

# Situation Overview: Winter Assessment of Government-Controlled Areas within 5km of the Line of Contact

Ukraine, February 2018



Funded by  
European Union  
Humanitarian Aid

**REACH** Informing  
more effective  
humanitarian action

## Introduction & Key Findings

Eastern Ukraine experiences harsh winters lasting from November to March, with temperatures reaching below -20 degrees Celsius. Such extreme conditions impact the humanitarian needs of populations living in conflict-affected areas due to increased difficulty accessing services, damage to critical infrastructure affecting water and heating systems, and decreased availability of nutritious foods. These issues are more pronounced along the line of contact (LoC) where ongoing shelling disrupts the provision of regular services and damages critical infrastructure.

In September 2017, REACH conducted a household survey in the settlements within 5km of the LoC assessing the humanitarian situation in the Government-Controlled Area (GCA) of the Donetsk and Luhansk oblasts. Based on the specific winter concerns and objectives set out by REACH partners, this study attempts to identify key changes in humanitarian needs that occur during the winter period in order to provide an evidence-base for humanitarian actors to implement effective future programming for winterisation assistance to people living in conflict-affected areas.

This situation overview outlines the results obtained in the February 2018 household survey, and is supplemented by a Non-Government Controlled Area (NGCA) overview as well as a cash assistance fact sheet.

## Population & Displacement

The area along the LoC has a significant population of vulnerable groups including pensioners, internally displaced persons (IDPs) and returnees. This is as a result of the out-migration of less vulnerable people with the means and ability to live and work elsewhere. Half of the displaced persons in the area along the line of contact arrived in 2014, and have no plans to return to their area of origin (AoO) in the foreseeable future due to security concerns, political differences, or lack of accommodation. The region is also highly urbanised with 83% of the population living in urban settlements.

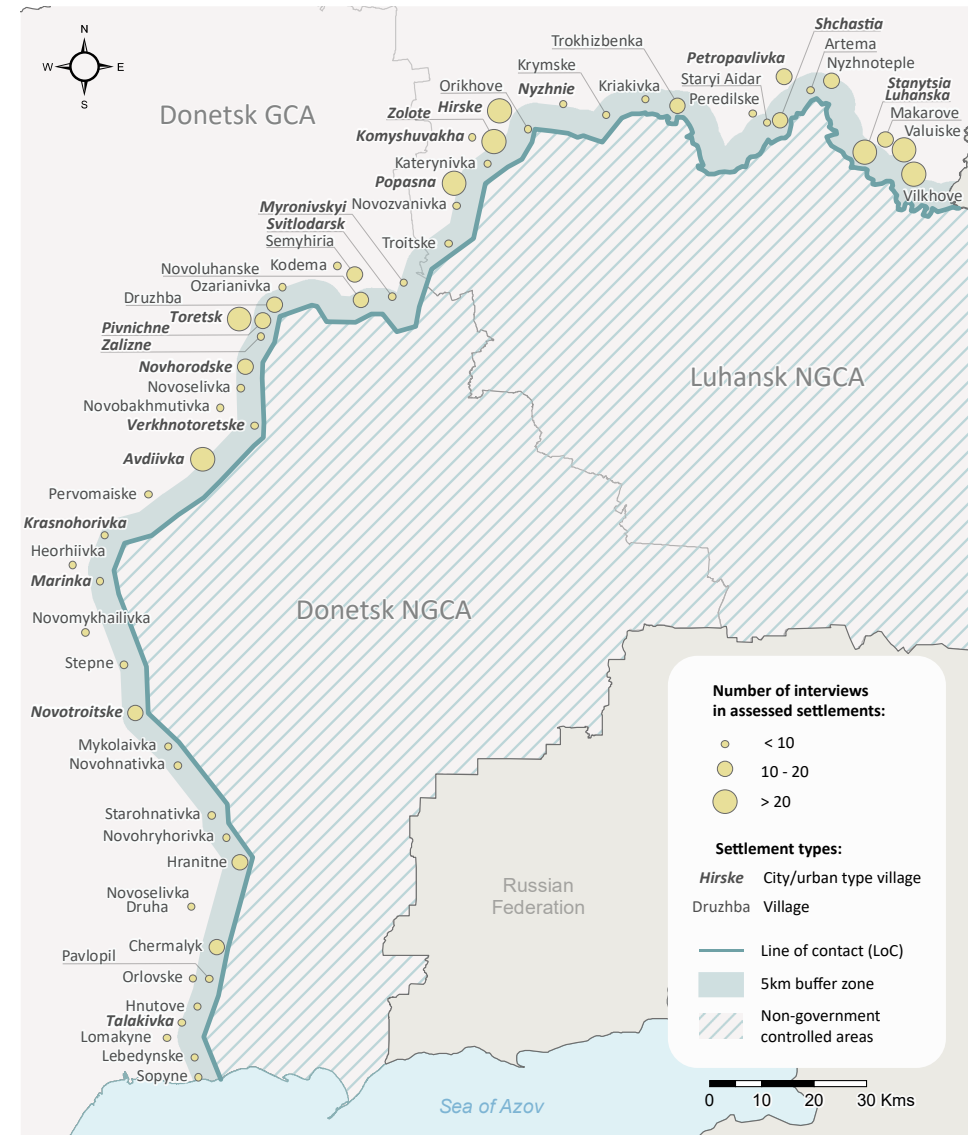
## Utilities

Issues facing households regarding utilities vary dramatically between urban and rural populations, as well as between Donetsk and Luhansk oblasts. Urban households are much more likely to have access to central heating, whereas rural households more often rely on gas, coal or wood to heat their accommodation. With a smaller proportion of households relying on coal in Luhansk oblast, the corresponding greater reliance on collecting firewood poses additional protection concerns as forests are reported as being heavily contaminated by landmines and unexploded ordnances (UXO).

## Protection

Physical protection and security concerns continue due to ongoing and active conflict in the area assessed. The location of the LoC has remained relatively stable since early 2015, thereby limiting the geographic scope of active

Map 1: Assessed Settlements



conflict and increasing the concentration of mines and explosive remnants of war (ERW). These landmines contaminate forests, urban areas and agricultural land, posing significant risks to populations in the area. High military presence and restricted movement due to checkpoints adds an additional burden to populations in the area.

