<td>Odesa</td>
<td>Roma</td>
<td>7</td>
<td>71%</td>
<td>37</td>
</tr>
</tbody>
</table>

Semi-structured key informant interviews

A total of 23 KIs were conducted with experts to validate and triangulate the findings of the quantitative analysis and gather further information on how the crisis has affected access to social services, social cohesion, gender roles and representations, as well as civic participation for marginalized groups. Targeted KIs included representatives from national ministries, employment services, large employers, research institutions, international organizations, and regional/oblast/hromada representatives. Interviewees were also selected to ensure a range of macro-regional representation.

The KIs were conducted by trained members of the IMPACT field team over the phone and in person, depending on the safety situation and availability of participants. KI processing followed the same process as that of FGDs noted above, taking place after a detailed training on the questionnaire. Audio was recorded where participants consented, and once interview notes were translated from Ukrainian or Russian to English, they were reviewed by the IMPACT Assessment Officer and shared with SeeD, who conducted qualitative data analysis.
**Table 3: Breakdown of KIs by type of KI, gender of participant, and area of expertise**

<table>
<thead>
<tr>
<th>Type of KI</th>
<th>Gender of participant</th>
<th>Area of expertise</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Women</td>
<td>Men</td>
<td>Social inclusion</td>
</tr>
<tr>
<td>Government</td>
<td>3</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>NGO/charitable fund</td>
<td>12</td>
<td>4</td>
<td>10</td>
</tr>
<tr>
<td>United Nations</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Academia</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>18</td>
<td>5</td>
<td>14</td>
</tr>
</tbody>
</table>

**Analysis overview**

Quantitative data captured through primary data collection were analysed according to data analysis plans aligning research questions with the relevant indicators. During the analysis, the quantitative data from each area were combined and weighted according to the population figures from Ukrainian Statistics Service (UkrStat) as of January 2022. Data collected from quantitative surveys were cleaned in compliance with IMPACT minimum data cleaning standards, before being analysed in R studio. All quantitative data and analysis were reviewed and validated by IMPACT HQ’s Research Design and Data Unit.

KI and FGD interview transcriptions were analysed using a data saturation and analysis grid to track content analysis. During cleaning and processing transcripts, specialists adhered to qualitative data processing minimum standards guidance. Analysis of the qualitative data was conducted by the SeeD team.
Annex 3:
Assessment methodology – multi-sector needs assessment


Annex 4:
Assessment methodology – SCORE

SCORE 2021 is a joint initiative funded by USAID, UNDP and the EU and implemented by SeeD. SCORE is the acronym for the Social Cohesion and Reconciliation Index. The data were collected through face-to-face interviews between January and May 2021, and made up a nationally representative sample of 12,482 interviews. Of these, 3,490 were from government-controlled areas of Luhansk and Donetsk oblasts, and 2,857 were from oblasts in the Azov and Black Sea areas (Zaporizhzhia, Kherson, Odessa and Mykolaiv oblasts). In addition to the nationally representative sample, 1,010 interviews were conducted near the ‘contact line’ in Luhansk and Donetsk oblasts, 3,600 interviews were conducted across 18 cities and urban communities, there were also 519 interviews of ATO/JFO veterans in five oblasts, 325 interviews with persons with disabilities from three oblasts, and 1,000 interviews with youth.

Annex 5:
Assessment methodology – SHARP

SHARP22 (SCORE-inspired Holistic Assessment of Resilience of Population) is a computer-assisted telephone interviewing survey conducted by the same consortium of partners from SCORE, including the Partnership Fund for a Resilient Ukraine, SeeD, the USAID-funded Democratic Governance East (DG East), USAID’s Transformation Communications Activity (TCA), and UNDP. SHARP is designed as an agile tool for evidence production to support Ukraine’s resilience. The SHARP Wave One data (out of three scheduled waves to be conducted across 2022 and 2023) consisted of two samples: a national random sample of 4,327 respondents from areas under the control of the GoU, and a panel sample of 495 respondents who participated in the SCORE 2021 study. The data collection for the random sample was conducted from 26 September to 5 November 2022. The data from the panel sample were collected from September to November 2022.
### Annex 6:
### HIA household-level quantitative tool

#### Demographics

- **RQ0_1**
  We are conducting this survey on behalf of IMPACT Initiatives and UN partners in order to understand the situation of households across Ukraine that have been affected by the full-scale invasion of Russia. We are interested in how things have changed since February 2022 in relation to your household’s basic needs, livelihoods, food security, social status, gender equality and women’s empowerment. Your household has been randomly selected to participate in this survey. This survey will take approximately 30 minutes. Your participation is completely anonymous and voluntary. You may refuse to participate now, or at any stage later in the survey. In addition, you also have the right to deny answering any specific question that makes you feel uncomfortable. Do you agree to participate?
  - 1. Yes
  - 2. No

- **RQ0_2**
  What is your preferred language for this survey?
  - 1. Ukrainian
  - 2. Russian

- **RQ0_3**
  Do you consider yourself the head of the household, a person who takes an active part in decision-making for the household? (NOTE: For the purpose of this survey, a household is defined as a group of people who pool their resources, sharing income and expenses. Persons living separately from the HH abroad or within Ukraine to work/study/fighting in the East can be considered part of the household ONLY if they are contributing economic resources to it.)
  - 1. Yes
  - 2. No

- **RQ0_4**
  (If RQ0_2 = no) If you are not the head of household, can you respond on behalf of the household? (NOTE: If respondent cannot answer on behalf of the household, stop interviewing. Look for another member in the household, who can respond on behalf of the household, or leave household.)
  - 1. Yes
  - 2. No

- **RQ0_5**
  Sex of respondent
  - 1. Male
  - 2. Female
  - 3. I do not want to answer
### RQ0_6 What is the marital status of the head of the household?

