Ukraine • June 2023

Human Impact Assessment









World Health Organization











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Abbreviations and Acronyms

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

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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

This assessment is a UNDP-led joint initiative of the United Nations, implemented at the request of the Office of the President of Ukraine and the Government of Ukraine.

Executive Summary

The start of 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 7.1 million Ukrainians below the poverty line and an additional 3.7 million close to it.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.^{2.3} Now, more than one year on from the full-scale invasion, these impacts 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 impacts as a result 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 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 impacted 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 as a result 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 usage 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

The majority of 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 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. The majority of households reported engaging in economically driven coping strategies to meet essential needs, such as spending savings, acquiring additional work, and reducing health expenditure in order 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 a number of 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 labor, 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 deteriorates further, this could result in issues of food availability in Ukraine. Despite sufficient food availability at the 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 frontline 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 one fifth to one third, with the Southeastern macro-region being most negatively impacted over time. 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 those who are unemployed.

Social Inclusion

The number of individuals at risk of social exclusion and who require assistance has risen since February 2022. This especially 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 are members of the Roma community. Certain groups have faced social stigma in dealing with the impacts of the war, including Roma, persons living with HIV and AIDS, and members of the LGBTQIA+ community. Damage to national infrastructure has negatively impacted inclusivity and accessibility of services, creating challenges in access to healthcare 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, 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 a number of women's organizations were not fully operational,⁴ 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 healthcare, protection, and other basic services.

Overall Recommendations for Resilience and Recovery

- Support the Government of Ukraine in implementing its international commitments to protect the rights, and meet the needs of, all groups experiencing the impacts of the war.
- Support households and local communities in rebuilding the resources they have exhausted to mitigate the impacts 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 programs.
- Ensure that interventions are cohesive and inclusive at the national level, while taking into account 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 labor 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 of 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

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The objective of this Human Impact Assessment (HIA) is to evaluate the overall 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, and evolution of 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, internally displaced persons (IDPs), older persons, persons with disabilities, LGBTQIA+, and Roma communities).⁵

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 analyzing the impact of the war on people in Ukraine. Findings reflect an extensive secondary data review (SDR), as well as a nationwide primary data collection exercise covering 3,239 households across 24 oblasts⁶ (excluding areas beyond the control of the GoU), 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.⁷ 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 not able to provide a comprehensive overview on all groups with vulnerabilities within Ukraine.

Alongside this SDR, representatives from 12 UN agencies contributed to HIA development: 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:

- 1. Living Standards, Health, and Education: UNICEF WHO UNHCR
- Social Inclusion: UNDP OHCHR
 Livelihoods: UNDP IOM
 Gender Equality: UN Women UNFPA
 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	f data g	aps resulting	from the	SDR, by pillar
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Living Standards, Health, and Education	Data was available across nearly all indicators, though the existing data could not always be disaggregated for target population groups.		
Livelihoods	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 was not available for the post-February period.		
Food Security	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.		
Social Inclusion	Existing research did not include certain data points related to access to public services.		
Gender Equality and Women's Empowerment	Post-February data gaps were identified around the evolution of household-level decision-making and protection-related indicators.		

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 the majority of the analysis:

- Nationwide primary datasets, including:
 - The primary data collected by IMPACT specifically for the HIA (including a household survey as well as KIIs and FGDs in order to target particular demographic groups);
 - The REACH Initiative and WFP 2022 Multi-Sector Needs Assessment (MSNA);
 - The SeeD 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 rigor, 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 UN 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 in order to validate the findings and recommendations, as well as with civil society organizations, 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, namely:

- 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 all 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 macro-regional
 aggregations and comparisons to be made across data sources which were not directly analyzed
 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 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 GPS data could be collected as data collection was done by phone using computer assisted telephone interviews (CATI), so the actual location of households could not be independently verified.
- Large proportions of the area making up 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 in order to reach the full sample of households.

Every effort was made to account for and mitigate potential impacts of these limitations on the findings of the assessment, to the maximum extent possible.

2 · Context of the Socio-Economic Situation

Purpose of the HIA

By joining the 2030 Agenda for Sustainable Development in 2015, Ukraine had set targets and objectives for sustainable social progress geared toward eradicating poverty, reducing inequalities, and making improvements relevant 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 7.1 million Ukrainians below the poverty line and an additional 3.7 million close to it.⁸ Within this context, it is essential to make sure 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 war on populations to draw out implications and priorities for recovery. It aims 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, socio-economic, geographic and demographic characteristics; the 2017 Ukraine Baseline National Report on Sustainable Development Goals (SDGs) identified large families and rural households to be the most at risk of falling into poverty.⁹ 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 line of contact, among others. This 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.¹⁰ Gaps in social services were becoming more acute in areas close to the line of contact, 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 were in need of humanitarian assistance. The largest humanitarian needs were estimated to be in access to water, sanitation, and hygiene (2.5 million people), protection (exposure of people to physical and/ or psychological risks or harm resulting from violent or crisis situations, 2.5 million people), health (1.5 million) and food security and livelihoods (1.1 million).¹¹

Back in 2021, Ukraine's Gross Domestic Product (GDP) growth was comparatively low (3.4 percent year-onyear) when considered alongside that of Central Europe and the Balkans, which was 6.1 percent year-onyear. Like its neighbors, 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.¹²

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 that represented 39 percent of service exports in 2021 (against 14 percent in 2014).¹³ The service sector employed most of the workforce in 2021 and accounted for half of the GDP.¹⁴ In contrast, agriculture represented only 11 percent of the national GDP in 2021 and 14 percent of employment but a large proportion of total exports (43.9 percent).¹⁵ As one of the major grains and vegetable oil producers in the world, Ukraine played a critical role in ensuring global food security.¹⁶

The labor 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),^{17,18} a sustained gender gap, as well as a shrinking labor force due to an aging population and outflow migration.¹⁹ When considered alongside the fact that Ukraine's population was already aging, demographic projections estimated that thirty years from now, Ukraine's population could decrease by up to a third.²⁰ Such a large decrease would have structural consequences for Ukraine's economy and implications for social protection systems within the country.

The International Labor Organization (ILO) also highlighted "elevated youth unemployment and inactivity, and a notable skills mismatch".²¹ In addition, there was a high degree of informality in the labor market (21 percent of the workforce in 2019),²² 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 decrease in working hours from March to June 2020 and a more sustained trend of reducing labor costs.²³

Before the war, Ukraine was characterized by increasing inequality with Kyiv city and the central oblasts (Dnipropetrovska, Poltavska) and some eastern oblasts (Kharkivska, Zaporizka) which were on a faster track of economic growth compared to conflict-affected areas, and western and central parts of the country.²⁴ 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 centers in those oblasts attracted most of the national and international investment.²⁵ This led to growing income disparities between those areas and the rest of the country, further exacerbated by increased labor migration from western oblasts to neighboring countries. This disparity was indeed reflected in the labor market, with lower unemployment rates in southern and eastern oblasts were excluded from these regional dynamics. In 2021, the highest unemployment rates were found in the areas of Luhanska (15.9 percent) and Donetska (15.3 percent) oblasts which were under the control of the GoU.²⁶

Widening Socio-Economic Vulnerabilities Since February 2022

One immediate consequence of the war was large-scale population displacement. From 1.5 million in 2021,²⁷ the number of IDPs peaked at 7.1 million in April 2022, according to IOM, and had decreased to 5.4 million by January 2023 (which may be explained by increasing patterns of return observed over the course of 2022 and into 2023).^{28,29} In addition, UNHCR recorded some 8 million Ukrainian refugees across Europe as of the end of January 2023.³⁰ High levels of displacement, especially outside of Ukraine, have heightened already existing demographic concerns about Ukraine's shrinking skilled labor force, especially as 2 million children have left Ukraine and are expected to remain abroad in other parts of Europe.³¹ As a result of the war, Ukraine is likely to have more female-headed households, a larger proportion of single earner households, as well as increasing numbers of households with individuals with disabilities.

The estimated number of people in need (PIN) of humanitarian assistance increased from 2.9 million at the end of 2021 to 17.6 million at the end of 2022.^{32,33,34} The humanitarian sector with the largest PIN increase was shelter and non-food items (NFIs) with an additional 8.1 million PiN. The war changed the demographics of people in need, with a relatively lower share of older persons (22 percent in the 2023 HNO, -7.6 pp compared to the 2022 HNO), and slightly decreasing share of adults (54 percent in the 2023 HNO, -3 pp compared to the 2022 HNO) and an increasing share of children (23 percent in the 2023 HNO, +10.4 pp compared to 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.

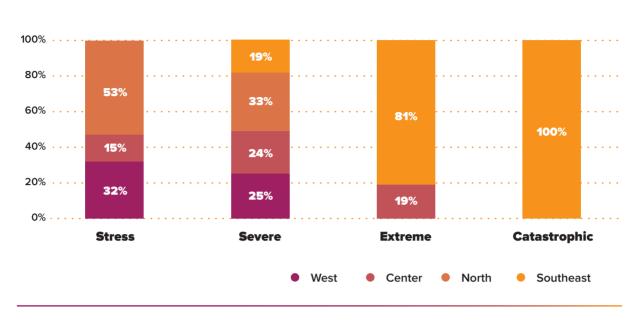


Figure 1: Estimated severity of needs by macro-region in 2022, as a percentage of the PIN³⁵

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 impacted the work of many industries in eastern oblasts, shutting down aerial freight and disrupting supply chains.³⁶ The government introduced capital controls and fixed the exchange rate to avoid additional financial implications. At the end of 2022, the GDP had declined by 29.2 percent and the inflation rate stood at 26.6 percent.³⁷ The trade deficit more than doubled between December 2021 and December 2022.³⁸ As of October 2022, the ILO estimated that 2.4 million jobs were lost compared to the pre-February period.³⁹ Businesses reportedly still expect to reduce their workforce in 2023 but at a slower pace than in 2022.⁴⁰ However, considering the scale of the shock and the occupation of up to 24 percent of Ukraine's territory in 2022,⁴¹ 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 favorable.⁴²

Large-scale population displacement, combined with volunteer mobilization and conscription, has resulted in imbalances in the labor market. Not only are fewer workers available, but Ukrainian refugees abroad are highly employable, according to UNHCR monitoring. Indeed, most are highly skilled workers, therefore representing fewer resources for the national labor market. These workforce demographic changes will be particularly important when looking ahead to labor market recovery, which will need to account for the loss of highly skilled workers and help facilitate integration of IDPs into local labor market.⁴³

The RDNA estimated in February 2023 that in one-year, direct damage to buildings and infrastructure amounted to US\$135 billion, while the total estimated amount of recovery and reconstruction needs reached US\$411 billion.⁴⁴ The geography of damages to physical capital was skewed towards the Northern and Southeastern macro-regions. The main sectors damaged were housing (38 percent of all damages), transport (26 percent), energy (8 percent), commerce and industry (8 percent), and agriculture (6 percent). Physical damage and land contamination with mines impacted the access of Ukrainians 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 2022.⁴⁵

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 US\$144 billion as of January 2023.⁴⁶ UN OCHA reported US\$4.3 billion of funding allocated to the Ukraine response in 2022 (compared to US\$170 million in 2021).⁴⁷ Before the war, Ukraine was the largest recipient of remittances in Europe and Central Asia with record-high inflows of USD 18.2 billion (9 percent of GDP) in 2021.⁴⁸ In November 2022, it was projected that remittance inflows to Ukraine would increase to USD 18.4 billion in 2022.⁴⁹ However, according to the National Bank of Ukraine estimates, remittance flows to Ukraine stabilized and ceased growing over the course of 2022.^{50,51}

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 of rural settlements. Rural households, which represented 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 thanks to auto consumption of their farming production; they tended to experience higher unemployment rates, lower access to social services, and a more acute gender gap.⁵² Moreover, rural households engaged in agriculture have been impacted by the war, with a quarter of respondents to a representative survey conducted by FAO at the end of 2022 mentioning having stopped or reduced their agricultural activity at the time of data collection as a result of the war.⁵³ Urban households have also been impacted by the war, though in different ways than the rural population. Large-scale internal displacement has mostly taken place toward urban centers.⁵⁴ 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.⁵⁵

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 more vulnerable to shocks which impact the labor market and employment opportunities. Women who are a single heads of household may have additional pressures resulting from care responsibilities.¹ Similarly, large families tend to be more economically vulnerable.²

Persons with disabilities, older persons, and persons with chronic illnesses. These groups have been particularly impacted by limited 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.³ People with chronic illnesses have faced difficulties accessing regular care and affording the cost of medicines.⁴

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 amongst 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

- ¹ NGO Working Group on Women, Peace, and Security. "Gender Analysis of the Situation in Ukraine," April 2022.
- ² REACH. "Multisectoral Needs Assessment (MSNA) 2022: Livelihoods Findings." March 2023.
- ³ Victoria Andrievska and Kristy Siegfried, 'I just can't stand aside if I know that I can help', published on 23 June 2022, UNHCR Ukraine.
- ⁴ "Ukraine: People with Chronic Diseases Face Massive Challenges in Accessing Health Care, According to New WHO Survey," April 2022.
- ⁵ Amnesty International. "Ukraine: 'I Used to Have a Home': Older People's Experience of War, Displacement, And Access to Housing in Ukraine," December 6, 2022.
- ⁶ Protection Cluster. "Protection of LGBTIQ+ People in the Context of the Response in Ukraine," May 2022.

