

HUMANITARIAN RESPONSE PLAN

UKRAINE

HUMANITARIAN
PROGRAMME CYCLE
2021
ISSUED FEBRUARY 2021



About

This document is consolidated by OCHA on behalf of the Humanitarian Country Team and partners. The Humanitarian Response Plan is a presentation of the coordinated, strategic response devised by humanitarian agencies in order to meet the acute needs of people affected by the crisis. It is based on, and responds to, evidence of needs described in the Humanitarian Needs Overview.

PHOTO ON COVER

A boy waits in a car while his father purchases hygiene products with a voucher he received from a humanitarian organization. Photo: TGH/Oleksii Filippov

The designations employed and the presentation of material in the report do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

Get the latest updates



OCHA coordinates humanitarian action to ensure crisis-affected people receive the assistance and protection they need. It works to overcome obstacles that impede humanitarian assistance from reaching people affected by crises, and provides leadership in mobilizing assistance and resources on behalf of the humanitarian system

www.unocha.org/ukraine

twitter.com/ocha_ukraine

Humanitarian RESPONSE

Humanitarian Response aims to be the central website for Information Management tools and services, enabling information exchange between clusters and IASC members operating within a protracted or sudden onset crisis.

<https://www.humanitarianresponse.info/en/operations/ukraine>



Humanitarian InSight supports decision-makers by giving them access to key humanitarian data. It provides the latest verified information on needs and delivery of the humanitarian response as well as financial contributions.

www.hum-insight.info



The Financial Tracking Service (FTS) is the primary provider of continuously updated data on global humanitarian funding, and is a major contributor to strategic decision making by highlighting gaps and priorities, thus contributing to effective, efficient and principled humanitarian assistance.

<https://fts.unocha.org/appeals/830/summary>

Table of Contents

05	Foreword by the Humanitarian Coordinator
07	Response Plan Overview
09	Context and Impact of the Crisis
12	Response by Strategic Objective
14	Planned Response
15	HRP Key Figures
16	Historic Trends
18	Part 1: Strategic Response Priorities
20	1.1 Humanitarian Conditions and Underlying Factors Targeted for Response
24	1.2 Strategic Objectives, Specific Objectives and Response Approach
31	1.3 Costing Methodology
32	1.4 Planning Assumptions
38	1.5 Accountability to Affected Populations (AAP)
40	1.6 Consolidated Overview on the Use of Multi-Purpose Cash
42	Part 2: Response Monitoring
43	2.1 Monitoring Approach
45	2.2 Indicators and Targets
50	Part 3: Cluster/Sector Objectives and Response
51	Overview of Sectoral Response
54	3.1 Education
60	3.2 Food Security and Livelihoods
66	3.3 Health
74	3.4 Protection
81	3.5 Shelter and Non-Food Items
86	3.6 WASH
91	Part 4: Annexes
92	4.1 Response Analysis
94	4.2 Participating Organizations
96	4.3 Planning Figures by Sector and Geography
97	4.4 What if we fail to respond?
99	4.5 How to contribute
100	4.6 Acronyms



CHERMALYK VILLAGE, DONETSKA OBLAST, GCA, UKRAINE

Nataliia holds her five-year-old daughter Liuba. She is raising five children alone in a small village right at the "contact line".

Photo: OCHA/Yevhen Maloletka

Foreword by the Humanitarian Coordinator

The past year has been exceptionally challenging for all of us across the globe as we collectively face the COVID-19 pandemic. But despite the dark shadow it has cast, 2020 also brought a few rays of light for the 3.4 million people who continue to be affected by the six-year-old conflict in Donetska and Luhanska oblasts. One of these breaks in the cloud happened on 27 July 2020 when a ceasefire agreed by the Trilateral Contact Group (TCG) came into force. The ceasefire continues to hold, creating the longest lull in the fighting since the conflict's eruption in 2014. This significant breakthrough presents a window of opportunity for long-lasting peace in the Donbas region that could put an end to the hardship of millions of people who live on both sides of the 427-km-long "contact line" that cuts the region into areas controlled by the Government (GCA) and those beyond it (non-Government controlled areas – NGCA).

There have been other notable and much appreciated steps by the Government of Ukraine to alleviate the suffering of the conflict-affected people such as the progress on the adoption of the "National Strategy on Protection of Civilians in Armed Conflict", the deferral of the verification requirements for internally displaced persons due to COVID-19-related travel restrictions and the extension of the social benefit payments to the unemployed until the end of the national quarantine. I would like to take the opportunity to thank the Government of Ukraine for its continued efforts to address the suffering of the conflict-weary people during these difficult times.

However, despite these welcoming developments, I am deeply concerned about the future of conflict-affected people. On top of the protracted armed conflict, the COVID-19 pandemic has further reduced chances for positive progress in the region. It is the

1.2 million elderly people, often frail and disabled, who have not only borne the physical and psychological brunt of the armed conflict over the past six years, they are also the most at risk of contracting COVID-19. Those of the younger generation face unprecedented challenges as economic insecurity looms large as a result of this double crisis, while children have been exposed to additional vulnerabilities, including disruptions in education, that could have many far-reaching negative effects on their future.

The hardship of this double crisis became most visible following the temporary closure of all five official crossing points along the "contact line" between March to early June 2020 in an attempt to curb the spread of the virus. Although the crossing points partially resumed their operations in mid-June, the number of times they are crossed every month has dropped by more than 90 per cent compared to last year. This significant reduction indicates that hundreds of thousands of people living in NGCA are no longer able to go to GCA to collect their social benefits and entitlements or visit loved ones. This has been detrimental for the elderly in NGCA as for many of them the main source of income is their government pension they can only collect on the other side of the "contact line". Even if the ceasefire brings lasting peace to the region, the affected people still have a long way to go to recover from this protracted crisis, especially as the land has been heavily contaminated with landmines and explosive remnants of war (ERW).

We must bear in mind that over half a million people live in areas where shelling, firing and heavy contamination of landmines and ERW is a daily reality they are forced to live with. Even though we saw some progress in the recovery prior to the pandemic, it is worrying to note that the reverse is happening now as

the double crisis takes its toll on the socioeconomic situation of the conflict-affected areas.

As outlined in the 2021 Humanitarian Needs Overview, 3.4 million people require humanitarian assistance and protection to live a life of dignity. More than half of those in need are women and every third person is elderly. Together with people with disabilities, female-headed households and children, they represent the most vulnerable groups. Although the number of people in need in 2021 is similar to 2020, their needs are significantly higher in severity due to the COVID-19 pandemic and its related restrictions.

With this in mind, I call on you to support the 2021 Humanitarian Response Plan (HRP) that aims to save lives, ensure people's access to basic services and strengthen the protection of those affected by the conflict and COVID-19. The HRP consists of almost 100 humanitarian projects that altogether seek \$168 million to assist some 1.9 million people on both sides of the "contact line". This "down-to-the-bone" figure reflects an extremely strict and focused prioritisation for meeting the essential basic needs and preventing further deterioration of the situation. These critical priority requirements have also been

established to help guide donors towards those activities that urgently require funding.

Recognising the strong capacity of the Government of Ukraine at all levels, one of the core objectives of the 2021 HRP is to support the Government in delivering services in Government-controlled areas to facilitate a humanitarian exit over the next few years. This will be done in close collaboration with Government authorities and development actors to seek sustainable solutions to alleviate the suffering of the conflict-weary people and pave the way to a peaceful future.

Until this is possible, the humanitarian community will stand by the conflict-affected people and continue to advocate to improve humanitarian access to the areas beyond the Government's control. I call on the donor community to maintain or increase their funding to ensure continuity in critical assistance, support the preservation of the operational space, and enable us to do more to assist the conflict-weary people to cope with and overcome the effects of the protracted crisis while more sustainable solutions are sought. Only with your support can we make a real difference in the lives of conflict-affected people and remove the cloud that has cast a shadow over them for almost seven years.



Osnat Lubrani

Humanitarian Coordinator in Ukraine

Response Plan Overview

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	OPERATIONAL PARTNERS
3.4M	1.9M	\$168M	120

Almost seven years of active fighting have had profound consequences on the lives of more than five million people in conflict-affected Donetsk and Luhanska oblasts of eastern Ukraine¹. Some 3.4 million of these people are in need of humanitarian assistance and protection.

The 2021 Ukraine Humanitarian Response Plan seeks to address the needs of 1.9 million of the most vulnerable people by providing emergency lifesaving assistance and protection across six sectoral areas – education, food security and livelihoods, health, protection, shelter and non-food items as well as water

CHERMALYK VILLAGE, DONETSKA OBLAST, GCA, UKRAINE

A humanitarian worker delivers heating fuel to Vladyslav, 90 years old, who lives alone just a few kilometres away from the “contact line”.

Photo: OCHA/Yevhen Maloletka



¹ The term “eastern Ukraine” used throughout this document refers to Donetsk and Luhanska oblasts.

and sanitation. The 2021 response will continue to focus on saving lives, ensuring people's access to basic services and strengthening protection to those affected by the armed conflict and COVID-19. Among the most vulnerable are the elderly, who represent 40 per cent of the people targeted for assistance in 2021, as well as the children of vulnerable families who make up 15 per cent. Importantly, the response also aims to meet the critical needs of 240,000 people with disabilities.

The vast majority of the 1.9 million people targeted for humanitarian assistance live in the two conflict-affected oblasts of Luhansk and Donetsk. Over 770,000 of the people targeted live in areas outside of Government-control (NGCA) while 1.14 million live in Government-controlled areas (GCA). The GCA caseload includes 189,000 people who have been internally displaced and account for 17 per cent of the people targeted in GCA. There are fewer people targeted for assistance in NGCA than GCA despite the higher severity of humanitarian needs in NGCA because ongoing access constraints continue to limit operational capacity. If humanitarian access improves, particularly to areas outside the Government's control, the ability to respond and the related financial requirement will be likely to increase.

Humanitarian actors will continue to support the Government, local authorities and responders to strengthen service delivery and provide humanitarian response in GCA. This support recognises the strong capacity, particularly of local and regional authorities, to play this leadership role and the development opportunities that are present. The target to assist 1.9 million people across the conflict-affected area is similar to the 2020 target and reflects response capacity, access restrictions and the development of COVID-19.

In 2021, humanitarian operations will focus on delivering a series of sectoral responses aligned with three overarching Strategic Objectives:

- (1) Provide emergency and time-critical assistance and ensure access to basic essential services for 1.9 million people affected by the armed conflict (including 189,000 IDPs), exacerbated by COVID-19.
- (2) Respond to the protection needs and strengthen protection of 1.5 million conflict-affected people, including 189,000 IDPs, with due regard to international norms and standards;
- (3) Ensure implementation of a humanitarian exit strategy in Government-controlled areas from 2021-2023.

The humanitarian response will require \$168 million to carry out prioritised humanitarian action in 2021.

The critical priority requirements for early funding have been identified to allow immediate implementation of urgent projects and activities. Planned activities included in the 2021 HRP have been selected with emphasis on quality humanitarian actions that (i) save lives, (ii) specifically address the urgent needs of the most vulnerable, (iii) target the areas of the most severe humanitarian needs, (iv) consider time criticality, taking into consideration seasonality and COVID-19 factors; (v) consider the probability of immediate implementation, and (vi) are non-duplicative of, or are complementary to the responses of other actors. The funds are required to implement 96 projects by 40 partners. These projects will be implemented alongside the work of the International Committee of the Red Cross and will complement the Government's efforts to address humanitarian needs.

Context and Impact of the Crisis

For over six years, the lives and well-being of millions of ordinary people in Donetsk and Luhanska oblasts have been turned upside down by the ongoing armed conflict. More than 3,000 civilians have been killed and over 7,000 injured, and people's mental and psychological health has been severely impacted. They have faced loss and deprivation and have been living in fear for their lives and the lives of their loved ones. Their access to basic services and humanitarian assistance has been severely hampered by insecurity, the presence of landmines and explosive remnants of war (ERW) and, most recently, by health risks and

restrictions related to the COVID-19 pandemic. This has often not only deprived them of their basic rights, but also generated humanitarian hardship.

