

IOM's ASSISTANCE

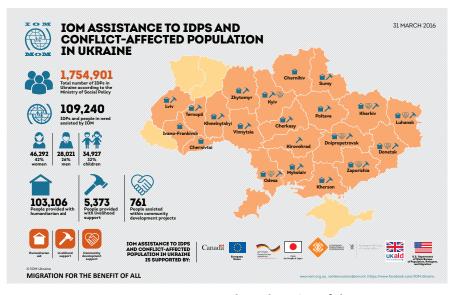
TO CONFLICT-AFFECTED PEOPLE IN UKRAINE

MONTHLY REPORT

MARCH 2016

HIGHLIGHTS

- The total number of internally displaced persons (IDPs) from Crimea and Eastern Ukraine reached 1,754,901 as of 28 March 2016, according to the Ministry of Social Policy.
- IOM has assisted 109,000 vulnerable IDPs and conflict-affected people in 21 regions of Ukraine.
- The conflict in Ukraine has deeply affected the lives of 580,000 children living in non-government-controlled areas (NGCAs) and close to the contact line. Of these, one in three need psychosocial support.
- 9,187 people were killed and 21,085 wounded over two years of condlict in Ukraine, OCHA reports.



Enlarged version of the map on page 6

IOM's RESPONSE TO DATE

REBUILDING THE DONBAS

Six social institutions in villages and towns of Donetsk Region have recently reopened their doors for visitors after the IOM-conducted refurbishment funded by European Union.

Over 28,000 local residents and about 3,000 internally displaced persons (IDPs) will be able to benefit from services of culture clubs in Mykolaivka and Paraskoviivka, a children's and youth creativity centre in Chasiv Yar, music school in Oleksandrivka, ambulatory in Krasne and secondary school in Zorya.



The youngest clients of the children's and youth creativity centre in Chasiv Yar



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MONTHLY REPORT, MARCH 2016



More classes on sewing can be held in Chasiv Yar with new equipment

Renovations included the installation of new roofs, windows and doors, upgrading heating systems, and refurbishment of concert halls. Audio and video equipment, interactive boards, computers and sewing machines were purchased to be used at master classes and other events contributing to the establishment of trustful relationships between IDPs and local residents, and in general promoting the inclusion of the diverse local population in community activities.

The EU and IOM support the integration of IDPs into host communities in Kharkiv, Dnipropetrovsk, Zaporizhia, Odesa, Donetsk and Luhansk regions. The initiative groups, consisting of both local residents and displaced people, selected local social institutions for renovation within the project. Local authorities also contributed to the refurbishment. In total, up to 70 culture clubs, libraries, secondary and music schools, and other social institutions are being re-opened to serve the needs of displaced people and local communities in six regions of Ukraine.

2



A band from Paraskoviivka



Ribbon-cutting ceremony at the village culture club in Mykolaivka



Souvenirs to reward the efforts of the Chasiv Yar community members



MONTHLY REPORT, MARCH 2016

In March, a series of IOM-organized events brought some diversity and action into the life of Bakmut (formerly Artemivsk), Donetsk Region.

The city's central municipal library was officially opened after renovation conducted by IOM with funding from the Government of Japan. During fighting, the library's windows were damaged, so IOM helped to install new windows. The premises were also adjusted to serve the needs of people with disabilities. Now, the library will be used by all members of the community, including IDPs and disabled people, for all kinds of social integration and cohesion events.

A community festival also took place in Bakhmut. More than 200 representatives from Kostiantynivka, Druzhkivka, Kramatorsk, Svyatohirsk, Severodonetsk, Lysychansk, Borivske, and Bakmut itself participated in the event to celebrate the conclusion of the Japan-funded IOM project supporting community stabilization in the government-controlled areas of Donetsk and Luhansk regions. IDPs, returnees and locals, who benefited from business training and self-employment grants provided within the project, had an opportunity to present their products and services at a special fair organized in the margins of the festival.

The event provided a platform for sharing best practices, and there



Mr. Michio Harada, Deputy Head of Japan Mission in Ukraine, presents a memorable gift to the Bakhmut community



A concert was a culmination of the community festival in Bakhmut

were also numerous group discussions on the most problematic issues for the conflict-affected communities in the Donbas, such as overcoming psychological trauma and stress, integration of IDPs into local communities, unemployment, and social development.

Overall, the Japan-funded IOM project provided for the repair and renovation of 21 social infrastructure facilities, which act

as social centres for more than 20,000 persons, including almost 9,000 IDPs and other vulnerable groups. Another focus of the project was to provide micro-grants to IDPs and persons affected by the conflict to establish or further develop their own business. More than 600 people attended business trainings, and over 400 beneficiaries were selected to receive grants for equipment, worth up to USD 900 for each participant.