1. Single  
2. Married  
3. Widowed  
4. Divorced  
5. Unmarried but living together  
6. Separated (married but not living together)  
7. I do not want to respond

### RQ0_7 Does any member of your household have any of the following characteristics?

1. Person with disability (not including chronic illness)  
2. Chronic illness and serious medical condition which affects quality of life (including mental illness)  
3. Other (specify)  
4. None/Not applicable  
5. Don’t know  
6. Prefer not to answer

### RQ0_8 What is your current displacement status?

1. Not displaced (not in an area hosting IDPs & have not left residence for more than 14 consecutive days)  
2. Internally displaced persons (left primary residence)  
3. Returnee (left more than 14 consecutive days and came back)  
4. Host community member (in an area hosting IDPs, never left residence more than 14 consecutive days)  
5. Don’t know  
6. Prefer not to answer

### RQ0_9 Do you currently reside in an urban or rural area?

1. Urban  
2. Rural  
3. Don’t know  
4. Prefer not to answer

### Household composition & income

#### RQ1_1 How many people (including yourself) reside in your household?

Integer

#### RQ1_2 How many of these household members are in each of the following categories:

1. Males aged 60+  
2. Females aged 60+  
3. Males aged 18-59  
4. Females aged 18-59  
5. Males aged 0-17  
6. Females aged 0-17
<p>| RQ1_3 | (If RQ1_2 &gt; 0) How many males aged 60+ have worked in the last 30 days? | Integer |
| RQ1_4 | (If RQ1_2 &gt; 0) How many females aged 60+ have worked in the last 30 days? | Integer |
| RQ1_5 | (If RQ1_2 &gt; 0) How many males aged 18-59 have worked in the last 30 days? | Integer |
| RQ1_6 | (If RQ1_2 &gt; 0) How many females aged 18-59 have worked in the last 30 days? | Integer |
| RQ1_7 | (If RQ1_2 &gt; 0) How many males aged 14-17 have worked in the last 30 days? | Integer |
| RQ1_8 | (If RQ1_2 &gt; 0) How many females aged 14-17 have worked in the last 30 days? | Integer |
| RQ1_9 | Which economic sectors are your HH's income earners engaged in? (Check all that apply) | 1. Agriculture, forestry, and fishing  |
| | | 2. Industry |
| | | 3. Construction |
| | | 4. Wholesale and retail trade; repair of motor vehicles and motorcycles |
| | | 5. Transportation and storage |
| | | 6. Accommodation and food service activities |
| | | 7. Information and communication |
| | | 8. Financial and insurance activities |
| | | 9. Real estate activities |
| | | 10. Professional, scientific, and technical activities |
| | | 11. Administrative and support service activities |
| | | 12. Public administration and defence, compulsory social security |
| | | 13. Education |
| | | 14. Human health and social work activities |
| | | 15. Arts, entertainment, and recreation |
| RQ1_10 | (RQ1_9 &gt; 1) What kind of paid work have primary household income earners been engaged in over the past 30 days? (Check all that apply) | 1. Regular paid work |
| | | 2. Part time / temporary work |
| | | 3. Self-owned business |
| | | 4. Other, please specify |
| RQ1_11 | Are any income earners in your household in need of either more work hours or increased pay to meet basic needs? (Check all that apply) | 1. More work hours |
| | | 2. Better pay |
| | | 3. Neither |
| | | 4. Refuse to answer |</p>
<table>
<thead>
<tr>
<th>RQ1_12</th>
<th>For any adult household members not currently earning income, which of these situations best describes their status in the last 30 days? (Check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Unemployed, but actively looking for a job</td>
<td></td>
</tr>
<tr>
<td>2. Unemployed but not actively looking for a job</td>
<td></td>
</tr>
<tr>
<td>3. In education</td>
<td></td>
</tr>
<tr>
<td>4. Sick or disabled (can't work)</td>
<td></td>
</tr>
<tr>
<td>5. Retired (not working)</td>
<td></td>
</tr>
<tr>
<td>6. Military service</td>
<td></td>
</tr>
<tr>
<td>7. Engaged in unpaid volunteer work (e.g., NGO, CSO, charity)</td>
<td></td>
</tr>
<tr>
<td>8. Other unpaid work (housework, looking after children, or caring for other persons)</td>
<td></td>
</tr>
<tr>
<td>9. No such members</td>
<td></td>
</tr>
<tr>
<td>97. Other</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RQ1_13</th>
<th>Has the work of your HH members been affected since the full-scale war in February 2022?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. No, they were not affected</td>
<td></td>
</tr>
<tr>
<td>2. Yes, they lost their job</td>
<td></td>
</tr>
<tr>
<td>3. Yes, their employer cut their salary</td>
<td></td>
</tr>
<tr>
<td>4. Yes, their work hours were reduced</td>
<td></td>
</tr>
<tr>
<td>5. Yes, they experienced delays in receiving their pay or pension</td>
<td></td>
</tr>
<tr>
<td>6. Yes, they had to change jobs</td>
<td></td>
</tr>
<tr>
<td>7. Yes, they left their job due to moving locations</td>
<td></td>
</tr>
<tr>
<td>8. Yes, they moved from official to unofficial employment (work without a contract)</td>
<td></td>
</tr>
<tr>
<td>98. I do not want to respond</td>
<td></td>
</tr>
<tr>
<td>99. I do not know</td>
<td></td>
</tr>
<tr>
<td>97. Other, please specify</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RQ1_14</th>
<th>(If RQ0_7=rural) Since February 2022, has your household experienced illness or death of livestock due to the war?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. No, we don't own livestock</td>
<td></td>
</tr>
<tr>
<td>2. No, the war has not caused illness or death in our livestock</td>
<td></td>
</tr>
<tr>
<td>3. Yes, the war has caused illness or death in our livestock</td>
<td></td>
</tr>
<tr>
<td>4. I don’t know</td>
<td></td>
</tr>
<tr>
<td>5. Refuse to answer</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RQ1_15</th>
<th>(If RQ1_14 = 3 or 4) Due to this (death or illness or livestock), has your household experienced loss of access to livelihoods / income earning activities?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Not at all</td>
<td></td>
</tr>
<tr>
<td>2. Somewhat</td>
<td></td>
</tr>
<tr>
<td>3. Greatly</td>
<td></td>
</tr>
<tr>
<td>4. I don’t know</td>
<td></td>
</tr>
<tr>
<td>5. Refuse to answer</td>
<td></td>
</tr>
</tbody>
</table>
| RQ1_16  | Since February 2022, has your household experienced loss of access to livelihoods / income earning activities due to safety and security concerns? | 1. Not at all  
2. Somewhat  
3. Greatly  
4. I don’t know  
5. I do not want to respond |
| RQ1_17  | (If RQ0_7 = rural) Since February 2022, has your household experienced loss of access to livelihoods / income earning activities due to loss of usable land for security and safety reasons? (Check all that apply) | 1. Mines or UXO in land  
2. Displacement because of security reasons  
3. Environmental hazard in the area  
3. No loss  
4. I don’t know  
5. Refuse to answer |
| RQ1_18  | Since February 2022, has there been a death of a household income earner due to the war? | 1. Yes  
2. No  
3. I don’t know  
4. Refuse to answer |