The shock of COVID-19 has created additional pressure on the struggling civilian population.

The pandemic and its ramifications have sent the weakened healthcare system, the insufficient provision of social services and the declining regional economy to a breaking point. During the first few months of the pandemic, all five crossing points along the "contact line" were completely sealed off in an attempt

OPYTNE VILLAGE, DONETSKA OBLAST, GCA, UKRAINE

Oleksandr, 79 years old, stands outside his shrapnel-marked house. Photo: Yevhen Maloletka



to contain the spread of the virus, causing severe restrictions on people's freedom of movement. These measures made it almost impossible for the population in need, particularly pensioners from NGCA, to obtain their Government pensions and social benefits. Many of them have become increasingly reliant on pensions from NGCA and have been forced to find alternative ways to survive, such as depleting their savings, borrowing money or obtaining their pensions through costly and legally challenging routes such as traveling to GCA of Ukraine through the Russian Federation.² At the same time, humanitarian workers' access to the population in need, especially in NGCA, was impeded by the closure of the crossing points. This led to a significant gap in the delivery of humanitarian assistance, especially to NGCA in Luhanska oblast as few partners have had access to continue full implementation of their planned activities.

Even though the ceasefire since July 2020 has significantly reduced hostilities and civilian casualties and has led to the longest lull in the fighting since the start of the armed conflict, the end of the conflict is not yet in sight. The affected areas are still heavily contaminated with ERW posing a significant risk to the lives of millions of people, especially children, who live on both sides of the "contact line". The armed conflict has also severed previously interdependent networks of services and markets and cut people off from the cities upon which they depended for social benefits and essential services.

The progress made towards disengagement in three locations (Stanytsia Luhanska, Zolote and Petrivske) in 2019 was followed by an agreement of four more disengagement sites (Slovianoserbsk, Petrivka and Nyzhnoteple in Luhanska oblast, and Hryhorivka in Donetsk oblast). The disengagement process, which is monitored by the OSCE Special Monitoring Mission (SMM), envisages the separation of forces and equipment as well as the dismantling of fortifications and demining.

² OCHA Ukraine, [Situation Report](#), 28 September 2020.

³ WHO and Public Health Centre of Ukraine, COVID-19 daily situation report as of 21 December 2020.

⁴ International Crisis Group, [Peace in Ukraine \(III\): The Costs of War in Donbas](#), 3 Sept 2020.

Movement restrictions which became tighter and more unpredictable with the COVID-19 pandemic have not only increased people's economic vulnerabilities, they have also added to their psychological stress.

Although two of the five crossing points partially reopened in June 2020, crossing procedures remain complicated. Following the closure of the crossing points in March 2020 and the partial reopening in June, the number of monthly crossings has been less than 10 per cent of the 1.2 million monthly crossings in 2019. Prior to COVID-19, 90 per cent of the crossings were undertaken by people living in NGCA. Out of this number, 13 per cent of crossings were to visit relatives – the impossibility of seeing loved ones is an additional source of anxiety. This leaves people feeling trapped and with no hope for improvement of the situation in the foreseeable future.

The COVID-19 pandemic has posed an additional burden on the healthcare system already weakened by the impact of the armed conflict. Since the first confirmed case of COVID-19 was reported in the conflict-affected area on 19 March 2020, the number of confirmed cases has rapidly increased. By late December 2020, Donetsk oblast (GCA) reported a case positivity rate (percentage of confirmed cases out of suspected cases) of 98.2 per cent which was the third highest rate nationwide (compared to the national average of 91 per cent), while it stood at 91.8 per cent in Luhanska oblast (GCA).³ Reports from NGCA health administrations and local media show that the situation is equally severe in NGCA, however, the lack of consistently reliable data makes it harder to understand the scale of the impact of COVID-19.

The armed conflict was yet another blow for an economically troubled region. The Donbas region had previously been the most densely populated and industrially productive part of the country. However, it faced the worst wage arrears in Ukraine with low life expectancy rates and high carbon emissions. Since the onset of hostilities, many young people have moved away leaving the region with an ageing population.⁴

The national economy has also been slowed by the effects of the COVID-19 pandemic. The Gross Domestic Product (GDP) declined by 11.4 per cent during the second quarter of 2020 causing an overall drop of 6.5 per cent during the first half of 2020. The overall GDP in 2020 is expected to contract by 5.5 per cent by the end of the year.

As highlighted, the armed conflict has had a deep impact on the affected population. Even if the situation improves and hostilities decrease, the

affected people will still need significant support to rebuild their lives that have been disrupted by the armed conflict and more recently by the COVID-19 pandemic. They will need support to regain their self-confidence and self-sufficiency, however, the road to recovery is long. Humanitarian needs are expected to persist, especially in NGCA, until peace is achieved and recovery can be initiated. For more information, please refer to the “Context of the Crisis” and “Impact of the Crisis” sections in the 2021 Humanitarian Needs Overview.

**HNUTOVE VILLAGE, DONETSKA
OBLAST, GCA, UKRAINE**

Mark and Erik, who lost their father in a landmine accident, live in a house near the “contact line”.

Photo: DRC-DDG/Serhii Korovayny



Response by Strategic Objective

S01: Provide emergency and time-critical assistance and ensure access to basic essential services for 1.9 million people affected by the conflict (including 189,000 IDPs), exacerbated by COVID-19.

This strategic objective seeks to save lives and ensure people's access to basic services through well-targeted assistance addressing the needs of the most vulnerable with respect to their safety and dignity. As the armed conflict continues to take a toll on the physical and mental well-being and living standards of 1.9 million people, their needs have intensified due to the effects of COVID-19.

The humanitarian response aims to provide emergency, time-critical assistance to those in need on both sides of the "contact line". An estimated 80 per cent of the overall financial requirement is intended to achieve this objective. In accordance with the needs analysis (see *HNO 2021*), priority will be given to lifesaving assistance for:

- **770,000 people living in NGCA.** Special attention will be given to meeting the needs of the elderly, pensioners, people with disabilities, female-headed families and children who have borne the brunt of the COVID-19 restrictions.
- **1.14 million people, including IDPs, living in Donetska and Luhanska oblast in GCA** who have experienced the negative consequences of the armed conflict and COVID-19, including difficult access to basic services such as health care, transport, education, water and livelihoods.
- **An estimated 10,000 IDPs living in other oblasts across Ukraine** where particular pockets of humanitarian needs also exist. These include IDPs living in dire conditions in collective centres.

S02: Respond to the protection needs and strengthen protection of 1.5 million conflict-affected people, including 189,000 IDPs, with due regard to international norms and standards.

The humanitarian response aims to strengthen the protection of 1.46 million conflict-affected people, including 189,000 IDPs. An estimated 10 per cent of the overall financial requirement is intended to support this objective as many of the activities supporting this objective are advocacy-related. The interventions advocate for the protection of civilians, access to social payments and documentation, freedom of movement, issues concerning landmines/explosive remnants of war (ERW) and for the integration of IDPs with due regard to international norms and standards. While people in NGCA are particularly affected by difficulties accessing pensions, social entitlements and civil documentation – and even more so in times of COVID-19 due to related restrictions – people on both sides of the "contact line" require physical protection from hostilities, mines and ERWs. IDPs in particular require durable solutions for a better future.

S03: Ensure implementation of a humanitarian exit strategy in Government-controlled areas from 2021-2023

The humanitarian response aims to enable the Government of Ukraine, particularly regional and local authorities, to improve its service provision in GCA for its citizens with a view to delivering future humanitarian response through basic services.⁵ This reflects the humanitarian community's ambition to gradually phase out humanitarian response in GCA by 2021 as the Government of Ukraine is able to provide more support and services. The proportion of the 2021 HRP's financial requirement contributing

⁵ Future efforts for strengthening local capacity will focus on five thematic areas, namely mine action, legal assistance, education, health and WASH. These thematic areas were established jointly by the Humanitarian Country Team and the UN Country Team in February 2019 for possible collaboration with development and other non-humanitarian actors.

to achieve this remains at a level similar to 2020 (below 10 per cent). The capacity of national and local responders and authorities will be strengthened at oblast, rayon and municipal levels aiming to transfer technical know-how. Efforts will be undertaken to

assess the possibility of delivering humanitarian services through Ukrainian institutions, which will in turn strengthen sustainability and the social contract between the state and its people.

STRATEGIC OBJECTIVE	PEOPLE TARGETED	REQUIREMENTS (US\$)
S01 Provide emergency and time-critical assistance and ensure access to basic essential services, to 1.9 million people affected by the conflict (including 189,000 IDPs), exacerbated by COVID-19.	1.9M 	141M
S02 Respond to the protection needs and strengthen protection of 1.5 million conflict-affected people, including 189,000 IDPs, with regard to international norms and standards.	1.5M 	\$19M
S03 Ensure implementation of a humanitarian exit strategy in Government-controlled areas from 2021-2023.	1.1M 	\$8M

Planned Response

PEOPLE IN NEED	PEOPLE TARGETED	WOMEN	CHILDREN	ELDERLY	WITH DISABILITY
3.4M	1.9M	54%	14%	41%	13%



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations

HRP Key Figures

Humanitarian Response by Targeted Groups

More on pages 20–23

POPULATION GROUP	PEOPLE IN NEED	PEOPLE TARGETED	IN NEED TARGET
Residents	3.0M	1.7M	
IDPs	343k	189k	

Humanitarian Response by Gender

More on pages 20–23

GENDER	PEOPLE IN NEED	PEOPLE TARGETED	IN NEED TARGET	% TARGETED
Women	1.9M	1M		54%
Men	1.5M	0.9M		46%

Humanitarian Response by Age

More on pages 20–23

AGE	PEOPLE IN NEED	PEOPLE TARGETED	IN NEED TARGET	% TARGETED
Children (0-17)	494k	267k		14%
Adults (18-59)	1.6M	857k		45%
Elderly (60+)	1.3M	781k		41%

Humanitarian Response for Persons with Disability

More on pages 20–23

	PEOPLE IN NEED	PEOPLE TARGETED	IN NEED TARGET	% TARGETED
Persons with disability	437k	247k		13%

Financial Requirements by Sector

More on pages 50–90

SECTOR	FINANCIAL REQUIREMENTS (MILLION US\$ AND %)
Protection	\$50 30%
Health	\$29 17%
WASH	\$27 16%
Shelter / Non-Food Items (NFI)	\$23 14%
Food Security and Livelihoods	\$21 13%
Common Services & Support	\$7 4%
Education	\$6 3%
Multipurpose Cash Assistance	\$5 3%

Number of Partners and Projects by Sector

More on pages 50–90

SECTOR	NUMBER OF PARTNERS	NUMBER OF PROJECTS
Protection	25	31
Health	16	20
WASH	15	17
Shelter / Non-Food Items (NFI)	15	17
Food Security and Livelihoods	14	17
Common Services & Support	4	4
Education	4	5
Multipurpose Cash Assistance	8	8

Historic Trends

Humanitarian response

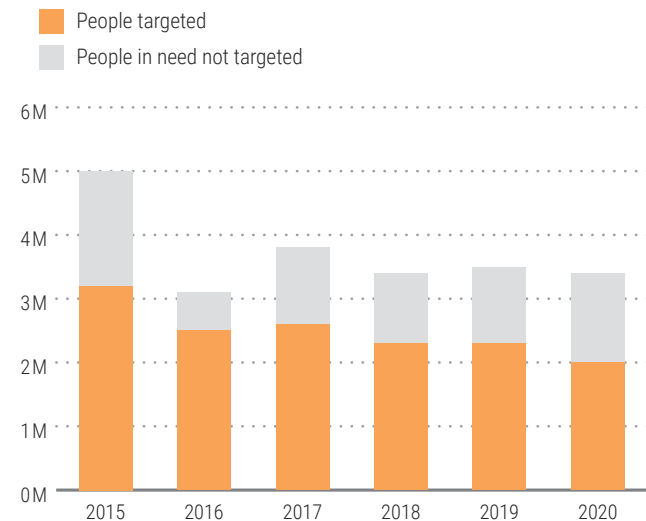
During the first three years of the armed conflict, the humanitarian response in Donetsk and Luhanska oblasts scaled up significantly. Since 2017, the number of people in need of humanitarian assistance arising from the armed conflict have remained at about the same level, however, in 2020, the needs have become more severe due to the effects of the COVID-19 pandemic. The psychological impact of the crisis is growing by the day⁶ while the socioeconomic consequences due to loss of livelihoods and deteriorating basic services are pushing some people into deeper vulnerability.

