

UKRAINIAN CRISIS

Analysis Brief

14 June 2023

THE HUMANITARIAN SITUATION IN FRONTLINE COMMUNITIES

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Introduction

In less than a month, 500 days will have passed since the escalation of the conflict when Russian forces entered Ukraine on February 24, 2022. Since September/October last year the frontline has remained relatively static after Ukraine reclaimed control over previously occupied areas in Kherson and Kharkiv oblasts. Many communities have therefore spent six to nine months living in settlements close to or on the frontline with all the additional dangers and hardship that entails.

One direct consequence of living close to the frontline is the increased risk of death or injury from shelling or surface missile attack. Since the escalation of the conflict OHCHR have recorded 24,425 civilian casualties in the country: 8,983 killed and 15,442 injured, (although OHCHR indicates that the actual figures are considerably higher). Explosive weapons with wide area effects have been responsible for 7,469 civilian deaths and a further 14,609 civilians injured with the most significant loss of civilian lives occurring in settlements on or near the frontline. Donetsk and Luhansk regions alone account for more than half (13,079) of the recorded casualties ([OHCHR 04/06/2023](#)).

As well as the human toll, bombardment has led to the widespread damage to homes and other civilian infrastructure forcing many to live in houses in urgent need of repair. Many of those who can leave, have, reducing populations to less than 20% of pre-war levels in some areas. This includes critical workers such as health care professionals and teachers. Many businesses and shops have also closed, significantly reducing livelihood opportunities and the availability of some goods and services. Heavy mine and explosive ordnance contamination have also impacted agricultural activities in rural areas, many of which are reliant on crop production as well as increasing the risks for those who remain.

Regular shelling has resulted in power interruptions despite authorities' efforts to restore access to electricity and gas. In some of the smaller villages, civilians, (often older people), live without gas, water, or electricity. Access to shops, health facilities and pharmacies is also difficult for those living in smaller population centres as many of these services have closed or are only partially functional and transport options to larger towns and cities are limited. Any travel brings with it the constant risk of being caught in the crossfire/shelling ([OCHA 02/06/2023](#)).

Access to Frontline Communities Remains Challenging

Access to frontline areas remains challenging with insecurity due to the ongoing shelling, and the presence of mines and unexploded devices being the main issues. Partners, local authorities and local actors continue to assist the populations wherever access is granted.

The ongoing conflict is restricting humanitarian access, leaving areas without adequate access to assistance and/or to services and goods. According to ACAPS dataset on access, 4105 access events have been recorded since the escalation of the conflict, Donetsk oblast having faced the largest share of them (745), before Khersonska (620), Luhanska (564) and Kharkivska oblasts (552). Overall, the largest part of the events had to deal with restriction and obstruction to access service (besieged areas or restriction of movement), the presence of mines and explosive devices (see Protection section), the environmental constraints (lack of fuel, telecommunication cuts, physical impediments to travel etc.) and the ongoing insecurity. The presence of mine is particularly problematic as a third of the country is reported to be contaminated, this issue is especially highlighted in Kherson oblast. Even when areas are accessible, the formation of crowds at distribution points can be dangerous with targeted shelling having occurred at such gatherings ([ACAPS database assessed on 06/06/2023](#), [IOM 02/06/2023](#), [REACH TR, ACAPS 16/03/2023](#), [Protection cluster 03/03/2023](#), [UNDP 01/03/2023](#), [LBA 19/01/2023](#)).

Populations also face movement restrictions implemented by local authorities and military forces. It was notably the case in Kherson areas during occupation by Russian forces, which led to the deaths of older people who could not access their medication ([OHCHR 24/03/2023](#)).

Despite these access barriers, local authorities, volunteer groups and international actors have worked to reach communities near the front lines and in newly liberated areas. A dozen of convoys have reached frontline areas in Donetsk, Kharkiv, Kherson, and Zaporizhzhya these past couple of months. Evacuations have also continuously been led by Ukrainian near the frontlines. Regarding non-governmental controlled areas, the assistance provided by local organizations is reported to be insufficient in scope and scale. The restriction of movement in these areas refrains civilians from moving to government-controlled areas and hampers international organizations to assist the population. No convoy has succeeded in reaching these areas since the escalation of the conflict ([USAID 05/05/2023](#), [USAID 27/03/2023](#), [UNHCR 22/03/2023](#), [Kyiv Independent 22/03/2023](#), [OCHA 21/03/2023](#), [USAID 10/03/2023](#), [HRP 15/02/2023](#)).

Damage to infrastructure and the cost of transportation stand out as access barriers for both the humanitarian actors and the populations.

The damage to roads and other transport infrastructure are aggravating access conditions. The latest available data showed that hundreds of kilometres of road required repair. Poor road conditions due to the shelling are also limiting the access for assistance. Many actors have also reported the rise in prices in the transportation sector, representing a barrier for the population willing to travel out of the conflict zone or needing to access services and assistance. According to REACH, the rise in prices of passenger transport by road (29% on a yearly basis) is due to the rise in fuel and lubricant prices (42% on a yearly basis). However, the fuel prices have been relatively stable for ten months. The REACH JMMI shows that vehicle fuel was not available according to 23% of respondents in Khersonska and 13% in Mykolaivska oblast. This issue can be a challenge for partners on the ground.

Lack of storage capacity can further limit the distribution of assistance in frontline areas. It was particularly highlighted by REACH in Donestka oblast. Finally, the lack of communication coverage is adding logistic constraints to access and implementation of humanitarian activities ([OCHA 04/05/2023](#), [REACH TR](#), [REACH 31/03/2023](#), [OCHA 24/03/2023](#), [World Bank 23/03/2023](#), [ACAPS 16/03/2023](#), [NBU 16/03/2023](#), [REACH 28/02/2023](#)).

Populations in frontline areas have disproportionately large numbers of older people and persons with disabilities whose mobility issues can reduce their access to assistance and services.

Some older persons and people with disabilities face heightened challenges in accessing assistance and services due to a lack of mobility. The lack of humanitarian access can have a major impact on the population in frontline areas as in some places, the whole population only relies on assistance due to lack of services, shops and purchasing power. The distribution of assistance has in some cases led to tensions, for example in Donestka oblast residents perceived the distribution of aid was unequal (REACH TR).

Information Sources and Gaps

This brief draws on nine trip reports¹ based on Inter-Agency Convoy Summary Observations made available by REACH and covering convoys to frontline communities during the last six months. As the reports are not publicly available and contain some sensitive operational information they are referenced as REACH TR in the text.

