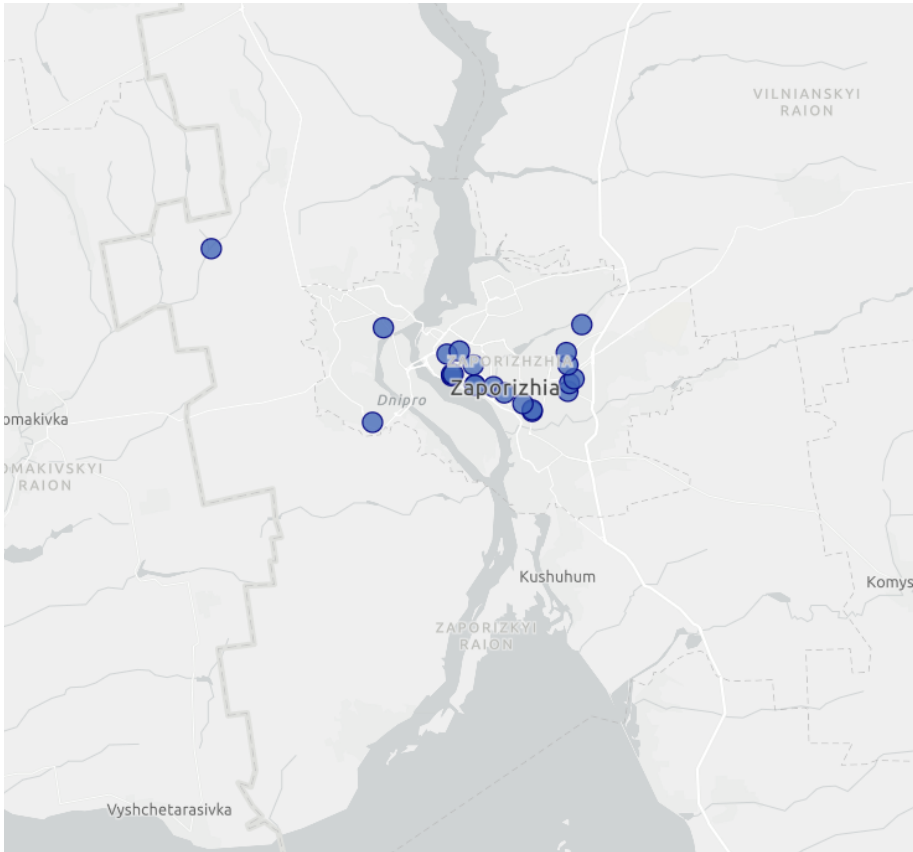


ZAPORIZKA OBLAST COLLECTIVE CENTRE ASSESSMENT

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

CLASSIFICATION: Unrestricted

ASSESSED COLLECTIVE CENTRES IN ZAPORIZKA 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 Zaporizka Oblast. Data was collected at the site-level at the request of the Zaporizka 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, 23 sites were assessed, 22 of which all were hosting IDPs at the time of assessment, with 1 site empty but ready to host. Over three-quarters (78%) of the assessed sites (78%) were dormitories, 9% were school buildings, while the remaining 16% were equally distributed between kindergartens, government buildings, and hotels. Across 91% of the sites, site managers report that the majority of IDPs do not plan to transit, while in 9% of sites, IDPs are reportedly both planning to stay and transit.

KEY FIGURES

 **23**
collective centres (sites) assessed
across Zaporizka Oblast

 **2,124**
IDPs hosted in collective
centres (sites)

 **4,989**
total hosting capacity


 **78%**
of sites are dormitories

 **91%**
of sites report that IDPs do not
have plans to transit to other
locations

 **36%**
of IDP-hosting sites report
the presence of persons with
disabilities

 **87%**
of sites are managed by the
government

 **64%**
of sites report presence of
unaccompanied elderly persons

 **48%**
of sites do not have a health
worker present or regularly
visiting

 **4%**
of sites are not connected to
central sewage system

 **17%**
of sites report that there is no
kitchen available for IDPs to
cook food

DEMOGRAPHICS



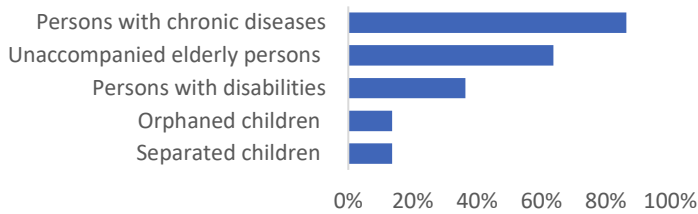
Out of a total of 2,124 IDPs currently hosted in the assessed sites, 63% are female and 37% are male; 18% are minors (under the age of 18), 67% are adults (aged between 18 and 59), and 15% are elderly (over the age of 59).