On average, the humanitarian community has targeted the needs of around two million people per year since 2016 – or around 60 to 65 per cent of

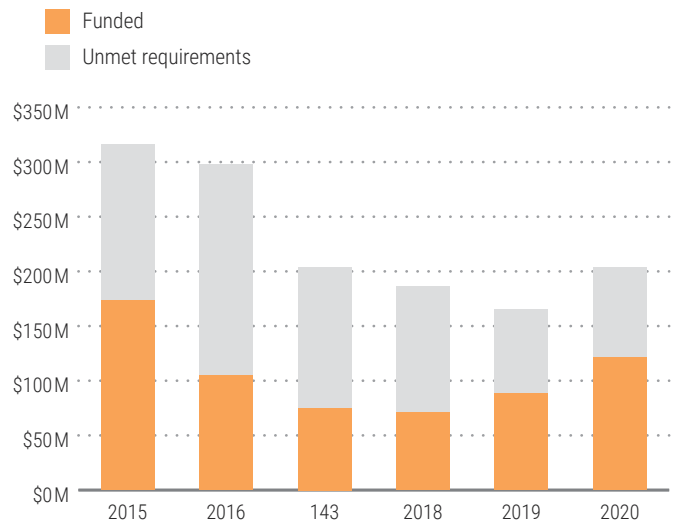
the total number of people in need. The number of people targeted reflects a realistic annual projection of humanitarian funding to Ukraine as well as the reality of operational capacity and restrictions faced by partners in delivering assistance in areas where access impediments have been observed.⁷

The number of people reached by the humanitarian community has remained at a similar level over the past few years – between 1.0 million and 1.2 million people annually. The number of people reached accounts for at least 50 per cent of the number targeted in a given year, reflecting the level of funding received and access impediments that have curtailed the ability to respond.

NUMBER OF PEOPLE IN NEED VS TARGETED



FINANCIAL REQUIREMENTS (US\$)



6 70 per cent of people living within 20 kilometres of the “contact line” show signs of psychological distress and emotional difficulties.

7 This is evident in the reduced number of people targeted between the 2017 and 2018 HRPs, which coincided with the closure of WFP’s operation in Ukraine in mid-2017 when the 2018 response planning was about to commence.

NUMBER OF PEOPLE IN NEED VS TARGETED AND FINANCIAL REQUIREMENTS (US\$)

YEAR OF APPEAL	PEOPLE IN NEED (IN MILLION)	PEOPLE TARGETED (IN MILLION)	PEOPLE REACHED (IN MILLION)	REQUIREMENTS (MILLION US\$)	FUNDING RECEIVED (MILLION US\$) ⁷	% FUNDED
2015	5.0	3.2	2.0	316	173	55%
2016	3.1	2.5	1.7	298	105	35%
2017	3.8	2.6	1.1	204	75	37%
2018	3.4	2.3	1.1	187	71	38%
2019	3.5	2.3	1.1	164	88	53%
2020*	3.4	2.0	1.0	205	122	59%

* Number of people reached during first nine months of 2020. Funding received as of 28 December 2020.

Financial requirements

Ukraine has used project-based costing since the first HRP in 2015, so the financial requirements reflected in the Humanitarian Response Plans over the past six years have been the sum of the financial requirement of approved projects.⁹

Compared to the 2020 revised HRP, which included the COVID-19 response, the financial requirement for 2021 has dropped by \$37 million (from \$205 million in 2020 to \$168 million in 2021), while the number of people targeted remains about the same. This figure reflects an extremely strict and focused prioritisation that all partners agreed upon to develop the minimum requirements essential for meeting the basic needs and preventing further deterioration of the situation.

⁸ [Financial Tracking Service](#), 27 December 2020.

⁹ An HRP includes an average of 100 projects. However, between the 2017 and 2018 HRPs, the financial requirement dropped significantly by \$27 million, which was due to WFP shutting down its operation.

Part 1: Strategic Response Priorities

NOVOSELIVKA DRUHA VILLAGE, DONETSKA OBLAST, GCA, UKRAINE

A man and a woman fill in documents needed to collect winter assistance.

Photo: OCHA/Yevhen Maloletka



Humanitarian needs in the conflict-affected areas are expected to remain severe or become even more so in 2021 due to the COVID-19 pandemic. Some 3.4 million people are expected to be in need of humanitarian assistance. Humanitarian partners aim to assist 1.9 million people placing primary emphasis on providing lifesaving and time-critical assistance, strengthening

protection, enhancing the capacity of the Government of Ukraine and local actors to gradually take over humanitarian delivery in areas under its control, and on expanding humanitarian access in order to deliver assistance in accordance with needs.

YENAKIIEVE, DONETSKA OBLAST, NGCA, UKRAINE

Yuliia, a mother of three, stands with her new-born baby in a dormitory. She has been living there since 2015 after her house was destroyed by shelling. Photo: IOM/Polina Perfilieva



1.1

Humanitarian Conditions and Underlying Factors Targeted for Response

Humanitarian conditions are present when the impact that any shocks or events have on people has been identified in terms of magnitude and is analysed in terms of severity. Humanitarian conditions are assessed along three dimensions: impact on physical and mental well-being; living standards; and coping mechanisms.

As the humanitarian context differs significantly between the areas controlled by the Government of Ukraine (GCA) and those beyond it (NGCA), the response plan also differentiates between these two areas. The response also aims to address the different needs of rural and urban residents as well as internally displaced persons (IDPs) who are only present in GCA. The consequences of COVID-19 on the population and operational context have also been taken into account in this response planning.

Humanitarian response in Government-controlled areas (GCA)

PEOPLE IN NEED (PIN)	PIN BY WOMEN MEN (%)	PIN BY CHILDREN ADULTS ELDERLY (%)	PIN BY DISABILITY (%)
1.7M*	54 46	14 35 51	14

* Including 1.5 million people in GCA of Donetsk and Luhansk oblasts and 0.2 million of IDPs in other oblasts.

Six years of armed conflict have had a devastating effect on all aspects of the daily lives of millions of people, from limiting their access to food, health care, education and social benefits to causing them to live in constant fear for their lives. The armed conflict has also accelerated the economic deterioration of the region which was already in decline before the armed conflict started in 2014. Not only have people been unable to seize development opportunities, they have experienced a deterioration in their well-being and

living standards. The arrival of the COVID-19 pandemic has exacerbated the situation in all aspects of life, exposing pre-existing challenges in social services, legal framework, town planning, infrastructure, labour market and economic fragility.

Associated factors

- **The armed conflict has differently impacted the physical and mental well-being of people depending on their exposure to hostilities, their physical vulnerability and their socioeconomic status.** People living close to the “contact line”, where fighting and mine contamination are most prevalent, suffer most from threat to life and injury. Those living in isolated settlements along the “contact line” are particularly affected as they are also cut off from access to basic services and markets, although pockets of vulnerability also exist farther away. Vulnerable groups, such as the elderly, people with disabilities, and women and children, bear the brunt of the consequences of the armed conflict.
- **Vulnerable populations in GCA are faced with multiple risks and critical problems ranging from the risk of death and physical injury from shelling, widespread mine contamination and ERWs to difficulties in accessing quality health care and the lack of adequate trauma care and other forms of emergency health services as well as access to education.** Damaged houses and property and the disruption of heating and electricity expose people to the elements and harsh weather conditions which require the distribution of household items, particularly during winter.
- **The absence of running water and inadequate sanitary conditions, including the disposal of solid waste, increases health risks.** Difficulties in accessing local markets means people cannot purchase basic goods and services while residents

of isolated settlements are often cut off from basic services due to insecurity and disrupted road infrastructure. Mental health issues can be witnessed which are either due to violence and stress or are related to increased gender-based violence (GBV). The high level of unemployment and resulting poverty also affect people's access to services and food forcing some to adopt negative coping strategies such as borrowing food, relying on help from family and friends or parents reducing their food intake to feed their children.¹⁰

The affected populations' living standards are negatively impacted by the disruption of basic services such as water, electricity, public transport and health care. The "contact line" has severed local service networks, markets and employment opportunities between GCA and NGCA. This has led to a "reorganization" of networks, forcing people, particularly in rural areas, to make new connections and seek services and employment in new locations. This phenomenon has placed an additional burden on services and capacities in urban areas that have not been directly affected by the armed conflict, but now have to serve a larger population. IDPs face difficulties related to durable solutions and seek greater support in the areas of livelihoods and housing.

Humanitarian response in non-Government-controlled areas (NGCA)

PEOPLE IN NEED (PIN)	PIN BY WOMEN MEN (%)	PIN BY CHILDREN ADULTS ELDERLY (%)	PIN BY DISABILITY (%)
1.7M	54 46	14 59 26	12

The non-Government-controlled areas of Donetsk oblast are primarily densely built-up industrial

territory whereas NGCA of Luhanska oblast are more agricultural. The effect of the armed conflict has been especially detrimental to the areas outside of Government control as they have been entirely cut off from the rest of Ukraine. The crisis has diminished development opportunities and banking restrictions have made investment in NGCA impossible. The nature of humanitarian needs in NGCA are similar to GCA, however, they are higher in severity and magnitude. The COVID-19 pandemic and its ensuing restrictions have posed additional pressure on the people living in NGCA, cutting them off from social services and entitlements as well as deepening their socioeconomic exclusion.

Associated factors

- **The closure of the entry/exit crossing points (EECPs) has led to a grave socioeconomic exclusion of the population in NGCA.** The number of crossings of the "contact line" dropped by 97 to 98 per cent in November and October 2020, respectively, compared to the same period of 2019. The drastic reduction is entirely attributed to restrictions imposed during the COVID-19 pandemic. Most affected are the elderly who made up around 60 per cent of the individual crossings before the pandemic. NGCA residents suffer more from the restrictions than their peers in GCA: in pre-COVID times, 90 per cent of the crossings were from NGCA to GCA to access pensions, social and financial services and to deal with documentation issues. An estimated 360,000 people have been unable to recover pensions while an estimated 200,000 have been unable to withdraw cash which has negatively affected their economic security.^{11,12} After nine months without accessing GCA pensions, which is the main source

¹⁰ The use of negative coping strategies was more prevalent in areas within 5km of the "contact line" in GCA, particularly in rural areas. Evidence suggests that the majority of people in this area may not be able to meet a minimum standard of living.

¹¹ According to media reports, over UAH2 billion accumulated in the accounts of Oschadbank, the main state bank in GCA, as COVID-19 travel restrictions prevented thousands of NGCA pensioners from collecting their banking cards which are needed to withdraw pensions and other social benefits. As of October 2020, more than 270,000 banking cards had not been picked up.

¹² These figures are based on the [analysis of the entry and exit flows through the crossing points during 2019 and early 2020](#) (prior to the closure of the crossing points in late March) to develop average percentages that were used as coefficients for calculation. The analysis was based on the monthly crossing statistics of State Border Guard Service and the monthly monitor of the crossing points by the NGO Right to Protection (R2P) as proxies. On average, there were 1.2 million crossings through the EECPs each month during 2019 and early 2020. This figure represents the number of *crossings* – not the number of people. It is assumed that because most people make a return journey, every two crossings represents one person – hence a rough average of 600,000 people crossing the "contact line" each month.

of income for many in addition to their NGCA pensions, pensioners have been forced to find alternative ways to survive such as depending more on NGCA pensions, depleting their savings, selling household goods, borrowing money¹³ or by accessing their pensions in GCA through costly and legally challenging routes.

