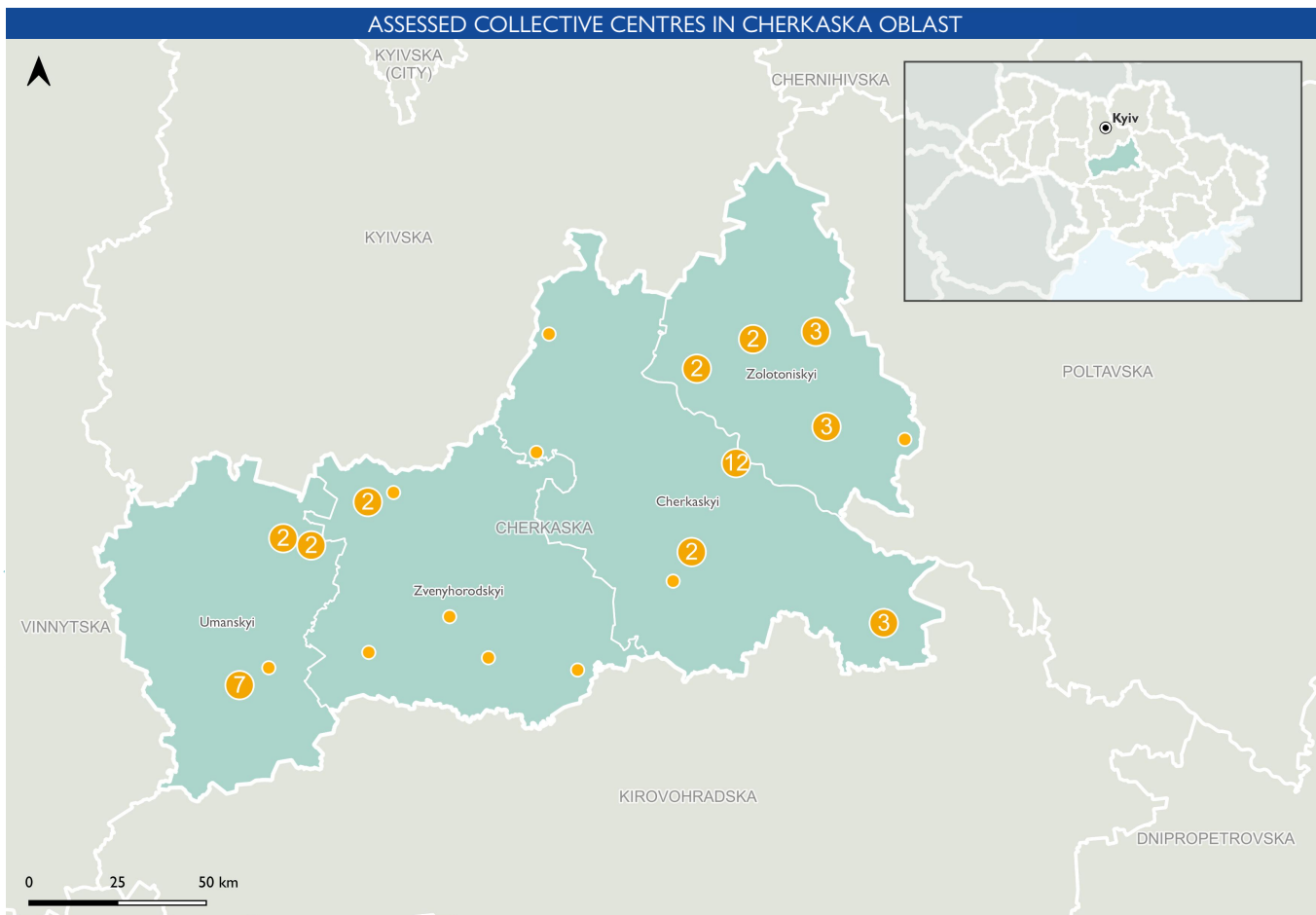


CHERKASKA OBLAST COLLECTIVE CENTRE ASSESSMENT

Summary of IOM's CCCM Collective Centre Assessment, as of 1st November 2022



OVERVIEW

Between 10 October 2022 to 20 October 2022, IOM CCCM teams, in collaboration with Oblast authorities and local civil society organizations, conducted a CCCM Collective Centre assessment across all Cherkaska Oblast. Data was collected at the site-level at the request of the Cherkaska Oblast administrations and implemented through key-informant interviews with site managers/focal points as well as conducting observational assessments. All figures and narrative in this factsheet cover collective centres hosting (and are capable of hosting) 30 people or more and are indicative of the situation in the sites at the time of collection.