## Education

Rural households most commonly cite long distances to educational facilities as a barrier to accessing education, whereas urban households report a lack of qualified teaching staff. While the overall majority of households report access to psychosocial services in schools, less than a third of rural households report availability compared to nearly two thirds of urban households. Inadequate heating in schools affects a minority of households, consistent across rural and urban areas and between oblasts.

## Health

Over all, 74% of households report greater health concerns during the winter period. More than 40% face barriers to accessing healthcare during the winter months and rural households are more severely affected with 51% facing barriers to access, many of whom cite distance to health facilities as a leading obstacle. This trend is of particular concern regarding specialist treatment, which rural households are significantly less likely to report as being available to household members.

## Food, Markets and Livelihoods

Since the summer assessment, there has been a 61% increase in the percentage of households with poor or borderline food consumption

scores, and large proportions of households report reduced quality and variety of fruits and vegetables available to them. Of particular concern are single-headed households and pre-pension age heads of household, for whom Food Security Index scores are significantly lower than other household types. Male-headed households earned 13% more per household member than female-headed households. Unemployed household members (both HoHH and other HH members) cite a lack of income generating opportunities in their communities as well as closing of enterprises as key drivers of unemployment in the region.

## Shelter & NFIs

Fewer households report living in damaged accommodation than in the summer period, potentially because harsh weather conditions require households to either repair their shelter or move elsewhere for the season. The vast majority of households with damaged shelter report conflict/shelling as the cause. Concerning NFIs, rural households are more likely to lack a number of essential winter items such as personal insulation or appropriate footwear for all household members than urban ones.

## WASH

More than one-third (34%) of households continue to report drinking untreated water, particularly in rural areas where households are more likely to be drinking groundwater from boreholes or tube wells. Rural populations are also much more likely to use outdoor toilets (69% compared to 25% of urban households), which is particularly burdensome for vulnerable populations during harsh winter weather.

## Methodology

The research used a mixed methods approach composed of both quantitative and qualitative methods of data collection.

The quantitative component involved 577 face-to-face household interviews within 5km of the line of contact in GCA, sampled to be statistically representative of households in the region (90% confidence interval and a 7% margin of error). This area closest to the LoC was outlined in the 2018 Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP) as having the highest humanitarian needs across the GCA. To better understand the varying needs across geographical areas, sampling provided statistical generalisability in both urban and rural areas in both oblasts.

The qualitative component involved 58 focus group discussions (FGDs) with 13 enumerators, and 3 team leaders to evaluate their direct observations of conditions in the settlements that were visited.

Primary data was collected using the KOBO platform, and enumerators were trained in

the use of KOBO as well as interviewing techniques and issues regarding the protection of vulnerable populations.

## Limitations

- The geographic scope of data collection limits the generalisability of the findings to the 5 km area along the LoC.
- Relatively low numbers of IDP households living in the assessed area reduces the generalisability of findings on IDP households when compared to the 2016 Inter-Agency Vulnerability Assessment (IAVA).
- The protracted nature of the conflict potentially leads respondents to under-report risks as they become normalised.
- Though the data has been cross-checked with secondary data and direct observations, Data is self-reported which could potentially introduce reporting bias.
- When examining subsets of each sampling strata (ex. HH with children in Donetsk oblast), confidence intervals are lower.

Table 1: Assessment time-line

Month	Research Phases
Nov. 2017	Research design
Dec. 2017 – Jan. 2018	Questionnaire design
Feb. 2018	Data collection
Mar. 2018	Data analysis
Apr. 2018 – May 2018	Report drafting & validation

Table 2: Sampled households

	Rural*	Urban*	Total
Donetsk oblast	57	310	367
Luhansk oblast	35	175	210
Total	92	485	577

\* Note: settlements in Ukraine are officially classified as “village,” “urban-type village,” or “city.” This assessment classifies villages as *rural* and urban-type villages/cities as *urban*.

## Population & Displacement

### Population

This section examines the demographic and displacement trends of the area within 5 km of the line of contact in the GCA. The assessment used a household member profiling strategy to better understand the displacement and demographic characteristics of all members of households.

Overall, the assessed area has a greater proportion of women to men, with 57% of household members reporting as female and 43% male.

The Ukrainian government defines certain groups of people as having a vulnerability and therefore potentially eligible for additional social benefits. Forty-three per cent (43%) of the total household population reported at

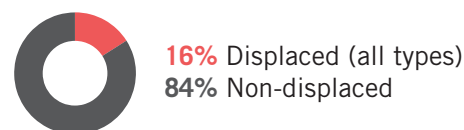
**Table 3: Household size vs. Head of Household (HoHH) age, female-headed households**

	18-35	36-50	51-60	60+
1	0.4%	1%	6%	16%
2	2%	3%	4%	5%
3+	3%	5%	2%	5%

**Table 4: Household size vs. HoHH age, male-headed households**

	18-35	36-50	51-60	60+
1	1%	1%	1%	3%
2	2%	2%	7%	10%
3+	8%	8%	3%	3%

**Figure 1: Household IDP status**

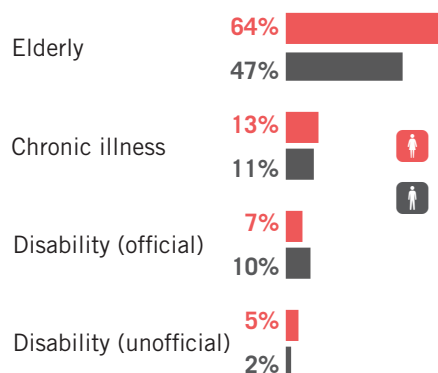


**Figure 2: Types of household displacement**

Household partially displaced*	6%
Displaced with IDP status	4%
Returnee with IDP status	4%
Displaced no IDP status	2%

least one of these vulnerabilities (see Figure 3). Female heads of household tend to be more likely to have at least one vulnerability, with 66% of female-headed households having a vulnerable household head.