Both access constraints and sectoral information is contained in the latest [Humanitarian Situation Monitoring Report](#) (HSM) from February which concentrates on settlements closer to the frontline, further information on access is also drawn from [ACAPS Access report](#). Overall data on the

damage and impact of the conflict was referenced from the [Ukraine Rapid Damage and Needs Assessment](#).

Food security and livelihoods sections use the latest household food consumption data by oblast was taken from [WFP Hungermap](#) along with the [March JMMI](#) and [April JMMI](#) reports which give information on food prices and availability. These reports also cover financial services, health and hygiene commodities. The [JMMI Market Trends Analysis](#) for the first 12 months of the war is also referenced.

Left Bank Analytics provided an analysis of [The Business Environment in Liberated and Frontline Communities](#), also of interest was the [LBA report on the impact of the strikes on the power grid](#) and additional critical areas situation reports ([LBA 16/02/2023](#), [LBA 19/01/2023](#)). The [FAO Report on of the war on agriculture and rural livelihoods in Ukraine](#) also describes livelihood and food security impacts in rural communities and finally economic data was also sourced from the [National Bank of Ukraine](#).

Agency reports included a [World Vision multi-sectoral needs assessment](#) and [Child Protection Report](#), a [Plan International report on Education](#). Damage to education infrastructure was sources from the [government Save Schools website](#). Additional education data was provided by the [Borgen Project Report](#). Additional health analysis came from the Health Cluster's [Public Health Situation Analysis](#) (Long form).

Analysis on specific groups also relied on an [IDA report on the issues facing persons with a disability](#), an [HRMMU briefing note on older persons](#) and [UN Women/Care Rapid Gender Assessment](#). A [WFP/REACH report on inaccessible areas](#) provided some information on NGCA frontline communities.

Where relevant, reference to findings from the Multi-sector Needs Assessment (MSNA) carried out in Q4 2022 provides details of sector living standard gaps which are based on a combination of key indicators (please refer to MSNA factsheets and the [methodology overview](#) for a full list of indicators and the methodology used).

It should be noted that data on frontline communities is difficult to obtain and often anecdotal in nature. Even information taken from convoys gives the picture only in the area visited and different needs can exist elsewhere in the oblast. However, this is in part due to access and the ability to deliver humanitarian aid. Priority needs show a degree of similarity, but specific needs depend on factors such as if there are functioning shops nearby or if the health centre has been recently resupplied. Findings and analysis presented should therefore be treated as indicative in nature and sources quoted can be accessed to understand methodological limitations.

¹ Sections of these reports contain sensitive operational data and are therefore not in the public domain.

Humanitarian Conditions in Frontline Communities

NEEDS AND PRIORITIES

There is an urgent and recurrent need for shelter kits including materials such as roofing slates, tarpaulin and plastic sheets to cover broken windows in frontline areas with the situation being particularly acute in newly liberated areas of Kherson oblast.

Hygiene items are a growing and recurring need in frontline areas, including laundry soap, toothbrushes, toothpaste, and toilet paper along with plastic bed sheets and adult diapers for elderly persons.

Access to drinking water is required in a number of settlements, primarily those closer to the frontline, with needs likely to increase in the Summer.

Food continues to be reported as a priority, especially in inaccessible areas. There is a specific need for fresh produce, and the need for food that requires little time to cook, and a need for cooking supplies.

In some areas where there are few shops or functioning markets there is a need for in-kind assistance instead of cash.

Where children are present nutrition kits for infants (up to 1 year old) and laptops/tablets for students to support online learning.

The need for mental health and psychosocial support (MHPSS) services in many frontline areas is likely to increase.

Specific medications are needed (for example for high blood pressure), but the type varies by location.

LIVING STANDARDS

Financial constraints are the main barrier to goods and services across most sectors with the rising prices of medicines, food and hygiene items, increases in the cost of services, and reduced household income all negatively impacting household purchasing power.

In Bakhmut, Velyka Novosilka, Vuhledar, and Hrodivka (Donetska oblast) KIs reported that most people (>50%) had been unable to access enough food in the 14 days prior to data collection (REACH HSM 24/04/2023).

Poor water quality as an issue is also reported by households in conflict affected areas, especially in Mykolaiv and Bashstansky districts where residents have complained about salty and hard water (LBA 16/02/2023).

Eastern and Southern regions have a larger share of households with poor and borderline food consumption (REACH MSNA 20/04/2023).

Insecurity is preventing face to face learning whilst online learning is being constantly disrupted due to missile strikes and shelling, as teachers and students are forced to take shelter and electricity supplies and internet services are cut.

COPING STRATEGIES

There is widespread use of livelihood coping strategies in frontline areas with spending savings, reducing essential health expenditure, selling HHS goods, and moving elsewhere in search of work the most prevalent (MSNA 20/04/2023, FAO 19/12/2022).

IOM GPS Rnd 11 showed that by the end of 2022, 71% of the respondents in the east and 67% in the south reported adopting at least one health-related coping strategy including reducing the dosage or frequency of medicine usage and the purchase of low-quality medicines (IOM 13/12/2022).

The impact of the conflict on peoples mental health is leading some to resort to harmful coping mechanisms including the use of alcohol, medication, or other substances with children also amongst those affected (World Vision 22/02/2023)

The most widely adopted livelihood coping strategies in inaccessible areas were spending savings (33%), followed by reducing essential health expenditure (26%), selling HHS goods (24%), and moving else work in search of work (22%) (REACH MSNA 20/04/2023).

PHYSICAL AND MENTAL WELL-BEING

Older people and people with disabilities face health risks and aggravated conditions due to poor access to healthcare (WHO 05/05/2023).

The risk of injuries is particularly high in frontline areas due to the ongoing shelling. Explosive weapons with wide area effects have caused the majority of injuries and deaths, but there have also been significant casualties as a result of mines and UXO (Health Cluster 02/06/2023).

Anxiety, stress and depression is widely reported among the people living close to the frontline areas (Heal Traumas International 20/04/2023).

IMPACT ON PEOPLE

Households in settlements close to the contact line have been among those most impacted by attacks on energy infrastructure which has left tens of thousands without electricity and heating in cities such as Donetsk city, Bakhmut, Horlivka, Kupiansk, Kurakhove, Makkivka and Yasnyuvata (REACH TR, REACH 03/05/2023).

The degree of damage to civilian housing is particularly high in the areas with active hostilities, primarily being reported in Donetsk and Kharkiv oblasts (REACH 03/05/2023).

Year on year inflation still stands at 17.9%, married to a drop in income or loss of salary income leaves many families with reduced purchasing power. Households in the east and south in particular rely on sources of income other than regular salaries (NBU 11/05/2023, IOM 02/02/2023).