**Livelihoods**

| RQ2_1  | Which of the following options best describes your household’s current accommodation? | 1. Detached house  
2. Apartment in apartment block  
3. Collective site / public building  
4. Informal site (not in compliance with government building regulations or illegally occupied)  
5. Other |
| RQ2_2  | Has your accommodation been directly damaged by the war? | 1. Yes  
2. No  
3. Don’t know  
4. I do not want to answer |
| RQ2_3  | Does your household pay rent in the accommodation you are currently residing in? | 1. Yes  
2. No  
3. Don’t know  
4. I do not want to answer |
| RQ2_4  | [if yes] What percentage of this household’s income is spent on rent / accommodation? [average of last three months] | 1. 0-15%  
2. 16-30%  
3. 31-45%  
4. 46-60%  
5. 60-75%  
6. More than 75%  
98. I do not want to answer |
<table>
<thead>
<tr>
<th>RQ2_5</th>
<th>What have been your household’s primary income sources since February? (Limit responses to up to three sources)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Paid work (employment)</td>
</tr>
<tr>
<td></td>
<td>2. Business (self-employment or business you own)</td>
</tr>
<tr>
<td></td>
<td>3. Government (pensions, social protection, etc.)</td>
</tr>
<tr>
<td></td>
<td>4. Bank loans</td>
</tr>
<tr>
<td></td>
<td>5. Aid received from humanitarian organizations</td>
</tr>
<tr>
<td></td>
<td>6. Financial support from friends or relatives (including remittances)</td>
</tr>
<tr>
<td></td>
<td>97. Other sources of income</td>
</tr>
<tr>
<td></td>
<td>98. I do not want to answer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RQ2_6</th>
<th>Prior to 24 February, what were your household’s primary income sources? (Limit responses to up to three sources)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Paid work (employment)</td>
</tr>
<tr>
<td></td>
<td>2. Business (self-employment or business you own)</td>
</tr>
<tr>
<td></td>
<td>3. Government (pensions, social protection, etc.)</td>
</tr>
<tr>
<td></td>
<td>4. Bank loans</td>
</tr>
<tr>
<td></td>
<td>5. Aid received from humanitarian organizations</td>
</tr>
<tr>
<td></td>
<td>8. Aid received from humanitarian organizations</td>
</tr>
<tr>
<td></td>
<td>9. Financial support from friends or relatives (including remittances)</td>
</tr>
<tr>
<td></td>
<td>97. Other sources of income</td>
</tr>
<tr>
<td></td>
<td>98. I do not want to answer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RQ2_7</th>
<th>Approximately how much income has your household earned in total in the past 30 days? (In UAH)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. 1 – 4,000</td>
</tr>
<tr>
<td></td>
<td>2. 4,001 – 7,500</td>
</tr>
<tr>
<td></td>
<td>3. 7,501 – 10,500</td>
</tr>
<tr>
<td></td>
<td>4. 10,501 – 20,000</td>
</tr>
<tr>
<td></td>
<td>5. &gt; 20,000</td>
</tr>
<tr>
<td></td>
<td>6. My household has not earned any income in the last 30 days</td>
</tr>
<tr>
<td></td>
<td>98. I do not want to answer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RQ2_8</th>
<th>Does anyone in your household currently own any of the following?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Dwelling (house or apartment)</td>
</tr>
<tr>
<td></td>
<td>2. Agricultural plot of land (excluding land under lease contract by household)</td>
</tr>
<tr>
<td></td>
<td>3. Livestock (domesticated animals raised in an agricultural setting to produce labour and commodities such as meat, eggs, milk, fur, leather, and wool.)</td>
</tr>
<tr>
<td></td>
<td>4. Personal car</td>
</tr>
<tr>
<td></td>
<td>5. A business</td>
</tr>
<tr>
<td></td>
<td>6. No, nobody in my households owns any of the above</td>
</tr>
<tr>
<td></td>
<td>97. Other</td>
</tr>
<tr>
<td></td>
<td>98. I do not want to respond</td>
</tr>
<tr>
<td></td>
<td>99. I do not know</td>
</tr>
<tr>
<td>RQ2_9</td>
<td>(If RQ0_6 = IDP) Since February 2022, has your household lost access to any of the following assets due to the war?</td>
</tr>
<tr>
<td>--------</td>
<td>------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>1. Dwelling (house or apartment)</td>
</tr>
<tr>
<td></td>
<td>2. Agricultural plot of land</td>
</tr>
<tr>
<td></td>
<td>3. Livestock (domesticated animals raised in an agricultural setting to produce labour and commodities such as meat, eggs, milk, fur, leather, and wool.)</td>