**Figure 3: Most reported HoHH vulnerabilities by HoHH gender**



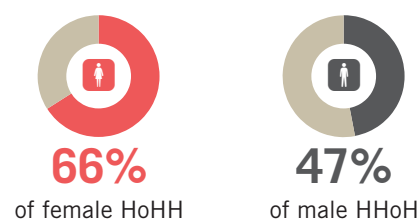
Elderly people made up the largest vulnerability group (37% of the population of assessed households were pensioners), followed by people living with chronic illness that affects their quality of life (9%). Seven per cent (7%) of household members reported having an officially recognised disability. Of disabled household members, the vast majority reported not having or needing an official carer or social worker (98%).

Notably, elderly female heads of household were significantly more likely to be living alone than to be living with one or more other household members, with 16% of all households assessed being elderly women living alone. Elderly male heads of household much less frequently lived alone at only 3% of assessed households. Households headed by younger people, both male and female, were much more likely to contain more household members (less than 2% of assessed households contained people between 18-35 living alone).

### Displacement

As an area of active conflict, much of the assessed area has been at various times

**Figure 4: Proportion of HoHH with at least one vulnerability**



government controlled and non-government controlled. Overall, 16% of households reported being IDPs or returnees. Of this 16%, the largest group report being “partially displaced,” meaning at least one member of the household is displaced (Figure 2). Four per cent (4%) of households report being entirely displaced with official IDP status, and 4% of households report being returnees with official IDP status. There is little variation between rural and urban households regarding the proportion that are displaced, although urban households are slightly more likely to report being displaced or returned than rural households.

Of displaced/returned households, the majority (55%) report at least one member being eligible to receive IDP benefits, however 35% of households with members who are eligible to receive benefits report not receiving them.

Half of displaced households arrived in their host community in 2014 early in the conflict, and the majority of displaced households (59%) report having chosen their host community due to family connections, followed by proximity to their home in the NGCA (18%) or due to free or cheap accommodation (18%).

While most households displaced from NGCA have no concrete plans to move back (51%), nearly one-fifth of displaced households (19%) report that they do have concrete plans to return. The top three reasons that households report for not planning to return to their previous area of residence are 1) security concerns, 2) political reasons and 3) shelter in NGCA is destroyed or in poor condition.

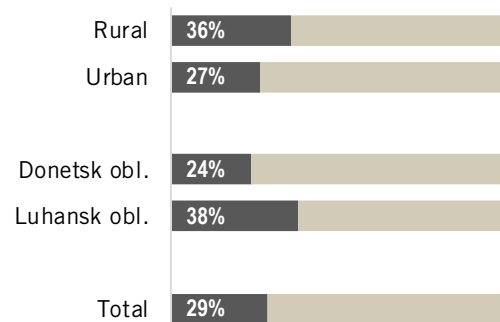
\*Refers to households reporting some IDP members and some non-displaced members

## ❄ Heating & Utilities

This section examines trends and issues facing households with regards to heating and utilities. Heating and utilities are particularly important in the winter period, as even brief disruptions can cause life-threatening consequences for households. There is variation between rural and urban areas, as well as Luhansk and Donetsk oblasts in fuel sources as well as issues surrounding heating and utility use.

Across the area of assessment, 38% of households have access to central heating of some kind. However, this access is concentrated in urban areas and insufficient for many households as only 22% of households report using centralised heating as their primary heating source. In rural areas, only 3% of households have access to central heating, and more often rely on gas (34%), wood (33%) and coal (26%) as the primary fuel source for heating. Importantly, nearly half (46%) of households in rural areas of Luhansk oblast heat their homes using wood increasing

**Figure 5: Per cent of HH reporting insufficient indoor warmth**



protection issues around mines and UXOs in forests, where firewood is collected.

Irregular electricity shortages are relatively common across geographic areas, with 42% of households reporting some kind of electricity shortages in the 30 days prior to data collection. Households in rural areas were more likely to report irregular electricity shortages at 64% of households.

Gas shortages were much less commonly reported, with only 4% of households reporting gas shortages in the 30 days prior to assessment. Rural areas reported slightly higher rates of gas shortages (6%) than urban areas (4%).

With harsh winter temperatures, heating shortages have a significant impact on the health and well-being of residents. Of households across the assessed area 11% reported experiencing some heating shortages over the 30 days prior to assessment. This rate was particularly high in rural areas, where 37% of households had experienced heating shortages, and 23% of households had experienced heating shortages of more than

a day. Fuel shortages contribute to nearly a third of households (29%) reporting insufficient indoor warmth, even higher in rural households (36%) than in urban households (27%).

Lack of fuel and insufficient indoor warmth have also caused households to engage in negative coping mechanisms in response to some of the issues posed by winter conditions (Figure 7). Forty-two per cent (42%) of households use at least one such coping mechanism, including using fuel sparingly, (31%), maintaining a reduced temperature in their living quarters (20%), only heating the bedrooms of their accommodation (11%), reducing the number of hours that they heat their accommodation (11%). These coping mechanisms were used in similar proportions across urban and rural areas and between oblasts.

Comparing the average number of rooms perceived to be warm enough to the average total number of rooms in household accommodation helps illustrate the use of these negative coping mechanisms. Rural households report a lower proportion of rooms in their accommodation as being warm enough

with a ratio of 0.86, compared to 0.91 in urban areas.

While data for this assessment was collected in February, 23% of households reported anticipating not having sufficient heating fuel for the remainder of the winter, particularly in rural areas where 43% reported insufficient fuel.

The impact of fuel shortages is exacerbated by the increased average length of the heating season reported by rural households. While the majority of households across all geographic areas reported the heating season beginning in October and ending in April, 20% of rural households reported that the heating season lasted until May of last year, compared to only 6% of urban households. Likewise 16% of rural households reported the heating season beginning in September.