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 in living standards. Regional differences also exist, with the Northern and Southeastern macro-regions most affected by utilities 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 in the Western macro-region where offline learning still prevailed. Attendance in 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 impacted access, as households have struggled to economically 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 of the recorded civilian casualties also occurred in these macro-regions.

The groups most affected in this pillar have been households combining displacement with other vulnerabilities such as 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 households' living standards is based on the Multidimensional Poverty Index, which focuses on three dimensions of deprivation: standard of living, health, and education. When considering those dimensions, Ukraine used to appear relatively high up on most international ranking systems. In 2021, Ukraine was also on the list of countries with a high human development index.⁵⁶ While multi-dimensional poverty remained low prior to 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.⁵⁷

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 US\$8,243 to US\$12,944, although from a comparative perspective it remained the lowest across Europe.^{58,59} Households commonly reported owning durable assets, which are considered indicators of prosperity, such as color TVs, washing machines, and refrigerators. In the last decade, households tended to own more durable assets, especially ITC assets such as computers, laptops, tablets, or smartphones.⁶⁰

Access to utilities was consistent across most of Ukraine before February 2022, with nationwide electricity, gas, district heating, water and sanitation, and telecommunications networks. Indeed before the war, 100 percent of households had access to electricity.^{61,62} Despite this largely consistent availability, infrastructure networks were in need of investment to improve energy efficiency and the quality of service.⁶³ Throughout the country, the price of utilities, combined with poor insulation of buildings and inefficiencies of the district heating system, were preventing 17 percent of households from heating their accommodation adequately during winter.⁶⁴ Access to and quality of water have also been a long-standing challenge for households in Ukraine.⁶⁵ In 2020, 89 percent of the population reportedly had access to a centralized water supply in the same period.⁶⁷ 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.^{68,69}

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.⁷⁰ In the areas of active conflict, 55,000 houses were destroyed⁷¹ and 1.7 million people were displaced and probably lost assets in the process.⁷² Of the 2.9 million people in need in 2021, 1.1 million were in 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.⁷³ This conflict-affected population was identified as particularly vulnerable, with 54 percent of women and girls, 13 percent of children, 13 percent of persons with a disability, and 30 percent of older persons (60+) categorized as being particularly vulnerable.⁷⁴

Health

Prior to February 2022, the national health system, characterized by a dense network of public healthcare facilities across the country, struggled to achieve universal coverage.⁷⁵ The main gaps identified in the healthcare system were high out-of-pocket payments, and high incidence of impoverishing and catastrophic expenses related to a lack of coverage for prescribed medicines and dental care.^{76,77}

Out-of-pocket expenses represented more than half of total household health expenditures (51 percent in 2019) on average nationwide, which is far above the equivalent Organization for Economic Co-operation and Development (OECD) average (14 percent in 2019).⁷⁸ Therefore, lower-income households were disproportionately limited in access to healthcare services, even when going to public facilities.^{79,80} 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.⁸¹

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).⁸² The prevalence of AIDS and Tuberculosis were also among the highest in Eastern Europe, mainly due to drug usage.⁸³ As in other countries in the world, the COVID-19 pandemic put further pressure on the national healthcare system with the exhaustion of care workers and the shortages of essential medical supplies.⁸⁴

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, there were 3,404 civilian casualties recorded and between 7,000–9,000 injuries.⁸⁵ The conflict also destroyed or damaged health facilities and equipment in these oblasts, in some cases propelling practitioners to flee conflict-affected areas and leaving gaps in medical coverage for the remaining inhabitants. The 2022 HNO estimated that 1.5 million people required care (of which 31 percent were over 60 years old) in Donetska and Luhanska oblasts.⁸⁶ A COVID-19 outbreak at the end of 2021 put even more pressure on health services in these areas.⁸⁷ Conditions were particularly acute for older persons and persons with disabilities living close to the line of contact, facing markedly lower levels of ability to access healthcare services.⁸⁸

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.⁸⁹ 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).^{90,91} At the country level, mental health services were not commonly available and were often stigmatized and poorly understood.⁹² Additionally, awareness about service availability was low, with 83 percent of respondents to a 2018 representative survey in areas of Donetska and Luhanska oblasts under GoU control reporting being unaware of psychosocial support centers in their area.⁹³

Education

While school attendance is free and mandatory for children aged 5-17 in Ukraine, the enrollment rates before February 2022 were markedly below 100 percent. In 2021, the enrollment rate from primary to tertiary education remained below that of developing country standards (79 percent compared to the OECD average of 90 percent).⁹⁴ This was particularly driven by the low enrollment rate for children over 15 years old, which stood at 50.4 percent in 2021. In addition, rural households had a lower enrollment rate for primary education (40 percent) compared to urban households (71 percent) according to 2021 data.⁹⁵ The main barriers to accessing education were the cost and transport to school. Children from Roma families were found to have a lower enrollment rate (especially for girls), and the majority did not finish school.⁹⁶

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 sector's inefficiencies were often highlighted.⁹⁷

This is reflected in Ukrainian students' 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.⁹⁸ 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.⁹⁹ 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 line of contact and in areas of Donetska and Luhanska oblasts not under the control of the GoU.¹⁰⁰

Aggregate Impact

The war's most immediately visible human impact has been the rise of civilian casualties directly linked to the conflict. According to the OHCHR, which only accounts partially for war-related casualties, there were 20,271 civilians killed or injured between 24 February 2022 and the end of 2022 (compared to 10,404-12,404 from 2014 to 2021).¹⁰¹ Thousands of injured persons, often with long-term physical rehabilitation needs, have had consequences for 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 frontline are more likely to experience deprivation in the three dimensions of living standards, health, and education due to the destruction of and damage to infrastructure, assets, and residential units. The war led to the internal displacement of seven million people, many of which were vulnerable households who were likely 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 centers such as Lviv, Dnipro, and Poltava. The 2022 MSNA found that 77 percent of households in the Northern and Southeastern macro-regions, compared to 41 percent nationally in the month before data collection (between September – November 2022).¹⁰² 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.¹⁰³ 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.¹⁰⁴ Civil society actors warned about the potential marginalization of persons with disabilities in public space that restrained their access to humanitarian assistance.¹⁰⁵

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 it was estimated that 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.¹⁰⁶ 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 by the war (compared to 13 percent nationally); more damage was reported by households in urban areas compared to 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 were evacuated due to damage and destruction, displacing 4,894 children.¹⁰⁷

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.¹⁰⁸

People living in collective sites, although corresponding to only 3 percent of IDPs as of January 2023, tended to have higher vulnerability at the household-level. Indeed, a 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.¹⁰⁹ Moreover, the primary needs were shelter and household items (51 percent of respondents reported severe needs and above) and healthcare (31 percent of respondents reported severe needs and above).¹¹⁰

Health

The war has impacted the provision of and access to healthcare in Ukraine through two main channels. Firstly, through the pressure put on facilities and staff. Secondly, as a result of limited economic resources driven 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.¹¹¹ As of February 2023, one in ten of Ukraine's hospitals were directly damaged from attacks, with damages most heavily concentrated in Kharkivska, Donetska, Luhanska, Khersonska, and Kyivska oblasts.¹¹² Many healthcare workers have been displaced by the war, leaving health facilities short of staff.¹¹³

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.¹¹⁴ In the WHO's Health Needs Assessment (HNA),¹¹⁵ the health services reported to have the most access difficulties for households were connected to chronic conditions (9.9 percent), pregnancy (9.6 percent), health services for children (7.9 percent) and injury (7.5 percent). In areas affected by active hostilities, the primary barrier to healthcare is the cost of medicine and treatment.¹¹⁶

The main reported barriers to accessing healthcare are related to cost of consultation, medicines, and physical difficulties reaching health facilities. This may be a result of an overall decrease in household income after the war (further discussed in the Livelihoods chapter below), or 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 medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services while 35 percent experienced barriers to accessing medical services barriers to access the percent services barriers to access to access the percent

For households reporting difficulties accessing healthcare 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 2021.¹¹⁸

According to the 2022 MSNA, groups most vulnerable to healthcare needs included households with older members, displaced persons, and those with a member with a disability. A primary challenge in accessing services for such households was the cost of healthcare services. The WHO HNA reported that 22 percent of households spent more than a quarter of their monthly income on healthcare services. Only 37 percent spent less than 10 percent of their income on healthcare services and medicines, while before the war, national data measured that health amounted to 4.7 percent of average household monthly expenditure in 2021.¹¹⁹

While measurement effects 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, with the exception of affordability being above the national level in Kyiv city and below in areas closer to the frontline. IDPs have also faced lower access to primary healthcare, 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.¹²⁰

War has also impacted mental health and has the potential to lead to an increasing prevalence of psychological trauma for adults and children.¹²¹ The 2022 MSNA found that only a limited number of households reported that individuals with mental health conditions were accessing mental healthcare. For those who did access such services, more than a quarter could not access mental health services and medications consistently.¹²² In the WHO HNA, 13.9 percent of households reported having at least one member being 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) (own or 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.¹²³

The Ministry of Health (MoH) estimated that close to 15 million persons would require psychological support, of which 3 to 4 million persons need medication.¹²⁴ 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.¹²⁵

Education

The education sector was disrupted by the war and damage to educational facilities, although the enrollment rate remained fairly stable. As of February 2023, there were 2,638 education facilities 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.¹²⁶

While the war has resulted in the departure of 2 million children from Ukraine, displacement within Ukraine of both students and teachers has also been a source of stress on the education system.¹²⁷ 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 2022.¹²⁸

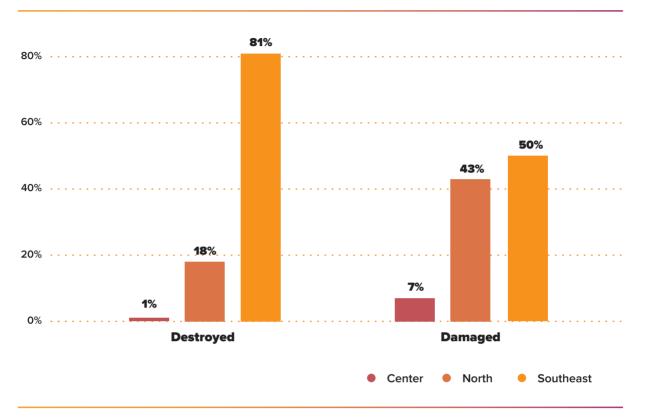


Figure 2: Reported damage to educational facilities as of February 2023, by macro-region

Source: Ministry of Education and Science

After February 2022, teaching has mainly been conducted online or through hybrid modalities. This has limited students' ability to interact with their schoolmates and teachers, impacting the quality of education and most likely adolescent mental health.¹²⁹ 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).¹³⁰ 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.¹³¹ 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, though. IOM's GPS found that 17 percent of IDP households reported that their children lacked access to education in the 2022-2023 school year.¹³² Furthermore, students with disabilities tend to face challenges to adapted approaches to education. Some students with disabilities struggle to access bomb shelters in schools or are not able to participate in online learning.

Households in the Southeastern macro-region have faced additional barriers to education. An assessment conducted in Zaporizka, Donetska, Khersonska oblasts found that a lack of internet connectivity was a crucial barrier to online classes.¹³³ 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 behavioral 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 youth (14-35) were asked "What personal problems bother you the most today?", and 11 percent of respondents (age 14-35) mentioned lack of access to quality educational services.¹³⁴

Coping Mechanisms

Living Standards

Displacement has been one of the main coping mechanisms used by households affected by the war. Indeed, damage or destruction of residential units was one of the major push factors cited by displaced households, just after security concerns.¹³⁵ According to IOM, as of January 2023 60 percent of IDPs were 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 represent the most vulnerable.¹³⁶ For households remaining in war-affected areas, coping mechanisms included measures such as protecting their windows and converting basements into shelters.¹³⁷

When faced with utility disruption, household respondents to a WASH needs assessment in oblasts in the Northern and Southeastern macro-regions reported adapting by 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 consumption.¹³⁸ Coping strategies involving selling durable goods were only used by a minority of households. Indeed, 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, the main measurable coping strategy was the share of households reducing healthcare expenses. According to the 2022 MSNA, reducing healthcare expenses was more often used in the Southeastern macro-region (29 percent of households, compared to 19 percent (Northern), 16 percent (Western), and 11 percent (Central)). This coping strategy is confirmed by a recent health needs assessment conducted in several oblasts where households reported that they reduced their use of healthcare facilities by postponing care, increasing consultations with pharmacists, or through self-medication.¹³⁹ However, such tendencies may have also begun during the COVID-19 pandemic as delaying care was a growing issue aheadof the war.