Movement restrictions and insecurity limit people's ability to access goods and services. (REACH 03/05/2023).

IMPACT ON SERVICES

The conflict has led to the damage and destruction of thousands of schools with Donetsk oblast (67% of schools) the most affected, followed by Kharkiv (43%), and Luhansk (41%) oblasts. Together, these three oblasts account for half of all damaged and destroyed schools in the country (CEDOS 24/02/2023).

Many businesses and industries on the frontline areas have been destroyed, closed or relocated, causing a significant decline in terms of jobs, livelihoods and services in these areas (LBA 27/02/2023).

As of February 2023, the government of Ukraine had stated that 23% of hospitals in the country were damaged as well as 4% of primary healthcare centers and 21% of ambulances. The largest share of damage is concentrated in Donetska, Kharkivska, and Chernihivska oblasts (World Bank 23/03/2023).

Specialized health services are particularly lacking in frontline areas, notably due to damage to facilities and because many health professionals have fled (WHO 03/04/2023).

Insecurity and logistics issues are reducing the availability of certain goods and services in frontline areas (REACH 03/05/2023).

CONFLICT / ACCESS

OHCHR have recorded 24,425 civilian casualties in the country: 8,983 killed and 15,442 injured (OHCHR 04/06/2023).

3.39 million IDPs have been displaced from the frontline oblasts of Donetska, Kharkivska, Khersonska and Zaporizka; these oblasts also host over 1 million displaced persons (IOM 05/06/2023).

40% of Ukraine (250,000 km2) may be contaminated with explosive ordnance or mines, with newly accessible areas such as Kherson and Kharkiv amongst the worst affected ((ACAPS 16/03/2023 HALO 17/02/2023).

As of 24 Feb 2023, direct damage in Ukraine has reached over USD 135 billion, with housing, transport, energy, and commerce and industry the most affected sectors. Damage is particularly heavy in the frontline oblasts of Donetska, Kharkivska, Luhanska, Zaporizka, Khersonska, Mykolaivska (World Bank Group 20/03/2023).

Food Security & Livelihoods

Financial issues such as reduced income, lack of money and high prices are the main barriers to accessing food across the country, including in inaccessible areas. However, communities close to the frontline face additional barriers to accessing to food including a lack of items in stores, the closure of stores and movement restrictions.

Households near and on the frontline areas are particularly impacted in terms of access to food, with the need for food primarily highlighted in these areas, echoing findings from the end of 2022, when food was reported as a main priority by more than two thirds of respondents in inaccessible areas assessed² in the MSNA. The level of need in relation to accessing food was reportedly the highest in Bakhmut, Velyka Novosilka, Vuhledar, and Hrodivka (Donetska oblast), where KIs reported that most people had been unable to access enough food in the 14 days prior to data collection ([WFP accessed 06/06/2023](#), [REACH 24/04/2023](#), [REACH MSNA 20/04/2023](#)).

Financial issues such as reduced income, lack of money and high prices are the main barriers to accessing food across the country, including in inaccessible areas. The majority of the oblasts along the front-line have seen households suffer a drastic decline in income decline (over 30%), well above national average. Difficulties in maintaining income levels, and the erosion of the capacity to produce their own food is affecting HHs' access to food has resulted in food expenditure becoming a higher proportion of household expenditure. Data shows that food constitutes almost a half of consumption expenditures. This means that low-income households (such as female-headed HHs, and HHs headed with older persons) are disproportionately impacted given food's large share in their budgets. Lack of money also contributes to food access difficulties, there have been reportedly barriers to accessing banks and ATMs in areas close to hostilities or affected by air attacks, especially in the South, and in Chernihiv and Kharkiv oblasts.

Areas close to the frontline also have additional barriers negatively impacting access to food (issues little seen in the rest of the country). These barriers include a lack of items in stores, closure of stores and also movement restrictions that further complicate access to goods and services in these settlements. For example, retailer KIs from the North and South face difficulties more frequently than those in other regions of Ukraine (61% and 60%, reported issues respectively). Additionally, data shows that security-related factors limited retailers' activity in the South and East, especially in Khersonska, Zaporizka and Kharkivska oblasts. Movement restrictions, active fighting or shelling, and infrastructural damages can prevent physical access to stores. The limited access to utilities and functioning stores in the frontline areas, is also shaping the needs in these regions, as some reports from the contact line show

that there is a need for in-kind assistance instead of cash, the need for food that requires little time to cook, and a need for cooking supplies ([WFP accessed 06/06/2023](#), [JMMI 17/05/2023](#), [REACH 03/05/2023](#), [REACH MSNA 20/04/2023](#), REACH TR, [WBG 20/03/2023](#), [LBA 27/02/2023](#), [FAO 19/12/2022](#)).

The above-mentioned barriers have resulted in shortages of food in areas close to the contact line, and newly liberated areas. The JMMI highlighted that in the southern regions close to the frontline, supply shortages were persistent, there has been a reported shortage of fresh produce such as cabbage, onions, carrots. In addition, the availability of JMMI basket items remained insufficient in the shops of retailers in Khersonska oblast, which has been experiencing ongoing ground shelling since the recent liberation. This shortage has led some to travel further to gain access to cheaper markets or to find essential items - as reported in Donesk Oblast - putting their lives at risk ([JMMI 17/05/2023](#), REACH TR).

The most adopted consumption-based coping strategies in inaccessible areas are relying on less preferred or less expensive products, limiting portions, borrowing food and decreasing meal frequency. Eastern and Southern regions have a larger share of HHs with poor and borderline food consumption.

Data shows a steady increase in HHs with inadequate food consumption particularly for areas close to the frontline where people face these additional barriers in accessing food. According to REACH MSNA, 12% of HHs recorded borderline food consumption in the East, and 6% poor, the South recorded HHs with 9% borderline food consumption, and 6% poor, making them the regions with the highest rates of poor food consumption.

According to data collected from inaccessible areas at the end of 2022, the most adopted consumption-based coping strategies were to rely on less preferred or less expensive products (31%), followed by limiting portions (24%), borrowing food (16%) and reducing the number of meals eaten in a day (14%) ([REACH 03/05/2023](#), [REACH MSNA 20/04/2023](#)).

Whilst the national inflation rate is dropping, purchasing power of the population in the most conflict-affected areas remains low, as the economy continues to face challenges with limited sources of income and employment opportunities.