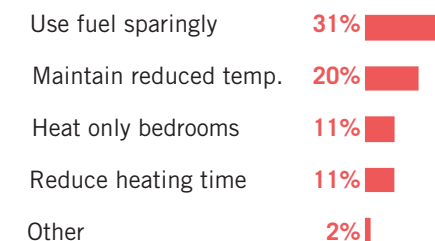
**Figure 6: Electricity shortages reported by all households**



**Table 5: Household main source of fuel for heating**

	Donetsk Rural	Donetsk Urban	Luhansk Rural	Luhansk Urban	Total
1. Gas	27%	27%	46%	51%	36%
2. Coal	39%	25%	5%	24%	25%
3. Central heating (only)	0.5%	34%	0%	12%	22%
4. Wood	24%	5%	46%	8%	10%
5. Other	9%	9%	2%	5%	7%

**Figure 7: Use of coping strategies for households reporting insufficient fuel**

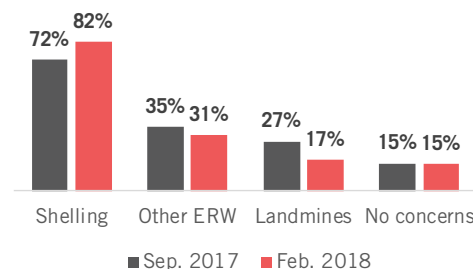




This section examines the trends in protection issues between summer 2017 and winter 2018 in the assessed area, which continues to face increased physical protection issues significant military presence compared to other areas of the GCA. High proportions of households reported concern over shelling (82%), UXOs (31%) and landmines (17%). Shelling appears to be of particular concern for households in Luhansk oblast, where 87% reported it as one of their top three physical security concerns. The issue appears to be affecting an increasing proportion of households compared to summer 2017 when 70% of households reported concern over shelling. Concern over UXOs and landmines decreased slightly over this same period, potentially due to snow cover reducing the accessibility of mined and contaminated areas.

While households in Luhansk oblast report greater concern over shelling, households in Donetsk oblast report a greater increase in concern since September 2017, when 71% of households reported concern compared to 87% in February 2018. Households in Donetsk

**Figure 8: Change in HH security concerns, Sep. 2017 to Feb. 2018**



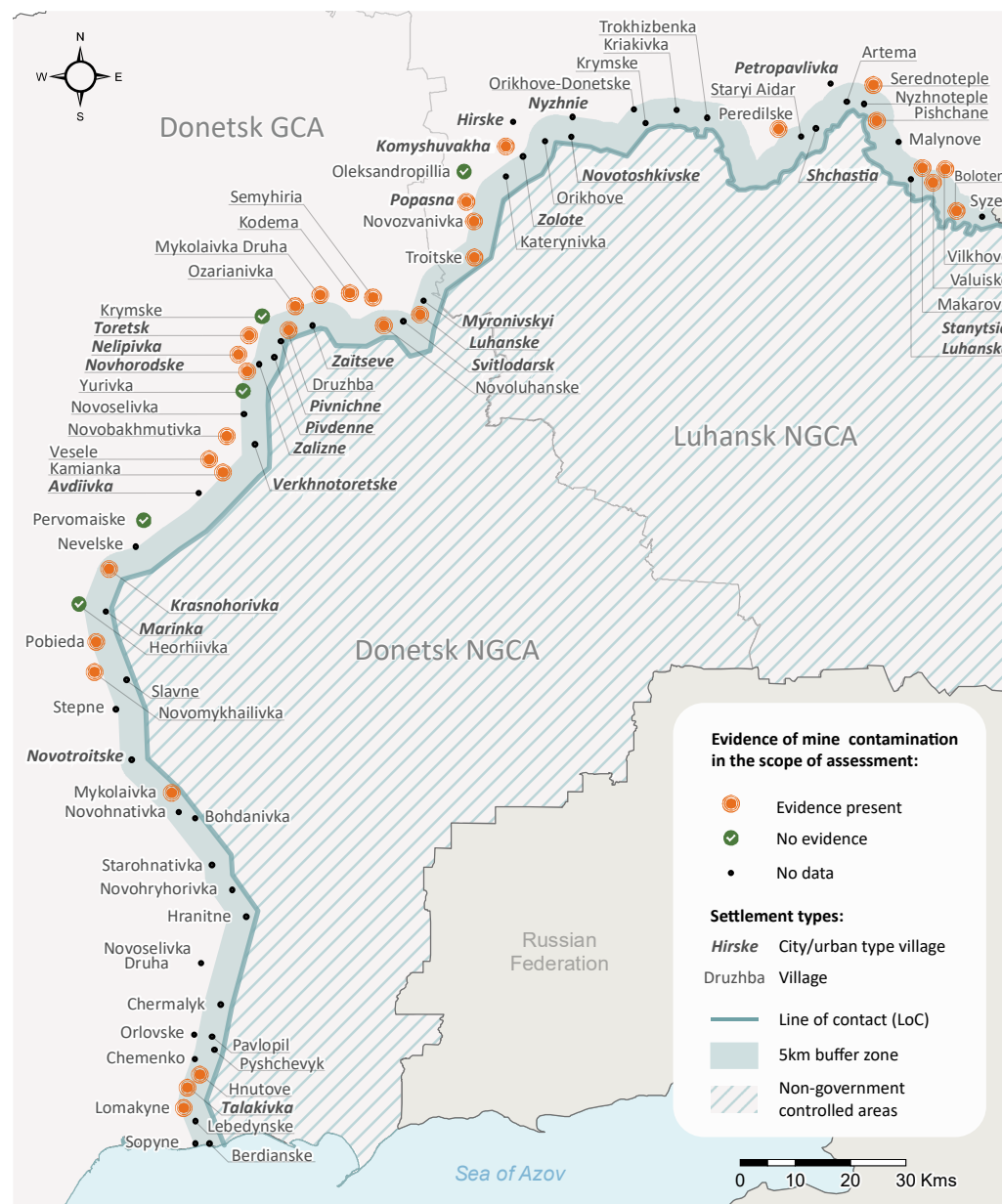
oblast are more likely to report concern over UXOs than in Luhansk oblast (35% in Donetsk oblast compared to 23% in Luhansk oblast).

Despite greater proportions of households reporting concern for shelling, Table 6 shows that nearly half (46%) of households report that the security situation has improved since summer 2017, while 37% report that the situation is unchanged and 16% report deterioration. In September 2017, significantly greater proportions of households reported an improving security situation over the year prior to that assessment (71%), and the proportion of households reporting a deterioration in security increased from 2% in September 2017 to 16% in February 2018.