Other sources reflect emerging patterns and increased usage of negative behavioral coping strategies.¹⁴⁰ A rapid needs assessment from the International Medical Corps on MHPSS 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.¹⁴¹ The WHO HNA found that around 38 percent of households did not visit a healthcare facility when a member was ill, rather engaging in self-treatment with medications, traditional remedies, or seeking information for treatment online.¹⁴² Affected people were also found to have used positive coping strategies such as strengthening community-based support networks, staying active, and facilitating post-traumatic personal growth.¹⁴³

Education

The main coping strategy at the institutional level 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, which has resulted in mixed approaches to teaching, including in-person, online, or blended, depending on the local security situation.¹⁴⁴

In an assessment conducted in Zaporizka, Donetska, Mykolaivska and Khersonska oblasts in February 2023, teachers surveyed 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).¹⁴⁵

On 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 macroregion, 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 labor,¹⁴⁶ which could increase particularly in rural areas.¹⁴⁷

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4 · Key Findings on Livelihoods

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Key Messages

According to 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 the majority of 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 (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 a decrease in 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 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. The majority of 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 impact of the war on livelihoods has been felt most greatly 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 impacts from safety and security.

Context

Employment and Income

Ukraine has undergone a number of economic shocks since its independence, first during an economic transition period from 1991-1999, during the global financial crisis of 2009, following the start of the 2014 conflict in eastern Ukraine (which both worsened economic conditions within Ukraine and marked the start of a period of increased dependence on labor migration and remittances) and finally, during the COVID-19 pandemic and guarantine restrictions starting in 2020.¹⁴⁸ Ahead of the war. Ukraine was experiencing its highest unemployment rate in the last decade, at 9.8 percent of the total labor 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.¹⁴⁹ A 2021 Labor Force Survey reported that unemployment amongst men (9.5 percent) was mildly lower than for women (10.1 percent), and marginally higher in rural areas (10.6 percent) than in urban areas (9.5 percent).¹⁵⁰ However, in the last two decades Ukraine made strides towards decreasing the number of households facing extreme poverty, bringing down the percentage of the population living on less than US\$3.65 per day from 17 percent in 2002 to less than 1 percent since 2008.¹⁵¹ The percentage of the population living on less than USD \$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 2020.¹⁵²

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 line of contact), only 28 percent of household members across the assessed area were reportedly engaged in paid work.¹⁵³

Barriers to Accessing Livelihoods

Aside from nationwide economic and labor market conditions, household-level data pertaining to barriers to accessing livelihoods prior to February 2022 is 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."¹⁵⁴ Older persons made up 64 percent of the population in these areas and were predominantly reliant on pensions for income.¹⁵⁵ 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.¹⁵⁶

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. Indeed, 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.¹⁵⁷ 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

than in other parts of the country.¹⁵⁸ Income from the sale of agricultural products accounted for 2.5 percent of income (8 percent for rural households), and income from household consumption (i.e. the value of goods produced and consumed by households themselves) for 3.1 percent (8.3 percent for rural households).¹⁵⁹

However, there is a high degree of informality in the Ukrainian labor 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 under-reported income, employees, and wages) range from between 23.8 percent to 38.5 percent of GDP.¹⁶⁰ Such informality was reported especially in the sectors of retail, manufacturing, construction, services, and wholesale.¹⁶¹

Entrepreneurs represented 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 the 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.¹⁶² 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).¹⁶³

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 that were engaged in small-scale agricultural production, with households accounting for approximately 32 percent of agricultural production and the remainder led by enterprises.¹⁶⁴ Such small-scale agricultural production is important in 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 labor 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 percent lower than during the pre-war level.¹⁶⁵ 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.¹⁶⁶ 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.¹⁶⁷

The 2022 MSNA found that of all households surveyed, 46 percent reported income from regular employment while 52 percent reported income from pension. 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).¹⁶⁸

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 USD 6.85 / person / day).¹⁶⁹ The decrease in income was derived mainly from job loss, salary cuts, and reduced working hours, with 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 income remaining stable, and 6 percent that it 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 and 73 percent respectively.

IOM's GPS found that 57 percent of IDP and 64 percent of non-IDP respondents 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); low offered salary and (45 percent of IDPs and 76 of non-IDPs).

Safety and security concerns also inhibited livelihoods. Most households reported that their livelihoods had been negatively impacted 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 a member with a disability 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 pension were notably higher for households headed by men than households headed by women, particularly in the Central macro-region.¹⁷⁰

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 to 50 percent for IDPs, and from 1 to 40 percent for those in the Southeastern.¹⁷¹ HIA respondent households also reported an increased reliance on state transfers since February 2022. A majority of households (53 percent) reported reliance on government income (i.e., pensions, assistance from social protection mechanisms, etc.) 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 a 58 percent reliance on pensions as a primary source of income for households headed by men, and a 45 percent reliance on pensions amongst households headed by women. Such findings may be reflective of a combination of factors: the GoU's extension of social safety nets¹⁷² and a scale-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 households which are more likely to be reliant on government assistance being left behind.

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). Prior to 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, damages to small-scale farming have stretched beyond a lack of access to usable land, including contamination of at least part of their land by unexploded ordnances (UXO), mines, bombshells, and debris, the destruction of agricultural equipment and facilities, livestock, crops, stolen farm inputs and outputs, and the need for recultivation of land.¹⁷³ Rural households hosting IDPs are also vulnerable to disruption of livelihoods and agricultural production.¹⁷⁴

In terms of damages to agricultural assets, the HIA survey did not capture the extent of the loss of access to productive land, or illness or 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 to lose their productive assets. A number of studies have cited operational challenges negatively impacting businesses in the face of the war, including interruption to electricity, water and heating, increased cost of inputs, disruptions to supply chains, reduction in demand, and danger while working.¹⁷⁵ There has been a relatively moderate contraction of active registered businesses, -6 percent at the national level between November 2021 and 2022, with -9 percent in the Southeastern and -7 percent in the Northern, compared to -3 percent in Western and Central macro-regions.¹⁷⁶ 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 2022.¹⁷⁷

Coping Mechanisms

War has affected the economy through the destruction of productive assets and the decline of demand, leaving a majority of households unable to meet their basic needs due to inadequate income. The 2022 MSNA captured data on households' ability to economically meet their needs. Nationally, 44 percent of households faced challenges doing so. Particular groups of concern included households without any working members, displaced households, households headed by a member age 60+, and households headed by women.¹⁷⁸

As a consequence, households have employed strategies available to them and reflecting their level of needs.¹⁷⁹ 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 type of coping strategies. The highest share of households employing coping strategies was reported in the Southeastern macro-region. Target groups tended to report being more likely to use livelihood coping strategies, such as IDPs (63 percent), returnees (58 percent), or households with a member with chronic illness and serious medical condition (62 percent).

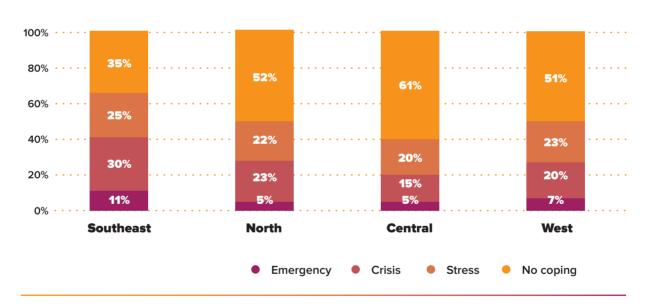
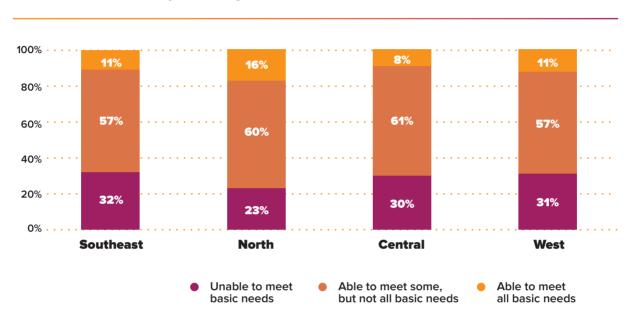


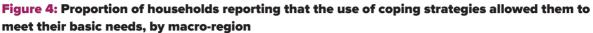
Figure 3: Reported household use of Livelihood Coping Strategies in the 2022 MSNA, by macro-region



The three most commonly reported coping strategies included spending savings (25 percent of households), taking on additional work (19 percent), reducing health costs (19 percent) in the 30 days prior to the survey.¹⁸⁰ For households that did engage in such strategies, only between 8 and 16 percent reported that they were then capable of meeting their essential needs, while the majority reported that they are able to meet some of their needs but not all (see Figure 4). Separately, between 23 and 31 percent of households reported that they remained unable to meet basic needs even with the use of coping strategies. The majority of households reporting that they had 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 cannot 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 expenditures, of which over two-thirds reported that they did not believe they could continue using this coping method to meet their needs.





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 a number of 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 labor, 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. Still, if agricultural production deteriorates further, this could result in issues of food availability in Ukraine.

While food availability did not emerge as an issue at the 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 the majority of 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 expenditures.

While economic access constraints are the primary driver of food insecurity nationwide, areas near the frontline have been negatively impacted in terms of security, damage to infrastructure, access to basic services, and pockets of limited market functionality, all of which contribute to a 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 being most negatively impacted.

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 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 were able to meet 90 percent of the population's food needs.¹⁸¹ 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 (3-year average) between 2017 and 2021 in Ukraine remained between 1.6 and 3.2 percent.¹⁸² The prevalence of moderate or severe chronic food insecurity in the total population (3-year average) was somewhat higher between 2017 and 2021, at between 18.3 and 22.7 percent.¹⁸³

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.¹⁸⁴ Household spending on food was relatively high, averaging 54.6 percent of total household cumulative spending.¹⁸⁵ Such data suggests that even 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 impacted food access and availability, including heightened food prices, COVID-19 movement restrictions, and low agricultural productivity.¹⁸⁶ In 2021, about 1 in 10 households in areas under government control in Donetska and Luhanska were found to be moderately to severely food insecure when looking specifically at acute food insecurity.¹⁸⁷ Incidence was slightly higher amongst 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).¹⁸⁸

Aggregate Impact

Food Access, Availability, and Utilization

The active fighting in parts of Ukraine, lack of labor, 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 the national level is reported to be adequate.¹⁸⁹ 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 2021.¹⁹⁰ Nonetheless, these volumes fully covered domestic needs, at the level of 18 million tons of grains.

While food availability at the 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.¹⁹¹ Food security monitoring data from throughout 2022 also showed that households with unstable or no income were more likely to have inadequate food consumption.¹⁹²

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.¹⁹³ 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 salaries being too low and lack of work opportunities.¹⁹⁴

The majority of surveyed households in the 2022 MSNA had consumption expenditures below a 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.¹⁹⁵ IDPs, single parent households headed by a woman, and households with persons with (registered) disabilities were more likely to fall below the MEB or SMEB.¹⁹⁶

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 country-wide were a concern in 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 reversed.¹⁹⁷

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 impact 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 allow them to purchase and prepare foods.¹⁹⁸

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 frontline) stating that they had "suspended or reduced agricultural production as a result of the war."¹⁹⁹ This mainly resulted from disruptions to value and supply chains as well as increased production costs for crops and livestock, which has negatively impacted the incomes of rural households.²⁰⁰ The majority 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.²⁰¹ In terms of food expenditure, the analysis showed that on average more than half of 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 frontline, 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 relation between food expenditure, decreases in income, and suspended or reduced agricultural production.²⁰² In fact, the share of food expenditure of rural households tends to increase as a result of decreased income levels and suspended or reduced production. While food insecurity at present is predominantly driven by issues of economic access, continued effects on rural agricultural livelihoods could play a role in the further deterioration of food availability.