Nationwide data published by the State Statistics Service of Ukraine, for April 2023, show that consumer inflation continued to slow to 17.9% year-on-year, down from 21.3% year-on-year in March. This is reflected in the prices of the JMMI baskets, which decreased in April in comparison to the previous month. This downward trend is likely to be in part due to the decrease in fuel prices but also due to prices

² Data from Area of Knowledge: areas which are inaccessible as they are temporarily beyond control of Ukrainian Government or closeness to the contact line.

being already significantly high in April of last year. While there is no specific regional data on inflation, the price of the JMMI basket in frontline areas recorded a slight increase. This aligns with anecdotal reports from Kharkivska stating that prices of goods were fairly stable ([NBU 11/05/2023](#), REACH TR).

However, the purchasing power of the population in the most conflict-affected areas remains low, as the economy continues to face challenges. Many businesses and industries on the frontline areas have been destroyed, closed or relocated, causing a significant decline in terms of jobs, livelihoods and services in these areas. Additionally, large-scale agriculture, normally a major source of employment and livelihoods, is no longer possible due to the high level of mine contamination and insecurity. In liberated areas, such as in Kherson Oblast, destroyed critical infrastructure and regular strikes are preventing the economy from restarting. This means that its mostly small shops (especially grocery stores), pharmacies, bakeries, and cafes that are the most likely to remain open despite security risks (REACH TR, [LBA 27/02/2023](#)).

According to data from the end of 2022, in oblasts along the contact line, more than half of the respondents rely on a single source of income. For most of them, this source of income is the production or sale of agricultural products, both in terms of crops and livestock, at the same time, more than one in three respondents (38%) reported having suspended or reduced agricultural production due to war. Lack of diversity of income leaves them vulnerable to economic shocks, resulting in a progressive deterioration of their resilience. In fact, MSNA findings indicated that the vast majority of raions surveyed in the East, North and South had a higher-than-average percentage of HHs with severe or extreme livelihood LSGs ([REACH MSNA 20/04/2023](#), [FAO 19/12/2022](#)).

The slow economic activity is contributing to high unemployment rates. The National Bank of Ukraine estimates the unemployment rate for Q1 2023 to be around 20% (1 in 5), with improvement in the labour market slowing, but still expected to continue in a positive direction. Given that HHs members (18-59 years old) located in western (60%), northern (58%), and central (56%) oblasts were more likely to report being officially employed than those in southern (52%) and eastern (47%) oblasts as of end of last year, it is likely that positive change in terms of unemployment will be slower in conflict-affected areas. This is corroborated by data from LBA from February 2023, where respondents in all areas surveyed in liberated and frontline areas reported rising unemployment in their communities. Teachers, lawyers, scientists, service workers, and even construction workers find it especially difficult to find employment, especially those who are older and may have trouble gaining new skills. Mine contamination and insecurity is further limiting employment opportunities ([NBU 11/05/2023](#), [REACH 20/04/2023](#), [REACH 31/03/2023](#), [LBA 27/02/2023](#)).

Reduced income is limiting access to basic goods and services, increasing concerns around heightened public disorder and increasing adoption of livelihood coping strategies.

Less income does not only limit the ability of HHs to access basic goods and services, but according to KIs in liberated and frontline communities, there are concerns that lack of income could lead to heightened public disorder or domestic strife, including increased divorce rates and domestic violence ([LBA 27/02/2023](#)). Additionally, data collected between September and October 2022, show that HHs reporting income decrease were 18% more likely to adopt Crisis/Emergency coping strategies than other HHs. That means that as frontline areas continue to be among the most affected areas in terms of income reduction, we will continue to observe higher levels of coping strategies. The latest data collected from inaccessible areas at the end of 2022, show that the most adopted livelihood coping strategies were spending savings (33%), followed by reducing essential health expenditure (26%), selling HHs goods (24%), and moving else work in search of work (22%) ([REACH MSNA 20/04/2023](#), [FAO 19/12/2022](#)).

Health

Low availability and functionality of services, physical barriers and unaffordability stand out as the main challenges to accessing healthcare in frontline areas.

The largest Living Standard Gaps (LSG) are reported in frontline areas.

Households in frontline areas show the worst Health LSGs.³ Indeed, according to REACH MSNA findings, 9% of households in the south and 7% in the east had an extreme or higher level of LSG by the end of 2022. Households in the east showed a higher proportion of households having severe to extreme needs (30% compared to 26% of households in the south and 24% of households in the centre). This is driven by a lack of access to healthcare and medicines.

Access to healthcare is limited due to unavailability and non-functionality of services.

In inaccessible settlements, access to healthcare services was reported to be a concern by 40% of Area of Knowledge respondents (AoK). Moreover, 65% of those who responded to health questions indicated that people cannot access healthcare services/facilities if needed. Respondents further indicated that the non-functionality of health facilities was the main barrier to access in these zones (48%), before the unavailability of specialized services (41%), the lack of staff (30%) and movement restriction (22%). REACH HSM found similar barriers. Availability and functionality are impacted by the damage of health facilities.

³ Health LSG focus on two composite critical indicators. The first examines the existence of met and unmet healthcare needs alongside HH member Washington Group Severity Score (WG SS); and the second examines access to mental health services.

As of February 2023, the government of Ukraine had stated that 23% of hospitals in the country were damaged as well as 4% of primary healthcare centres and 21% of ambulances. According to the Herams report, 9% of health facilities were destroyed by the conflict in the Kherkonska oblast alone. In Donetsk, 60% of the health facilities assessed by WHO were at least partially damaged, alongside 30% in Kharkiv and in Mykolaiv.

In addition to the damage to infrastructure, health facilities suffer from disruption to supply chains and from damage and looting of medical supplies. The waves of mass attacks on the energy infrastructure that started in October 2022 further impacted the functionality of the healthcare services with a lack of water and electricity resulting in reduced quality of care, disrupted services, disrupted cold chains, and difficulties in preserving medicines and vaccines. The cold chain was also unavailable in 33% of health facilities in Khersonska oblast. The healthcare system continues to be impacted by additional factors such as inflation, inaccessible stockpiles and a lack of doctors trained in battlefield medicine.

According to assessments led by REACH in front-line areas, the availability of health facilities varies significantly depending on the hromadas. For instance, health service availability remains limited in the newly liberated areas of Kherson oblast and in occupied areas. In some areas, households must travel to a nearby hromada in order to get healthcare (a risk in frontline areas where shelling is a regular occurrence).

Lack of specialized services and health staff is of particular concern.

