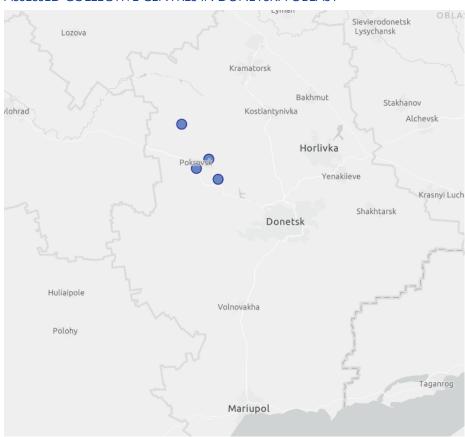
# DONETSKA OBLAST LECTIVE CENTRE ASSESSMENT

Summary of IOM's CCCM Collective Centre Assessment | Q3, 2023



**CLASSIFICATION:** Unrestricted

#### ASSESSED COLLECTIVE CENTRES IN DONETSKA OBLAST



#### **OVERVIEW**

Between May and September 2023, IOM CCCM teams, in collaboration with Oblast authorities and local civil society organizations, conducted CCCM Collective Centre assessment across all Donetska Oblast. Data was collected at the site-level at the request of the Donetska Oblast administration and implemented through key-informant interviews with site managers / focal points as well as conducting observational assessments. All figures and narrative in this fact-sheet cover collective centres which are hosting (and are capable of hosting) 30 persons or more and are indicative of the situation in the sites at the time of data collection. This fact-sheet provides a short overview of the monitoring assessment in the following thematic areas: demographics, vulnerabilities, site management, site environment, health, water, sanitation and hygiene (WASH), food provision, and most urgent needs.

# SITE TYPES

In total, 4 sites were assessed, of which 3 were hosting IDPs at the time of assessment, with 1 centre empty but ready to host. The most common type of site were dormitories (75%), followed by school buildings (25%). In 25% of sites, site managers report that IDPs do not have plans to transit to other locations; while in 50% of sites, IDPs are reportedly both staying and transiting, and in the remaining 25% of sites IDPs are primarily transiting.

# **KEY FIGURES**



collective centres (sites) assessed across Donetska Oblast



IDPs hosted in collective centres (sites)



total hosting capacity



of sites are dormitories



of sites report that IDPs do not have plans to transit to other locations



of IDP-hosting sites report the presence of persons with disabilities



of sites are managed by the government



of IDP-hosting sites report presence of unaccompanied elderly persons



of sites do not have a health worker present or regularly visiting



of site do not have a communal area for IDPs to eat food



These assessments, conducted over the third quarter of 2023, were made possible through the generous support provided by the Bureau for Humanitarian Assistance (BHA).



#### **DEMOGRAPHICS**



HEALTH



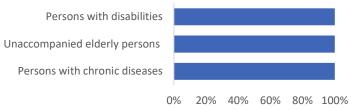
Out of a total of 131 IDPs currently hosted in the sites across the oblast, 55% are female and 45% are male; 8% are minors (under the age of 18), 72% are adults (aged between 18 and 59), and 20% are elderly (over the age of 59).

# **VULNERABILITIES**

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A total of 9 IDPs (7% of total IDPs) across 3 sites (100% of IDP-hosting sites) were reported to be persons with disabilities. Unaccompanied elderly persons and persons with chronic diseases were also reported across all sites.

Top vulnerable groups (% of sites with presence of)



# SITE MANAGEMENT



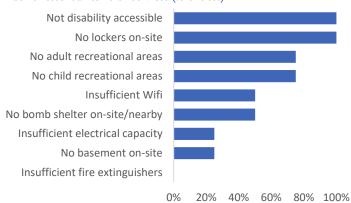
100% of sites are managed by the government. Three quarters of sites (75%) report staff presence 24 hours of the day while one quarter 25% report periodic presence only. IDP registration upon arrival is reported across all sites, and an allocation plan for vulnerable groups exists in 75% of sites. In half of the sites (50%), IDPs are reportedly being charged money to stay.

#### SITE ENVIRONMENT



In all sites, the site manager reports that they expect the site to remain open for more than six months. The below chart presents gaps in site provision of key items and services. Critically, all sites are not disability accessible, there are insufficient WiFi services in 50% of sites, no bomb shelter on-site or nearby in 50% of sites, and insufficient electrical capacity in 25% of sites.

Lack of essential items or services (% of sites)



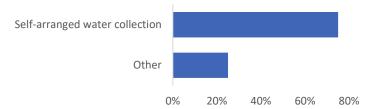
There is no health worker present or to regularly visit in 75% of sites, and problems in accessing medicines are reported in 25% of sites.

#### **WASH**



On average, there are 11 toilets and 9 showers per site for the IDP population. Toilets and showers are not gender-segregated in 75% of sites, nor disability-accessible in 100% of sites. A critical 21% of sites are not connected to the central sewage system. The below chart details the primary ways by which IDPs access drinking water; of which, the most frequently reported way was through self-arranged water collection.

# Primary way by which IDPs access drinking water (% of sites)



# **FOOD PROVISION**



25% of sites reported that there was no available communal space for IDPs to eat food, while no sites reported that there was no kitchen area available for IDPs to prepare food. The most frequently reported way by which IDPs have access to food in sites was by personal preparation (100%), followed by food provisions by the site or NGOs (both 25%).

Ways by which IDPs access food (% of sites)





0.0% Social

## MOST URGENT NEEDS



The most urgent needs, as identified by site managers are displayed in the below table. Overall, site upgrades and repairs, wash services (including hygiene kits), NFIs for facilities, and shower upgrades were equally selected by one site each.

Table 1: Highest priority need (% of sites)

1. Site upgrades and repairs	25.0%
2. WASH services (including hygiene kits)	25.0%
3. NFIs for facilites	25.0%
4. Shower upgrades	25.0%