- **The further curtailment of freedom of movement across the “contact line” has restricted access to civil documentation (birth and death certificates as well as education certificates) for those living in NGCA.** The lack of civil documentation has a pervasive impact on every aspect of people’s lives, limiting access to services and entitlements and freedom of movement. Only 45 per cent of children born in Donetska and Luhanska oblasts (NGCA) since the start of the armed conflict have a birth certificate issued by the Government of Ukraine.¹⁴ Official confirmation of deaths in NGCA is also difficult to obtain which may lead to challenges concerning inheritance and property rights. In the absence of administrative procedures, people residing in NGCA must go to court to establish the fact of birth/death before relevant certificates can be issued thus putting an additional financial and logistic burden on families. Restricted movement across the “contact line” due to COVID-19-related restrictions has made it difficult to travel to GCA to obtain the necessary documentation, which will pose difficulties in the confirmation of relevant facts in courts in the future.
- **Economic security has been highlighted as a priority need for most affected people in NGCA.** Six in ten heads of households are pensioners while only 25 per cent are employed full-time (21 per cent in trade; 12 per cent in industry and eight per cent in health care¹⁵ among others). Due to the temporary crossing point closures and COVID-19-related movement restrictions, the share

of people having GCA pensions and social benefits as their main source of income dropped to 13 per cent in October 2020. The share of people relying on salaries also dropped from 47 per cent pre-COVID-19¹⁶ to 39 per cent in September 2020.¹⁷

- **The healthcare system in NGCA faces three main challenges: shortage of specialised medical personnel; lack of maintenance of healthcare facilities and medical equipment; and the high cost of medicines and treatment.** The departure of many healthcare workers from the region since the beginning of the armed conflict has led to a shortage of specialised healthcare staff, particularly in Luhanska oblast. Many of the healthcare workers who remain lack training, experience and appropriate skills to treat patients which is particularly problematic in times of COVID-19. Lack of or inadequate medical equipment, particularly in health facilities outside the two main cities of Donetsk and Luhansk, has compromised the quality of health care. The high cost of medicines and treatment is a concern. Almost a quarter of families living in NGCA report that they are forced to cut costs for essential health care as they are unable to afford it. And even when they can afford it, it is often not available. In Luhanska oblast, a shortage of basic medicines, particularly antibiotics and anti-viral drugs, has recently been reported in both urban and rural areas.¹⁸
- **Inadequate access to sufficient water for domestic use.** Thirty per cent of the affected population have only intermittent or no access to running water. Disruptions are more frequent in Luhanska oblast outside the city where 40 to 50 per cent of the respondents reported limited or no access to water, and almost 20 per cent claim that the water situation has deteriorated considerably since the start of COVID-19. This

According to the monthly crossing point monitor by R2P, around 93 per cent of the crossings were done by people living in NGCA. The main reason for crossing was to recover pension (around 65%) and withdrawing cash (around 40 per cent).

13 REACH, Humanitarian Situation Monitor in NGCA, October 2020.

14 UN Briefing Note on Birth Registration, March 2020.

15 REACH, Humanitarian Situation Monitor in NGCA, October 2020.

16 REACH, Multi-sectoral Needs Assessment in NGCA, February 2020.

17 REACH, Humanitarian Situation Monitor in NGCA, October 2020.

18 Ibid.

- is concerning as adequate hygiene practices are particularly important in times of the pandemic.¹⁹
- **Bureaucratic hurdles for NGCA education certificates to be recognised by the Government of Ukraine.** Despite recent steps to simplify procedures for NGCA graduates to enter GCA universities, they still face numerous barriers to continue their education outside NGCA. These include pressure on children to study extra subjects, expenses associated with education in GCA, inability to cross the “contact line” or the absence of a valid Ukrainian passport. These obstacles prevent young people in NGCA from enjoying the same rights as the citizens of Ukraine in accessing education. Young people in NGCA also report challenges in validating educational credentials for use outside NGCA. Since the beginning of the armed conflict, around 140,000 boys and girls have received NGCA education certificates, including both middle and high school certificates (nine and 11 grades).²⁰
 - **Delivery of humanitarian aid to NGCA, particularly to Luhanska oblast, has been more challenging since the onset of the COVID-19 pandemic.** This is due to the introduction of multiple COVID-19 restrictive measures and regulations imposed by the Government and entities in control in NGCA that are continually changing. The fact that the only crossing point in Luhanska oblast is a pedestrian-only bridge has made transportation of humanitarian items more difficult as they have to be hand-carried across. Pre-COVID-19 all humanitarian convoys to Luhansk (NGCA) had to transit via Donetska oblast (NGCA),²¹ however, this arrangement has become more problematic due to additional restrictive measures that have been put in place by NGCA entities. By the end of November 2020, only two UN-organised humanitarian convoys had successfully reached Luhanska oblast (NGCA) via Donetska oblast (NGCA) since the start of the COVID-19 pandemic. Between March and October 2020, there was a 14 per cent drop in the cargos delivered to NGCA of both oblasts compared to the same period in 2019, and a 20 per cent drop in the cargos specifically delivered to Luhanska oblast (NGCA) during the same period. This is concerning given that there is a higher severity of needs in NGCA.
 - **Prior to COVID-19, living conditions in NGCA were already difficult due to socioeconomic challenges, lack of assistance, pre-conflict poverty and unaddressed impacts of heavy fighting in the area in 2014 and 2015.** Further exclusion due to the various restrictions on crossing the “contact line” has isolated the region from the rest of Ukraine even more.

19 Ibid.

20 Education Cluster – for more information see Sectoral Section.

21 Prior to COVID-19, all cargo from GCA to Luhansk (NGCA) was via transit through Donetsk (NGCA).

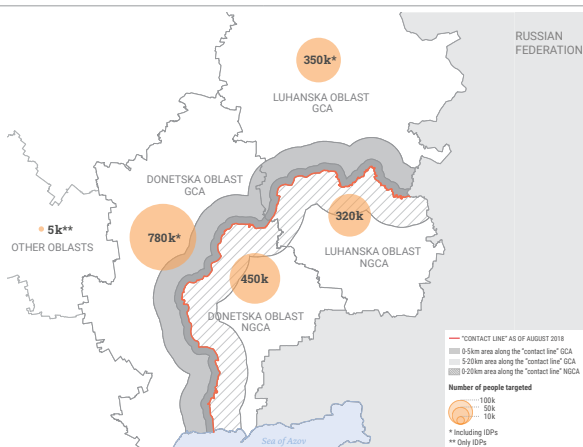
1.2

Strategic Objectives, Specific Objectives and Response Approach

Based on the Humanitarian Needs Overview (HNO), three strategic objectives have been established to guide the 2021 humanitarian response. Each strategic objective is complemented by a set of specific objectives that provide detailed description of the desirable results through a combination of direct service provision, in-kind support, cash and voucher (CVA), community-based support and capacity strengthening of the regional Government authorities and local responders. Success and impact of the 2021 humanitarian response will be ensured and assessed by a set of the intersectoral indicators against strategic and specific objectives. The coordinated response will be accompanied by improved coordination, accountability mechanisms and advocacy.

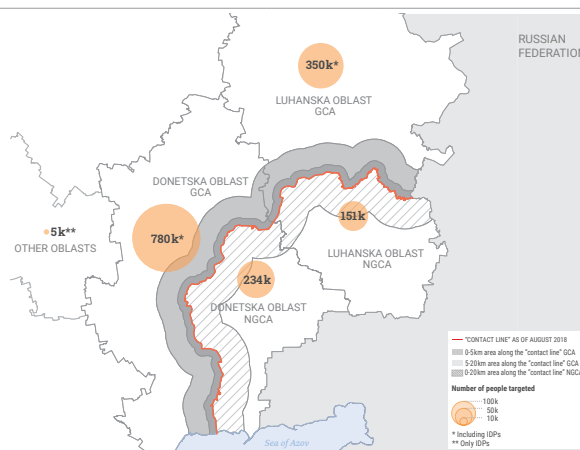
Strategic Objective 1

Provide emergency and time-critical assistance and ensure access to basic essential services for 1.9 million people affected by the conflict (including 189,000 IDPs), exacerbated by COVID-19.



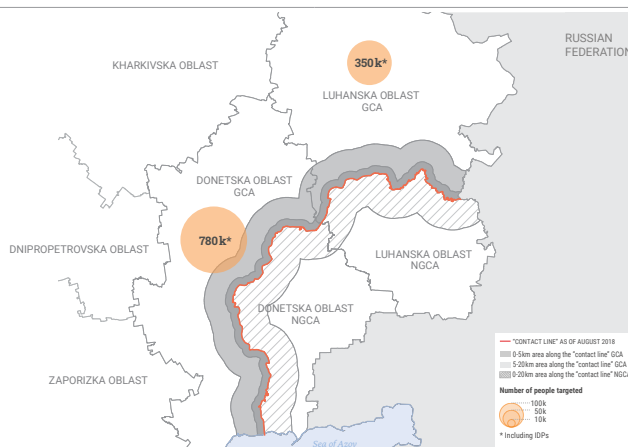
Strategic Objective 2

Respond to the protection needs and strengthen protection of 1.5 million conflict-affected people, including 189,000 IDPs, with due regard to international norms and standards.



Strategic Objective 3

Ensure implementation of a humanitarian exit strategy in Government-controlled areas from 2021-2023.



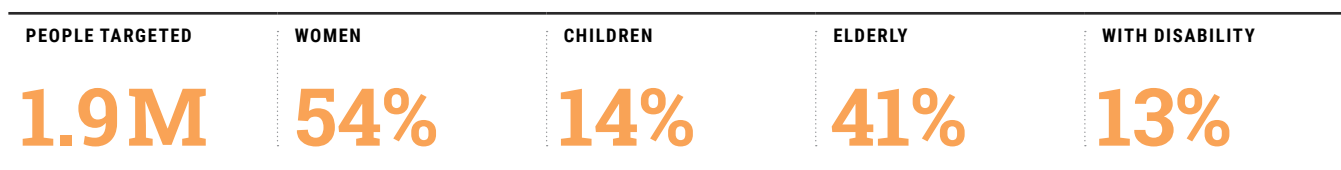
Strategic Objective 1

Provide emergency and time-critical assistance and ensure access to basic essential services for 1.9 million people affected by the conflict (including 189,000 IDPs), exacerbated by COVID-19.



NOVOTOSHKIVSKE VILLAGE, LUHANSKA OBLAST, GCA, UKRAINE

A humanitarian worker delivers solid fuel to conflict-affected people living along the “contact line”.
Photo: OCHA/Yevhen Maloletka



Rationale and intended outcome

The strategic objective seeks to save lives and ensure people’s access to basic services through well-targeted assistance addressing the needs of the most vulnerable with respect to their safety and dignity.

The armed conflict continues to take a toll on the physical and mental well-being and living standards of some 1.9 million people. Their needs have intensified due to the effects of COVID-19. Despite the

relative calm following the ceasefire that began on 27 July 2020, heavy landmine and ERW contamination still pose a fatal threat to the lives of many conflict-affected people. COVID-19-related restrictions have curtailed people’s access to markets and livelihoods as well as to pensions and social entitlement which is particularly challenging for those living in isolated communities along the “contact line”. The temporary closures of the crossing points have made it hard for NGCA residents to access pensions, administrative

services, social benefits and entitlements in GCA. The socioeconomic decline of the region, further aggravated by COVID-19 restrictions, has resulted in greater needs of livelihood opportunities for the most vulnerable.