</tr>
<tr>
<td></td>
<td>4. Personal car</td>
</tr>
<tr>
<td></td>
<td>5. A business</td>
</tr>
<tr>
<td></td>
<td>98. I do not want to respond</td>
</tr>
<tr>
<td></td>
<td>99. I do not know</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RQ2_10</th>
<th>How would you qualify the evolution of your household's income since 24 February?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Increased</td>
</tr>
<tr>
<td></td>
<td>2. Stable</td>
</tr>
<tr>
<td></td>
<td>3. Decreased</td>
</tr>
<tr>
<td></td>
<td>98. I do not want to respond</td>
</tr>
<tr>
<td></td>
<td>99. I do not know</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RQ2_11</th>
<th>Has your household engaged in any of the following activities to cover your basic needs since the full-scale war in February 2022? (For the purpose of this survey basic needs means food, shelter, health, education, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Spend savings</td>
</tr>
<tr>
<td></td>
<td>2. Reduce essential health expenditures (including medication)</td>
</tr>
<tr>
<td></td>
<td>3. Taking on additional work / job</td>
</tr>
<tr>
<td></td>
<td>4. Taking on debt / borrowing money</td>
</tr>
<tr>
<td></td>
<td>5. No, my household has not engaged in any of these strategies</td>
</tr>
<tr>
<td></td>
<td>98. I do not want to respond</td>
</tr>
<tr>
<td></td>
<td>99. I do not know</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RQ2_12</th>
<th>(If RQ2_10 = 1,2,3,4) Do you feel that utilizing these activities has allowed your household to meet its needs?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. No, we are still unable to meet our basic needs</td>
</tr>
<tr>
<td></td>
<td>2. Somewhat; we are able to meet some basic needs but not all</td>
</tr>
<tr>
<td></td>
<td>3. Yes, we have been able to meet all of our basic needs</td>
</tr>
<tr>
<td></td>
<td>98. I do not want to respond</td>
</tr>
<tr>
<td></td>
<td>99. I do not know</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RQ2_13</th>
<th>(If RQ2_10 = 1,2,3,4) (For each individual activity) Do you feel that your household can continue using this activity to meet your needs?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Yes, we can continue using this activity to meet our needs</td>
</tr>
<tr>
<td></td>
<td>2. No, we cannot continue using this activity to meet our needs</td>
</tr>
<tr>
<td></td>
<td>98. I do not want to respond</td>
</tr>
<tr>
<td></td>
<td>99. I do not know</td>
</tr>
</tbody>
</table>
### Access to information

<table>
<thead>
<tr>
<th>RQ4_1</th>
<th>Do any members of your household have access to the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Internet</td>
</tr>
<tr>
<td></td>
<td>2. Smart phone</td>
</tr>
<tr>
<td></td>
<td>3. Any other mobile phone or landline</td>
</tr>
<tr>
<td></td>
<td>4. Radio</td>
</tr>
<tr>
<td></td>
<td>5. TV</td>
</tr>
<tr>
<td></td>
<td>6. Missile early warning system (city wide or through mobile phones)</td>
</tr>
<tr>
<td></td>
<td>7. Other (specify)</td>
</tr>
</tbody>
</table>

(If RQ4_1=Internet) Do the following categories of household members have regular access to the internet? (NOTE: In this case, “regular access” means frequent enough to facilitate access to information pertaining to basic needs and safety)

<table>
<thead>
<tr>
<th>RQ4_2</th>
<th>1. Males aged 60+</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2. Females aged 60+</td>
</tr>
<tr>
<td></td>
<td>3. Males aged 18-59</td>
</tr>
<tr>
<td></td>
<td>4. Females aged 18-59</td>
</tr>
<tr>
<td></td>
<td>5. Boys aged 0-17</td>
</tr>
<tr>
<td></td>
<td>6. Girls aged 0-17</td>
</tr>
</tbody>
</table>

(If RQ4_1=Smartphone) Do the following categories of household members have regular access to a smartphone? (NOTE: In this case, "regular access" means frequent enough to facilitate access to information pertaining to basic needs and safety)

<table>
<thead>
<tr>
<th>RQ4_3</th>
<th>1. Males aged 60+</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2. Females aged 60+</td>
</tr>
<tr>
<td></td>
<td>3. Males aged 18-59</td>
</tr>
<tr>
<td></td>
<td>4. Females aged 18-59</td>
</tr>
<tr>
<td></td>
<td>5. Boys aged 0-17</td>
</tr>
<tr>
<td></td>
<td>6. Girls aged 0-17</td>
</tr>
</tbody>
</table>

What are the outlets you use the most for information?