**Table 6: Reported change in HH perception of safety since summer 2017**

	Rural	Urban	Donetsk Obl	Luhansk Obl	Total
1. Improved	39%	47%	50%	39%	46%
2. Unchanged	47%	35%	34%	42%	37%
3. Worsened	12%	16%	15%	17%	16%
4. Don't know	1%	1%	1%	2%	1%

**Map 2: Communities with reported landmine presence<sup>1</sup>**



<sup>1</sup> Data courtesy of: Landmine/UXO Rapid Assessment. The HALO Trust, 2018. Contact the [HALO Trust](https://www.halo-trust.org/) for more information.

## Landmines/UXO

Landmines also continue to be an ongoing issue facing populations both near and further away from the LoC. Map 2 (reverse) shows the locations where residents report landmines using data collected by the Halo Trust, who visited settlements throughout Donetsk and Luhansk oblasts to identify the communities most affected by landmines and UXO. Such widespread use of land mines has led to Ukraine having the highest rate of anti-vehicle mine casualties in the world<sup>2</sup> which has had a significant impact on child protection, freedom of movement, livelihoods and self-reliance, and critical infrastructure.<sup>3</sup>

Along the line of contact, 30% of households report being aware of landmines or UXOs in

Figure 9: Landmines & UXO



Figure 10: Landmines & UXO locations



their communities, with little variation between households in rural and urban areas, or between Donetsk and Luhansk oblasts. Of households that were aware of landmines and UXOs in their communities, forests were the most frequently reported contaminated area (41%), particularly in Luhansk oblast, where 53% of households that were aware of mines or UXOs in their communities reported contaminated forests. This issue has particular impact in rural areas of Luhansk oblast, where 46% of households reported using wood as their primary fuel source for heating, compared to 10% of total households, thereby potentially increasing exposure to contaminated land.

Enumerators reported greater mine risks in the communities of Novoluhanske, Kodema, Orikhove, Druzhba, Novotroitske, Pervomaiske and Ozarianivka, where residents had brought to their attention significant restrictions on movement and disruption to agricultural cultivability of land near the communities in the summer period.

## Checkpoints

The area along the LoC has a high military presence and the Ukrainian military has established a network of checkpoints that civilians must cross when entering or exiting many settlements. While these checkpoints are often located between settlements, 26% of households reported needing to cross at least one checkpoint to access services or livelihood opportunities. The issue affects rural populations more, where 45% of households

report the need to cross checkpoints for services or livelihood opportunities which are often located in urban centres.

Wait times at internal GCA checkpoints are usually short, with 85% of households that must pass checkpoints reporting the average time spent waiting as less than 15 minutes. Some households, however, experience significant wait times, with 2% of affected households reporting average wait times of more than an hour. Among households affected by checkpoints, healthcare is the most reported service to be affected (55%), particularly in rural areas (70%).

Figure 11: Per cent of HH crossing checkpoints to access services/livelihood opportunities

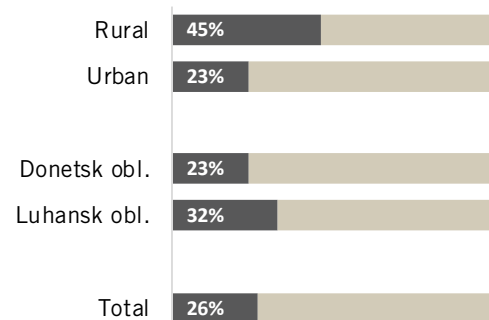
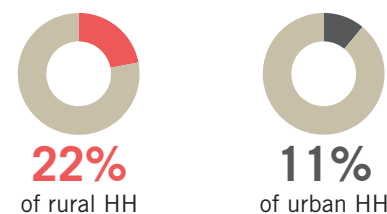


Figure 12: Per cent of HH reporting need for legal assistance



Only 1% of households report experiencing intimidation or harassment at checkpoints, however due to the sensitive nature of this question, there is some risk of under-reporting.

## Pension Reform

In October 2017, the pension system was reformed and pensions increased for many pensioners. Considering the high percentage of pensioners in the area assessed, this reform has the potential to strongly impact household income and spending patterns.

More than half of pensioners living in assessed households (51%), however, report that the increase in is not sufficient to cover rising prices. With that in mind, pensioners still report that the increase has allowed greater spending in a number of other areas, including purchasing medication (23%) or purchasing more or better quality food (15%). There was little variation between how households used the increase in pension between rural and urban households.

## Legal Assistance

The percentage of households in need of legal assistance continues to be an issue facing populations near the line of contact. Twelve per cent (12%) of all households require legal assistance that they reported not receiving at the time of data collection. The issue is greater in rural areas, where 22% of households are in need, compared with 11% of urban households. Single-headed households are also more likely (16%) to require legal assistance than dual-headed households (10%).

<sup>2</sup> Mine Action in Ukraine. Protection Cluster Ukraine, 2018 [Available Online](#).

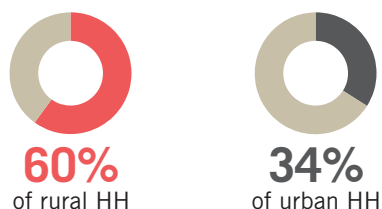
<sup>3</sup> Global Mapping and Analysis of Anti-Vehicle Mine Incidents in 2016. Geneva International Centre for Humanitarian Demining, 2017. [Available Online](#).

## Education

This section examines trends in household access to education between September 2017 and February 2018 in the area within 5 km of the LoC. Overall, access to education, which showed a marked improvement in the 2017 REACH Trend Analysis report, appears to have largely maintained the improvements noted from the previous year. Rural households appear to still experience certain additional barriers.

Relatively large proportions of households with children report experiencing a gap in education of more than one month in the current academic year (15%), a trend that was highest in Luhansk oblast, where one-fifth (21%) of households with children report experiencing this. The most frequently reported reason for a gap in attendance across all areas was health issues (89%). Although rural households are less likely to report a gap in attendance, they are much more likely to report difficulty traveling to facilities due to inclement weather (31% compared to 6% of urban households). This trend is corroborated by a reported increase in travel time to educational facilities during the winter by 60% of rural households.

