Introduction

Ukraine has the largest percentage of older people affected by conflict in a single country in the world with approximately one quarter of the population in Ukraine being over 60 years old at the beginning of 2022. Eastern Ukraine has a particularly high proportion of older people as many of the working age population left during the previous eight years of conflict.

Following the escalation of the conflict in late February, millions of Ukrainians fled their homes, with the number of Internally Displaced Persons (IDPs) reaching close to three million by early May. The International Organisation for Migration (IOM) reported that 57% of displaced households had an older person as a member. However, many older people were also unable or unwilling to leave their homes. An assessment of older people in Donetsk and Luhansk during early March found that 99% of them did not want to be evacuated from their homes. International press such as the Guardian highlighted the conditions faced by many older persons who stayed behind. Several factors reduce the ability or willingness of older people to flee their homes in conflict-affected areas, including physical capacity/mobility issues, the risk of illnesses during long journeys, the reduced access to medication during journeys, the lack of finances to travel and the strong sense of belonging to their home and community.

The more recent mandatory evacuations led by the government has enabled many older people to escape from cities heavily impacted by the armed conflict. Older IDPs now represent almost 20% of the displaced population. However, the largest IDP populations now reside in Eastern Ukraine, areas closer to, and more impacted by the armed conflict than the western areas of Ukraine where the majority of IDPs fled during the early months of the current crisis (IOM 06/10/2022, OCHA 07/09/2022, Health Cluster 01/08/2022, Dorcas Aid International 28/06/2022, HelpAge 06/06/2022, HelpAge 31/05/2022, IOM 09/05/2022, HelpAge 13/04/2022, MSF 11/03/2022, HelpAge 04/03/2022).

The analysis contained in this report does not cover current response efforts as these are not tracked by DFS (avoiding duplication with OCHA situation reports). Local Government, emergency services and local volunteer collectives sustain much of the response efforts in conflict affected areas, and certainly support to at risk households is taking place, but it appears less humanitarian aid is getting to the villages or to the raions outside the big cities (ACAPS 07/10/2022).

---

1 Ukraine has 27 regions (the main administrative division), including 24 oblasts, 2 cities and one special autonomous republic. Each region is further subdivided into several raions.
Armed conflict erupted in the Donbas region of eastern Ukraine (primarily Donetsk and Luhanska oblasts) following the Russian declaration of annexation of Crimea in early 2014, and since then humanitarian conditions in the region have seen a steady deterioration, further exacerbated by the impact of the COVID-19 pandemic. As the situation worsened, many left looking for employment and security elsewhere (Unemployment rates in the region were around 16% compared to a national average of 10.3% by mid-2021). However older people were less likely to leave, in part due to mobility issues as well as a reluctance to leave their long-term homes and support networks. Older people constituted 30% (0.9M) of the estimated 2.9M people in need of humanitarian assistance at the beginning of 2022 (Global conflict tracker 20/10/2022, OCHA 11/02/2022, OCHA 15/02/2021).

A HelpAge assessment in August 2021 highlighted the widespread challenges faced by the older population in the region, a picture now repeating in many conflict-affected areas (CAAs) of Northern, Eastern and Southern Ukraine. The study found that:

11% of those interviewed had a registered disability although 73% of respondents had at least 1 significant or several functional impairments according to the Washington Group Questionnaire (only 13 % of which had their disability status registered).

73% of older people were older women.

Half of older people reported living alone, 86% of older people had limited mobility and were partly in need of the help of others, 10% of older people were immobile.

99% of older women and men relied on a pension as their main source of income. 89% of older people had only one source of income and 26% of older people spent the majority of their income on food.

98% of people interviewed have at least one chronic disease, 70% of older women and men had issues with access to medical facilities and medicines and 65% of older people spent the majority of their income on medicines.

11% of older people were in debt, including arrears on utilities and only 49% of older people stated they had accommodation fully suitable for living both in summer and winter conditions.

24% of respondents reported they had issues with access to safe drinking water and 5% with access to sanitation.

13 % were internally displaced persons.