VULNERABILITIES



A total of 28 IDPs (1% of total IDPs) across 8 sites (36% of IDP-hosting sites) were reported to be persons with disabilities. Persons with chronic diseases were reported in 86% of IDP-hosting sites, unaccompanied elderly persons in 64%, orphaned children in 14%, and separated children in 14%.

Top 5 vulnerable groups (% of sites with presence of)



SITE MANAGEMENT



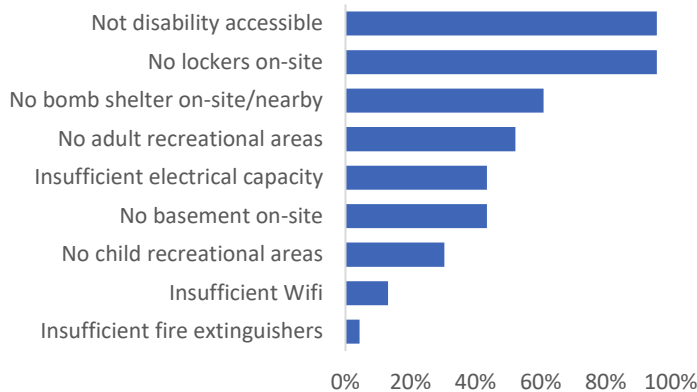
87% of sites are reportedly managed by the government, 9% by local NGOs, and 4% by private individuals. All sites report staff presence 24 hours of the day and IDP registration upon arrival. An allocation plan for vulnerable groups exists in 22% of sites. 39% of site managers report that IDPs are being charged money to stay at the centre.

SITE ENVIRONMENT



In 96% of sites, the site manager reports that they expect the site to remain open for more than six months, and in the remaining 4% they expect the site to close within 6 months. The below chart presents gaps in site provision of key items and services. Critically, 96% of sites are not disability accessible, 61% do not have a bomb shelter on-site or nearby, and 43% have insufficient electrical capacity.

Lack of essential items or services (% of sites)



HEALTH



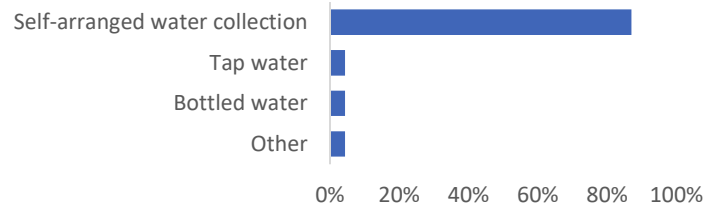
There is no health worker present or to regularly visit in 48% of sites, and problems in accessing medicines are reported in 4% of sites.

WASH



On average, there are 19 toilets and 14 showers per site for the IDP population. Toilets and showers are not gender-segregated in the majority of sites (74% and 78%, respectively), nor disability-accessible in 100% of sites. A critical 4% 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 self-arranged water collection (87%).

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

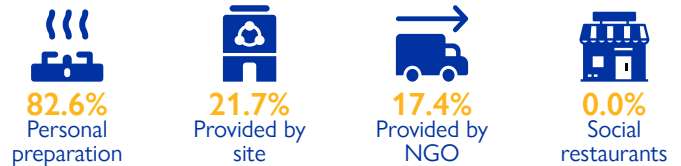


FOOD PROVISION



4% of sites reported that there was no available communal space for IDPs to eat food, and 17% of 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 (83%), followed by food provisions by the site (22%).

Ways by which IDPs access food (% of sites)



MOST URGENT NEEDS



The most urgent needs, as identified by site managers are displayed in the below table. Overall, the most frequently reported highest priority site need was found to be shower upgrades (26%), followed by site upgrades and repairs to structural elements (17%).

Table 1: Highest priority need (% of sites)

1. Shower upgrades	26.1%
2. Site Upgrades & Repairs - Structural elements	17.4%
3. None	13.0%
4. Hygiene items	8.7%
5. Kitchen Upgrades	8.7%