<table>
<thead>
<tr>
<th>RQ4_4</th>
<th>1. Websites</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2. Radio</td>
</tr>
<tr>
<td></td>
<td>3. TV</td>
</tr>
<tr>
<td></td>
<td>4. Social media &amp; messaging platforms</td>
</tr>
<tr>
<td></td>
<td>5. None of the above</td>
</tr>
<tr>
<td></td>
<td>97. Other (please specify)</td>
</tr>
</tbody>
</table>

[for all outlets selected before] How often do you use these information outlets?

<table>
<thead>
<tr>
<th>RQ4_5</th>
<th>1. Daily</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2. Weekly</td>
</tr>
<tr>
<td></td>
<td>3. Monthly</td>
</tr>
<tr>
<td></td>
<td>4. Less than monthly</td>
</tr>
</tbody>
</table>

### Household decision-making

<table>
<thead>
<tr>
<th>RQ4_6</th>
<th>Do you feel the full-scale war has affected your involvement in household decision-making?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. No, my involvement in decision-making has not changed</td>
</tr>
<tr>
<td></td>
<td>2. Yes, my involvement in decision-making has changed</td>
</tr>
<tr>
<td></td>
<td>98. I do not want to respond</td>
</tr>
<tr>
<td></td>
<td>99. I do not know</td>
</tr>
</tbody>
</table>
| RQ4_7 | (If RQ4_6 = yes) How has your involvement in decision-making changed? | 1. My involvement has increased somewhat  
2. My involvement has increased significantly  
3. My involvement has decreased somewhat  
4. My involvement has decreased significantly  
98. I do not want to respond  
99. I do not know |
| --- | --- | --- |
| RQ4_8 | In which areas do you feel that the changes in your involvement in household decisions have been the most noticeable since February 2022? | 1. Health (going to the doctors, expenses related to health care)  
2. Childcare arrangements  
3. Education (parenting, choice of school, etc.)  
4. Finance (how resources are shared, who decides on expenditures, debt, investment)  
5. Work (decision on undertaking paid employment/studying, kind of work taken)  
6. Sexual and reproductive decisions (having more children, contraception, use of sexual health services, forming or dissolving partnership)  
7. Housing arrangement (especially decision of relocation since February)  
8. I don’t want to answer |
| RQ4_9 | [for each case] Who usually made decisions related to your previous answer before the war? | 1. Male over 60 years old  
2. Female over 60 years old  
3. Male adult (18-59)  
4. Female (18-59)  
5. Other: Specify  
6. I do not know  
7. I do not want to answer |
| RQ4_10 | [for each case] Who usually makes decisions related to your previous answer now? | 1. Male older person (60+)  
2. Female older person (60+)  
3. Male adult (18-59)  
4. Female (18-59)  
5. Other: Specify  
6. I do not know  
7. I do not want to answer |
| RQ4_11 | Who in your household has the final say when important decisions are made? | 1. Male member(s) of the household  
2. Female member(s) of the household  
3. Male and female members jointly  
4. Difficult to answer  
5. Other  
6. I do not want to answer |
### RQ4_12
Approximately how many hours a week do you spend on household work?

1. Less than 15 hours  
2. 15-20 hours  
3. 21-30 hours  
4. 31-49 hours  
5. 50 hours or more  
6. I do not know  
7. I do not want to answer

### RQ4_13
(IF RQ1_2 indicates any male or females aged 0-17) Approximately how many hours per week do you spend on childcare?

1. Less than 15 hours  
2. 15-20 hours  
3. 21-30 hours  
4. 31-49 hours  
5. 50 hours or more  
6. I do not know  
7. I do not want to answer

### RQ4_14
How does this compare to before the full-scale war?

1. Increased  
2. No change  
3. Decreased  
4. I don't know  
5. I don't want to answer

Thank you for your time in answering our survey. Your responses are really important to us, and they will be used to gain a better understanding of current challenges caused by the war. All responses will be treated anonymously.

(for the enumerator) Are there any additional comments or notes that are relevant to the content of the interview? If so, please add them here.
Annex 7: 
HIA key informant interview tools

<table>
<thead>
<tr>
<th>Name:</th>
<th>Affiliation:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone number:</td>
<td>Sector of organization:</td>
</tr>
<tr>
<td>City:</td>
<td>Position:</td>
</tr>
<tr>
<td>Pillar:</td>
<td>Notes:</td>
</tr>
</tbody>
</table>

Hello, my name is ________. IMPACT Initiatives (IMPACT) and its partner, the Centre for Sustainable Peace, and Democratic Development (SeeD) are working with UNDP and participating agencies to assess how the situation of different groups of people in different regions has changed since the full-scale war compared to the pre-war situation. I am part of a team conducting this assessment. We would like to ask about your insights and opinions to better understand the needs of the group(s) you deal with in your professional life. We are keen to hear your views on existing gaps and challenges and potential solutions within the sectors we’ll discuss.