**Figure 13: Per cent of HH reporting increased travel time to education facility in winter**



**Table 7: Top three barriers HH reportedly experience in accessing education**

	Rural	Urban	Donetsk Obl	Luhansk Obl	Total
1. Poor quality teaching staff	13%	16%	21%	6%	16%
2. School is unsafe	6%	5%	7%	3%	5%
3. Long distance to school	19%	3%	3%	9%	5%

Across the assessed area, 33% of households that access education services reported experiencing some problems in their access, with rural households being the most likely to experience problems (41%). Nearly half (46%) of rural households that report problems with education cite distance to educational facility as a main problem, while in urban areas the most frequently reported problem was low quality of teaching staff (16%), potentially relating to an out-migration of qualified professionals from the area experiencing conflict. Households in Luhansk oblast were more likely to report not experiencing any problems with their education facilities (78%) than households in Donetsk oblast (61%).

Insufficient heating in educational facilities affects 9% of households across all strata,

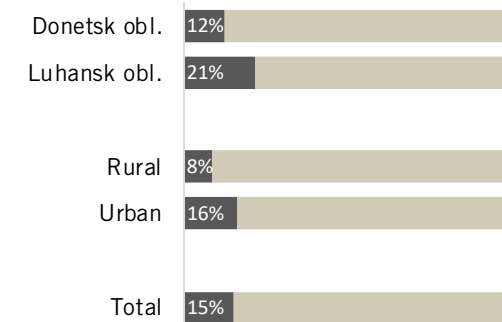
with little variation between urban and rural areas or Donetsk and Luhansk oblasts.

In terms of services offered by schools, the winter assessment showed a slight reduction in the percentage of households reporting access to assessed services in schools, though there is still marked improvement in school services since 2016. Drinking water appears to be an issue in schools in Luhansk oblast, where less than half (45%) of households report availability in the school they access, compared to 68% of households in Donetsk oblast. While access to psychosocial services in schools remains significantly higher than in 2016 (58% compared to 16%) there has been a slight reduction since the September 2017 Trend Analysis when 66% reported access to the service in education facilities. Lack of

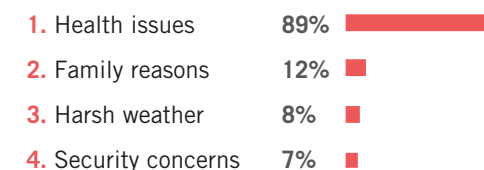
**Table 8: Per cent of HH reporting access to school services**

	Rural	Urban	Donetsk Obl	Luhansk Obl	Total
1. Medical support	61%	88%	87%	82%	85%
2. School books (free)	83%	80%	79%	84%	81%
3. Lunch (paid)	60%	61%	66%	51%	61%
4. Drinking water	60%	60%	68%	45%	60%
5. Psychosocial services	30%	62%	57%	60%	58%
6. Extracurricular activities	15%	57%	54%	48%	52%

**Figure 14: Per cent of HH with children experiencing a gap of more than one month in school attendance**



**Figure 15: Most reported reasons for gap in attendance of more than one month**



psychosocial services appears to more greatly affect students in rural areas, where only 30% of households with children report availability.

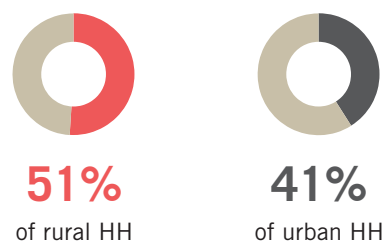
Physical safety in schools remains an issue affecting children in households living in close proximity to the LoC, where half (50%) of households report some safety or security concern for their children in educational facilities. Shelling remains the greatest reported security concern with 43% of households experiencing the issue, followed by the large presence of military personnel at 30%, particularly in Donetsk oblast (32% compared to 26% in Luhansk oblast).

## Health

This section examines the changes in access to health care in the winter period, particularly as it compares to the trend analysis assessment conducted in summer 2017. Findings indicate little variation between access to health services between the winter and summer periods, with the same issues affecting households in both time periods. However, with increased health concerns across all populations, rural households are particularly vulnerable in winter periods due to the additional travel burden caused by inclement weather.

Across the assessed area, 42% of households reported difficulty in accessing health care in September 2017, similar to the 46% found in the summer period. While there is little variation between Donetsk (43%) and Luhansk (42%) oblasts, there is significant deviation between urban households (41%) and rural households (51%). Such variation in difficulty accessing healthcare is attributable to longer distance and difficulty traveling to health facilities, and

**Figure 16: Proportion of HH reporting having faced barriers to accessing healthcare in 2017**



indeed nearly twice the proportion (79%) of rural households report distance to facilities as a barrier to access compared to 41% of urban households. Similarly, 47% of rural households report cost of travel as a barrier while only 16% of urban households report the same.

With these barriers to access in mind, the majority of both rural and urban households have at least some kind of functional primary medical facility located within 5 km of their residence (92% urban, 86% rural). For more specialised services at multi-specialty hospitals, urban households report requiring significantly less travel, with 52% of urban households reporting less than 5 km of travel to access compared to only 6% of rural households to access government run facilities. Conversely, 38% of rural households reported needing to travel more than 25 km to access multi-specialty hospitals compared with 18% of urban households. Private specialist facilities were less common and 78% of households in the assessed area reported not knowing the distance.

**Table 9: Reported barriers to accessing healthcare**

	Rural	Urban	Donetsk Obl	Luhansk Obl	Total
1. Cost of medicine	78%	77%	77%	78%	77%
2. Distance to facility	79%	41%	47%	49%	48%
3. Irregular doctor presence	15%	29%	34%	11%	26%
4. Cost of travel	47%	16%	22%	21%	22%
5. GCA checkpoints	29%	15%	18%	18%	18%
6. Lack of facilities	35%	13%	22%	9%	17%

\* Ear, Nose and Throat (ENT)

Along with greater barriers to accessing primary healthcare, lower proportions of rural households reported being able to access specialist healthcare services. Of 13 specialist healthcare services, rural households reported lower rates of access in all categories. Of particular concern is the large percentage of rural households that report not having access to ambulance services (39% compared to 16% of urban households).