Lack of specialized services is a particular issue in frontline areas, notably due to damage to facilities and because many health professionals have fled. Some medical staff have been killed and many have to endure high levels of stress which could lead to burnout and other mental health problems. According to Herams data from the beginning of 2023, in Khersonska oblast, the lack of staff was the main reason for the non-functionality of health facilities (79% of facilities reporting lack of functionality). Hospitals are now better equipped to provide emergency services than to provide long-term medical care.

Regarding mental health and psychosocial support, 43% of health facilities in the country were reported not to normally provide psychological first aid, with Donetsk oblast showing the lowest availability scores (72% lack provision). Cancer diagnostic and treatment services are lacking in Khersonska Oblast, also due to the lack of staff. This was also the case in areas of Donetsk assessed by REACH. Sexual and reproductive health and antenatal care services were either partially or not available in respectively 32% and 10% of health facilities in Khersonska oblast.

Skilled care during childbirth was not normally provided in 85% of the facilities assessed, mostly due to the lack of staff (56% available) and medical equipment (39%). Those services

are lacking the most in Donetsk oblasts. Basic emergency obstetric care was also not normally provided in 84% of assessed facilities. Vaccination roll-out was already slow before the escalation of the conflict and services have been further disrupted.

Insecurity and movement restrictions are physical barriers to access.

Insecurity was also commonly identified as a barrier to access in the areas closest to the conflict. This has notably impacted humanitarian mobile teams, making their visits dangerous. The crowding of the population near assistance points is further increasing safety threats. In addition, movement restrictions have further hampered citizens to access healthcare ([Health Cluster](#) 01/06/2023, [WFP/REACH](#) 23/05/2023, [REACH](#) 04/05/2023, [REACH](#) 03/05/2023, [Health Cluster](#) 03/05/2023, [EWM/INEW](#) 24/04/2023, [REACH](#) 20/04/2023, REACH TR, [WHO](#) 03/04/2023, [World Bank](#) 23/03/2023, [LBA](#) 17/01/2023).

High costs and unavailability of both medicines and pharmacies have hampered access to medication.

The unavailability of medicines and pharmacies is a major barrier in accessing medication. Access to medicine is a predominant issue in frontline areas, with 46% of REACH AoK respondents highlighting it as a concern. The closure of pharmacies or unavailability of medicines has limited access to necessary medication, as it has been particularly highlighted by REACH in Donetsk Oblast. In some hromadas, all pharmacies are closed. By October 2022, findings from the IOM GPS came to a similar conclusion with the highest shortage of medications and medical services being noted in southern and eastern Ukraine (respectively 38% and 35%). The unavailability of medication is due to the disruption of the supply chain and the closure of pharmacies, resulting in medicines being sold in the street at very high prices.

The unaffordability of medicine is particularly prevalent as an issue in frontline areas and was reported as the main barrier to access. REACH JMMI indicated that between January 2022 and January 2023, pharmaceutical products, medical products, appliances and equipment increased in price by 22%. In Mykolayivska oblast, prices of health goods and services have increased by 121% between December 2021 and December 2022, in Khersonska by 112%. LBA reported by February 2023 issues related to low quality of medication in Khersonska oblast, which could result from the lack of access and the black market.

According to September data from REACH and LBA, the lack of availability and the unaffordability of medicines was depicted as a major issue in occupied areas of Kherson, Mariupol and Kharkiv and also in newly accessible areas. It was unsurprising therefore that 83% of settlements assessed for REACH HSM in Kharkivska and 70% of settlements in Donetsk oblasts cited medicines as the main need ([REACH](#) 03/05/2023, [JMMI](#) 15/04/2023, [LBA](#) 16/02/2023, [REACH](#) 23/12/2022, [IOM](#) 18/10/2022, [LBA](#) 12/09/2022, [LBA](#) 05/08/2022).

Older people and people with disabilities face health risks and aggravated conditions due to poor access to healthcare.

The population residing in the frontline is mostly composed of those who have mobility issues and could not and did not want to be displaced, including older persons and people with disabilities. Those people are more likely to suffer from aggravated chronic conditions and long-lasting illnesses due to a lack of healthcare, medication and also from nutrition problems due to lack of food, related to poor mobility. People with disabilities are further at risk of losing their assistive products, notably due to damage, putting their health, their mobility and their access to all services in danger ([IDA](#) 10/05/2023, [WHO](#) 05/05/2023, [WHO](#) 20/04/2023).

The lack of access to specialized healthcare is an aggravating factor in putting the population's health at risk, notably in the case of pregnancy and birth, with a higher risk of premature birth. The lack of care for cancer and chronic illnesses limits follow-up for persons in need, leading to potentially harmful outcomes. This is the case with many other health-related issues, notably nutrition ([WHO](#) 03/04/2023, [UN Women](#) 04/05/2022).

The need for critical care, notably for trauma significantly increased since the escalation of the conflict.

The conflict has increased emergency health needs in frontline areas, including for trauma and burns. Across the country, trauma and burns cases have multiplied 12-fold between January and July 2022. By June 2023, close to 14,000 people including over a thousand children were reported to have sustained injuries across the country. The risk of injuries is particularly high in frontline areas due to the ongoing shelling, notably with the explosive weapons with wide area effects which has led to the largest part of injuries and deaths. Mines are the next most common cause of injuries and can result in disabilities. Populations are also seeing their access to health facilities reduced in the frontline areas due to the overwhelming of services for wounded fighters. This was particularly the case in Donetsk and Khersonska oblasts ([Kyiv Independent](#) 05/06/2023, [Kyiv Independent](#) 05/06/2023, [Health Cluster](#) 02/06/2023, [UNDP](#) 06/04/2023, [LBA](#) 19/01/2023).

Facing high costs and unavailability of services, households have adopted negative coping strategies and in order to cope with the mental health burden, people have further resorted to harmful coping mechanisms.

In order to face the main barriers to healthcare, namely the unavailability and unaffordability of services and medicines, many households rely on coping strategies. IOM GPS Round 11 showed that by the end of 2022, 71% of the respondents in the east and 67% in the south reported adopting at least one health-related coping strategy (the percentage being lower but still over 50% in the rest of the country). Reducing essential health expenditure was mentioned by 1 in 4 respondents living in inaccessible areas. This was also reported by 41% of returnees throughout the country by December 2022 according to the IOM Returns report. Also highlighted was the heavy reliance on assistance by many households, notably for older persons struggling to access health services and medication. Self-treatment with medications has been depicted as a coping strategy used throughout the country (28%) of WHO respondents in December. According to IOM GPS, other coping strategies have been used by households in the country, which may also be the case for households remaining in frontline areas. It includes the use of traditional medicine, the reduced dosage or frequency of medicine usage, the purchase of low-quality medicines, and the adoption of loans to cover health-related expenditures.