Your participation in this study is entirely voluntary and you are free to stop the interview or refuse to answer at any time. This interview will take about 45 minutes to an hour. All the information you share with us will be kept confidential and will not be shared beyond project partners. We encourage you to be honest in your assessment so that we can get an accurate in-depth picture of the situation. Do you agree to participate in the interview? (Yes/No)

With your consent, we would like to use quotes from your interview in the final report. Do you consent to being quoted (anonymously)? (Yes/No)

Do you consent to having this interview recorded? (Yes/No)

Main QNR: Social inclusion

1. Since the start of Russia’s full-scale war, which groups and in what areas are particularly disadvantaged or excluded in society? In which ways do they experience exclusion? How this is different from the pre-war situation? In your view, what are the new challenges since February 2022?

2. In your view, what groups have unequal access to vital resources, services and decision making (in rural and urban areas, north, east, west, or south, in the front line, in liberated territories, in the areas not under GoU control)?

3. What are the factors, motives or narratives that trigger this exclusion? Please elaborate on your answer.

4. How can we increase social inclusion and integration in the most vulnerable areas [in areas such as access to health care, education, employment, economic inclusion, justice]?

5. What is the role of non-state actors and alternative mechanisms (of conflict resolutions, of social protection) in supporting social inclusion (please, provide examples).

6. Are you aware of any complaint mechanisms? Do you have any examples of using them (successfully, unsuccessfully)?
Main QNR: Gender equality

1. Since the start of Russia’s full-scale war, do women and men face challenges, insecurities or disadvantages that are specific for their group?

2. Do you think there are instances when women or men have unequal access to resources, services and decision-making?

3. How did the war affect women’s and men’s role in the family/household in terms of decision making and their roles, including time spent on childcare?

4. How did the war affect the extent to which women have lost access to protection services (e.g. treatment of GBV), sanitation facilities for women and girls, reproductive health services or prenatal and postnatal care; Are there any instances when men have lost access to protection services or health facilities?

5. Do you deal with the issues of GBV in your work; can you tell us about your experience of dealing with issue since the war?

6. How do you think the war is affecting the sense of femininity and masculinity/or gender roles and norms in Ukraine?

7. How do you think the war will affect women’s and men’s empowerment and progress in gender equality in Ukraine?
Annex 8:
HIA Focus group discussion tools

Example of focus group consent form and participant list

<table>
<thead>
<tr>
<th>Country: Ukraine</th>
<th>Target Group: IDPs, of all age groups 18+ including elderly. (Preferably, 4 men and 4 women)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Region(s): south and west</td>
<td>Number of groups: 2 (one in the south and one in the west)</td>
</tr>
<tr>
<td>Format: Offline (with videorecording only if the group feels secure to be recorded with clear consent)</td>
<td>Number of participants: Minimum 8</td>
</tr>
<tr>
<td>Number of participants: Minimum 8</td>
<td>Duration: Minimum 2 hours</td>
</tr>
<tr>
<td>Name of the facilitator(s):</td>
<td>Date: TBC</td>
</tr>
<tr>
<td>Location/venue:</td>
<td>Start &amp; finish time:</td>
</tr>
</tbody>
</table>

Hello, my name is ________. IMPACT Initiatives (IMPACT) and its partner, the Centre for Sustainable Peace, and Democratic Development (SeeD), are working with UNDP and participating agencies to assess how the situation of different groups of people in different regions has changed since the full-scale war compared to the pre-war situation.

I am part of a team conducting this assessment. We would like to ask about your insights and opinions to better understand the needs and issues most relevant to you. Everything said in this focus group will remain confidential and anonymous [NB! Sign the letter of consent with the participants before the start of the FGDs].

This discussion will take about two hours. All the information you share with us will be kept confidential and will not be shared beyond project partners. However, with your consent, we would like to use a video recorder to make our reporting easier [facilitators can start the recording after the initial introduction to avoid recording people’s names or get their permission to record their names. Please note that all respondents can use only their first names, no surnames/addresses or any other personal information is needed].

Your participation is completely voluntary. You may choose to stop participating in the discussion or refuse to answer any question at any time. We encourage you to be honest and truthful so that we can get an accurate in-depth picture of your situation and the situation in your community.

Before we start, I would like to remind you that there are no right or wrong answers to any questions. We are interested in knowing what each of you thinks, so please feel free to be frank and share your point of view, regardless of whether you agree or disagree with what you hear. It is very important that we hear all your opinions. Please treat others in the group as you want to be treated by not telling anyone about what you heard in this discussion today. Please leave your contact details (mobile phone) for possible follow-up when we conclude the study. Let’s start by going around the circle and having each person introduce themself.

[NB! Members of the research team should also introduce themselves and describe each of their roles].
ASK RESPONDENT:

<table>
<thead>
<tr>
<th>Do you have any questions?</th>
<th>Yes (1)</th>
<th>No (0)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do I have your permission to continue with the discussion?</td>
<td>Yes (1)</td>
<td>No (0)</td>
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</table>

If NO, let the participant end his participation in the discussion.

By signing below, I attest that I have read the above statement to the participant, and he/she/they has/have agreed to continue with the discussion. I have also addressed all his/her/their questions and/or concerns.