Food Security Outcomes

The 2022 MSNA, building on the CARI (Consolidated Approach for Reporting Indicators) of Food Security console of food security indicators,²⁰³ found that a quarter of the surveyed households were acutely food insecure, with a higher proportion in Southeastern (up to 31 percent). Notably, the majority of households, or 23 percent nationwide, were found to be in the moderately food insecure category, and only 2 percent severely food insecure. Furthermore, the survey found that certain socio-demographic groups were mildly more likely to experience food insecurity than the national average, including displaced households, households with a member with a disability, single parent households headed by a woman, and households with a member with a chronic illness. Unemployment also impacts food security outcomes, with 56 percent of food insecure households reporting having an unemployed (and actively searching for a job) head of household.²⁰⁴

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 the food consumption score (FCS), with the Southeastern macro-region having the worst outcomes over time (See Figure 5).²⁰⁵ Oblasts in the Southeastern macro-region showed the greatest food consumption gaps, though data collected by WFP shows 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, noting a smaller sample size as well in this region, possibly influencing results.²⁰⁶

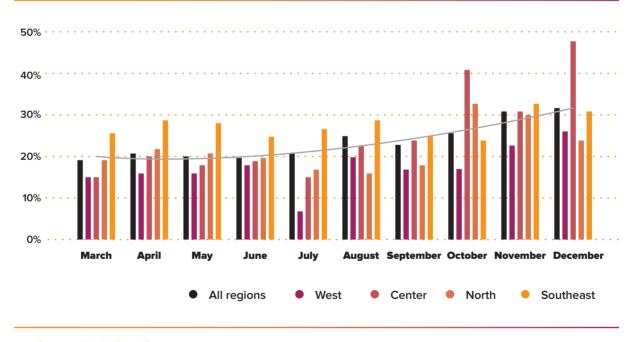


Figure 5: Proportion of households with insufficient food consumption (poor or borderline FCS score), by month and macro-region in **2022**

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.²⁰⁷

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 help. 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.²⁰⁸ Still, 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.²⁰⁹

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 7 days prior to 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).²¹⁰

The highest reported use of coping strategies in order to meet food needs was found in the Southeastern macro-region (see Figure 6).²¹¹ Findings from the 2022 MSNA suggested 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.

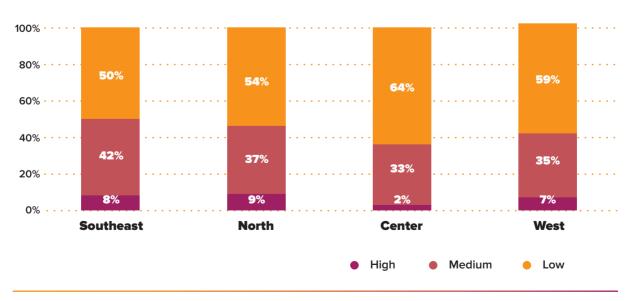


Figure 6: Reduced coping strategies index (rCSI) by macro region

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 to understanding households' medium- to long-term ability to cope in response to a lack of an ability to purchase food. Findings that around half of households (especially in the Southeastern macro-region) are spending savings, taking on more work, reducing health expenditures, and in some cases borrowing food indicate such strategies are commonplace in order to maintain consumption and meet essential needs.

The war has also had a unique effect on coping strategies amongst rural households. FAO's national assessment on 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 impacted 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.²¹²

Finally, it is important to acknowledge that while much of the data relating to food security provides 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 households' coping capacity in the future.

For notes

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 Roma) 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 reduced.

Despite most people continuing having 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 situationin 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, individuals living with HIV/ AIDS, and members of the LGBTQIA+ community, face stigmatization and are particularly disadvantaged in dealing with the impacts of the war.

Context

This chapter of the report considers the impact of the war on particular 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,²¹³ Roma communities, women, men (both analyzed 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 frontline. 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/AIDS).²¹⁴

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).²¹⁵ 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 healthcare. The integral index of subjective well-being, indicating accessibility of goods and services, grew consistently since 1996.²¹⁶ However, it shows a long-term disproportion: legal support and healthcare remained the least accessible services among 20 other indicators, particularly for more vulnerable groups.

Within the UNDP Social Inclusion framework, people are treated inclusively as a part of the social, economic, political, and cultural life of their country, their voices are heard, and they are able to use their capabilities and access resources, including financial and business opportunities. Social inclusion is closely linked to the development of institutions, socioeconomic reforms, and democratization processes that generate new pathways and mechanisms to improve access to opportunities, assets, resources, and participation. When individuals or groups are treated negatively (stigmatized and/ or have unequal power) and excluded from full participation in society due to their perceived differences or characteristics, social exclusion further reinforces negative consequences, including a lack of access to resources, limited opportunities for social and economic mobility, and poor health outcomes.

Accessibility of social assistance²¹⁷, administrative services, and internet access was improving during the pre-war period, according to the SCORE report which compared data between 2016, 2018 and 2020.²¹⁸ This had positive effects on all groups and regions, albeit to varying degrees.²¹⁹ 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 line of contact (3.4, in comparison to the national average at 4.3).²²⁰ Provision of services facilitating access to justice was lower in rural areas (4.2, in comparison to the national average at 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 healthcare were found to be on a less positive trend. According to SCORE21, access to services facilitating access to justice was considered inefficient across the country,²²¹ and healthcare was less accessible in the Southeastern macro-region.²²²

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). Marginalization²²³ was overall low (0.4) but slightly higher among persons with disabilities (0.6) and IDPs (0.7).²²⁴ The "Ukrainian authorities care" subjective estimation (looking at 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) (compared to the national average at 2.6).

Ukraine faced increasing pressure on its social safety net in the last decade, challenged by the conflict beginning in 2014 and growth of the population in need.²²⁵ 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.²²⁶ 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 affordability of healthcare services, including mental health support.²²⁷ According to the WHO, the main barrier to people's access to health care was the cost of medicine and treatment. Also, in areas experiencing active hostilities there are still serious concerns about the deteriorating access to health care²²⁸, 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 2020.²²⁹ 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, out of 15,000 secondary schools in Ukraine, only 3 percent had no internet access in 2020.²³⁰ Although the COVID-19 pandemic was an impetus for accelerating digitalization of services, a UNDP study demonstrated that the means of providing electronic services in Ukraine were often partially or completely inaccessible to different groups of users, including those with disabilities.²³¹

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).²³² Among those, 11.1 million were people in urgent need of humanitarian assistance and protection.²³³

Until 1 January 2022, there were approximately 500,000 veterans in Ukraine. According to the Ministry of Veterans Affairs of Ukraine in May 2023 this number grew to 770,000.²³⁴ The projected number of veterans (including persons with disabilities resulting from the war), their family members, and families of fallen soldiers that will need support in the post-war period is estimated at between 3-5 million people (10-15 percent of the total population of Ukraine).²³⁵

According to a survey conducted by UNDP and the Ministry of Digitalization, the proportion of those 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),²³⁶ with a vast majority of women in this age group.

According to SHARP22, 23 percent of the respondents were displaced. Displaced people were among the most vulnerable of the surveyed groups: they had a lower income and much higher personal exposure to adversities than stayers. 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. 11 percent of the respondents were also returnees. The largest number of the surveyed returnees were from liberated areas (mainly from Kyiv oblast). Most respondents intended to stay at their current locality during the survey period. Only 5 percent planned to return to their native locality where they lived before the war (to Donetska, Luhanska, Khersonska, and Kharkivska oblasts mainly). Most of them have personally experienced war-related adversities and war crimes. They also largely rely on welfare payments.²³⁷

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.²³⁸ 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 who were likely to change jobs in 2022, move to unofficial employment, or whose salary was cut or paid with delay.

Unequal Access to Resources

According to SHARP22²³⁹, income levels were lower among older persons (3.0), 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 at 7.1). The provision of welfare payments²⁴⁰ 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 (although deteriorated significantly due to attacks on energy infrastructure and related blackouts during the autumn 2022 and winter months of 2022-2023).²⁴¹ 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 establishing 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 access to the internet, though, 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 Diia 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

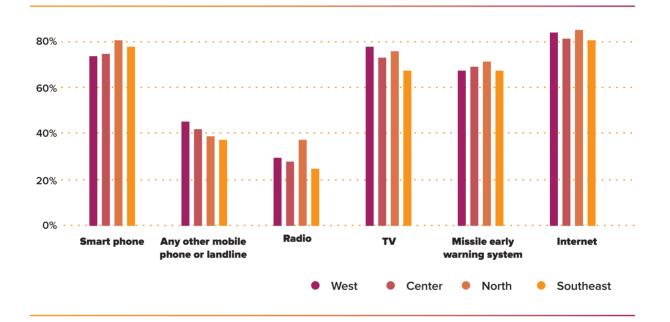


Figure 7: Reported access of household members to information services in 2022, by type of information service and macro-region

According to FGD participants, access to healthcare 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 Sites Monitoring from November 2022, the average length of time that households reported living in collective sites was 7.5 months.²⁴² People who 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 longer period in collective centers.

According to a REACH assessment of government-led social assistance programs, the majority of IDPs received housing allowance 2 to 3 months after applying, and around one third received it in less than 1 month.²⁴³ 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.²⁴⁴ This disproportionately impacts 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 centers and faced other forms of stigmatization (for example, at checkpoints or when accessing services).

They (HIV positive women) are being denied entry to collective centers because they were thought to infect others. Homosexual men were stopped by the police or representatives of the alleged territorial defense who behaved inappropriately or were threatening or assaulted them.

• KII, Expert in gender equality, Kyiv

• KII, Expert in gender equality, Kyiv

Before the war, we inquired about enrolling our child in a nursery (we couldn't get registered for two years). And they wouldn't accept our child into school (they were surprised and asked if our child would really be studying) ... And now it's even more difficult with these issues. We had to bribe to finally get their child registered.

• FGDs with Roma people, Odesa

The livelihoods chapter discussed related to the impact 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 registered as unemployed as well as the experiences of other groups with vulnerabilities. IDPs reported facing challenges competing with local applicants. Moreover, 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 for employers in 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 representatives of the Roma community still persist.²⁴⁵

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 to opt for informal employment when formal job opportunities were scarce.²⁴⁶

It used to be very difficult for Roma women to find a job before the war, and even more so now.

• Woman, FGD with Roma people, Odesa There are jobs for locals, but it is very difficult for IDPs who are there to find work.

 KII, Social expert, Odesa A statement in my resume that I am an IDP (prevented me from being hired) ... Any job with fiscal responsibility requires a permanent residence permit.

• FGD with IDPs, Dnipro According to my observations, in Vinnytsia, women are looking for job more than men, and they are more likely to accept low-paying jobs. Men often do not want to apply for an official job because of the risk of mobilization.

• KII, Expert in gender equality, Vinnytsia

Coping Mechanisms

Coping mechanisms of groups with vulnerabilities mainly involved self-reliance (an 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 necessary skills, certain groups may have limited coping capabilities. Certain individuals, especially older persons, and those with severe disabilities, may confront difficulties in effectively communicating their needs, potentially resulting in their exclusion from crucial humanitarian assistance. Moreover, 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 to ensuring inclusive assistance.²⁴⁷

A sense of marginalization among groups and tension between host communities and IDPs was relatively low: according to SHARP data, in 2022 80 percent of respondents at the national level strongly or somewhat disagreed that there were tensions between IDPs and host communities. Still, some challenges and tensions around access to essential items, public services, and accommodation as well as political, cultural, and language differences and stereotypes (including anti-social behavior and draft evasion by displaced men) exist in oblasts hosting a large number of IDPs. These should be monitored to ensure that tensions 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 distinct groups and within them 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).^{248,249}

Experts interviewed recommended keeping the focus on addressing structural issues faced by groups with vulnerabilities (including those that are displaced but not restricted to them) 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, it is essential to have access to psychological support.

7 · Key Findings on Gender Equality

ВИШНЕВИ

Key Messages

Women and men experienced increased financial insecurity since the start of the war, and women respondents reported lower monthly household income and were more reliant 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 area.

The war has had multifaceted impacts on gender norms; experts noted that the war can reinforce harmful norms, empower women to take on new roles, do both simultaneously, or 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 Sustainable Development Goal 5: Achieve gender equality and empower all women and girls.²⁵⁰ According to the Gender Inequality Index, genderbased inequality in Ukraine in 2019 was lower than in Europe and Central Asia overall, and Ukraine stood 52nd out of 189 countries on the index.²⁵¹ 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.²⁵² 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.²⁵³

Ukraine has made significant strides in the protection of women's rights, and the Constitution and laws²⁵⁴ of Ukraine aim to safeguard equal rights and opportunities for women and men.²⁵⁵ Ukraine has ratified or joined most major international agreements on gender equality, and has subsequently approved numerous relevant National Action Plans,²⁵⁶ among these the National Action Plan to implement UN Security Council Resolution 1325 "Women, Peace and Security" (NAP 1325) for the periods up to 2020 and 2025.²⁵⁷ In 2022, the NAP1325 was revised and now includes key provisions on prevention and response to CRSV, on anti-trafficking, and 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).²⁵⁸ 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 gender-based violence 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.²⁵⁹

Ukraine 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 UN 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/defense sector, providing holistic assistance and access to justice for survivors.