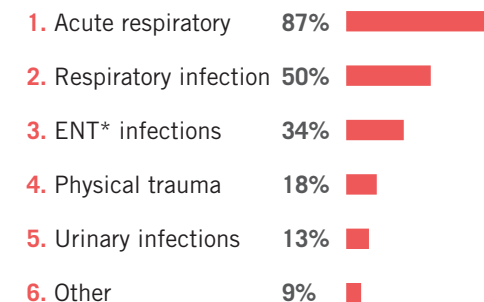
Access to psychosocial services is also an ongoing issue, with the majority of households across all strata reporting that they do not know where to access psychosocial services (65%). Additionally, 17% of rural households report that there is no place to access services in their settlement, compared to 7% of urban households.

Large proportions of households report increased health concerns in the winter period (74%). Urban households report an increased incidence of health concerns more frequently than rural households, with 77% of urban households and 63% of rural households

**Figure 17: Increased health concerns during the winter period**

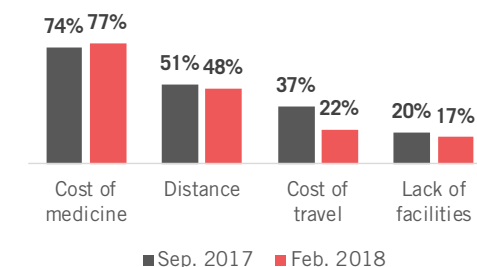


**Figure 18: Most reported increased health concerns in the winter period**



reporting additional winter health concerns. Despite such variation, the concerns reported rank similarly across strata, with respiratory infections (acute 87% and chronic 50%) leading, followed by ear nose and throat infections at 34%, and physical trauma at 18% of households reporting increased health concerns.

**Figure 19: Change in reported barriers to accessing healthcare, Sep. 2017 to Feb. 2018**





## Food & Economic Security

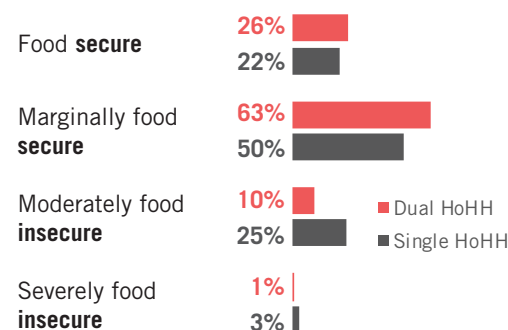
This section examines the trends around food and economic security in the winter period along the line of contact. Food Security Index and Food Consumption Scores are calculated using the World Food Programme's Consolidated Approach for Reporting Indicators (CARI) methodology.

Between the summer and winter period, food consumption scores deteriorated, with the percentage of households with borderline or poor food consumption scores increasing from 13% to 21% (Table 10). Indeed, significant proportions of households report that in the

**Table 10: Change in HH Food Consumption Scores, Summer 2017 to Winter 2018<sup>4</sup>**

	September 2017	February 2018
Poor	2%	5%
Borderline	11%	16%
Acceptable	87%	79%

**Figure 20: Food Security Index (FSI) by HoHH marital status**



winter period there is reduced quality (46%) and variety (51%) of fruits and vegetables. Relatively few households, however, report having increased difficulty accessing food markets in the winter (12%), with rural households being slightly more likely to report difficulty accessing markets (15% compared to 11% of urban households).

Rural households rely more on home production of food products than urban households, with 89% of rural households reporting supplying some or most of their food by self-production. The majority of urban households (54%), however, also rely on self-production for some or most of their food.

The Food Security Index is based on the Food Consumption Score, the household's use of negative livelihoods coping strategies and the proportion of household spending on food, and provides insight into households' ability to meet their food needs. Single-headed households were more than twice as likely to be moderately or severely food insecure (28%) than dual-headed households (11%).

**Table 11: Food Security Index by Head of Household Age**

	18-35	36-50	51-60	60+	Total
Food secure	41%	22%	15%	19%	22%
Marginally food secure	50%	64%	53%	64%	59%
Moderately food insecure	10%	12%	29%	16%	17%
Severely food insecure	0%	2%	3%	1%	2%

The group with the greatest proportion of households experiencing moderate or severe food insecurity is those headed by pre-pension age adults between 51-60 years of age. Among this group, 32% are food insecure, compared with 17% of pensioners, 14% of households headed by a person aged 36-50, and 10% of those headed by adults under 35 years of age.

### Economic security

The largest sectors of employment in the region are industry and trade, which each compose 18% of the total workforce. In rural areas, a plurality (29%) of employed household members work in the agriculture sector. Among urban households a greater proportion of employed household members work in the mining sector (11%) than among rural households (4%). Mining is also a more common sector of employment in Donetsk oblast (17%) than in Luhansk oblast (6%).

Unemployment remains an issue facing households, with 10% of 10% of all working-age household members in assessed households reporting that they are unemployed and either actively seeking employment, or wanting to

work but not actively searching. However, most are actively seeking employment, with 74% of unemployed having actively looked for employment in the 30 days preceding data collection.

Among households with unemployed members, the majority cite a lack of relevant vacancies in their settlement as the principal reason for their unemployment (66%), followed by the closing of their previous place of employment (21%), and family reasons (13%).

Male-headed households continue to earn more than female-headed households, and median income per household resident is 13% higher for male-headed households (UAH 2400, approximately USD 92) than female-headed households (UAH 2117, approximately USD 81).

**Table 12: Main sectors of employment for all household members in the assessed area**

Sector	%
1. Industry	18%
2. Trade	18%
3. Service sector	13%
4. Mining sector	10%
5. Transportation	7%
6. Social service	6%
7. Healthcare	6%
9. Agriculture	5%
9. Education	4%
10. Public administration	3%
11. Construction	2%
12. Other	8%

Note: For a more detailed analysis of trends affecting socioeconomic and food security, the Food Security and Livelihoods cluster published a detailed trend analysis using REACH data from several rounds of data collection that examines many of these issues in closer detail.

<sup>4</sup> Food Security Index and Food Consumption Scores are calculated using the WFP's CARI methodology.