NAME AND SIGNATURE OF THE SUPERVISOR/FACILITATOR/MODERATOR OF THE DISCUSSION:

________________________________________________________________________________

Date_______________________________

Information about FGD participants

<table>
<thead>
<tr>
<th>FGD TITLE:</th>
<th>1) IDPs SOUTH</th>
<th>2) IDPs EAST (tick one)</th>
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PARTICIPANTS WHO CONSENTED TO GIVE THEIR CONTACTS FOR FOLLOW UP

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Where they are from originally (city or settlement)</th>
<th>Contact details (phone number)</th>
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**IDP focus group questionnaire:**

1. How has your personal and economic situation changed since Russia's full-scale war on Ukraine in February 2022?
   a. When did you move to this region (after 2014 or in 2022)?
   b. What are your (your family's) living conditions now? (Type of settlement: house, apartment, collective centre, other/private/rented housing).
   c. Is this your first or second displacement experience?
   d. Has your family been separated?
   e. For those who are second-time displaced, was it easier or more difficult for you to arrange your resettlement from the conflict zone? What was the most difficult experience (for example, finding accommodation, arranging payments, etc.)? Please provide examples.
   f. Have your sources of income and level of income changed? How?

2. Since the Russia's full-scale war on Ukraine in February 2022, have there been any instances where you felt isolated or excluded? How do these experiences influence your livelihood and daily life (economic, psychological, social, civic)?
   a. Do you currently have access to life-supporting services that you and your family need (health, nutrition, security, social protection, education, or other services)?
   b. What are your most pressing needs now?
   c. How much time do you spend obtaining information, services, or resources that you need? In your view, was it long/short, difficult for you/easy for you?
   d. Do you know anyone who was unable to access employment/education due to a lack of documentation? How was the situation resolved?
   e. Do you think you have equal access to services and opportunities as other people in this locality? Why or why not?
   f. Are you employed now? If not, what have been the barriers to employment? Do you think there are any available employment opportunities for you in the local labour market? In other locations? Are you able to move there? Why or why not?
   g. Have there been any occasions when you needed access to justice, administrative, and legal services? Did you get what you needed? If not, please provide examples.
   h. Have there been any situations when there were no official ways to get access to services and you applied to agents/private consultants? Have you paid bribes to get what you needed (services, consultations, documents)?
   i. In your view, among the displaced people you know, who are the most vulnerable groups and why (children, young people, persons with disabilities, the elderly, single parents, women, etc.)? In your view, when it comes to aid, which group should be prioritized (by the state and by other agencies who support IDPs)?

3. Are there any cultural obstacles to the social inclusion of the IDPs? If so, what are they?
   a. Do you think people in this locality have any biases or stereotypes toward IDPs, or do they not? Have you ever witnessed any conflicts or tensions between IDPs and the local population? Why did this occur?
   b. Has the situation changed since the full-scale war?
4. How do you and other members of your group cope with the effects of the ongoing war? Do you have anyone or anything (institution or mechanism) you rely on? Do you feel that you are able to effectively influence your situation (apply to the authorities or any other aid agencies, and make sure your voice is being heard)?
   a. Have you had any experience applying to the authorities with your queries? Was your application successful or not?
   c. Have you had any opportunities to participate in decision-making on the IDP situation in your locality? Please share your experience in starting petitions, organizing initiatives or groups to support members of your group.
   d. Have you ever applied to any initiatives or groups that assist and/or defend the rights of IDPs? Are you a member of such group(s)?
   e. Has the situation changed since the full-scale war?

**Roma focus group questionnaire:**

1. How has your personal and economic situation changed since the Russia's full-scale war on Ukraine in February 2022?
   a. What are your (your family) living conditions now?
   b. Have you or your family been displaced? Is this your first displacement?
   c. Has your family been separated?
   d. Have your sources of income and level of income changed? How?

2. Do you now have access to life supporting services that you and your family need?
   a. What kind of obstacles and challenges do you face when you try to access these services? Please elaborate on your answer.
   b. Think about health, nutrition, security, social protection, education, and administrative, and other services. Were there any situations when there were no official ways to get access to services and you applied to agents/private consultants?
   c. Did you ever have to pay bribes to get what you needed (services, consultations, documents)? Please provide examples.

3. Do you feel that you are treated differently than other groups in your area?
   a. How so? How does this impact your relationship with your community?
   b. How about your relationship with local service providers? Humanitarian aid providers? Your ability to access economic opportunities / the labour market?
   c. Do you think people in this locality have any biases or stereotypes towards the Roma community? Have you ever witnessed any conflicts or tensions? Please provide examples.
   d. Have the sense of exclusion and biases changed since Russia’s full-scale war in February 2022? If yes, in what ways?

4. How do you engage in civic and community life?
   a. Do you have any access to opportunities to participate in decision-making in your locality? Please elaborate on your answer.
   b. Have you ever applied to any initiatives or groups that defend the rights of the Roma community and help them? Are you a member of such group(s)?
   c. What kind of civic efforts/volunteering are you involved in at the moment, if at all?
   d. If not, what are the obstacles to your involvement?
   e. Has the situation changed since the full-scale war? Are you more or less involved now?
5. In the face of Russia’s full-scale war on Ukraine, do you think the Roma community are facing different challenges to other groups?
   a. Do the Roma community need different humanitarian assistance, tailored support, and specialized policies to feel safe and protected? Why and why not?