Specific objectives and response approach

This strategic objective is supported by three specific objectives:

Specific Objective 1.1: Provide lifesaving assistance for people affected by the conflict, including IDPs.

This specific objective recognises that emergency needs are particularly high in the areas with active hostilities and heavy contamination of landmines, as well as in the entire NGCA due to the economic isolation and less aid delivered in the past. The response aims to deliver assistance to where the affected populations are, wherever feasible. It takes into account the many hurdles people may face to reach essential services due to restricted freedom of movement, isolation from important urban centres due to the “contact line” and COVID-19 restrictions. Much of the assistance under this objective is related to health and cash interventions, but also includes critical protection services such as explosive ordnance risk education, shelter repair, provision of water and sanitation services, repair of damaged schools, distribution of essential education supplies and food assistance.

Specific Objective 1.2: Improve living standards through ensuring people’s access to essential services. This specific objective recognises the need to ensure people’s access to essential services. This includes access to quality education, health care, water, sanitation and hygiene as well as essential protection services. To this end, humanitarian actors will support income generation, proper functioning of school and pre-school facilities, water system maintenance and strengthening healthcare systems including for COVID-19 response.

Specific Objective 1.3: Expand and secure humanitarian access to all people in need. This specific objective seeks to enable the response on both sides of the “contact line” and acknowledges the different types and drivers of restrictions. Even though no programmatic interventions are foreseen within this specific objective, a large part of the work will be facilitated by the HCT Access Task Force such as the development of joint operating principles and agreed minimum standards to facilitate and ease humanitarian action in NGCA. The existing mechanisms such as the Ukraine Humanitarian Fund (UHF) will be utilised to support the facilitation of greater access.

Strategic Objective 2

Respond to the protection needs and strengthen protection of 1.5 million conflict-affected people, including 189,000 IDPs, with due regard to international norms and standards.



AVDIIVKA, DONETSKA OBLAST, GCA, UKRAINE

A woman rides her bicycle alongside a minefield.

Photo: PIN/Alyona Budagovska

PEOPLE TARGETED

2.8M

WOMEN

57%

CHILDREN

22%

ELDERLY

19%

WITH DISABILITY

6%

Rationale and intended outcome

Violations of international humanitarian law (IHL) and international human rights law (IHRL) have been observed in the humanitarian crisis in Ukraine.

This strategic objective aims to strengthen the protection of 1.46 million conflict-affected people by promoting and advocating for respecting IHL and IHRL, demanding accountability and mitigating the impact of violations.

This strategic objective prioritises six key protection concerns (no specific order of priority): protection of civilians and civilian infrastructure; access to pensions and social benefits; access to civil documentation; freedom of movement; protection from landmine and ERW and durable solutions and integration of IDPs.

This strategic objective targets the entire population in need across the two conflict-affected oblasts and in pockets across the rest of the country. It aims to alleviate the

suffering of those people who continue to face serious risks to their safety, well-being and entitlement to their basic rights. The activities under this objective seek to strengthen the protection environment working closely with all stakeholders. Activities under this strategic objective are advocacy-focused and seek to call upon the duty bearers under IHL and IHRL to adhere to international obligations, standards and norms and to respect the rights of conflict-affected people. It is important to note that “operational” protection services such as legal aid, mine risk education, demining, GBV response, etc. that seek to address the protection needs of conflict-affected people are captured under SO1.

Specific objectives and response approach

This strategic objective is supported by five specific objectives, defined thematically, as follows:

Specific Objective 2.1: Step up efforts to protect civilians and civilian infrastructure according to IHL and other legal instruments. This objective recognises the need for taking measures to protect civilians and civilian infrastructure from the effects of armed conflict. Efforts will be made to advocate for the implementation of the Safe School Declaration (SSD) endorsed by the Government of Ukraine in November 2019 and for the full adoption of the *National Strategy for the Protection of Civilians in Armed Conflict*, a draft Presidential decree of which was approved in 2020.

Specific Objective 2.2: Improve access to social entitlements and civil documentation for civilians residing in NGCA.

This specific objective recognises the need to ease and systematise the procedures for civilians to access state administrative services such as registering a birth or a death, identification documents and education certificates. Even though some progress has been made over the past few years, the issue has not yet been fully addressed and has been further complicated by the consequences of COVID-19. Humanitarian actors will continue to advocate for an efficient civil registration system which is accessible to all civilians within the entire territory of Ukraine.

Specific Objective 2.3: Improve conditions and ease restrictions on movement for civilians and goods across the “contact line”. This specific objective recognises the need for simplified, systematic and safe crossing procedures of the “contact line” and less cumbersome passage for civilians and goods, particularly in times of COVID-19. It also advocates

for adequate facilities and structure at all crossing points, including COVID-19 testing, appropriate hygiene facilities, sufficient space for social distancing and WiFi to download the mandatory smartphone app called *Dii Vdoma (Act at Home)* required by the GoU for home quarantine. The humanitarian community will continue to work with government counterparts to address the remaining legislative issues that impact people’s freedom of movement. Further efforts must also be undertaken in areas outside of Government control.

Specific Objective 2.4: Prevent and mitigate physical harm and risks of landmines and explosive remnants of war (ERW).

This objective recognises the need for actions to reduce the risks of landmines and ERWs. On 9 December 2020, amendment to the Mine Action Law (Law n. 911-IX) was signed by the President. The amendment envisages operationalization of the mine action response through establishment of the National Mine Action Authority chaired by the Ministry of Defence and Mine Action Centres in Ministry of Defence and State Emergency Service of Ukraine. Additional by-laws and SOPs are yet to be developed to ensure full implementation of the law, in particular development of the frameworks for the National Mine Action Authority, Mine Action Centres and the Humanitarian Demining Centre and, set of procedures for the mine victim assistance component, review on National Mine Action standards, drafting of National Mine Action Strategy etc. In collaboration with Verkhovna Rada and government, humanitarian actors will continue to provide technical expertise and support to operationalize the current legislation, including advocacy for an adequate allocation of budget. Humanitarian actors will continue to advocate for strengthened mine-action and explosive ordnance risk education with unimpeded access for mine action actors to all contaminated areas. Advocacy efforts will also go towards reinforcing services for children and families who survived a mine or ERW accident.

Specific Objective 2.5: Promote durable solutions for IDPs living in GCA. This objective recognises the need to identify durable solutions for IDPs through strengthening the implementation of Ukraine’s strategy for IDPs. Building upon the progress on IDP integration including introducing voting rights for IDPs, social housing for IDPs and digitalisation of IDP certificates, humanitarian actors will continue to advocate for the extension of the current national IDP Strategy Action Plan beyond 2020 and will help mobilise adequate financial resources for the Action Plan’s full implementation.

Strategic Objective 3

Ensure implementation of a humanitarian exit strategy in Government-controlled areas from 2021-2023



OPYTNE VILLAGE, DONETSKA OBLAST, GCA, UKRAINE

Vasyl, 80 years old, stands at the gate of his house pockmarked by shrapnel. The hand-painted sign on the gate says "Живу [I live]", which indicates that a house is still inhabited. Similar signs can be found on most inhabited houses along the "contact line". Photo: OCHA/Yevhen Maloletka

PEOPLE TARGETED

1.1M

WOMEN

54%

CHILDREN

14%

ELDERLY

41%

WITH DISABILITY

13%

Rationale and intended outcome

This strategic objective seeks to assist the Government of Ukraine and local actors in strengthening the delivery of humanitarian aid to the front lines of the crisis in areas under its control over the next three years. The international community will support the efforts being taken at the local, regional and national level to strengthen service delivery. This represents not only a more sustainable use of donor funding, it also recognises the strong capacity that exist to play this leadership

role. It is also important to strengthen efforts with support of the development community to transfer humanitarian assets and knowledge to local responders. While this strategic objective recognises that the Government of Ukraine is the duty bearer for its own citizens, efforts will be made to facilitate a gradual humanitarian exit from GCA over a period of three years. A clear set of benchmarks will be set every year to measure the progress of this transition.

Specific objectives and response approach

This strategic objective is supported by three specific objectives:

Specific Objective 3.1: Increase national and regional Government ownership of and responsibility for the provision of services that deliver humanitarian assistance in GCA. This specific objective recognises the need for the Government, particularly the local authorities, to take ownership of the response in GCA. Efforts will be made to increase the commitment to serve the humanitarian needs of the affected people and move from a “substitutive” approach to one that builds local capacity and services, where feasible. Strengthened advocacy with all concerned stakeholders will be essential for further progress.

Specific Objective 3.2: Strengthen capacity of local responders (NGOs, CSOs, and private sector) to complement the Government-led response. This specific objective recognises the critical role local non-governmental responders play in supporting humanitarian operations as well as their existing strong capacity and networks in Donetsk and Luhansk oblasts. Efforts will be made to strengthen their capacity to complement the Government-led response.

Specific Objective 3.3: Implement transitional programming, ensuring complementarity between humanitarian and development actions, and build the resilience of conflict-affected population. This specific objective acknowledges that enhanced linkages and collaboration between humanitarian and development actors support the wider United Nations reform agenda. The armed conflict has complicated the roll-out of the agenda as it has a direct impact on people’s needs and access to basic services as well as on service provision. By applying the “Humanitarian-Development-Nexus (HDN) lens” to certain issues derived from the armed conflict, it could potentially reinforce the reform agenda. Activities seeking to strengthen the affected communities’ resilience will also be prioritised in the response. The existing mechanisms such as the Ukraine Humanitarian Fund (UHF) will be utilised to pilot HDN programming in GCA.

New ways of working and opportunities in times of COVID-19

The COVID-19 pandemic has forced every humanitarian organization to quickly adjust to new realities. The year 2020 has been a year of steep learning, adaptation and adjustment to ensure that the response saves lives as well as mitigates the risk of COVID-19 transmission. The response must be delivered in such a way that ensures the safety of those they serve and of their humanitarian staff.

Humanitarian response has been implemented in accordance with the global and national recommendations on COVID-19 including the use of PPE among staff and adoption of social distancing measures. Other examples of programmatic adjustments are the inclusion of basic PPE and hygiene items (e.g. soaps and hand sanitiser) as well as COVID-19 information material in the response across all sectors (as much as feasible), better utilisation of secondary information/data and phone interviews in conducting assessments, the use of cash-based programming as a contactless modality of response, offering more services remotely and online (which also reaches more people), giving patients medicine sufficient for longer periods or adopting an “individual service delivery” or “door-to-door delivery” approach to minimise people’s exposure to COVID-19. As the disease will persist in 2021, this experience has generated some good practices and will be further built upon to better serve the affected people.

The pandemic emphasises the need for the response to be fast and at the same time forward-looking well beyond the pandemic. Response programming, for example, in health and WASH reflects this thinking as a large number of the interventions aim not only to address the immediate situation (e.g. contact tracing, strengthening COVID-19 testing capacity, COVID-19 training for health personnel, hygiene programme, etc.), but also to enhance the response capacity and improve the status quo in the longer run to cope with future emergencies.

The COVID-19 pandemic also reveals some structural shortcomings. One critical shortcoming in Ukraine is the absence of an adequate legal framework governing humanitarian action in emergency situations. The pandemic allows a unique opportunity for the humanitarian community to revitalise and strengthen collective advocacy for the adoption of the draft law on humanitarian action in emergency situations that was first developed in 2016. It also presents opportunities for both humanitarian and development sectors to collaborate and coordinate efforts more concretely to address both immediate and structural weaknesses as the affected people need extended support far more than immediate, lifesaving assistance to get through these challenges.

1.3 Costing Methodology

The humanitarian response planning in Ukraine has applied a project-based costing methodology since the first HRP was developed in 2015. It relies primarily on summing up the funding requirements of selected projects of different organizations to identify the financial resources needed to provide an appropriate humanitarian response.