Nonetheless, women faced unequal access to the labor 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 labor force participation stood at 74.5 percent of men's in 2019.²⁶⁰ A gender wage gap had been observed in all sectors of economic activity,²⁶¹ equivalent to 23 percent in 2019²⁶² (19 percent in 2021) and in 2019 the gender pension gap stood at 32 percent.²⁶³ Before the war, there were more women than men in Ukraine, particularly in terms of the population over 65, of which two thirds were women.²⁶⁴ 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,²⁶⁵ while single mothers made up 95 percent of single-parent households²⁶⁶ and women were most often the primary caregivers for children, older family members and those who were ill or living with disabilities.²⁶⁷ The proportion of women of reproductive age whose demand for family planning had been met using modern methods of contraception was 68 percent in 2012, far from the 100 percent target.²⁶⁸

SCORE results in 2021²⁶⁹ found that women reported higher levels of subjective poverty and economic insecurity, and experienced lower employment rates despite having equal educational attainment compared to men.

The women most vulnerable to economic fragility were older and more rural, suffering from poorer health outcomes and facing barriers in their access to services, as well as feeling disenfranchised from the state and their personal role in civic life. Women experienced lower physical health status and mental wellbeing, both of which were exacerbated by economic fragility and by insufficient access to medical services.

Even before 24 February 2022, gender-based violence, 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 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 increased by up to two-fold during COVID-19 lockdowns).²⁷⁰ According to national crime statistics in 2019, women and girls constituted the majority of registered victims of rape (86.3 percent), 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.²⁷¹

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). 2021 data also pointed to the particularly vulnerable situation of women living near the line of contact 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.²⁷² (The level of reporting is higher when survivor gets to the more safe 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 2052²⁷³ and estimates that the number of women-headed households will increase.²⁷⁴ The changing demographic landscape is further impacted by the 5.3 million registered IDPs in Ukraine, and the 8.1 million Ukrainians who have fled the country as of January 2023,²⁷⁵ of which an estimated 90 percent are women and children.²⁷⁶

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. One third (33 percent) of men and 35 percent of women said that their involvement in these has increased since February 2022. There were no differences between single-headed households²⁷⁷ 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).

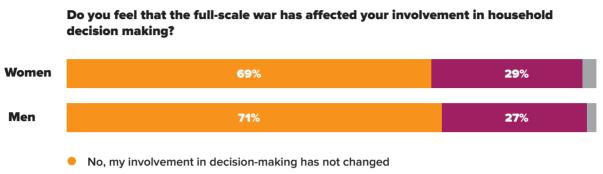
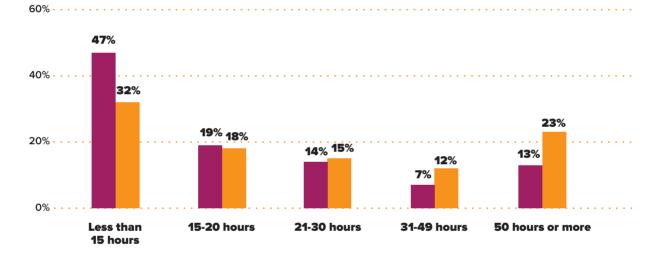


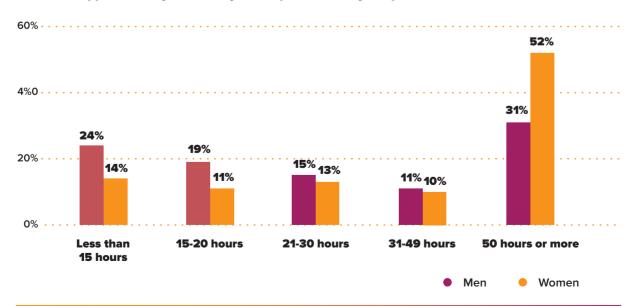
Figure 8: Percentages of responses from the 2023 HIA survey

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?





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

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 4,000 UAH in the past month, compared to 13 percent of men, while 7 percent of women said their households earned over 20,000 UAH in the past month, compared to 19 percent of men. Household income had reportedly decreased for 60 percent of women since 24th 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.

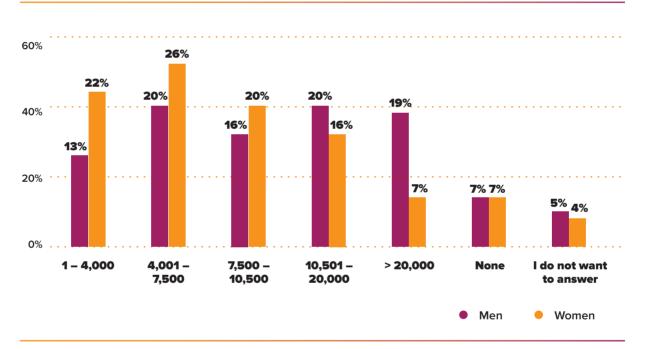


Figure 9: Average household income reported in the 30 days prior to data collection, by gender of respondent

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 p.p. and 16 p.p. decrease, respectively). Both men and women reported an increase in primary household income from government assistance (7 p.p. and 8 p.p. increase, respectively) and from humanitarian aid (18 p.p. and 22 p.p. increase, 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 healthcare.

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, 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.

• Expert in women's rights protection, Kharkiv

The impact of war on traditional gender norms and stereotypes is multifaceted. According to key informants, two popular narratives emerged: that war enhances patriarchal dynamics and reinforces traditional gender norms, and that it empowers women and minorities; still others claimed that the war simultaneously undermines gender equality in some respects and enhances it in others.

The war has exacerbated GBV and brought increased risks around conflict-related sexual violence (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 centers, and in bomb shelters face a particularly elevated risk. In February 2023, 3.6 million people were in need of GBV prevention and response services assistance; approximately 39 percent of these were located 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 to 4,684 – with the total annual quantity 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 decreased by 27.5 percent compared to the same period of 2021. This could be reflective of people's ability to make reports due to displacement or war-related services impacts, 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.²⁷⁸

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 2022²⁷⁹ 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 those who felt safe in their daily life, 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.

KIIs with Ukrainian gender experts further pointed to the rise in domestic violence rates, the lack of access to protection services, and heightened risks of sexual violence from Russian militias (showcasing the particular vulnerability of those living near the frontlines and/or in temporarily occupied territories) experienced by women since February 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 2019.²⁸⁰ 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.

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 2023,²⁸¹ 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 called attention to increased risks of trafficking.

And then as well women who are moving and displaced and then relying on strangers, or family friends to host them and exploit the situation. We have plenty of those reports and of course vulnerability to trafficking is out of this world.

• Expert in gender equality, Kyiv

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, on their access to healthcare, 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 service access. 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, frontline 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 area, and both women and men in the FGDs expressed a strong desire to contribute to supporting Ukraine. The war initially impacted the operation of many civil society organizations; immediately following the war, the number of fully operational women's organizations had decreased by half,²⁸² although only one in five of the public and charitable associations operating before the full-scale invasion stopped their operations (on average for 4 months) and then resumed operation; 80 percent of such organizations 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 being established in Ukraine but a drastic increase in the number of new charitable organizations.²⁸³

Crucially, data from the SSSU indicates that the share of CSOs led by women shows a minor increase over the course of two years 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 frontline in humanitarian response.²⁸⁴ Women's leadership and their role in decision-making has increased at the family level and partially at the 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 household has had to spend their savings to cover basic needs (compared to 34 percent of men), 24 percent have had to reduce health expenditures (compared to 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, whereby women and men are equally likely to reduce vital expenditures or borrow money, but men are 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, i.e., 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

HYUNDAI

The methodology and analysis included in this report have been shaped by the Guidelines for Assessing the Human Impact of Disaster, which aims to analyze indicators impacting human development preand post-disaster.²⁸⁵ 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 this report has not been written in a "post-disaster" context as the war in Ukraine is ongoing. The data collected and analyzed in this report provides only a snapshot of conditions, based on data published between February 2022 and April 2023, and the corresponding initial impacts on people's access to basic needs, livelihoods, food security, and 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 impacts on the country's SDGs and development targets.

Composite Picture of Impacts 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 discussions of what these figures could mean and the 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 healthcare services
Deprivations in Livelihoods	There were 150,000 unemployed persons at the end of Q1 2023, or 10.6% of the labor force (+1.4 pp compared to Q4 2022)	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 decreased (67 to 53%), while the proportion of households reliant on state transfers and humanitarian aid has increased (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 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	45% of the population belongs to at least one vulnerable group (+9pp in 2022 compared to 2021)	IDPs, persons with disabilities and older persons experienced the lowest income levels, with IDPs showing the biggest decrease in incomeamong groups with vulnerabilities	IDPs and representatives of Roma communities were more likely to face discrimination in looking for a job or accommodation
Deprivations in Gender Equality	3.6 million people were in need of GBV prevention and response services in February 2023	55 percent of women did not feel safe in their daily life, in comparison to 40 percent of women pre-war	23 percent of women reported spending 50 or more hours per week on domestic choresin comparison to 13 percent of men

Macro-regional Dynamics of Deprivations

While the war has impacted 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 negative impacts of safety and security on livelihoods, lessened access to paid work and increased reliance on humanitarian assistance as a primary source of income, decreased incomes, and greater rates of use of livelihoods 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 households' 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 heterogenous, 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 frontline experienced direct damage to their residential unit. 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 livelihoods 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" impacted 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.

Already having experienced discrimination in Ukraine prior to February 2022, Roma community members reported facing increased discrimination since then, especially when looking for jobs and seeking housing and accommodation. Notably, the lack of identification documents among Roma is one of the obstacles for inclusion. Key informants also noted lessened access to healthcare, 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 can 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.²⁸⁶

People at Risk of Poverty

The World Bank estimated that the share of people living at or below the international poverty line (of USD 6.85 per person per day) increased from 5.5 percent in 2021 to 24.1 percent in 2022, which represents 7.1 million people pushed into poverty.²⁸⁷ 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.²⁸⁸ In the 2022 MSNA 28 percent of respondents reported that the total amount of their household income was below the statutory subsistence minimum in fall 2022.²⁸⁹

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.²⁹⁰ 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 frontline, 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 impact 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 frontline in the Northern and Southeastern macro-regions.²⁹¹ 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 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. Indeed, 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 of the households reported that they were close to exhausting the coping strategies they had been using since February 2022. Extended household use and exhaustion of coping strategies can have knock-on effects. These could be economic, such as spending savings turning into borrowing money and incurring debt or reducing health care expenses resulting in bigger health issues.

Government and humanitarian aid are also playing a key role in mitigating the impact of war on poverty. Indeed, the GoU extended social safety nets early on 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.²⁹² In addition, the humanitarian response has channeled billions of dollars of aid (with US\$4.3 billion pledged from UN OCHA alone) in cash and in-kind, to households and local relief actors, preventing households from falling further into poverty. In 2022, the CWG reported having supported 5.9 million people and transferring US\$1.2 billion, or on average US\$203 per person.²⁹³ Humanitarian cash interventions were designed to support households affected at the very beginning of 2022, but prolonged support would need to be channeled 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.²⁹⁴

Potential Implications for Ukraine's Progress Towards SDGs

The following section provides an overview of the potential implications of the war on progress made toward achieving SDGs in Ukraine, taking into consideration the targets outlined in Ukraine's 2020 SDGs Monitoring Report.²⁹⁵ 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 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 programs 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; 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.²⁹⁶ While available data on food security in Ukraine since February 2022does not directly correspond with these indicators, it 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.²⁹⁷ One 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 in order 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.²⁹⁸ Ukraine has also experienced some setbacks in terms of price volatility, as food prices have gradually increased since February 2022.²⁹⁹

SDG 3 – Good Health and Well-being

SDG 3 is focused on reducing preventable mortality for certain target groups (i.e., children under age 5), ending epidemics of HIV/AIDS and tuberculosis, reducing serious injuries and deaths from road traffic accidents, ensuring universal immunization coverage, and reducing the prevalence of smoking.³⁰⁰ 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 abuse of substances and smoking, which is likely to sidetrack progress towards targets for this SDG. Moreover, one of the most common barriers to accessing healthcare was affordability which suggests that continuing the health financing reform is crucial to ensure 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 prevalence of knowledge and skills required for decent jobs, eliminating gender disparities among schoolteachers, and creating a modern learning environment in schools.³⁰¹ Access to education has largely been maintained nationwide, with shifts to online schooling in the Northern and Southeastern macroregions 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 impacted the enrollment rate of students in general secondary education and has only moderately affected enrollment in preschool education. Given that Ukraine was not meeting preschool enrollment 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 following distance learning.³⁰² In addition, access to inclusive education for learners with disabilities was reported to have stopped or become limited with distance learning, which means 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.³⁰³ 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 in the first year of the war, and incidences of domestic violence increased in 2022.³⁰⁴ Women responding to the HIA survey reported greater numbers of hours per week spent on both domestic chores and childcare compared to men. Such findings from the HIA may indicate that the first year of war has stagnated 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 efficiency of water use, and implementing integrated water resources management.³⁰⁵ 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 a centralized sewage system, although access to an improved water source 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. Moreover, disruption to utilities is still ongoing in settlements close to the frontline, 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.³⁰⁶ Ukraine's economy and labor market have been heavily affected by the war, negatively impacting progress toward decent work and economic growth. Ukraine's GDP declined by 29.2 percent in 2022 and is expected to grow by only 0.3 percent in 2023, with inflation standing at 26.6 percent.³⁰⁷ 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 job.³⁰⁸ Economic productivity has been negatively impacted by wide-scale damages to public infrastructure in Ukraine, with enterprises experiencing USD 9.7 billion in physical asset losses and the agricultural sector sustaining USD 4.3 billion in losses.³⁰⁹ Concerns related to the physical safety of employees (often related to a 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.³¹⁰

SDG 10 – Reduced Inequalities

SDG 10 is focused on accelerating growth of income for the least well-off 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.³¹¹ 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 frontline. The 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 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 impacts 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 a majority of 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 in ensuring households have food to eat, but also in 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 impacted by the effects of damages 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 impacts such as rises in morbidity, mortality, decreases in birth rates, rises in death rates, or increases in the number of Ukrainians living with a disability or facing mental health challenges.