Source: HelpAge 31/08/2021

These findings have many parallels with the situation faced by older people in the current crisis.
Humanitarian Conditions in Conflict Affected Ukraine with a focus on older people

**NEEDS AND PRIORITIES**

- Financial support was cited as the major need across all population groups (including older persons) in the most recent IOM population survey, although the lack of availability of some goods (including food and medicine) means that mixed modalities of interventions will be required (IOM 04/10/2022).
- Health needs are urgent, including support to maintain emergency treatment facilities, medicine to treat chronic and serious illnesses, and targeted support for older people and people with disabilities who face additional mobility issues.
- There is a widespread need for materials to repair homes/shelters with older people likely in need of additional support to effect repairs (IOM 02/19/2022).
- Access to assistance: Almost seven out of ten older people (69%) have not been consulted by a humanitarian agency since the escalation (HelpAge 09/08/2022).
- There is a need to improve the availability of portable water and hygiene items, particularly where water supplies have been disrupted with older people facing difficulties to access water distribution sites.

**LIVING STANDARDS**

- There are 8.5 million people with insufficient food consumption, older people face difficulties in queuing for aid (WFP accessed 25/10/2022).
- 16 million people in Ukraine are in need of water, sanitation and hygiene assistance (OCHA 23/09/2022).
- Older persons are one of the most frequently reported groups of population less able or unable to meet their everyday needs (reported by respondents in 33% of assessed settlements) (REACH 30/09/2022).
- The lack of knowledge of digital tools, the frequent electricity disruption and the damages to the internet network restricts older people’s access to information and communication (REACH 30/09/2022, REACH 19/07/2022).

**IMPACT ON PEOPLE**

- Across Ukraine, nearly six out of ten respondents reported having experienced either a large income reduction or having no income at all as compared to before the current crisis. Some older people have stopped receiving their pensions. 39% of older people who are registered as internally displaced are not receiving their social benefits (HelpAge 01/08/2022, WFP 12/05/2022).
- Older persons are one of the most frequently reported groups of population less able or unable to meet their everyday needs (reported by respondents in 33% of assessed settlements) (REACH 30/09/2022).
- The lack of knowledge of digital tools, the frequent electricity disruption and the damages to the internet network restricts older people’s access to information and communication (REACH 30/09/2022, REACH 19/07/2022).

**IMPACT ON SERVICES**

- A total of 631 attacks on health facilities have been reported resulting in 100 deaths and 129 injuries (WHO accessed 25/10/2022).
- The number of partially/non-functional health centres is negatively impacting older people’s access to health services. 209 medical facilities were damaged, 24 were destroyed and 19 looted according to OHCHR (OHCHR 27/09/2022).
- Food inflation is of particular worry with roughly a 17% increase in prices (in September) since February 2022. Prices of firewood, coal, portable heaters and benzine have also skyrocketed. (GPC 13/09/2022, Kyiv Post 13/09/2022, ACAPS 30/08/2022).

**COPING STRATEGIES**

- The latest IOM GPS (round 9) found that 96% of IDPs indicated their household had adopted at least one coping strategy in reaction to reduced incomes or increased insecurity, with 91% of non-displaced households adopting similar strategies (IOM 04/10/2022).
- To face shortage and high prices of energy, people are fetching wood, however it is likely more difficult for older people and people with disabilities because of mobility constraints (WFT 11/09/2022).

**PHYSICAL AND MENTAL WELL-BEING**

- OHCHR have recorded the deaths of 6,374 civilians since the start however the actual numbers are likely to be much higher (OHCHR 23/10/2022).
- Physical and mental health and protection needs remain high, with 1.22 million older people in need of additional support to access health facilities, and particularly older people who remain in conflict-affected areas (HelpAge 10/10/2022).
- Protection abuse affects all groups including older people. They include killings, injuries, rape and torture (HelpAge 10/10/2022, UNHCR 12/08/2022, OSCE 14/07/2022).
- 12% of older people have faced violence where they currently stay (HelpAge 10/10/2022).
- 41% of persons aged 60 years and over in Eastern Ukraine reported at least one significant or total disability based on the Washington Group Questionnaire (OCHA 23/08/2022).