Regarding mental health, the JERU assessment conducted in the eastern part of the country in November 2022 shows that households have been adopting different coping strategies to face the psychological burden of the conflict, including the use of alcohol, medication, or other substances ([HRMMU](#) 25/05/2023, [MSNA REACH](#) 23/05/2023, [OCHA](#) 04/05/2023, [WHO](#) 29/03/2023, [IOM](#) 21/12/2022, [IOM](#) 13/12/2022).

Health care and access to medication continue to be highlighted as priority needs for frontline communities.

Medicine appears as a primary need in settlements in Kharkiv near the frontline and the February ATM found that access to medicine was a very high need for displaced people assessed in Kharkiv (by 60% of assessed households). Provision of medicine and healthcare appeared as the third and fourth main needs according to interviews from inaccessible areas (AoK) with respectively 36% and 28% of respondents ([WFP/REACH](#) 23/05/2023, [REACH TR](#), [REACH](#) 28/02/2023).

Protection

Frontline communities have higher levels of Protection Living Standard Gaps.⁴

Households in frontline areas have shown the worst protection living standard gaps in Ukraine with 31% of the assessed population stating that they had an extreme or higher level of protection LSG against only 5% and 2% of households in the north and central part of the country respectively. This number was particularly high in Bilhorod Dnistrovskiyi (67%), Mykolaivska (65%) and Kharkivska (54%) areas ([REACH](#) 20/04/2023, [REACH MSNA](#) 02/03/2023).

Ongoing hostilities and the presence of mines and UXO's are major protection concerns.

Ongoing hostilities have increased protection-related concerns in households closer to the frontline areas. The HSM shows that KIs in around a quarter of the assessed settlements (23%) reported safety as a 'main concern' for people in their settlements, which were within 100 km of the contact line. Furthermore, 44% of the respondents (AOKs) for inaccessible areas reported armed violence and shelling as a concern in their settlements, compared to 27% of households in accessible areas. The presence of military actors was seen as a concern by 43% of respondents in inaccessible areas and 1.6% of households in accessible areas. Other concerns in inaccessible areas included looting of private property (38%), social tension (35%), and unlawful occupation of property (34%). Similar issues were also identified in accessible areas ([REACH](#) 03/05/2023).

These security-related factors have limited retailers' activity in the south and east, especially in Khersonska, Zaporizka and Kharkivska oblasts. This is also due to the presence of mines in these areas which has limited people's freedom of movement. Documentation from the Office of the High Commissioner for Human Rights indicates that as of February 15, 2023, there were 288 civilians killed by mines and explosive remnants of war and a further 591 injured ([OHCHR](#) 04/06/2023, [JMMI](#) 17/05/2023, [World Bank](#) 23/03/2023).

In inaccessible areas, four in ten AoK respondents were aware of or had heard of civilians who had been injured or killed by landmines/UXO in their settlement against 1% of HH in accessible areas who reported presence of landmines / UXO as a concern. Findings from an ACAPS report also show that between November 2022 and January 2023, Kherson oblast reported more mine and other explosive incidents than any other oblast. The localities with the most incidents were Beryslav city, Borozenske village, Kherson city, and Velyka Oleksandrivka town. Mine and Unexploded Ordnance (UXO) contamination is also severe both inside Avdiivka town and in the countryside, including cluster munitions. Areas like Lyman (20 km from the line of contact) and Novoselivka hromada (10 km from the line of contact) have also reported a similar presence of mines in their area, with

government reports citing that there is at least 1 UXO for every 2 square metres. Civilian movement in these areas so close to the contact lines is therefore very restrained ([ACAPS](#) 16/03/2023, REACH TR).

Evidence of war crimes, torture and threats to civilian populations continue to surface.

Multiple reports of torture, sexual assault and mass graves have come up from newly liberated areas. As of mid-Sept, approximately 250 war crimes that were reportedly committed in the Kharkiv region have been documented and registered. Alleged torture chambers have been found in previously occupied cities, and hundreds of graves were discovered outside of Izyum. Similar reports on torture in basements and threats of sexual assault were reported by households in recently liberated areas of Kherson oblast ([LBA](#) 26/09/2022).

Access to social services, including support for children, can be problematic for those living in frontline communities.

Findings from the MSNA show that households in the eastern parts of Ukraine are also more likely to report issues with accessing social services (7%). A considerable disparity between rural and urban HHs who reported barriers was also found regarding the lack of information on the availability of social services, with 35% of urban HHs in eastern Ukraine reporting this compared to 4% of rural HHs ([REACH](#) 20/04/2023).

With almost two-thirds of children being forced to leave their homes, child protection risks are of particular concern, and yet access to beneficiaries is a considerable challenge for organisations across vast swathes of eastern Ukraine, compounded by energy black-outs which regularly disrupt CP activities from taking place. According to the MSNA, when asked about awareness and availability of social services for children, 34% of assessed households in the conflict-affected areas of the east said that they didn't know that there are available services for children and 24% highlighted that they lacked information about these services. A higher proportion of HHs reported being unaware of social services available for children in Kharkivska (45%), Khmelnytska (43%) and Zakarpatska (43%) oblasts ([REACH](#) 20/04/2023, [World Vision](#) 22/02/2023, [World Vision](#) 31/01/2023).

The impact of the conflict continues to drive increasing mental health needs.

Since the onset of the February escalation, various reports have identified the increasing presence of anxiety, stress and depression among the people living close to the frontline areas. Exposure to different types of violence, conflict duration, displacement, and loss of livelihood can also lead to increased susceptibility to mental illness. A study on mental health issues in Ukraine after the invasion shows that exposure to different types of violence, conflict duration,

⁴ The Protection Living Standard Gap (LSG) framework uses 4 composite critical indicators including the presence of children not residing in the HH, housing, land and property (HLP) issues of ownership, rent and conflict-related damage, concerns of harm, physical threat and discrimination and the presence of HH members lacking identification.

and the nature of trauma either witnessed or experienced can lead children to experience mental health disorders later in life. It also documented greater levels of worry, avoidant behaviour, and post-traumatic stress reactivity amongst the war-affected population in the country. This is in alignment with a World Vision needs assessment from January conducted across Kharkiv, Kherson and Dnipro oblasts that shows that children are feeling unsafe at their current location with girls aged 14-17 feeling significantly more unsafe than boys in the same group ([Heal Traumas International](#) 20/04/2023, [World Vision](#) 22/02/2023, [World Vision](#) 31/01/2023)

Children are adopting negative coping strategies to deal with the stress caused by the conflict.