6. How do you and other members of your group cope with effects of the ongoing war?
   a. Do you have anyone or anything (institution or mechanism) you rely on?
   b. Do you feel that you are able to effectively influence your situation (apply to the authorities or any other aid agencies, and make sure your voice is being heard)? Why and why not?
   c. Have you had any experience applying to the authorities with your queries? Was your application successful or not? In your view, why or why not?
   d. Has the situation changed since the full-scale war?

**Persons with disabilities focus group questionnaire:**

1. How has your personal and economic situation changed since the Russia’s full-scale war on Ukraine in February 2022?
   a. What are your (your family) living conditions now?
   b. For those who are displaced, is it your first displacement? Has your family been separated due to the displacement?
   c. Have your sources of income and level of income changed? How?

2. Do you now have access to life supporting services that you and your family need?
   a. What kind of obstacles and challenges do you face when you try to access these services? Think about health, nutrition, security, social protection, education, and administrative, and other services.
   b. Were there any situations when there were no official ways to get access to services and you applied to agents/private consultants?
   c. Have you ever had to pay bribes to get what you needed (services, consultations, documents)?

3. What are your most pressing personal needs now?
   a. Health care/psychological support/sanitation/other basic needs including education for children and, importantly, access to necessary medication, medical equipment, and medical treatment.
   b. Economic/professional
   c. Political/civic/legal
   d. [NB! Please share your experience of taking care of children with disabilities.] What are your most pressing needs since the full-scale war?
   e. Has the situation changed since the full-scale war? How?

4. Do you feel that Persons with Disabilities are treated differently than other groups in your area?
   b. Do you think people in this locality support people with disabilities and understand their needs? Why or why not? Did you ever witness any conflicts or tensions related to people with disabilities in public spaces (for example, in public transport, in health care centres, in local administrations/service centres, in humanitarian centres)? Please elaborate on your answer.
c. Do you think there is any sense of exclusion and marginalization in daily life and daily interactions in relations to people with disabilities? Please think about both interpersonal (e.g. neighbours), institutional experiences (e.g. local authorities, aid providers), and economic opportunities (e.g. labour market). Please provide examples.

d. Do you think the situation has got worse or better since the war? Do you feel more, or less, support from other people, from the authorities now as compared to the pre-war period? Why or why not? Please elaborate on your answer.

5. How do you engage in civic and community life?
   a. Do you have any access to opportunities to participate in decision-making in your locality? Please elaborate on your answer.
   b. Have you ever applied to any initiatives or groups that defend the rights of persons with disabilities and help them? Are you a member of such group(s)?
   c. What kind of civic efforts/volunteering are you involved in at the moment, if at all?
   d. If not, what are the obstacles to your involvement? Please elaborate on your answer. Has the situation changed since the full-scale war? Are you more, or less, involved now?

6. How do you and other members of your group cope with effects of the ongoing war?
   a. Do you have anyone or anything (institution or mechanism) you rely on?
   b. Do you feel that you are able to effectively influence your situation (apply to the authorities or any other aid agencies, and make sure your voice is being heard)? Why and why not?
   c. Have you had any experience applying to the authorities with your queries? Was your application successful or not? In your view, why or why not?

Women and men focus group questionnaire:

1. How has your personal and your household situation changed since the Russia’s full-scale war in Ukraine in February 2022?
   a. What are your (your family) living conditions now?
   b. Has your family been separated?
   c. Have you become a career? Or had your carer duties changed?
   d. How have your family responsibilities changed, if at all, within your household since February 2022? Please elaborate on your answer.

2. How has your economic and professional situation changed since February 2022? How has your health situation changed since February 2022?
   a. Has your employment status changed? How?
   b. If not, and you would like it to change, do you think there are any available employment opportunities for you in the local labour market?
   c. In your view, are any obstacles undermining your access to the local labour market? Please elaborate on your answer.
   d. Please share with us your unpaid work experience and simultaneous activities that you must carry out during your non-working hours. How many hours do you usually sleep? Do you feel it is enough for you? Do you have time to take care of yourself (visit doctors/do diagnostic testing when needed, etc.). Why or why not? How would you describe your psychological state now (do you usually feel calm, or do you feel stressed)? How did your health conditions change since the war?
3. How has your role in civic and community life changed since the Russia’s full-scale war?
   a. Have you been a member of an NGO/charity before? What about now?
   b. Have you participated in local governance before? What about now?
   c. What kind of civic efforts/volunteering are you currently involved in, if at all?
   d. If not, what are the obstacles to your involvement? Please elaborate on your answer.

4. Thinking about your role in decision-making, how would you say this changed since Russia’s full-scale war, if at all?
   a. Think about your decision-making role within the family, household, neighbourhood, or apartment building (be it about sharing resources, the future of the family, or about daily needs). Who is the main decision-maker in your household? Please elaborate on your answer.

5. What are your most pressing personal needs now?
   a. Psychosocial/personal
   b. Economic/professional
   c. Political/civic
   d. Health care/sanitation/other basic needs
   e. Has the situation changed since the full-scale war? How?

6. Do you have access to the life supporting services that you and your family need?
   a. Think about health, nutrition, security, social protection, and other services. What kind of obstacles and challenges do you face when you try to access these services?
   b. How would you say this has changed, if at all, since Russia’s full-scale war?

7. In the face of the full-scale war, do you think women are facing different challenges than men?
   a. Do you think that women need different humanitarian (legal, psychological, other) assistance, tailored support, and specialized policies to feel empowered, safe, and secure? Why and why not?