**CONFLICT**

- As of Oct 23, OHCHR recorded 16,150 civilian casualties (6,374 killed and 9,776 injured) (OHCHR 23/10/2022).
- Civilian areas are subject to missile/air strikes and shelling from heavy artillery and multiple launch rocket systems. Many areas are now contaminated by mines and UXO.
- Roughly a third of Ukraine’s population is displaced, including 7.68 million who have crossed to neighbouring countries and 6.24 million who are internally displaced. The IDP population includes an estimated 1.22 million older people persons (OCHA 17/10/2022, IOM 06/10/2022).
- 5,000km of gas pipelines were damaged as well as 3,800 gas distribution facilities, and 200 gas-fired boiler plants, leaving over 230,000 people without gas supply across the country (ACAPS 30/08/2022). 11% of IOM respondents indicate that their home was damaged since the beginning of the armed conflict (IOM 30/08/2022).

**DESTRUCTION**

- GDP dropped by 19% and 37% respectively in the first and second quarters of 2022 with inflation standing at 20% in August (Kyiv Post 13/09/2022).
Food Security and Livelihoods

Loss of income and rising prices are driving increased poverty rates and food insecurity across the country. Analysis provided by the Kyiv Post in September indicates that around 30% of Ukrainians have lost their jobs since the escalation of the armed conflict. At the same time the August inflation figure for the country stood at 20%. These factors are likely to lead to a substantial increase in poverty with 25% of the population projected to fall below the global poverty of US$6.85 a day (up from 5.5% in 2021). Unsurprisingly this is leading to increased food insecurity with WFP estimating that there are 8.5 million people with insufficient food consumption within Ukraine. Conflict affected areas (CAAs) are the most impacted, with reports from areas of Kharkiv newly under the control of Ukrainian forces indicating that the lack of livelihoods, depleted savings, high prices, and the limited availability of food stocks are all drivers of food insecurity (WFP accessed 25/10/2022, ACAPS 07/10/2022, WBG 04/10/2022, Kyiv Post 13/09/2022).

Older people will be amongst those most heavily impacted by these issues. Forty percent of settlements assessed in the latest REACH Humanitarian Situation Monitoring Report (HSM) for August identified at risk population groups that were less able or unable to meet their everyday needs. The top three groups specified were people with physical disabilities (36% of assessed settlements), Older people (33%) and chronically ill people (9%). Many older persons would fit into two of these categories, with some falling into all three (REACH 07/09/2022).

Low or lost income is a major concern with many older people relying primarily on their pensions as their main or only source of income. For many state pensions were not enough to cover expenses even before the escalation of the conflict (and consequently many had been engaged in work to secure additional income); recent high inflation has now reduced the value of their pensions even further. Loss of livelihood opportunities, especially in CAAs, therefore leaves many struggling to meet their basic needs. Older women without families are particularly at risk of economic hardship, due to inadequate pensions, discrimination in the labour market or caregiving responsibilities in the past leaving many unable to repair their homes and maintain an adequate standard of living (OHCHR 27/09/2022, CESVI 28/09/2022, ACAPS 10/07/2022, HelpAge 06/06/2022).

Lack of access to pensions, welfare and savings is also a serious problem. Access to post offices, banks, ATMs and pension services has been compromised by the armed conflict, and even those who have savings to cover expenses may not be able to withdraw their money. In the July HSM only 38% of respondents reported Ukrposhta offices functioning as usual in the eastern region, bank branches were reported to be fully available by only 53% and 67% of respondents in the South and East regions, and in the North only about 68% of respondents reported functioning ATMs.

A Key Informant (KI) interview from Kharkiv stated that “Older people dependent on their pensions are unable to access them as local authorities are not able to deliver them”. With reduced mobility and compromised support networks older people are particularly at risk due to the disruption of nearby services, with the situation for those in remote or isolated villages particularly acute (REACH 05/08/2022, ACAPS 10/07/2022, NP 22/06/2022, UNHCR 17/06/2022, NRC 14/06/2022).

Health

Attacks on health facilities continue to negatively impact health services with 631 verified attacks recorded since the escalation of the conflict on February 24th. Closure of pharmacies and disruption of supply chains has also reduced the availability of medicines, whilst inflation continues to push up costs. Displacement has led to increased pressure on health services in communities hosting large numbers of IDPs and at the same time has led to shortages of health staff in conflict affected areas. The armed conflict has also heightened the need for increased trauma care diverting resources from the provision of other health services and conflict itself continues to limit access to health services (WHO accessed 25/10/2022, DFS 28/09/2022, REACH 07/09/2022).