The project-based costing methodology has a number of pros and cons. On one hand, it is recognised as a useful and familiar channel to convene humanitarian actors together to discuss and agree upon how to best respond to identified needs. It also fits well with existing tracking systems. On the other hand, it may be seen as an aggregate of projects rather than a coherent picture of the response necessary to address the needs of the affected populations with its sum perceived as a fundraising figure rather than a credible reference.²² Cognizant of the limitations of this methodology, the clusters stepped up their outreach to partners to ensure that included projects were reflective of the assessed response capacity and are fully aligned with pre-identified activities as well as sectoral and multi-sectoral outcomes aligned with the Strategic and Specific Objectives. Recognising the limitations of the project-based costing methodology for the 2022 Humanitarian Programme Cycle (HPC), the Humanitarian Country Team (HCT) has decided to adopt a unit-based costing.

The 2021 HRP consists of 96 projects with a cost of \$168 million to address the needs of 1.9 million people, including 189,000 IDPs living in GCA. All projects have been self-assessed using the Gender with Age Marker (GAM) to ensure that they sufficiently address the specific differentiated needs of women, men, girls and boys. The financial requirement reflects the operational reality including access constraints and the effect COVID-19 has on the response capacity of individual organizations. COVID-19 has made partner outreach more challenging as less physical contact is possible which affects the

number of organizations submitting their projects. Where feasible, online modalities have been adopted to facilitate discussions on the needs' analysis and response priorities. Training sessions on Project Module Systems were delivered online in Ukrainian, Russian and English to support project registrations by partners.

All projects have gone through a strict prioritisation process to ensure that they are lifesaving in nature and target the most vulnerable while taking into consideration the time-criticality and "doability" (a realistic assessment of the ability to implement the project) in times of COVID-19. To ensure the most critical lifesaving activities are prioritised, the humanitarian community in Ukraine agreed upon a common framework to guide decisions on common prioritisation criteria across all sectors. The response activities have been divided into critical, high and medium priorities to reflect the time-criticality/urgency. The prioritisation was guided by six common criteria reflecting quality humanitarian actions that

- i. save lives;
- ii. specifically address the urgent needs of the most vulnerable;
- iii. target the areas of the most severe humanitarian needs;
- iv. consider time criticality considering seasonality and COVID-19 factors;
- v. consider the probability of immediate implementation; and
- vi. are non-duplicative of, or complementary to the responses by other actors.

Each cluster has contextualised these six common criteria in their peer reviews of project proposals applying a simple scoring system for prioritisation. *For more information about the response prioritisation criteria, please refer to the Annexes.*

²² OCHA, HRP costing methodology options, July 2017.

1.4 Planning Assumptions

While only an end to the armed conflict can lead to a gradual reduction in humanitarian needs on both sides of the “contact line”, there is no concrete indication that this scenario will materialise in 2021. The 2021 scenario anticipates that the armed conflict will continue at a similar scale as in 2020 and that the deterioration of public health, protection, social and economic conditions will accelerate, also due to the effects of COVID-19 and related restrictive measures that have been and will be put in place. Below is a set of specific planning assumptions agreed by key humanitarian actors operating in Ukraine:

- Despite the latest ceasefire, the armed conflict is likely to continue with low intensity in 2021.
- COVID-19 will continue to be a major factor and the situation is expected to worsen throughout the approaching winter and persist until at least mid-2021. The epidemiological situation in NGCA is expected to be more acute due to the limited capacity of hospitals and laboratories.
- The restrictions on movement across the “contact line” will contribute to increase the level of vulnerability, particularly among NGCA residents.
- The “contact line” is likely to remain substantially closed at least until summer 2021 despite the potential opening of two new crossing points in Luhanska oblast.
- Without the opening of a new transport corridor directly to Luhanska oblast (NGCA), humanitarian convoys to Luhansk (NGCA) are likely to remain difficult as the only crossing point in Luhanska oblast (Stanytsia Luhanska) does not permit the passage of trucks and convoy transit through Donetsk (NGCA) remains complicated and restricted.
- The COVID-19 pandemic and related restrictions are likely to accelerate the deterioration of socioeconomic vulnerabilities of the people affected by the armed conflict. Economic recovery in Donetsk and Luhanska oblasts is unlikely in 2021. Communities are expected to remain dependent on support to regain their self-sufficiency and recover from the effects of the prolonged crisis and the pandemic.

CHERMALYK VILLAGE, DONETSKA OBLAST, GCA, UKRAINE

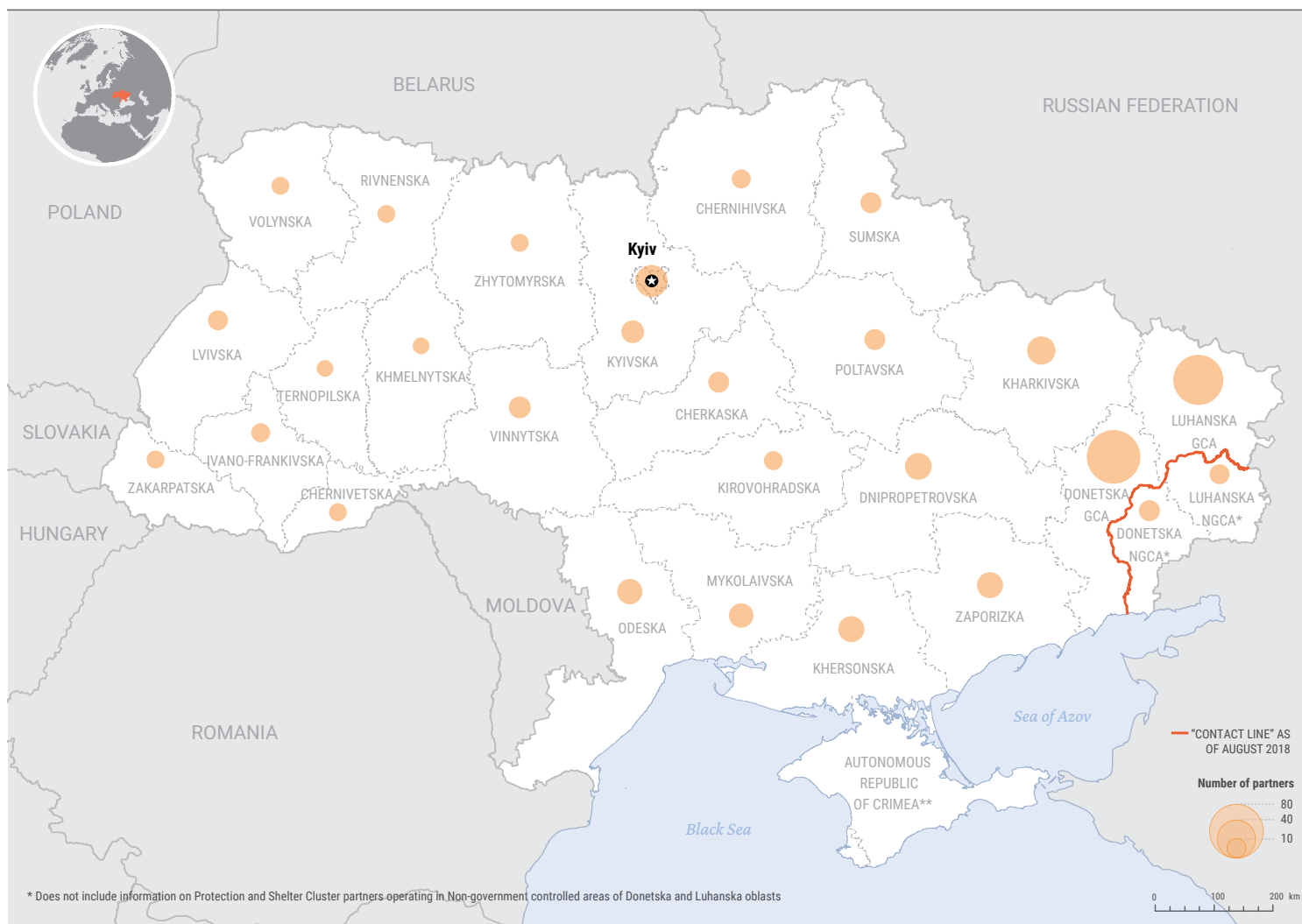
Beneficiaries line up to collect medicines from a humanitarian organization. Photo: Yevhen Maloletka



Operational capacity and access

For more information on the impact of the armed conflict and COVID-19 on operational capacity and humanitarian access, please refer to the “Impact of the Crisis” section of the 2021 HNO.

The humanitarian community in Ukraine has had a well-established operational presence across the country, particularly in the conflict-affected areas, since 2015. Based on the consolidated 3W (Who, What, Where) database, 120 organizations provide



* Does not include information on Protection and Shelter Cluster partners operating in Non-government controlled areas of Donetsk and Luhanska oblasts

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

humanitarian assistance and protection and are engaged in the collective coordination structures in 2020. Compared to the previous year, the operational capacity remains more or less the same. This is an indication of aid agencies’ continued commitment to support the conflict-affected people and their needs which are more severe this year due to COVID-19. The majority of operational partners are national NGOs as they continue to be important frontline actors in providing humanitarian assistance and protection to the most vulnerable. Out of the 120 organizations, 40 are seeking funding for the implementation of 96 projects in 2021 through the HRP.

The operational capacity in NGCA has been challenging since July 2015 due to bureaucratic impediments introduced by the NGCA entities. Around 21 organizations²³ have been delivering assistance to the people in NGCA. Even though this is up from the 12 organizations operating in NGCA in 2019, the assistance they are able to provide remains insufficient to meet the deepening needs due to existing bureaucratic hurdles that continue to restrict access. Over the past few years, humanitarian organizations

have maintained delivery of humanitarian programmes, but far below the scale required to meet the critical needs of the populations. Between 2016 and 2019, an annual average of 15 per cent of the targeted populations in NGCA received some form of humanitarian assistance. As of September 2020, humanitarian actors had already reached close to 200,000 people in NGCA, which is an increase compared to the same period in previous years.²⁴ This can be attributed to some opportunities the COVID-19 pandemic has opened for the negotiations on better access. It is anticipated that there may be gradual progress on new organizations gaining access to operate in NGCA, especially for COVID-19 response.

The volume of assistance to NGCA has been hampered by the difficulties in sending convoys, particularly since the onset of COVID-19 has led to a myriad of bureaucratic procedures. The delivery of humanitarian convoys to NGCA will depend on several factors including the severity of the COVID-19 situation, the restrictive measures in place in response to the virus, and the progress of access negotiations and bureaucratic bottlenecks with relevant actors.

Partners by Sector

SECTOR	NO. PARTNERS
Protection	67
WASH	31
Food Security & Livelihoods	20
Health	18
Education	17
Shelter and Non-Food Items	9
Multipurpose Cash Assistance	7
Common Services & Support	4

Partners by Type

TYPE	NO. PARTNERS
National NGO	69
International NGO	34
UN Agency	9
International Organization	5
Other	3

²³ This figure includes both organizations that have shared technical information with relevant entities concerning their operations to facilitate humanitarian access and those delivering assistance through local implementing partners. This includes UN agencies, NGOs, local and international organizations such as the International Committee of the Red Cross (ICRC) and the Swiss Agency for Development and Cooperation (SDC). Of 21 partners, 12 implement their activities through local partners, particularly in Donetsk oblast (NGCA).

²⁴ In 2016, 250,000 people were reached out of 1.7 million targeted; in 2017, 300,000 were reached out of 1.3 million targeted; in 2018, 200,000 people were reached out of 1.1 million targeted and in 2019, 225,000 were reached out of 1.2 million targeted.