In the face of such challenges, data in this report suggests that, thus far, households have been able to mitigate some of the potential impacts of the war by employing coping strategies. However, these coping strategies are, in many cases, a finite and temporary measure which cannot continue to be used to support meeting household needs. This report 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

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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 convergence 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, such 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 phase 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 UN 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 impacts discussed throughout this report.

Overall Recommendations for Resilience and Recovery

- Support the GoU in implementing its international commitments to protect the rights, and meet the needs of, all groups experiencing the impacts 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 impacts 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 re-building these household resources, alongside increasing labor market access and ensuring universal access to free healthcare. 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 programs. 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 UN and INGOs to the government social protection system and NNGOs in a manner that ensures vulnerable households in need of support do not fall through the cracks.

- Ensure that interventions are cohesive and inclusive at the national level, while taking into account the specific needs encountered in each region and building linkages to areabased recovery plans. 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 a chronic illness or disability. 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 various parts of the country, account for the particular needs of different and diverse population groups, and are implemented in a human-centered, non-discriminatory, and participatory manner. It is also important to ensure that interventions are developed through consultations with, and 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. To address the complex challenges of displacement in Ukraine and to support sustainable reintegration and foster social cohesion comprehensive, areabased durable solutions for IDPs and refugees are required, which account for the needs of host communities in Ukraine and take a human-centered 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 those 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, and communicating the dividends of dialogue and cooperation, creating a 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, thematic media coverage) could help foster horizontal cohesion and harmony. Enhance coordination with Women-Led Organizations / Women's Rights Organizations as mediators to ensure the inclusion of vulnerable groups.
- Engage INGOs, national civil society organizations, 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 efficiency 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, both in the areas of social assistance, contributory schemes, and labor market policies. At the same time, combined advocacy on the part of these organizations will be key for ensuring the 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. At the same time, efforts should also focus on modernizing to boost production.
- Invest in education and skills training initiatives to bolster Ukraine's human capital and increase labor productivity. This could include ensuring rapid and sustainable re-integration of young veterans and youth affected by the war through vocational training programs 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 postwar labor 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, as well as 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 of Ukraine in the longer-term, policies which harness the development potential of migration and foster linkages with diaspora should also be considered.
- Specifically, create an enabling environment for women and displaced persons to work outside
 of the home, engage in home-based livelihoods activities, 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 survivors of these events and those otherwise exposed to harassment and gender discrimination and traumatic events affecting mental health and psychological wellbeing have access to appropriate support and reporting mechanisms, and 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 centered 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 people with disabilities, ethnic and social minorities, elderly persons, and those near the frontline. 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 housing market. Ensuring safe, equal, and affordable access to housing will be a key element of Ukraine's recovery, including in 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 services and medicines. This will entail improving efficiency of the health system, particularly, the Affordable Medicines Programme, given budgetary constraints, extending and expanding primary healthcare capacities and addressing war-induced needs of Ukrainians.

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- 224 Score out of 10. Difference of 0.5 point is considered to be significant.
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Annex 1: Human Impact Assessment Indicator List

Living Standards, Health, and Education

Sub-indicator	Pre-February 2022 Data Source	2022 Post-February 2022 Data Source	
The number and/or proportion of households that had access to safe drinking water or water for household use in affected areas	SCORE21	MSNA 2022	
Main reported source of drinking water for households in affected area	SSSU 2021	MSNA 2022	
The number and/or proportion of households that had access to electricity in affected districts	MSNA GCA 2021	MSNA 2022, HSM (KI settlement level)	
The number and/or proportion of households that had access to heating in affected districts	MSNA GCA 2021	MSNA 2022	
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)	SSSU	MSNA 2022 (coping strategies on selling assets)	
The number and/or proportion of households reporting that their house was destroyed or damaged	HNO 2022	HIA data collection – Household survey 2023 MSNA 2022	
The number of civilian deaths reported due to military action	OHCHR	OHCHR	
The number of civilian injuries reported due to military action (trauma patients)	OHCHR	OHCHR	
The number and/or proportion of individuals/households who have difficulties accessing healthcare services, disaggregated by type of health service	N/A	WHO periodic health needs assessment	
Proportion of individual/household income spent on healthcare – including medications	SSSU	WHO periodic health needs assessment	
The number and/or proportion of individuals/households who have access to primary health care services	SSSU	WHO periodic health needs assessment	
Number of health facilities damaged or destroyed by the war	N/A	RDNA 2023	
The number and/or proportion of men, women, boys, and girls who have access to mental health and psychosocial support services	N/A	WHO periodic health needs assessment	
Number of education facilities damaged or destroyed by the war	N/A	MoES	
Net enrolment rate of primary and secondary school children	SSSU	MoES	
Net enrolment rate of preschool children	SSSU	MoES	

Percentage of IDP households without access to education in 2022-2023 school year	N/A	IOM GPS
Proportion of girls and boys who are attending school in- person and online for the 2022/2023 school years	MoES	MoES, Overview of the current state of education and science in Ukraine in terms of Russian aggression

Livelihoods

Sub-indicator	Pre-February 2022 Data Source	Post-February 2022 Data Source
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.	SSSU 2021 ILO FAO 2021	HIA data collection – Household survey 2023
Percentage of HHs living beneath the poverty line of USD 6.85 / person / day	World Bank	World Bank
Percentage of HHs that rely on regular employment; government assistance; and humanitarian assistance as a primary source of income	SSSU 2021 (for regular employment and government assistance); No data for humanitarian assistance	HIA data collection – Household survey 2023
Percentage of HHs that reported increase or decrease in their income since February 2022	N/A	HIA data collection – Household survey 2023
Percentage of HHs who reported the work of their HH members had been affected in one of more ways since February 2022	N/A	HIA data collection – Household survey 2023
The number and/or proportion of households deprived of their productive assets and resources (financial)	SSSU 2021 data on resources of households in Ukraine	HIA data collection – Household survey 2023 MSNA 2022
The number and/or proportion of households deprived of their productive assets and resources (physical)		
The number and/or proportion of households deprived of their productive assets and resources (natural)		
The number and/or proportion of households reporting loss of access to livelihoods due to damage or destruction caused by the war	N/A	HIA data collection – Household survey 2023 Rapid Damage Needs Assessments 1 and 2
The number and/or proportion of households reporting loss of access to livelihoods due to safety and security concerns	MSNA in GCAs 2021 Household Economic Resilience Assessment (HERA) 2021 FAO FSL Assessment in GCAs 2021	HIA data collection – Household survey 2023

The number and/or proportion of households reporting loss of access to livelihoods due to geographic concerns (migration and/or displacement)	MSNA in GCAs 2021	HIA data collection – Household survey 2023 FAO – Impact of the war on agriculture and rural livelihoods in Ukraine
The number and/or proportion of households reporting loss of access to livelihoods due to the morbidity and/or mortality of key assets, such as livestock	FAO FSL Assessment in GCAs 2021	HIA data collection – Household survey 2023
The number and/or proportion of households reporting loss of access to livelihoods due to disruption of local markets	MSNA in GCAs 2021 Household Economic Resilience Assessment (HERA) 2021 FAO 2021	JMMI 2022 WFP Rapid Market Assessments 2022

Food Security

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

Gender Equality

Sub-indicator	Pre-February 2022 Data Source	Post-February 2022 Data Source	
Full Time or Part Time Employment Status	SCORE 2021	SHARP2022	
The number and/or proportion of employed working-age individuals	SSSU 2021	No data	
The number and/or proportion of hours spent on domestic chores per week	FAO 2021	HIA data collection – Household survey 2023	
The number and/or proportion of hours spent on childcare per week	No data found	HIA data collection – Household survey 2023	
The number and/or proportion of households headed by women over the age of 18	SSSU 2021	<u>SSSU 2022</u>	
The number and/or proportion of individuals who agree that "men in the family should have the final word when important decisions are made"	SCORE 2021	HIA data collection – Household survey 2023	
		UN Women 2022	
The number and/or proportion of individuals who say the war has affected their involvement in household decisions	N/A	HIA data collection – Household survey 2023	
Civic engagement mean score (note: 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 neighborhood, etc.)	SCORE 2021	SHARP2022	
The number and/or proportion of individuals who attend events of local authorities (Civic Engagement indicator)	SCORE 2021	SHARP2022	
The number and/or proportion of individuals who participate in events of NGOs (Civic Engagement indicator)	SCORE 2021	SHARP2022	
The number and/or proportion of individuals who participate in activities to improve their local area (Civic Engagement indicator)	SCORE 2021 SHARP2022		
The number and/or proportion of individuals who say that the war has affected their involvement in community decisions	N/A UN Women 202		
Community cooperation mean score	SCORE 2021	SHARP2022	
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)	SCORE 2021	SHARP2022	

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) (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)	SCORE 2021	SHARP2022
The number and/or proportion of women's CSOs that are fully operational	UN Women 2022	UN Women 2022 SSSU 2022
The number and/or proportion of cabinet of ministers who are women	Verkhovna Rada of Ukraine, 2019	N/A
The number and/or proportion of Verkhovna Rada seats held by women	Verkhovna Rada of Ukraine, 2019	N/A
The number and/or proportion of oblast councils led by women	CVK Ukraine, 2020	NA
The number and/or proportion of village councils held by women	CVK Ukraine, 2020	N/A
SDG5 Demand for family planning satisfied by modern methods, for women aged 15-49	SDG Report, 2012	No data
Maternal mortality ratio per 100,000 births	World Bank, 2017	No data
The number and/or proportion of individuals who report that healthcare services are provided somewhat or very efficiently	SCORE 2021	SHARP2022
The number and/or proportion of individuals who report that basic schooling services are provided somewhat or very efficiently	SCORE 2021	SHARP2022
The number and/or proportion of individuals who report that welfare payments are provided somewhat or very efficiently	SCORE 2021	SHARP2022
The number and/or proportion of individuals who report that utilities (water, heating, electricity, waste disposal) are provided somewhat or very efficiently	SCORE 2021	SHARP2022
The number and/or proportion of individuals who report that administrative services are provided somewhat or very efficiently	SCORE 2021	SHARP2022
The number and/or proportion of women and girls aged 14-55 who have access to reproductive health services	OCHA, UNFPA	UNFPA, 2022
The number and/or proportion of women in need of prenatal and postnatal care who have access to services	OCHA, UNFPA	UNFPA, 2022
The number and/or proportion of women who have access to sanitation facilities for women and girls	OCHA, UNFPA	OCHA, UNFPA
The number and/or proportion of women who have access to protection services for women and girls, e.g., for the treatment of gender-based violence	OCHA, UNFPA	OCHA, UNFPA
Total number of people in need	OCHA, 17 February 2022	OCHA, March – December 2022
The number and/or proportion of individuals who feel safe in their daily life	SCORE 2021	SHARP2022