MONTHLY REPORT, MARCH 2016

LIFE STORIES

FIRST AID

IOM HELPS VULNERABLE IDPS COVER THEIR

MEDICAL EXPENSES

According to the official data, approximately
60 per cent of IDPs in
Ukraine are pensioners,
12.5 per cent are children
and 4 per cent are people
with disabilities. With the dramatic devaluation of the national currency and economic
decline, medical expenses skyrocketed for all Ukrainians. For
displaced people, who lost their
homes and jobs and were separated from their families, the situation is even tougher.

IOM, with funding provided by the Government of Lithuania, was able to cover the costs of medical and psychological assistance of over 900 IDPs. Unconditional cash assistance, which has been provided by IOM to vulnerable IDPs, including people with disabilities and the elderly, with funding from ECHO, and the governments of Germany and Norway, is in many cases used by beneficiaries to buy medicines and medical goods, pay for tests and medical consultations.

Healthcare ranks second among the spending priorities of over 9,000 cash assistance beneficiaries served by IOM in nine regions of Ukraine. On average, 25% of the funds received from IOM were spent on medical needs. According to the post-distribution monitoring, conducted in December 2015, 55 per cent of the sur-

Halvas as well as many other IDRs

Halyna, as well as many other IDPs living with diabetes, was able to buy a glucometer she strongly needed with IOM's support

veyed beneficiaries of the cash assistance project have a household member with a chronic disease, while 43 per cent have household members with a disability. The average monthly spending of these IDP households on treatment, according to an IOM survey, is UAH 1,470 (about USD 55), while the average income per family is UAH 3,432. Below are the stories of some people whom IOM was able to assist with medical expenses so far.



MONTHLY REPORT, MARCH 2016

Halyna* welcomes us on the threshold of a multistory house in a remote area of Kharkiv where she lives in her daughter's apartment. She left her native Dokuchaevsk, located 40 km from Donetsk, in autumn 2014, but sometimes she goes back to visit her aunt: "Without me, my aunt would die, I travel to see her as often as possible. She is the only person still waiting for me there."

The final decision to leave came after heavy shelling of her neighbourhood, when one of the shells exploded in the courtyard. "I remember that day like it was yesterday," Halyna says with a trembling voice. "My grandson saw the explosion through the window and rushed to me to another room. We fell down on the floor, even not clearly realizing what had just happened. Later on, his ear started bleeding, apparently from the blast or even out of fear. The child experienced a lot of stress, which caused him to develop a serious stutter. I decided to go immediately to Volnovakha (a city located 100 km from Dokuchaevsk, controlled by the Ukrainian Government), and further to Kharkiv".

Halyna admitted that because of the war stress she's been suffering from serious health problems: "A month ago I swiftly started to suffer from femur bone destruction; in order to stop this process I have to take expen-

sive medication. Moreover, due to my diabetes, my vision has been quickly worsening, though officially I'm still considered able to work. Who would offer me a job with such a diagnosis, if even healthy young people are largely unemployed?"

Halyna goes into another room and brings a white box: "This is what I've bought on IOM's cash assistance, a glucometer. Without your money I would not be able to afford such a purchase. I have a small pension, and state assistance for IDPs is paid irregularly, but this device has turned out to be vital for me".

for learning languages. "Just imagine, she's studying Mandarin!" Halyna says proudly. Hanna and her family, displaced

Despite her declining health, Halyna is trying her

best to actively help around the house, especially

taking care of her granddaughter, who has a knack

from Kyrovsk, Luhansk Region, to Kharkiv

Hanna is a diabetic and suffers from a chronic disorder of the endocrine system. Her family income was largely spent on medicine even before displacement. However, when they fled their home and were left without jobs, they couldn't afford medicines any longer. Also, the social payments that they received as IDPs were spent on rent and food. IOM support was crucial for Hanna. She received the required treatment and prescribed medicines.

Veronika and her daughter, displaced from Luhansk to Odesa

Both Veronika and her four-year-old daughter live with disabilities. Back home in Luhansk, they were admitted to a hospital for medical assistance. But when overnight shelling grew ever nearer, Veronika packed

> a suitcase and left with her daughter for Odesa. Here they found shelter in a collective centre for IDPs. They were provided with food and essential hygiene items, but no organization or state agency in Odesa could help them with medicine. IOM provided priority medicine for Svitlana and her daughter. According to Veronika, this restored her hope and gave her strength to go on.

Ilona, displaced from Khartsyzsk, Donetsk Region, to Kharkiv

Ilona fled home when the fighting intensified near her

Svitlana, mother of three, left Donetsk when pregnant:

"I received medicines for my children that they needed but I couldn't afford. My children got better. I was really depressed in the beginning but step-by-step things started getting better."