The constant fear of attacks and isolation has also resulted in children resorting to using negative coping strategies to deal with stress and grief. Smoking or other forms of addiction was the most common coping mechanism that children were using in the frontline areas. This is followed by dropping out of school, physical violence and begging. In a World Vision report, many teenagers also cited that they knew someone their age who had run away from home and instances of early marriage have also been flagged. In addition, reports of child labour were also highlighted, particularly in Kherson oblast ([World Vision](#) 22/02/2023, [World Vision](#) 31/01/2023).

Shelter, NFI and Utilities

Frontline areas have the highest Shelter Living Standard Gaps.⁵

Households in frontline areas have recorded the worst level of Shelter LSGs. Findings from the REACH MSNA shows that 26% of households in the east and 21% of households in the south had reported extreme or extreme+ LSGs by the end of December 2022. Overall, HHs that included a member with disability are much more likely to report a shelter or NFI gap, reported the highest in the south (23%) and east (13%) This is in part due to the massive disruption to services and utilities in the region ([REACH MSNA](#) 20/04/2023).

Infrastructure damage and interruptions to utility supplies are making living conditions particularly difficult in frontline areas.

Households in settlements close to the contact line face the brunt of attacks on energy infrastructure which has left thousands without electricity and heating. Donetsk city, Bakhmut, Horlivka, Kupiansk, Kurakhove, Makkivka and Yasyuavata are some of the worst hit cities when it comes to disruptions to mains electricity and central heating. In Kupiansk (Kharkiv oblast), which is approximately 15 km from the line of contact, gas systems are under constant shelling, impacting household's heating and cooking capacities. There

are also reports coming from Bakhmutskiyi Hromada which highlights a dearth in generators. MSNA data also shows similar concerns in these areas with one in four assessed households in Donetsk oblast citing that they were unable to keep themselves warm during the winter months because their houses lacked insulation ([REACH](#) 20/04/2023, REACH TR).

Reports from the last six months also show similar infrastructure related issues in newly liberated areas, especially in Kherson's Rivne where destruction of most of the region's power plants have made restoring power supply very difficult (REACH TR, [LBA](#) 19/01/2023, [REACH](#) 20/04/2023 [LBA](#) 20/12/2022). Findings from a study done in the inaccessible areas, also shows that utility disruptions as a major concern amongst assessed respondents (AOKs) with 30% citing them as a primary concern ([WFP/REACH](#) 23/05/2023).

These interruptions and a growing need for better and accessible services have also reduced household's access to essential NFI items. Overall, households in the east and southern parts of the country lack clothes, mattresses, and fuel for heating, amongst other items. For settlements in inaccessible, access to heating fuel was cited as a priority need by 26% of Area of Knowledge respondents (AoK) ([WFP/REACH](#) 23/05/2023, [REACH](#) 20/04/2023).

There is severe damage to civilian housing and widespread needs for shelter repairs.

The degree of damage to civilian housing is particularly high in the areas with active hostilities, primarily being reported in Donetsk and Kharkiv oblasts. The situation is particularly concerning in Donetsk oblast - eight out of ten assessed settlements where KIs reported that most people (>50% of the population in the given settlement) had been unable to access safe and adequate housing in the 14 days prior to data collection. With reports of massive destruction to residential houses coming from areas like Bakhmut and Advikka the need for shelter repair items have also grown significantly. In areas like Lyman, Kurakhove and Kupiansk which are less than 20 kilometres from the frontline, Emergency Shelter Kits (ESKs) are one of the most primary needs amongst the population. There is an urgent requirement of materials like roofing slates, tarpaulin and plastic sheets to cover broken windows in these areas ([REACH](#) 03/05/2023. REACH TR).

Repair materials are also one of the most pressing needs for the households in the newly liberated areas in Kherson oblast, most particularly in the rural settlements of Velyka Oleksandrivka and Davydiv Brid where there are hardly any habitable houses remaining as of December 2022. Whereas in town areas of the oblast, most houses have broken windows, doors or roofs. Financial and access constraints have also severely slowed down repairs in the areas closer to the contact line ([LBA](#) 31/12/2022).

⁵ Shelter and NFI LSGs utilises six indicators including the type of shelter HHs lives in and whether the shelter has any damages or defects. Also, if HH members faced issues in terms of living conditions inside their shelter, their main heating sources and if these have been interrupted and access to essential non-food items.

WASH

WASH Living Standard Gaps⁶ were amongst the highest in frontline areas with disruptions to water supply and access to drinking water as two of the key drivers.

The areas closer to the frontline had the highest percentage of households facing an Extreme or Extreme+ Water, Sanitation, and Hygiene (WASH) LSG with 10% identifying them in the south and 7% in the east. Donetsk and Mykolaivska were the worst affected areas.

Continuous attacks on infrastructure in these areas are likely the main reasons behind the poor living standard scores. The MSNA reports that drinking water was identified as one of the most primary needs by the assessed households in the eastern oblasts, most frequently reported in rural areas (27%). This is in alignment with information from a study conducted in the inaccessible areas of Ukraine which showed that drinking water was reported to be one of the top five priority needs by 36% of assessed AOKs. These areas were in Donetsk, Zaporizka, Luhanska and Khersonska oblast ([REACH/WFP 23/05/2023](#), [REACH 20/04/2023](#), [REACH MSNA 02/03/2023](#)).

The February HSM report focused on areas near the frontline also found that approximately 48% of the assessed settlements had concerns with accessing drinking water. These concerns were cited due to damage to water infrastructure and potential limitations in water pumping capacity caused by electricity disruptions. Additionally, the absence of a centralized water system and lack of electricity or backup power have exacerbated the situation ([REACH 03/05/2023](#)).

There are also reports of increases in the price of drinking water in these areas with Mykolaiv seeing a 20% hike in prices last year, though no current data on water prices is available. However, with frequent disruptions to water supply being reported by settlements within 100 kms of the frontline, it can be assumed that the situation is unlikely to have improved. These disruptions were most notably reported in Novoselivka Persha, (Donetska Oblast - approximately 10 km from the frontline) and Kupiansk (Kharkivska Oblast – approximately 15 km from the line of contact) ([LBA 05/08/2022](#), REACH TR).

The deteriorating situation in Donetsk oblast and the challenges faced by the towns (Marinka, Vuhledar, and Kurakhove) was also highlighted by OCHA, particularly with regard to limited water supply. This is in alignment to the MSNA data from December which also reported a higher level of WASH needs in this oblast, with 17% of households reporting concerns by the end of December 2022 ([REACH 03/05/2023](#), [OCHA 03/05/2023](#), [REACH MSNA 20/04/2023](#)).