Any disruption to health service provision will have a disproportionate effect on the older people who are more likely to experience chronic medical conditions such as diabetes and hypertension. In the latest HSM, 16% of assessed settlements reported concerns surrounding access to healthcare services with more than half of those (29 of 48) located in CAAs) where lack of access to specialist health care (including cancer treatment and dialysis) was one of the most common issues raised. Older people are also more likely to have a disability. Data from eastern Ukraine has also revealed that 41% of persons aged 60 years and over reported at least one significant or total disability (based on the Washington Group Questionnaire), although only 4.8% of those had official disability status (SCORE 22/08/2022, OCHA 05/08/2022, REACH 07/09/2022, ICRC 22/06/2022).

Disability, ill health, and the ageing process means that older people often have restricted mobility, making it harder for them to get to health facilities. In addition, increased insecurity due to the conflict, reduced public transport, and the increased cost and scarcity of fuel further impact both the ability of the older people to travel to health services and for health practitioners to visit the patients in their place of residence. This is particularly acute for more remote rural areas and areas experiencing active conflict.

Access to medicines is also more challenging due to the closure of pharmacies and other services. Inflation has driven up the price of medicines and health services, which, combined with a real-term loss of income (see food
security and livelihoods), has pushed many health costs out of the reach of older people (DFS 28/09/2022, REACH 07/09/2022, NP 26/09/2022, ICRC 22/06/2022).

These issues were highlighted by assessments carried out in and around Kharkiv (including areas under renewed control of Ukrainian forces). Reports indicated that the already strained health system in the region cannot provide assistance to residents with chronic illnesses, cancer, or other serious diseases that require expensive treatment. Patients with chronic illnesses were reported to have been rapidly deteriorating without access to care or medication over the prolonged period. The need to support older people, especially with medicines was also flagged (ACAPS 07/10/2022, NP 23/09/2022).

Furthermore, mental health needs are critical for the whole population in Ukraine and more specifically for older people. Those that remain in conflict-affected areas and are at risk of psychological harm due to the violence, the isolation and the stress, exacerbated by the disruption of support networks and the displacement of family, friends and neighbours. According to an HelpAge survey which was conducted after the 2014 conflict, 96% of the older people assessed were already experiencing conflict-related mental health issues. Current figures are most likely similar, especially with the long-lasting conflict which has had an impact for the past 8 years on the older people living in the East. Moreover, mental health problems can have an impact on the physical well-being of older people who can see their blood sugar, blood pressure and heart rate increasing due to stress-caused cortisol (HelpAge 24/02/2022, HelpAge 10/10/2022).

**Protection**

Populations in conflict affected areas face an increased risk of physical injury, psychological distress, and long-term mental health problems. The Office of the UN High Commissioner for Human Rights (OHCHR) reports that 6,114 civilians have been killed and 9,132 have been injured inside of Ukraine since the escalation of the armed conflict, although casualties are likely to be much higher. Most of the civilian casualties recorded were caused by the use of explosive weapons with a wide impact area, including shelling from heavy artillery and multiple launch rocket systems, and missile and air strikes (OHCHR 03/10/2022).

According to Human Rights Watch, older people in conflict settings are subject to the same abuses than the rest of civilians, including killing, attack, abduction, rape and torture with older people representing one of the main population groups remaining in conflict-affected areas. They are also at increased risk of family separation with many experiencing limited mobility which hampers their ability to evacuate. Mobility challenges may also restrict them from finding shelter during shelling without assistance, putting them at higher risk of injury from attacks and increasing the likelihood of isolation, all contributing to fear and distress. For those able to flee, many have experienced traumatising journeys. According to an assessment led in June by HelpAge, 12% of older people have faced violence where they currently stay and 8% of those ones report being at risk of psychological abuse (HelpAge 10/10/2022, UNHCR 12/08/2022, IDMC 27/07/2022, Dorcas Aid International 28/06/2022, NP 22/06/2022, HelpAge 06/06/2022, INTERSOS 10/05/2022, CARE 04/05/2022, HelpAge 13/04/2022, HRW 22/02/2022).