Partners by Location

OBLAST	NO. PARTNERS	
Donetska (GCA)	72	
Luhanska (GCA)	63	
Kyiv	26	
Kharkivska	20	
Dnipropetrovska	18	
Khersonska	17	
Zaporizka	17	
Odeska	16	
Mykolaiivska	15	
Kyivska	13	
Vinnytska	12	
Cherkaska	11	
Donetska (NGCA)	11	
Poltavska	11	

OBLAST	NO. PARTNERS	
Sumska	11	
Luhanska (NGCA)	10	
Lvivska	10	
Chernihivska	9	
Ivano-Frankivska	9	
Kirovohradska	9	
Chernivetska	8	
Rivnenska	8	
Volynska	8	
Zakarpatska	8	
Zhytomyrska	8	
Khmelnyska	7	
Ternopilska	7	

Particular attention will be given to secure access to Luhanska oblast (NGCA) where most restrictions are in place.

Existing mechanisms including the Ukraine Humanitarian Fund (UHF) have played a significant role in supporting the effort to increase access to NGCA.

\$5.5 million has been allocated to enable humanitarian response in NGCA in 2020. This response has been carried out by three UN agencies, eight international and five national non-governmental organizations (NGOs).

The humanitarian community will continue to advocate for free and unimpeded access for affected people to goods and services as well as for humanitarian actors' ability to reach those in need of assistance and protection. These efforts will seek to preserve the space and increase access for humanitarian organizations to deliver assistance in NGCA while promoting international humanitarian law (IHL) and the Humanitarian Principles.

Government of Ukraine's Contribution to Humanitarian Action

The change in the political environment in 2019 opened opportunities for a different approach to address the needs of the people in the conflict-affected areas. With the Ukrainian President voicing his commitment to resolve the armed conflict, the Government has taken several significant steps to improve the lives of the conflict-affected people:

The political focus on reintegration and the establishment of a new Vice Prime Minister's position in March 2020. With the creation of a new Ministry on Reintegration of Temporally Occupied Territories and the appointment of a new Vice Prime Minister – Minister on Reintegration, the Government has reiterated its main priority to create a favourable political, economic and humanitarian environment for the reintegration of NGCA and its residents. These priorities were reflected in the Government's plan for 2020, however, they were not approved by Parliament.

Ongoing Trilateral Contact Group negotiations have led to the longest pause in hostilities since the beginning of the armed conflict. This has been a huge relief to the affected people's lives, especially for those living along the "contact line". It has facilitated humanitarian access and improved the operations of humanitarian organizations.

Steps have been taken to enable NGCA residents to continue receiving their pensions despite the COVID-19-related movement restrictions. In an effort to facilitate NGCA residents receiving social benefits and pensions, the Government has abolished the obligatory in-person verification for the period of quarantine and restrictions related to the pandemic.

The planned opening of two new crossing points in Luhanska oblast will significantly improve access to social services and other entitlements, especially for NGCA residents in Luhansk. So far, the residents of Luhansk have only been able to cross via a pedestrian bridge, however, the planned opening of the new EECs at Shchastia and Zolote should facilitate vehicle crossings in the oblast. Furthermore, all EECs are expected to be equipped with service centres, each including a mobile bank department, mobile centre for administrative services, a medical point with ambulance services, a COVID-19 testing point and adequate sanitary facilities in 2021. Two such service centres were opened at EECs at Shchastia and Novotroitske in November and December 2020, respectively. The construction of the service centres is the result of close cooperation between the Government, humanitarian actors, development agencies and the private sector.

The introduction of preferential and simplified procedures for NGCA students to enrol in universities and colleges has been a significant step for the young generation. The Government passed a law to simplify the enrolment in all Ukrainian universities under which students are not required to take the final exam. Furthermore, the list of authorised higher education institutions which NGCA students can enter

under a simplified procedure was extended to 91.²⁵ The Ukrainian government has also cancelled the 14-day quarantine requirement for school children and their accompanying adults entering GCA from NGCA in a move to facilitate access to education for youth from NGCA at the beginning of the new academic year.

Another positive development is the adoption of Resolution No. 767 which is an amendment to the 2019 compensation mechanism for people whose houses were damaged or destroyed as a result of the armed conflict.²⁶ One of the most significant changes is that people who have moved from their original home and no longer live in the place which was damaged or destroyed in the armed conflict are now also eligible to compensation payment. This is the first time since the beginning of the armed conflict that funds to compensate people whose houses were destroyed in the conflict have been allocated in the 2020 national budget. In 2020, UAH 20 million was allocated, and the 2021 budget envisages UAH 114 million for the same purpose.

The introduction of an electronic registration system for humanitarian assistance by international organizations and international and local NGOs eliminates some bureaucratic obstacles. The resolution,²⁷ which is due to come into force in December 2020, complements the existing procedure of submitting paper documents for registering goods, cargoes, cash or services to be recognised as humanitarian assistance. It is expected to facilitate the registration of humanitarian assistance and its timely delivery to beneficiaries.

Planned digitalisation of IDP certificates will facilitate IDP verification and access to social services. The planned mobile application from the Ministry for Reintegration and the Government will allow IDPs to verify their status through an app rather than paper documents. The same app could be used to apply for social services and other entitlements by sending the electronic IDP certificate to the relevant state authorities. Another advantage will be that

²⁵ Ukraine Ministry for Reintegration of the Temporarily Occupied Territories of Ukraine, 12 May 2020.

²⁶ Since the start of the armed conflict over 55,000 homes have been damaged or destroyed due to hostilities.

²⁷ The [full text](#) is available online (in Ukrainian).

IDP certificates can be reissued or issued for newly registered IDPs without leaving the house, which is beneficial especially in time of COVID-19. It is not yet clear when digital verification will be launched.

The Government has also taken significant steps to grant internally displaced persons the right to vote and participate in local elections. Resolution No. 88, which came into force in July 2020, enables local electoral authorities to accept documents such as IDP registration certificates or residential lease contracts

to link the electoral address to the factual place of residence. The resolution eliminates direct and indirect limitations of any kind and grants internally displaced persons voting rights.²⁸ This enabled IDPs to vote in the October 2020 local elections and shows a strong commitment from the Government to improve IDPs' integration into their host communities.

Housing programmes funded by foreign investors are being introduced to cover IDPs housing needs in some regions.

Response reach under 2020 HRP

SECTOR	PEOPLE IN NEED	PEOPLE TARGETED	■ IN NEED ■ TARGETED	PEOPLE REACHED*	% TARGET REACHED	■
Protection	2.8M	1.5M		886k	60%	
WASH	2.8M	2.1M		452k	21%	
Health	1.3M	1.7M		71k	4%	
Food Security & Livelihoods	1.0M	162k		29k	18%	
Education	420k	207k		21k	10%	
Shelter/NFI	384k	119k		41k	34%	
Multipurpose Cash Assistance	-	33k		9k	27%	

* Number of people reached during first nine months of 2020.

28 Reliefweb, [New resolution on voting rights in Ukraine: a key step towards guaranteeing the rights of displaced persons](#), 17 June 2020.

1.5

Accountability to Affected Populations (AAP)

Satisfaction of aid

The latest assessment reveals that nearly **80 per cent of people in GCA have received some form of assistance**.²⁹ Among them, some 90 per cent expressed their satisfaction in both the quantity and quality of assistance,³⁰ representing a 15 per cent increase compared to 2019. Similarly, the proportion of households reporting not being consulted about their needs has decreased from 72 per cent in 2019 to 62 per cent in 2020.³¹ The proportion of households with the knowledge/awareness of available complaint mechanisms has also increased from 50 per cent in 2019 to 53 per cent in 2020.³²

While these findings show a positive trend, humanitarian organizations have to do more to improve their communications with affected people about their rights and entitlements and availability of humanitarian assistance, particularly about how to register for aid. Almost six in 10 people considered themselves insufficiently informed about their rights and entitlements, while 65 per cent of respondents reported wanting to receive more information about how to register for assistance.³³

Humanitarian partners remain committed to strengthening their engagement with affected people to ensure that the response programming is informed by their feedback and preferences. A range of tools will be utilised to expand the reach and awareness of available feedback mechanisms, including the PSEA Network, the newly established HCT AAP Task Force, cluster- and organization-specific feedback and complaints mechanisms as well as the GBV-hotline.

Preferred sources of information about humanitarian assistance among Households in GCA³⁴

SOURCE OF INFORMATION ABOUT HUMANITARIAN ASSISTANCE	% HOUSEHOLDS IN GCA
International NGOs	71%
Community leader	13%
Government officials	8%
Local NGOs or Civil Society Organisations	4%

Gender and age considerations in the response

The IASC Gender with Age Marker (GAM) has been one of the mandatory requirements of the HRP. Each project in the HRP must apply a gender lens in all the design phase and put in place, where feasible, appropriate AAP mechanisms. To further reinvigorate the work on AAP, the HCT revised the AAP Framework in 2020 to facilitate the building and operationalisation of a system-wide AAP approach that is succinct, fit-for-purpose and easy to apply in all stages of humanitarian programme cycle.

Feedback and complaint mechanisms

There are some 34 hotlines operational in Ukraine administered by civil society or humanitarian organizations – some established before and some after the armed conflict. These hotlines provide counselling assistance (e.g. psychosocial counselling, legal aid, etc.) directly to people who

29 REACH, [Humanitarian Trend Analysis in GCA](#) (interactive dashboard), 2020.

30 Ibid.

31 REACH, [Humanitarian Trend Analysis in GCA](#), 2019 and 2020.

32 Ibid.

33 Ibid.

34 REACH, [Humanitarian Trend Analysis in GCA](#) (interactive dashboard), 2020.





need it and offer a channel for affected people to report problems they face. Further efforts are being made to establish systematic and meaningful links among them and/or with alternative mechanisms.

Prevention of sexual exploitation and abuse (PSEA)

PSEA has been a strategic priority of the HCT since 2019. The PSEA Task Force is chaired by OCHA (established in early 2019) and plays a pivotal role in operationalizing the prevention and response to cases

of PSEA by aid workers in Ukraine. In accordance with a multi-year PSEA Action Plan (2019-2020), the PSEA Task Force has developed a number of training kits to serve as the basis for awareness raising campaigns, build staff capacity and integrate PSEA into Civil-Military Coordination training for military, intelligence and civil authorities. The HCT PSEA Task Force has also developed a guide for hotline managers to address cases of sexual exploitation and abuse by aid workers.

Satisfaction with assistance received in GCA households³⁵

	2019	2020
 % HOUSEHOLDS CLOSE TO THE "CONTACT LINE" WHO RECEIVED ASSISTANCE IN THE PAST 12 MONTHS	49%	36% ↓
 % HOUSEHOLDS CLOSE TO THE "CONTACT LINE" WHO WERE SATISFIED WITH ASSISTANCE RECEIVED	77%	90% ↑
 % HOUSEHOLDS RECEIVING ASSISTANCE WHO REPORTED AVAILABILITY OF COMPLAINT MECHANISMS TO AID PROVIDERS	50%	53% ↑
 % HOUSEHOLDS CLOSE TO THE "CONTACT LINE" WHO REPORTED BEING CONSULTED ABOUT THEIR NEEDS OR PREFERENCES PRIOR TO AID DELIVERY	28%	53% ↑

Satisfaction with assistance received in NGCA households³⁶

	2019	2020
 % HOUSEHOLDS CLOSE TO THE "CONTACT LINE" WHO RECEIVED ASSISTANCE IN THE PAST 12 MONTHS	49%	36% ↓
 % HOUSEHOLDS RECEIVING ASSISTANCE WHO REPORTED AVAILABILITY OF COMPLAINT MECHANISMS TO AID PROVIDERS	77%	90% ↑

35 REACH, Humanitarian Trend Analysis in GCA, 2020 and 2019.

36 REACH, Multi-Sectoral Needs Assessment in NGCA, February 2020.

1.6

Consolidated Overview on the Use of Multi-Purpose Cash

Multi-purpose cash (MPC) assistance offers people affected by the crisis a maximum degree of flexibility and dignity to choose how to cover their needs.³⁷ Evidence³⁸ shows that 76 per cent of the conflict-affected population in GCA identified cash as a preferred type of assistance. Cash assistance is acknowledged to be challenging in some remote communities closest to the active hostilities where markets may not function properly. MPC has been and continues to be an important multi-sectoral response modality, particularly in GCA and, to the extent possible, in NGCA. Its primary objective is to increase the ability of people to meet their immediate basic needs and maximise the use of resources in a way that is most suited to their requirements.