Access to appropriate sanitation facilities is also a concern in some settlements.

Lack of access to improved sanitation facilities is concerning in several settlements in Donetsk oblast (Bakhmut, Zvanivka, Velyka Novosilka, Vuhledar, and Hrodivka), as well as in Mykolaivka (Odessa oblast), Dvorichna (Kharkivska), Tiahynka and Darivka (Khersonska). In these settlements, KIs reported that the level of need in this relation was 'catastrophic', meaning most people (>50% of the population in the given settlement) in the settlements were unable to access improved sanitation facilities. Lack of toilets was also commonly highlighted as a barrier by KIs in several settlements in Donetsk oblast ([REACH 03/05/2023](#)).

Hygiene items are a growing need in frontline areas.

Availability of hygiene items was particularly low in Zaporizka, Chernihivska, and Khersonska oblasts. In Donetsk oblast, especially in Lyman, Toretsk and Kurakhove, the need for hygiene items including washing powder, children's diapers, adult diapers amongst others are frequently being cited by households. Prices of products have also increased in these settlements which has impacted their affordability amongst the affected population especially for older people who are mostly living on pensions ([JMMI, 04/2023](#), REACH TR).

Poor water quality as an issue is also reported by households in conflict affected areas, especially in Mykolaiv and Bashstansky districts where residents have complained about salty and hard water ([LBA, 16/02/2023](#)). In several settlements 20 -230 km from the line of contact in Zaporizhzhia Oblast KIs have reported issues with sewage systems and garbage disposal. This could lead to negative means of garbage disposal and can further aggravate the wash and health needs in the frontline. The REACH MSNA shows that negative means of garbage disposal are more prevalent among rural households especially in households headed by older people (REACH TR, [REACH MSNA 20/04/2023](#)).

Overall, this widespread damage to WASH infrastructure followed by reduced access and high prices has also contributed to people being forced to seek alternative sources of water such as wells or rivers. In addition taking water from heating systems and radiators, leading to an increased risk of disease outbreaks such as cholera ([Save the Children 26/01/2023](#), [HNO 28/12/2022](#)).

⁶ WASH LSG are based on four critical indicators including HH drinking water sources and time taken to fetch water (if necessary; HH access to improved water for drinking, cooking, bathing and washing; HH shelter issues with interruptions and conflict-related damages to septic and sewage systems and HH access to hygiene items from local markets.

Education

Oblasts which have seen the greatest intensity of hostilities have recorded the most damage or destruction to education facilities. Destruction to schools and insecurity is forcing students to have almost exclusively online classes, which are often disrupted due to power outages and airstrikes.

According to the official figures by the Ministry of Education and Science of Ukraine, 3,281 education institutions have suffered bombing and shelling, 262 of which have been destroyed completely. The most affected educational institutions are in the Zaporizhzhia region where 175 institutions were destroyed. In Donetsk oblast, 69 institutions were destroyed, while 52 in Kharkiv and 23 in Kherson. Overall, 33% of settlements surveyed across Ukraine had reported concerns about access to education in the GCA with almost 90% of these settlements in areas within 100km of the frontline or Russian border. Shockingly, 7% of settlements reported that all or almost all educational facilities were not functioning, while in a further 6% of settlements, the proportion of non-functioning facilities was more than half.

The extensive destruction to schools on the frontlines has left them no longer serviceable, and left children with no capacity to have face-to-face education. Schools in regions still subject to partial occupation, active hostilities or landmine contamination, such as Zaporizka, Donetska, Kharkivska, Mykolaivska and Khersonska now teach exclusively online, with many students and teachers displaced internally or abroad.

While online schooling is available, poor internet and regular blackouts limits the ability of children to attend. Some students and teachers rely on Invincibility Points⁷ for access to electricity and stable internet connection, but not all have easy access to these points, and some have to travel to reach them; likely to put them at risk. Additionally, air raid sirens during the day force students to go to the basement and continue studying there. This means that for many living in areas on the frontline, neither face-to-face nor online education has taken place in a structured manner since February 2022 ([Save Schools](#) accessed 08/06/2023, [Borgen Project](#) 26/05/2023, [REACH](#) 03/05/2023, [REACH](#) 04/04/2023, REACH TR, [Plan International](#) 02/03/2023, LBA 23/01/2023).

Students and teachers require psychosocial support before resuming educational activities, to ensure their social and emotional well-being having been through traumatic experiences, this is especially the case on recently accessible areas.

Education institutions need to address the psychological trauma caused by the war. The fact that many children have had to spend long periods of time in bomb shelters can be incredibly traumatic, especially for young children. In recently accessible areas there is a specific need to address the trauma of the local population and possible tensions within the de-occupied communities. Students and teachers will require urgent psychosocial support before they can resume educational activities. Teachers in Russian controlled areas were forced to teach the Russian curriculum. Many Ukrainian teachers were reportedly beaten and tortured while detained and there are widespread reports of conflict-related sexual violence near the frontlines ([Vox Ukraine](#) 19/05/2023, [CEPR](#) 13/05/2023, [Plan International](#) 02/03/2023).

Due to the ongoing hostilities major repairs or rebuilding schools is less likely to be undertaken in frontline areas leaving the most conflict-affected oblasts lacking adequate education infrastructure given the scale of destruction in these areas.

According to participants from a recent study (collected between Dec. 2022 and Jan. 2023), the scale of assistance from humanitarian organisations varies, from purchasing computer equipment to financing repairs, but in their opinion, donors generally do not take on very large-scale projects such as major repairs or rebuilding an entire school. For example, the latest project launched earlier this year to repair initially 50 schools that were damaged, in municipalities across Ukraine, is aiming to conduct repairs to damaged buildings such as the installation of new windows, repairs of roofs, heating systems and sanitary facilities. Given that the majority of destroyed schools are in areas on the frontlines, these areas will be most impacted by the lack of support and repairs to their educational infrastructure in terms of rebuilding of facilities. Additionally, urgent mine and unexploded ordnance clearance, and the provision of Explosive Ordnance Risk Education is needed in these areas prior to any return to face-to-face schooling can be considered. In the short term, educational material to access online learning such as tablets and laptops are still cited as needed in some inaccessible areas (REACH TR, [Plan International](#) 02/03/2023, [CEDOS](#) 24/02/2023, [UNDP](#) 02/02/2023).

⁷ Locations where Ukrainians could get uninterrupted access to power, heating and internet, some of it provided by Starlink antennas.

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