% women aged 18-29 who feel safe since Russian invasion in Ukraine	SCORE 2021	Internews 2022
% of who have been verbally harassed or abused by someone in their household	SCORE 2021	No data
% who have been hit, pushed, or slapped by someone in their household	SCORE 2021	No data
The number and/or proportion of women who have experienced sexual harassment	OSCE 2019	Internews, March 2022
Perceived prevalence of GBV (indirect measure)	OSCE	UNFPA Regional Response to Ukraine Emergency Situation Report #16, February 2023 GBV Sub-Cluster 5W Dashboard ODIHR, January 2023
Monthly number of GBV cases reported to national GBV hotline (La Strada)	UN Women 2020	UN Women 2022
Annual number of registered domestic violence cases	Ukraine Prosecutor General's Office (2019)	Ukraine Prosecutor General's Office (2022)

Social Inclusion

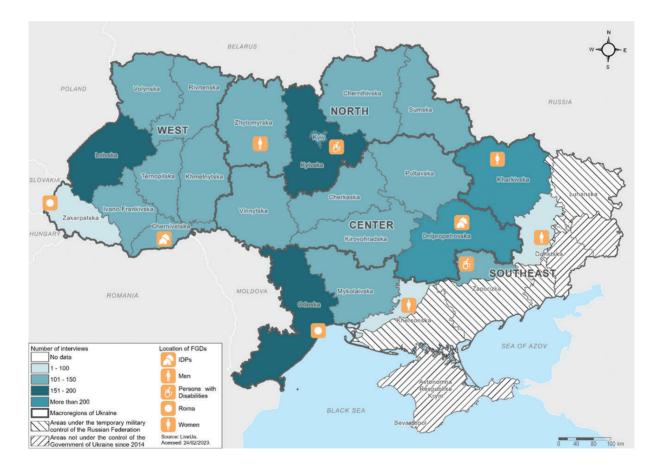
Sub-indicator	Pre-February 2022 Data Source	Post-February 2022 Data Source
Share of the population who reported using the internet over the past 12 months, % (by sex, age, type of residence)	UNDP, Ministry of Digitalization, KIIS SSSU 2020	HIA data collection – Household survey 2023 UNDP, Ministry of Digitalization, KIIS
The number and/or proportion of secondary schools with internet access	Ministry of Digitalization	Ministry of Digitalization
The average length of time that households report living in collective sites	No data	REACH Collective Sites Monitoring 2022
The number and/or proportion of households that can easily afford rent (one third of income)	No data	HIA data collection – Household survey 2023
The number and/or proportion of households having to limit consumption of other necessary goods (Food/fuel) to pay rent	No data	No data
The number and/or proportion of households living in unregulated/inadequate houses/shelter	No data	HIA data collection – Household survey 2023
Provision of welfare payments to those who is in need (note: Provision of welfare payments is defined as the degree to which one is satisfied with the welfare payments to those who is in need (e.g., disabled, unemployed, pensioners, scholarships))	SCORE 2021	SHARP 2022

The number and/or proportion of households eligible for and receiving assistance (pensions, unemployment, IDP assistance etc.)	SSSU 2020 No data found	
The number and/or proportion of households unable to access benefits due to lack of documentation	No data found No data found	
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	No data found No data found	
Average reported time spent to register as IDP (in person and digitally), and average time between registration and first payment	No data found REACH Social Protection Factshe	et
The number and/or proportion of households unable to access employment/education due to lack of documentation	No data found HIA data collection FGDs and KIIs	ı —
Access to information about decision-making processes	No data found HIA data collection FGDs and KIIs	1 —
The number and/or proportion of households reporting using available complaints mechanisms	No data found HIA data collection FGDs and KIIs	1 —
Access to information about decision-making processes The number and/or proportion of households reporting	No data found FGDs and KII HIA data colle	s ectior

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 form target groups which 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 was collected to be representative for each macro-region by level of urbanization (two-stage stratified random sampling). The final sample comprised of 3,239 household interviews across Ukraine. Data collection took place between February 6 – 20 2023. The data was 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 (Frontline), 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% confidence level and 5% margin of error.

Stratification	Men	Women	Total	Share of Total Sample
Urban HHs	454	1,169	1,623	63%
Rural HHs	618	998	1,616	37%
HHs with Persons with Disabilities and/or Chronic Illness	458	1,013	1,471	45%
IDP HHs	158	311	469	16%
Returnee HHs	69	182	251	9%
Host Community HHs	532	1,143	1,675	50%
Neither Displaced nor Host Community HHs	301	509	810	24%

Table 1: Demographic breakdown of individuals from surveyed households

Focus Group Discussions

Qualitative data collection of FGDs and KIIs took place between January 26 and February 27, 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. 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, who conducted qualitative data analysis.

Macro-region	Location	Target Group	Number of participants	% Women	Median age
Northern	Zhytomyr	Men	7	0%	32
Northern	Kyiv	PwDs	6	50%	38.5
Western	Uzhorod	Roma	8	63%	37
Western	Chernivtsi	IDPs	9	56%	48
Central	Dnipro	IDPs	8	50%	37.5
Southeastern	Kharkiv	Women	8	100%	47
Central	Dnipro	Men	8	0%	34.5
Southeastern	Zaporizhzhia	PwDs	10	50%	63
Southeastern	Kherson	Women	8	100%	45.5
Southeastern	Odesa	Roma	7	71%	37

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

Semi-Structured Key Informant Interviews

A total of 23 KIIs were conducted with experts to validate and triangulate the findings of the quantitative analysis and gather further information on how the crisis has impacted 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 KIIs 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. KII 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.

Type of Kl	Gender of Participant		Area of Expertise		Tetel
	Women	Men	Social Inclusion	Gender	Total
Government	3	1	4	0	4
NGO/Charitable Fund	12	4	10	6	16
UN	1	0	0	1	1
Academia	2	0	0	2	2
Total	18	5	14	9	23

Table 3: Breakdown of KIs by type of KI, gender of participant, and area of expertise

Analysis Overview

Quantitative data captured through primary data collection was analyzed according to data analysis plans aligning research questions with the relevant indicators. During analysis, the quantitative data from each area was combined and weighted according to the population figures from Ukrainian Statistics Service (UkrStat) as of January 2022. Data collected from quantitative surveys was cleaned in compliance with IMPACT minimum data cleaning standards, before being analyzed 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 analyzed 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. Data analysis for the qualitative data was conducted by the SeeD team.

Annex 3: Assessment Methodology – Multi-Sector Needs Assessment

A detailed summary of the methodology for the 2022 Ukraine Multi-Sector Needs Assessment is available https://reliefweb.int/report/ukraine/2022-msna-bulletin-ukraine-february-2023.

Annex 4: Assessment Methodology – SCORE

SCORE 2021 is a joint initiative funded by The United States Agency for International Development (USAID), the United Nations Development Programme (UNDP) and the European Union (EU) and implemented by the Centre for Sustainable Peace and Democratic Development (SeeD). SCORE stands for Social Cohesion and Reconciliation Index. The data was collected through face-to-face interviews between January and May 2021, and consisted of 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, Mykolaiv oblasts). In addition to the nationally representative sample, 1,010 interviews were conducted near the line of contact 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 5 oblasts, 325 interviews with persons with disabilities from 3 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 (CATI) survey conducted by the same consortium of partners from SCORE, including The Partnership Fund for a Resilient Ukraine (PFRU), 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 September 26th to November 5th, 2022. The data from the panel sample was collected from September to November 2022.

Annex 6: HIA Household-Level Quantitative Tool

Demographics				
	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	1.Yes		
RQ0_1	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?	2.No		
RQ0_2	What is your preferred language for this survey?	1. Ukrainian		
		2. Russian		
	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	1.Yes		
RQ0_3	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.)	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	1.Yes		
	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.)	2.No		
RQ0_5		1.Male		
	Sex of respondent	2. Female		
		3.I do not want to answer		

		1.Single	
RQ0_6		2.Married	
		3.Widowed	
	What is the marital status of the head of the household?	4.Divorced	
		5.Unmarried but living together	
		6.Separated (married but not living together)	
		7.I do not want to respond	
		1.Person with disability (not including chronic illness);	
	Does any member of your household have	2.Chronic illness and serious medical condition which affects quality of life (including mental illness)	
RQ0_7	any of the following characteristics?	3.Other (specify)	
		4.None/Not applicable	
		5.Don't know	
		6.Prefer not to answer	
	What is your current displacement status?	1. Not displaced (<i>not</i> in an area hosting IDPs & ha not left residence for more than 14 consecutive days)	
		2.Internally displaced persons (left primary residence)	
RQ0_8		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	
	Do you currently reside in an urban or rural area?	1.Urban	
		2.Rural	
RQ0_9		3.Don't know	
		4.Prefer not to answer	
Househo	Id Composition & Income		
RQ1_1	How many people (including yourself) reside in your household?	Integer	
		1. Males aged 60+	
		2. Females aged 60+	
RQ1 2	How many of these household members are	3. Males aged 18-59	
	in each of the following categories:	4. Females aged 18-59	
		5. Males aged 0-17	
		6. Females aged 0-17	

RQ1_3	(If RQ1_2 > 0) How many males aged 60+ have worked in the last 30 days?	Integer	
RQ1_4	(If RQ1_2 > 0) How many females aged 60+ have worked in the last 30 days?	Integer	
RQ1_5	(If RQ1_2 > 0) How many males aged 18-59 have worked in the last 30 days?	Integer	
RQ1_6	(If RQ1_2 > 0) How many females aged 18-59 have worked in the last 30 days?	Integer	
RQ1_7	(If RQ1_2 > 0) How many males aged 14-17 have worked in the last 30 days?	Integer	
RQ1_8	(If RQ1_2 > 0) How many females aged 14-17 have worked in the last 30 days?	Integer	
		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	
	Which oconomic soctors are your HH's	8. Financial and insurance activities	
RQ1_9	Which economic sectors are your HH's income earners engaged in? (check all that apply)	9. Real estate activities	
		10. Professional, scientific, and technical activities	
		11. Administrative and support service activities	
		12. Public administration and defense, compulsory social security	
		13. Education	
		14. Human health and social work activities	
		15. Arts, entertainment, and recreation	
		97. Other	
		98. Refuse to answer	
		1.Regular paid work	
RQ1_10	(RQ1_9 >1) What kind of paid work primary household income earners have been	2.Part time / temporary work	
	engaged in over the past 30 days? (Check those that apply)	3.Self-owned business	
		4.Other, please specify	
		1.More work hours	
DO4 44	Are any income earners in your household in need of either more work hours or increased pay in order to meet basic needs? (check	2.Better pay	
RQ1_11		3.Neither	
	those that apply)	4.Refuse to answer	

		1. Unemployed, but actively looking for a job
		2.Unemployed but not actively looking for a job
		3.In education
		4.Sick or disabled (can't work)
	For any adult household members not	5.Retired (not working)
RQ1_12	currently earning income, which of these situations best describes their status in the	6.Military service
	last 30 days? (Check all that apply)	7. Engaged in unpaid volunteer work (e.g., NGO, CSO, charity)
		8.Other unpaid work (Doing housework, looking after children, or caring for other persons)
		9.No such members
		97.Other
		1.No, they were not affected
		2.Yes, they lost their job
		3.Yes, their employer cut their salary
		4.Yes, their work hours were reduced
		5.Yes, they experienced delays in receiving their pay or pension
RQ1_13	Has the work of your HH members been affected since the full-scale war in February	6.Yes, they had to change jobs
	2022?	7.Yes, they left their job due to moving locations
		8. Yes, they moved from official to unofficial employment (work without a contract)
		98.I do not want to respond
		99.I do not know
		97.Other, please specify
	(If RQ0_7=rural) Since February 2022, has your household experienced illness or death of livestock due to the war?	1. No, we don't own livestock
		2. No, the war has not caused illness or death in our livestock
RQ1_14		3. Yes, the war has caused illness or death in our livestock
		4. I don't know
		5. Refuse to answer
		1. Not at all
	(If RQ1_14 = 3 or 4) Due to this (death or	2. Somewhat
RQ1_15	illness or livestock), has your household experienced loss of access to livelihoods /	3. Greatly
	income earning activities?	4.I don't know
		5.Refuse to answer