MONTHLY REPORT, MARCH 2016

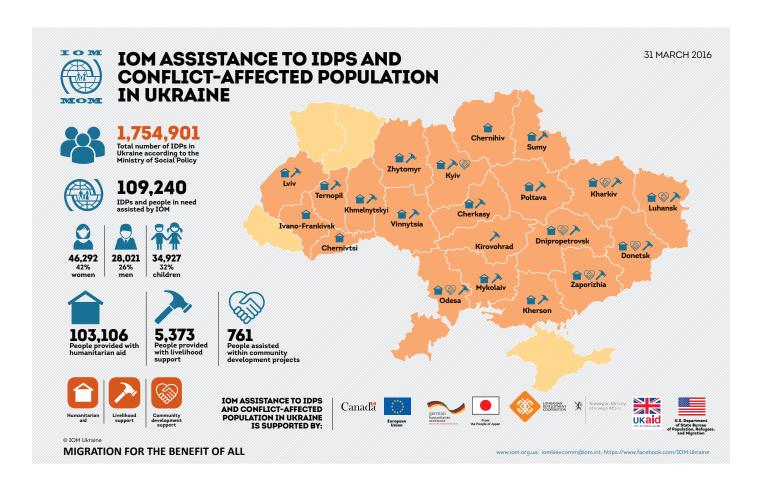
town in Donetsk Region. In Kharkiv, she went through all the challenges that IDPs face: financial troubles, search for a place to live, need for clothing and other necessities. But most of all, Ilona has struggled with health problems. Because of weak knee joints, she barely could walk and also couldn't afford expensive medicine. Besides, she suffered emotionally, as she was constantly worried about her son who stayed in the conflict zone. Ilona received both medical and psychological assistance from IOM. As a result, her pains have largely been relieved and she has also overcome her feelings of loneliness and anxiety.

Lidiia, mother of two, moved from her house in Luhansk to a dormitory in Odesa:

"I could only cope with my depression, because I felt responsibility to provide for my children. My older daughter is ten and younger is four years old. When I came to Odesa, my younger daughter felt ill and I spent all my savings on medical tests and medicine that was prescribed. When the money ran out, I didn't know what to do. So when I received an inhaler for my daughter and could pay for the treatment she needed, it was the first time in one-and-a-half years that I felt relieved. In a way, it gave me faith in a better future."

*All names in the article have been changed

IOM's RESPONSE MAP





MONTHLY REPORT, MARCH 2016

BACKGROUND ON THE CRISIS

In April 2014, armed groups in the Donbas region of eastern Ukraine (Donetsk and Luhansk) began to seize buildings and arms. As a result of ongoing fighting between armed groups and government forces, as well as the events which occurred in the Autonomous Republic of Crimea (ARC) in March 2014, many people have been forced to flee their homes and have become increasingly vulnerable. Most leave with few belongings and are in need of shelter, food and nonfood assistance, as their savings are often meager, social benefits take time to re-register, and livelihoods options may be restricted. Concurrently, while grassroots volunteer organizations, civil society and host communities have provided a robust response to the immediate needs of IDPs, the economic crisis in Ukraine has hampered opportunities for more durable solutions, in part through employment and community stabilization. Those staying in the Donbas, particularly in areas affected by fighting along the contact line, face imminent security threats. The provision of basic services has been disrupted, supplies are increasingly limited, and economic activity has been crippled. Ongoing daily ceasefire violations continue to be reported.

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IOM's ASSISTANCE TO CONFLICT-AFFECTED PEOPLE IN UKRAINE IS SUPPORTED BY:















From the People of Japan

In line with IOM's global strategy, the IOM Mission in Ukraine aims at advancing the understanding of the opportunities and challenges of migration in the Ukrainian context. Maximizing those opportunities and minimizing the challenges presented by migratory movements are the quiding principles of all activities and programmes the Mission engages in.

IOM Ukraine fights trafficking in human beings, assists the Government in addressing the needs of internally displaced persons and dealing with irregular migration, improving its migration management system, and creating migrant-inclusive health practices and policies. At the same time, IOM Ukraine engages in exploring and promoting regular channels for Ukrainian labour migrants, harnessing the development potential of migration, disseminating migration information and managing migration movements and integration of ethnic minorities, promoting the benefits of cultural diversity, and counteracting xenophobia and intolerance.

During the 20 years of its presence in Ukraine, IOM has assisted over 400,000 migrants (Ukrainians and other nationalities), potential migrants, victims of trafficking and other vulnerable groups, directly or through its project partners.

Views and opinions expressed in this publication do not necessarily reflect the view of IOM or its member states