COLLECTIVE CENTRE TYPES

A total of 50 sites were assessed. 22 sites were hosting IDPs at the time of assessment, with 28 centres empty but ready to host. 34% of collective centres assessed were dormitories, 26% were schools, with the remaining 28% a mix of different types. 7 different Oblasts were reported as the Oblast of Origin for the majority of IDPs in the centres. The top 3 Oblasts of origin majorities were: Donetsk: (17), Zaporizka: (5) and Kharkivska: (2).

KEY FIGURES



1,311 individuals hosted in collective centres



3,468 total hosting capacity



34% of collective centres are dormitories



86% of sites - majority of IDPs have no plan to transit to other locations



SHELTER AND NFI

78% of sites do not have enough mattresses, with approximately a further 2,365 mattresses required. 96% do not have enough bedding and blankets. Bed linen, towels, beds and mattresses were the most requested NFI items.



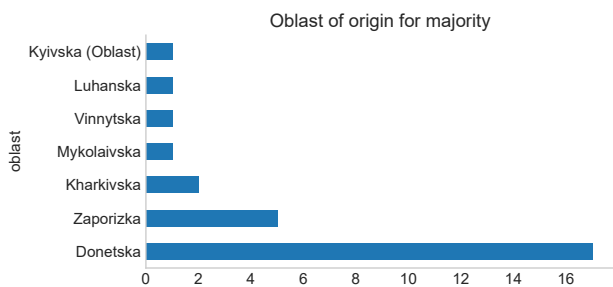
HEALTH

80% of sites have an active health referral system in place. 35% have health worker visits on a regular basis. 41% of sites have basic medicines available on-site, however 12% still require additional medicines.



WASH

Only 6% of sites meet or exceed the standard of 20 persons per toilet. 48% of sites do not have showers. 90% of sites do not have toilets equipped for people with physical disabilities and 92% of showers. Tap water is the most common source of drinking water (46%), followed by people bringing their own (28%). 39% of sites are not connected to the public sewage network. Hygiene kits have been distributed in 31% of sites. The most requested hygiene items are personal cleaning products (70%). Only 10% of sites have sufficient washing machines.



MOST URGENT NEEDS

The most urgent needs, as identified by site managers were:

1. Ovens and refrigerators
2. Site repairs
3. Shower and toilet renovation
4. Beds mattresses and blankets
5. Generators

VULNERABILITIES



91% of sites reported the presence of at least one vulnerable group in their site. Unaccompanied elderly persons were present in 40% of sites. Child headed households were present in 23% of sites. Persons with chronic diseases were present in 19% of sites.

SITE MANAGEMENT

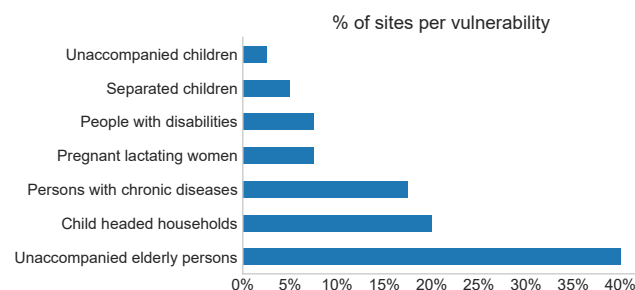


98% of sites are managed by government, and the remaining 2% by private individuals, religious or local NGOs. 56% of sites have staff present 24 hours per day. 20% of sites having staff present only during the day. 72% sites have registration on arrival and 36% have an allocation plan in place.

SITE ENVIRONMENT



84% of sites are not fully accessible for persons with mobility issues, with a lack of required infrastructure the most cited concern. 38% of sites do not have a fire-safety system in place with 32% showing visible hazards. The most common hazards are electrical (50%) and fire (24%). 32% of sites have visible damage to the infrastructure. 18% of the sites are overcrowded. 44% of sites are without privacy areas and 94% are without lockable storage spaces for belongings.



FOOD PROVISION



Government provision of food is occurring in 40% of sites. 14% of sites do not contain a kitchen while 36% do not contain a communal eating area. Infant formula is not available in 74% of sites.

For more information on the assessment please contact
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