In Eastern Ukraine, 41% of persons aged 60 years and over reported at least one significant or total disability based on the Washington Group Questionnaire. Such conditions exacerbate the challenges they face and may limit their ability to meet their basic needs and potentially their capacity to seek support. According to the REACH assessment in August, in respectively 20% and 19% of assessed settlements, key informants revealed that older persons and people with physical disabilities were facing more safety concerns. Moreover, 60% of people over 60 years old who are affected by the conflict are reported by HelpAge to be women, highlighting again the risk they face with regards to gender-based violence (REACH 07/09/2022, SCORE 22/08/2022, HelpAge 14/06/2022).

**Utilities and Shelter**

Civilian residential infrastructure continues to be damaged and destroyed due to the conflict with an estimated 12 million people in need of shelter repair materials across Ukraine. With winter approaching temperatures could plummet to as low as –20 degrees Celsius in parts of the country adding further urgency to improve the shelter situation. Lack of gas and electricity supplies are factors contributing to the need for alternative heating appliances, especially amongst IDPs in the east. Furthermore, damage to electricity infrastructure has caused wide-scale disruptions to water supplies leaving many without access to drinking or consuming water (IOM 04/10/2022, OCHA 23/09/2022, REACH 19/09/2022, USAID 16/09/2022, LBA 26/08/2022, IOM 30/08/2022).

Damage to accommodation is particularly problematic for older people in conflict-affected areas, where many reside alone or without assistance. Mobility challenges can restrict them from being able to fix the damage themselves and their limited access to livelihoods and to pensions hamper their ability to pay for such repairs. As winter approaches, respiratory diseases are spreading, which, linked to the poor living conditions and the lack of heating, can be especially troubling for older people, who face greater health risks associated with the onset of colder weather. Coping mechanisms available for younger persons, such as obtaining wood from the forests can be much harder for the older people due to mobility constraints (OHCHR 27/09/2022, CESVI 28/09/2022, NYT 11/09/2022, NYTC 10/05/2022, CARE 04/05/2022, HelpAge 13/04/2022, HRW 22/02/2022).

The lack of drinking water and water for washing and cleaning is also directly affecting older people. HelpAge reported that although overall, 91% of older people had access to safe drinking water, there were more severe access issues for those living in collective centres, sites in Dnipropetrovsk and Lvivska, where there is a particular access gap. The regular shelling has disrupted water systems,
restricting those remaining in conflict-affected areas to access drinking water and to follow good hygiene practices. They may face heightened struggle in accessing water distribution centres set up to mitigate the loss of piped water. Furthermore, the lack of hygiene exacerbates the threat of communicable diseases, the impact of which is heightened for those experiencing a chronic illness (ACAPS 06/10/2022, OCHA 21/06/2022, HelpAge 06/06/2022).

Access to Information

According to the logistics cluster, telecommunications infrastructure remains operational throughout most of Ukraine, however, shelling has damaged facilities in conflict-affected areas, leading to disruption of the network. According to local press, Russian troops allegedly destroyed or seized more than 4,000 base stations used by Ukrainian telecoms operators and damaged more than 60,000 kilometres of fibre optic systems. By June, 15% of Ukraine's internet infrastructure was destroyed. Hacking and jamming of telecommunications channels in the country have also been reported (ETC 16/09/2022, Kyiv Independent 28/09/2022).

Older people remaining in conflict-affected settlements are facing particular constraints in accessing information to access assistance or to contact their families. The lack of knowledge of digital tools and the frequent electricity disruption can further restrict their access to information and communication. According to the REACH HSM report for June, older persons and persons with disabilities/chronic illnesses were the most commonly reported population groups that were less able to access information. Key informants reported such issues in 92% of settlements regarding older people and in 57% settlements regarding people with disabilities or chronic illnesses. The same observation was reported in September by REACH: older people again faced barriers due to the lack of knowledge of digital services (REACH 30/09/2022, REACH 19/07/2022, REACH 08/07/2022 VOICE 26/05/2022, INTERSOS 10/05/2022).