		1.Not at all
RQ1_16	Since February 2022, has your household experienced loss of access to livelihoods / income earning activities due to safety and	2.Somewhat
		3.Greatly
	security concerns?	4.I don't know
		5.I do not want to respond
		1.Mines or UXO in land
	(If RQ0_7 = rural) Since February 2022, has	2.Displacement because of security reasons
DO4 47	your household experienced loss of access	3.Environmental hazard in the area
RQ1_17	to livelihoods / income earning activities due to loss of usable land for security and safety	3.No loss
	reasons? (select all that apply)	4.I don't know
		5.Refuse to answer
		1. Yes
DO4 40	Since February 2022, has there been a	2. No
RQ1_18	death of a household income earner as a result of the war?	3.I don't know
		4.Refuse to answer
Livelihoo	ds	
		1.Detached house
		2.Apartment in apartment block
	Which of the following options best	3.Collective site / public building
RQ2_1	describes your household's current accommodation?	4.Informal site (not in compliance with government building regulations or illegally occupied)
		5. Other
		5. Other 1.Yes
	Has your accommodation been directly	
RQ2_2	Has your accommodation been directly damaged by the war?	1.Yes
RQ2_2		1.Yes 2.No
RQ2_2		1.Yes 2.No 3.Don't know
	damaged by the war?	1.Yes 2.No 3.Don't know 4.I do not want to answer
RQ2_2 RQ2_3	damaged by the war?	1.Yes 2.No 3.Don't know 4.I do not want to answer 1.Yes
	damaged by the war? Does your household pay rent in the accommodation you are currently residing	1.Yes 2.No 3.Don't know 4.I do not want to answer 1.Yes 2.No
	damaged by the war? Does your household pay rent in the accommodation you are currently residing	1.Yes 2.No 3.Don't know 4.I do not want to answer 1.Yes 2.No 3.Don't know
	damaged by the war? Does your household pay rent in the accommodation you are currently residing	1.Yes 2.No 3.Don't know 4.I do not want to answer 1.Yes 2.No 3.Don't know 4.I do not want to answer
	damaged by the war? 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 1.Yes 2.No 3.Don't know 4.I do not want to answer 1.Yes 1.No 3.Don't know 4.I do not want to answer 1.Yes
	damaged by the war? Does your household pay rent in the accommodation you are currently residing in? [if yes] What percentage of this household's income is spent on rent / accommodation?	1.Yes2.No3.Don't know4.I do not want to answer1.Yes2.No3.Don't know4.I do not want to answer1.'0-15%2.16-30%
RQ2_3	damaged by the war? Does your household pay rent in the accommodation you are currently residing in? [if yes] What percentage of this household's	1.Yes 2.No 3.Don't know 4.I do not want to answer 1.Yes 2.No 3.Don't know 4.I do not want to answer 1.Yes 2.No 3.Don't know 4.I do not want to answer 1.'0-15% 2.16-30% 3.31-45%
RQ2_3	damaged by the war? Does your household pay rent in the accommodation you are currently residing in? [if yes] What percentage of this household's income is spent on rent / accommodation?	1.Yes 2.No 3.Don't know 4.I do not want to answer 1.Yes 2.No 3.Don't know 4.I do not want to answer 1.Yes 2.No 3.Don't know 4.I do not want to answer 1.'0-15% 2.16-30% 3.31-45% 4.46-60%

		1.Paid work (employment)
		2.Business (self-employment or business you own)
		3.Government (pensions, social protection, etc.)
	What have been your household's primary	4. Bank loans
RQ2_5	income sources since February? (limit responses to up to three sources)	5. Aid received from humanitarian organizations
		6. Financial support from friends or relatives (including remittances)
		97.Other sources of income
		98.I do not want to answer
		1.Paid work (employment)
		2.Business (self-employment or business you own)
		3.Government (pensions, social protection, etc.)
	Prior to February 24th, what were your	4. Bank loans
RQ2_6	household's primary income sources? (limit responses to up to three sources)	8.Aid received from humanitarian organizations
		9.Financial support from friends or relatives (including remittances)
		97.Other sources of income
		98.I do not want to answer
		1.1-4000
		2.4001-7500
		3.7501-10500
RQ2_7	Approximately how much income has your household earned in total in the past 30	4.10501-20000
	days? (in UAH)	5.> 20000
		6. My household has not earned any income in the last 30 days
		98. I do not want to answer
	Does anyone in your household currently own any of the following?	1.Dwelling (house or apartment)
		2.Agricultural plot of land (excluding land under lease contract by household)
RQ2_8		3.Livestock (domesticated animals raised in an agricultural setting to produce labor and commodities such as meat, eggs, milk, fur, leather, and wool.)
		4.Personal car
		5.A business
		6.No, nobody in my households owns any of the above
		99.I do not know/
		98.I do not want to respond
		97.Other

RQ2_9	(If RQ0_6 = IDP) Since February 2022, has your household lost access to any of the	1. Dwelling (house or apartment)
		2. Agricultural plot of land
		3. Livestock (domesticated animals raised in an agricultural setting to produce labor and commodities such as meat, eggs, milk, fur, leather, and wool.)
	following assets due to the war?	4. Personal car
		5. A business
		99.I do not know
		98.I do not want to respond
		1.Increased
		2.Stable
RQ2_10	How would you qualify the evolution of your household's income since February 24?	3.Decreased
	household's income since rebruary 24:	99.I do not know
		98.I do not want to respond
		1.Spend savings
		2.Reduce essential health expenditures (including medication)
	Has your household engaged in any of the following activities in order to cover	3.Take on additional work / job
RQ2_11	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.)	4.Taken on debt / borrowed money
		5. No, my household has not engaged in any of these strategies
		99.I do not know
		98.I do not want to respond
	(If RQ2_10 = 1,2,3,4) Do you feel that utilizing these activities has allowed your household to meet its needs?	1.No, we are still unable to meet our basic needs
		2.Somewhat; we are able to meet some basic needs but not all
RQ2_12		3.Yes, we have been able to meet all of our basic needs
		99.I do not know
		98.I do not want to respond
		1.Yes, we can continue using this activity to meet our needs
RQ2_13	(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	2.No, we cannot continue using this activity to meet our needs
	needs?	99.I do not know
		98.I do not want to respond

Access to	o Information	
		1.Internet
		2.Smart phone
		3.Any other mobile phone or landline
RQ4_1	Do any members of your household have	4.Radio
	access to the following:	5.TV
		6.Missile early warning system (city wide or through mobile phones)
		7.Other (specify)
		1. Males ages 60+
	(If RQ4_1=Internet) Do the following	2. Females ages 60+
	categories of household members have regular access to internet? (NOTE: In this	3. Males age 18-59
RQ4_2	case, "regular access" means frequent enough to facilitate access to information	4. Females age 18-59
	pertaining to basic needs and safety)	5. Boys age 0-17
		6. Girls age 0-17
		1.Males ages 60+
	(If RQ4_1=Smartphone) Do the following	2. Females ages 60+
	categories of household members have regular access to a smartphone? (NOTE: In	3.Men age 18-59
RQ4_3	this case, "regular access" means frequent enough to facilitate access to information pertaining to basic needs and safety)	4.Females age 18-59
		5.Boys age 0-17
		6.Girls age 0-17
		1.Websites
		2.Radio
RQ4 4	What are the outlets you use the most for	3.TV
KQ4_4	information?	4. Social media & messaging platforms
		5. None of the above
		97. Other (please specify)
	[for all outlets selected before] How often do	1.Daily
		2.Weekly
RQ4_5	you use these information outlets?	3.Monthly
		4.Less than monthly
Househo	ld Decision-Making	
		1.No, my involvement in decision-making has not changed
RQ4_6	Do you feel the full scale war has affected your involvement in household decision- making?	2.Yes, my involvement in decision-making has changed
		99.I do not know
		98.I do not want to respond

RQ4_7	(If RQ4_6 = yes) How has your involvement	1. My involvement has increased somewhat
		2. My involvement has increased significantly
		3. My involvement has decreased somewhat
	in decision-making changed?	4. My involvement has decreased significantly
		99.I do not know
		98.I do not want to respond
		1.Health (going to the doctors, expenses related to healthcare)
		2.Childcare arrangements
		3.Education (parenting, choice of school, etc.)
	In which areas do you feel that the changes	 Finance (how resources are shared, who decides on expenditures, debt, investment)
RQ4_8	in your involvement in household decisions have been the most noticeable since February 2022?	5.Work (decision on undertaking paid employment/ studying, kind of work taken)
	Pedruary 2022?	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 Feb)
		8.I don't want to answer
		1.Male over 60 years old
		2.Female over 60 years old
	[for each case] Who usually made decisions	3.Male adult (18-59)
RQ4_9	related to \$previous answer\$ before the	4.Female (18-59)
	war?	5.Other: Specify
		6.I do not know
		7.I do not want to answer
	[for each case] Who usually makes decisions related to \$previous answer\$ now?	1.Male older person (60+)
		2.Female older person (60+)
		3.Male adult (18-59)
RQ4_10		4.Female (18-59)
		5.Other: Specify
		6.I do not know
		7.I do not want to answer
		1. Male member(s) of the household
		2. Female member(s) of the household
RQ4_11	Who in your household has the final say	3. Male and female members jointly
NQ#_11	when important decisions are made?	4. Difficult to answer
		5. Other
		6. I do not want to answer

		1. Less than 15 hours
RQ4_12		2. 15-20 hours
		3. 21-30 hours
	Approximately how many hours per week do you spend on household work?	4. 31-49 hours
	you spena on household work.	5. 50 hours or more
		6. I do not know
		7. I do not want to answer
		1. Less than 15 hours
		2. 15-20 hours
	(IE DO1 2 indicatos any mala ar famalas	3. 21-30 hours
RQ4_13	(IF RQ1_2 indicates any male or females aged 0-17) Approximately how many hours per week do you spend on childcare?	4. 31-49 hours
		5. 50 hours or more
		6. I do not know
		7. I do not want to answer
	How does this compare to before the full- scale war?	1.Increased
		2.No change
RQ4_14		3.Decreased
		4.I don't know
		5.I don't want to answer
	Thank you for your timein answering our survey. Your responses are really important for us, and they will be used to gain a better understanding of current challenges caused by the war. All responses will be treated anonymously.	
	<i>[for the enumerator]</i> Are there any additional comments or notes that are relevant to the content of the interview? If so, please add them here.	text

Annex 7: HIA Key Informant Interview Tools

Name:	Affiliation:
Phone Number:	Sector of Organization:
City:	Position:
Pillar:	Notes:

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 vs 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 min to an hour. All 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

- 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 frontline, in liberated territories, in 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 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 decisionmaking 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 gender-based violence), 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 impacting the sense of femininity and masculinity / or gender roles and norms in Ukraine?
- 7. How do you think the war will impact 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

Country: Ukraine Region(s): south and west	Target Group: IDPs, of all age groups 18+ including elderly. (preferably, 4 men and 4 women)	
Format: offline (with videorecording if only the group feels secure to be recorded with clear consent)	Number of groups: 2 (one in the south and one in the west)	
Number of participants: <u>minimum</u> 8	Duration: <u>minimum</u> 2 hours	
Name of the facilitator(s):	Date: TBC	
Location/Venue:	Start & Finish time:	

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 vs 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 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 of 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 herself.

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

ASK RESPONDENT:

		(1)	
Do you have any questions _	No	(0)	
Do I have your permission to continue	Yes	(1)	If NO, let the participant end his participation
with the discussion?		(0)	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

FGD TITLE:	🗌 1) IDPs S	SOUTH 2) IDPs EAST	(tick one)
PARTICIPANTS WHO CONSENTED TO GIVE THEIR CONTACTS FOR FOLLOW UP			
Name	Age	Where they are from originally (city or settlement)	Contact details (phone number)
1			
2			
3			
4			
5			
6			
7			
8			

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 center, 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 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 labor 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, PwDs, 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?
- b. 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.
- c. Have you ever applied to any initiatives or groups that assist and / or defend the rights of the IDPs? Are you a member of such group(s)?
- d. Has the situation changed since the full-scale war?

Roma Focus Group Questionnaire:

- 1. How has your personal and economic situation changed since 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 isolated, excluded, or marginalized in your locality?
 - a. How does this sense of exclusion and marginalization manifest itself in daily life and daily interactions?
 - b. inter-personal (e.g., neighbors) and institutional experiences (e.g., local authorities, aid providers) and economic opportunities (e.g., labor 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 than 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:

- How has your personal and economic situation changed since 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?
 - 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?
 - Healthcare/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 start of the war?
 - e. Has the situation changed since the full-scale war? How?
- 4. Do you feel isolated, excluded, or marginalized in your community?
 - a. 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 centers, in local administrations/service centers, in humanitarian centers)? Please elaborate on your answer.
 - b. 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., neighbors), institutional experiences (e.g., local authorities, aid providers), and economic opportunities (e.g., labor market). Please provide examples.
 - c. Do you think the situation 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 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 carer, or have your carer duties, if at all 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 labor market?
 - c. In your view, are any obstacles undermining your access to the local labor 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 fullscale war, if at all?
 - a. Think about your decision-making role within the family, household, neighborhood, 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
 - b. What kind of obstacles and challenges do you face when you try to access these services?
 - c. How would you say this has changed, if at all, since the 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?