## Shelter & NFIs

This section examines some of the changes in Shelter and NFI related issues in the winter period. The vast majority of households in the assessed area own their own accommodation (83%), however 14% of households are lacking official government approved documentation proving ownership of their property.

The proportion of households living in damaged shelter has decreased slightly from the summer period, with 24% of households reporting living in damaged shelter compared to 35% in September 2017. This decrease is potentially due to the difficulty of living in damaged accommodation during cold winter periods compared to summer, necessitating either repairing shelter or staying elsewhere for the winter.

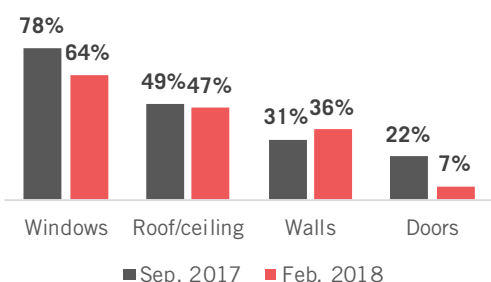
Of households still living in damaged shelter, roof/ceiling damages are the most frequently reported for rural households (65%) and window damages are the most frequently reported for urban households (69%). Indeed, 28% of rural

households experience leaks when it rains, compared to 14% of urban households. The vast majority (94%) report shelling or conflict as the reason for at least some of the damage to their shelter.

Among displaced households, 35% report that their accommodation in the NGCA has been damaged by the current conflict, with 5% saying their housing was completely destroyed. Of those with damaged shelter in their area of origin (both GCA and NGCA), only 9% say the damage has been fully repaired.

Rural households report lacking essential NFIs at a higher rate than urban households. Nearly 22% of rural households lack winter shoes/boots for all members of their household, compared with 11% of urban households. Likewise, 18% of rural households lack warm clothing for adults, compared with 7% of urban households. Rural households are also twice as likely to lack sufficient warm jackets for household members (16% and 8%).

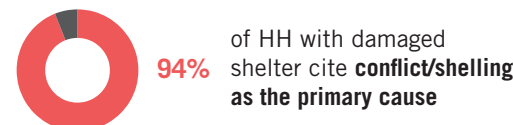
**Figure 21: Change in reported shelter damage, Sep. 2017 to Feb. 2018**



**Figure 22: Damaged shelter**



**Figure 23: Conflict related shelter damage**



## Water, Sanitation and Hygiene (WASH)

This section examines changes in access to water and hygiene issues during the winter period. There is no change in the rank of sources of drinking water between summer and winter, with urban households relying more on piped water (45% compared to 13% of rural households in winter), and rural households relying more on tube-wells or boreholes (43% compared to 13% of urban households in winter). The same sources were used in both rural and urban areas for use in cooking, cleaning and other non-drinking purposes.

Overall, 34% of households consume untreated drinking water, including more than half of rural households (53% compared to 30% of urban households). These rates remain unchanged from summer 2017, and have increased from

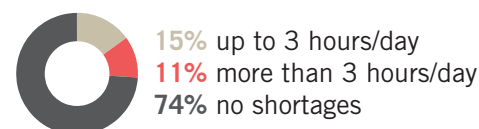
2016 when 26% of households reported consuming untreated drinking water.

Water shortages affect more than a quarter of households (26%), with another 18% of households unconnected to central water supplies. While rural households experience lower rates of water shortages (9% compared to 29% of urban households) they are also significantly more likely to be unconnected to the central water supply (55% compared to 11% of urban households).

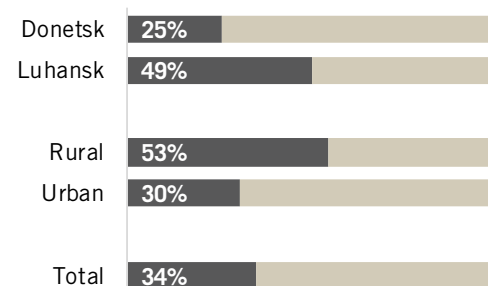
The most frequently reported strategy that households report for coping with water shortages is by storing water.

Toilets are nearly exclusively private across urban and rural areas, and in urban areas the majority (63%) of households use flushing toilets connected to sewage systems. In rural areas, most households (69%) utilise outside toilets, which poses particular hazards for vulnerable populations who need to leave the house to use the toilet regardless of weather.

**Figure 24: HH reported water shortages**



**Figure 25: Per cent of HH drinking untreated water**



**Table 13: Household toilet type in urban/rural areas**

	Rural	Urban	Total
Sewerage (flush)	17%	63%	56%
Outside toilet	69%	25%	32%
Septic tank	28%	16%	18%

## Conclusion

This winter assessment provides humanitarian actors with a better understanding of the specific needs facing populations along the LoC due to harsh winter conditions. Extreme cold, long hours of darkness and difficult travel conditions not only affect households' ability to access goods and services, but also increase the challenge that humanitarian actors face in delivering aid to affected populations.

As highlighted in this assessment winter increases the pressure on households that are already experiencing difficult circumstances. For example, increased difficulty traveling puts even greater pressure on rural households in their ability to access goods and basic services such as education, healthcare or quality food. Additionally, increased utility costs caused by the need to maintain a liveable temperature in accommodation potentially impacts households' ability to meet basic needs in other areas, or may even lead households to adopt negative coping strategies such as collecting wood for fuel in mined areas.

Though the entirety of Ukraine experiences similar winter conditions, residents of the area near the line of contact have unique needs, not only due to the increased physical protection concerns caused by ongoing shelling, shooting and landmine contamination, but also due to the inability of households to access areas that previously provided many basic services, markets and employment opportunities.

The results of this assessment will inform humanitarian actors and international donors as they plan their winterisation strategies for the 2018-2019 cold season.

## Partners



### About REACH

REACH is a joint initiative of two international non-governmental organisations - ACTED and IMPACT Initiatives - and the UN Operational Satellite Applications Programme (UNOSAT). REACH facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. All REACH activities are conducted in support to and within the framework of inter-agency aid coordination mechanisms.

For more information please visit our website: [www.reach-initiative.org](http://www.reach-initiative.org).

Follow us on Twitter @REACH\_info