Humanitarian Conditions of Older IDPs

There are significant numbers of older people amongst the IDP population. According to the September IOM GPS (round 9), 39% of IDP households are reported to contain one or more older people, with the overall number estimated to be 1.22 million (19.5% of the total IDP population). In addition, large numbers of IDPs are residing in areas close to the conflict with close to 2 million IDPs in the East macro-region and a further 600,000 in the South (IOM 06/10/2022).

Older displaced persons have similar underlying issues to older persons who have not moved. According to a survey by HelpAge in May 2022, 89% of displaced older people have a health condition, and of those 71% have more than one. These include hypertension (57%), heart problems (50%), joint aches and pains (41%) and gastro-intestinal issues (20%). Yet at the time of the survey only 43% had full access to their required medication, with 12% who were unable to access their medication at all. However, 89% of those surveyed reported being able to access health services (HelpAge 06/06/2022). Issues around medication were also reported early in the crisis by REACH with some KIs in Chernihiv and Zhytomyr noting that many IDPs are older people, and therefore require specific medication, which is often not accessible. Medicines commonly lacking include treatment for diabetes and heart disease. (REACH 16/04/2022).
The prevalence of disabilities amongst older IDPs was lower than findings for the Donbas prior to the recent escalation, perhaps indicating the difficulty those with disabilities have in travelling. Overall, 43% of older people reported having at least one disability and of those with a disability, the majority (70%) were not registered (HelpAge 06/06/2022).

In line with general IDP findings, the most requested support was cash (74% of those surveyed) with access to sufficient food reported by 89% of those interviewed. The survey was conducted in the west and central oblasts, where there has been less impact on food availability and prices. Lack of documentation can also be an issue for IDPs, especially when documentation was destroyed due to the conflict. This can hamper access to social payments and pensions (IMMI 14/09/2022, OCHA 13/07/2022, HelpAge 06/06/2022).

Non-Government Controlled Areas (NGCAs)

There is limited information from NGCAs, with only a few sporadic reports from those who have fled these areas or information from populations in newly accessible areas. Loss of livelihoods, access to critical income sources, including Government-provided pensions and social safety nets are all significantly affecting people’s purchasing power and food security. This is forcing older residents to cut corners when it comes to purchasing food, medicines, and/or medical supplies (OCHA 28/03/2022, LBA 05/08/2022).

Some reports indicate that pensions are being issued by the controlling administration. Local press indicated that pensions from Russia were being issued in Mariupol with about 47,000 pensioners having been registered. However, around 10,000 more Mariupol residents have not submitted documents for the handouts on principle. Local press also report large queues for bread in the city, another barrier for older people to negotiate (Censor.Net 13/09/2022, Ukrainska Pravda 09/06/2022).

Reports from Donetsk and Kharkiv oblasts indicate that there is also widespread damage in NGCAs. World Vision reported 7,000 residential buildings had so far been damaged in Donetsk as well as 300 educational facilities and hundreds of other civilian objects and infrastructure. In the former NGCA of Kharkiv Oblast, water, electricity and other basic services have been interrupted and much of the land mined (WVI 22/10/2022).

It would appear that from the limited information available that older people face similar challenges in NGCAs, and possibly are even more severely affected by lack of access to government support. Conflict damage and disruption of utilities will be of concern as winter approaches. Lack of income may also be affecting access to health services and medicines.

Appropriate Response Modalities

The humanitarian response must continue to ensure that programming is age and disability inclusive. Cash assistance is the priority need cited by most older persons, but special attention must be provided to the transfer modality, especially in areas where there is a lack of access to financial services and telecoms. Some older persons will require assistance and services provided in their homes, or transportation support, particularly for those with mobility difficulties (both locally and if they need to travel further afield). Collective centres and the facilities within them should be appropriate for those with mobility difficulties. Finally, communications around assistance, including what support is available and how it can be accessed, should be provided in various formats (phone calls are generally popular amongst older persons).

ABOUT THIS BRIEF

The analysis provided is a synthesis of information collected and tagged using the DEEP platform from publicly available sources and supplemented by assessment data provided by humanitarian partners working in Ukraine and neighbouring countries. This brief was prepared independently by Data Friendly Space (DFS) with thanks to HelpAge for technical guidance and review. Photographs provided courtesy of HelpAge International.