Evidence shows that MPC beneficiaries generally have an income level of around 53 per cent of the minimum subsistence level which makes them unable to meet urgent basic needs. It also shows that 72 per cent of MPC beneficiaries have overlapping needs in more than two sectors, which tend to be exacerbated in winter. Without MPC support, they will not be able to meet immediate daily basic needs and are at risk of resorting to negative coping mechanisms.

Since 2016, the Ukraine Cash Working Group (CWG)³⁹ has been the main coordination forum for MPC transfers to track their implementation progress and promote a more coherent approach and standards. Transfers with objectives within a specific sector (e.g.

cash for food, for rent or for hygiene, etc.) continue to be coordinated by and reported to the relevant cluster.

Response

The CWG helps define the Minimum Expenditure Basket (MEB) which determines a household's requirement to meet its basic needs and average cost. Since 2017, the MEB approaches have been in full alignment with that of the Government of Ukraine using the Ministry of Social Policy's data on minimum expenditure⁴⁰ which is regularly updated to reflect the market dynamic as a benchmark for calculation.

For 2021 response planning, CWG partners agreed to increase the MPC transfer amount from UAH 970 to UAH 1,150 per person per month (an increase of 19 per cent) covering around 60 per cent of the minimum expenditures-income gaps (as of April 2020).⁴¹ This takes into account the negative economic impact COVID-19 has had on vulnerable populations and the increase of the official actual subsistence level. The MEB analysis shows no tendency for the average cost of living to stabilise but indicates that vulnerable groups continue to survive on an income that is significantly below the minimum cost of living. Like in previous years, MPC transfers will cover an average of four monthly instalments or longer should multiple needs persist. In some cases, the transfer will be a one-off transfer, however, the total amount will be in line with the monthly transfer value recommended by CWG.

³⁷ The Cash Learning Partnership (CaLP).

³⁸ REACH, 2020 Humanitarian Trend Analysis.

³⁹ For more information on the services provided by CWG in Ukraine, please click [here](#).

⁴⁰ The actual subsistence level in Ukraine is published on a monthly basis by the Ministry of Social Policy (MoSP). It is calculated as the cost estimate of the Minimum Expenditure Basket (MEB) which includes the minimum essential food basket, a set of non-food items (NFI) and essential services. The currently used MEB comprises a list of 296 items. As of April 2020, the minimum subsistence level was estimated at UAH 3,846 per person per month. The data is publicly available [here](#).

⁴¹ MEB methodology is available [here](#).

Targeting: MPC specifically targets the most vulnerable individuals who have multiple unmet needs and whose monthly income is lower than the minimum expenditure. As per the post-distribution monitoring, this mainly includes:

- The elderly whose sole source of income are pensions
- Female-headed households with multiple children
- Families with single parents
- Families with people with disabilities or immobile members
- Families with chronically ill members
- Families with IDPs who may lose access to their social benefits due to bureaucratic complications
- Families with unemployed members aged 50-59 (below pensionable age)⁴²
- Families with children where the breadwinner has lost the job/source of income as a result of COVID-19/quarantine restrictions

Geographic focus: Cash transfers, including MPC, are generally feasible in GCA where markets continue to function and banking and postal services offer a safe

and efficient delivery mechanisms. In NGCA, market data remains limited and insufficient to inform whether cash transfers would be realistically feasible at a larger scale. The lack of reliable financial service providers in NGCA is another major impediment to implement cash transfers there.

Coordination with other sectors: MPC partners coordinate with other clusters through (i) the ICCG, where the chair of the CWG has a permanent seat to ensure adequate coordination with other clusters, (ii) referral systems to in-kind sectoral assistance, in case of extreme or chronic vulnerabilities identified among MPC beneficiaries, and (iii) regular market monitoring by MPC partners in conflict-affected area over the past three years.

Cost of Operation

Since 2015, MPC transfers have had specific budget lines in HRP in order to quantify the requirement accurately. MPC activities in the 2021 HRP require \$5.2 million to assist 25,000 people and will be implemented by eight partners. This is a similar scope and scale of the MPC response as in 2020.

⁴² Pensionable age in Ukraine is currently 55 for females and 60 for males. However, the new legal framework stipulates the increase of pensionable age to 60 for females and 62 for males by 2021.

Part 2:

Response Monitoring

HRANITNE VILLAGE, DONETSKA OBLAST, GCA, UKRAINE

Alina, a nine-year-old girl from a hard-to-reach settlement without sufficient access to potable water, stands next to a trailer loaded with bottled water provided to her family.

Photo: UNICEF/Oleksii Filippov



2.1 Monitoring Approach

The humanitarian community in Ukraine will continue to use existing monitoring and reporting mechanisms that have been in place since 2015. To ensure protection and humanitarian aid reach the people who need it most and in a timely manner, humanitarian partners will continue to improve their monitoring and information management capacity and activities, including the use of remote monitoring during times of COVID-19 and in the area where access is difficult.

Response monitoring

The creation and subsequent monitoring of the strategic framework at the inter-cluster and cluster levels is managed by the Response Planning and Monitoring tool (RPM) which supports the HRP planning process and the periodic monitoring processes that occur in Ukraine quarterly. Partners enter response data (disaggregated by age, sex and disability status) for key cluster and cross-sectoral indicators to clusters which is submitted to OCHA and analysed as appropriate. The consolidated data is displayed on the **Humanitarian Insight Platform** which provides a visual overview of progress towards meeting humanitarian needs in 2021. Other existing tools and platforms designed or rolled out by OCHA and other partners such as the **Financial Tracking Service (FTS)**, the **Digital Situation Report** and the data platform maintained by the Ministry of Reintegration of Temporary Occupied Territories. These tools facilitate the monitoring in real time and enable humanitarian actors to analyse achievements, call attention to gaps and capture changes in the operating context.

The 2021 response monitoring will be conducted at three levels: (i) the output indicator monitored by the cluster; (ii) the monitoring against the indicator contributing to the achievement of the intersectoral

specific objectives; and (iii) the monitoring of outcomes against the strategic objective.

The Ukraine Humanitarian Fund (UHF) will also undertake monitoring of funded activities as part of its accountability framework. The UHF projects will also contribute to achieving the 2021 HRP Strategic Objectives.

Cluster monitoring

Cluster objectives, outputs, targets and indicators are based on the Humanitarian Response Plan Strategic Objectives and related inter-sector outcomes. The output indicators aggregate the contributions from cluster members' projects to summarise core activities and highlight key achievements of the cluster. This provides an indication of whether the cluster is on track to meet its targets and reach to different geographic areas. Indicators from the cluster plans will be used to monitor reach on a quarterly basis (5Ws).

Situation and needs monitoring

Humanitarian partners in Donetsk and Luhanska oblasts will continue to monitor changes in the humanitarian context based on the Joint Intersectoral Analysis Framework (JIAF) which is the backbone of the HNO. The monitoring is guided by the list of thirty indicators agreed within the framework of JIAF and optimises the various existing assessment mechanisms. They include documenting civilian casualties by OHCHR, the monitoring of security incidents by INSO and ACLED, the National Monitoring System by IOM (with focus on IDPs), other multi-sectoral assessments by REACH and COVID-19 updates and statistics provided by the Public Health Centre of Ukraine, WHO and other concerned organizations. Should any major shocks occur during 2021, the HRP will be revised in accordance with the reprioritisation of emerging needs.

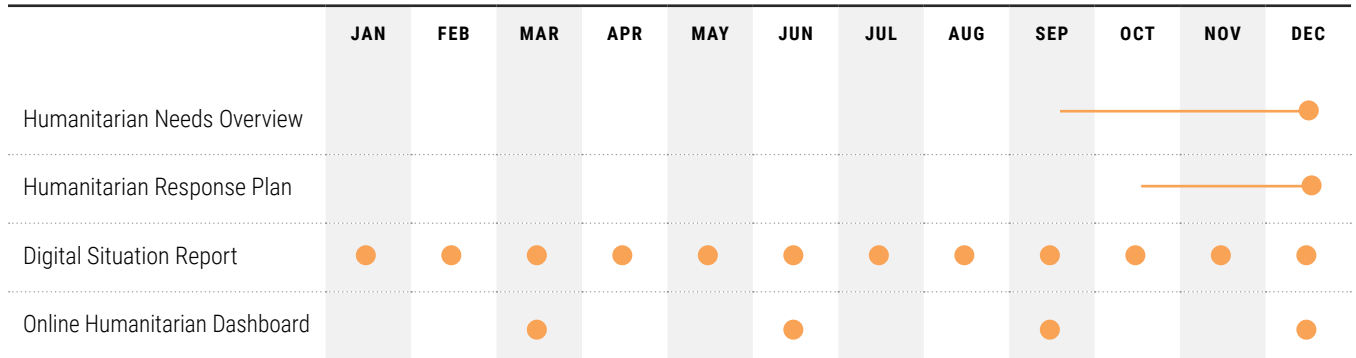
Access Monitoring

In 2020, an Access Monitoring and Reporting Framework (AMRF) was piloted to document access incidents affecting humanitarian organizations and their ability to reach the affected people. The roll-out of the AMRF will be subject to the review of the pilot and a decision by the HCT Access Task Force.

Reporting

Monitoring data will be made publicly available on the [Humanitarian Response website](#) on a quarterly basis and complement cluster-specific products (maps, interactive dashboards, etc.). These monitoring reports will include revised data and analysis to adjust response planning and inform strategic decisions.

Humanitarian Programme Cycle Timeline



2.2 Indicators and Targets

Strategic Objective 1

Provide emergency and time-critical assistance and ensure access to basic essential services for 1.9 million people affected by the conflict (including 189,000 IDPs), exacerbated by COVID-19.

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
# of people receiving emergency assistance in 2021	3.4M	-	1.9M	5W/HRP	Quarterly
# of people in need in 2022	N/A	3.4M	3.4M	JIAF	Annually

Specific objective 1.1

Provide life-saving assistance for people affected by the conflict, including IDPs.

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
% of affected households having food consumption score > 42	N/A	21% (GCA) & 36% (NGCA)	23% (GCA) & 36% (NGCA)	MSNA	Quarterly
# of affected people with access to safe water and adequate sanitation	2.47M	-	0.62M	WASH Cluster	Quarterly
# of affected people with access to adequate hygiene	1.85M	-	1.27M	WASH Cluster	Quarterly
# of people receiving direct life saving and PHC services including emergency medical health services, SRH and MHPSS	1.52M	-	1.32M	5W/HRP	Quarterly
# of affected households receiving winterization assistance	55,000	-	51,000	5W/HRP	Quarterly
# of affected households receiving shelter repair assistance	53,000	-		5W/HRP	Quarterly
# of women, men, boys and girls with access to essential services (including PSS, Legal assistance, Individual protection assistance and case management, GBV, Mine victim assistance, transportation etc.)	1.45M	-	0.4M	5W/HRP	Quarterly
# of affected children having safe access to education	0.4M	-	0.1M	UNICEF, SCI and MSNA	Quarterly
# of affected people and IDPs with improved ability to meet basic needs through increasing their purchasing power	N/A	-	26,566	5W/HRP	Quarterly

Specific objective 1.2

Improve living standards through ensuring people's access to essential services.

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
# of education facilities in conflict affected areas have capacity to provide quality education	N/A	-	120	MSNA	Annually
% of affected population have improved access to the means of livelihood	N/A	-	80%	FSL Cluster and MSNA	Quarterly
# of health facilities in conflict affected areas exacerbated by COVID-19 that are supported	N/A	-	360	Health Cluster	Quarterly
% of affected people with access to centralised or decentralised water services	23%	77%	80%	WASH Cluster	Annually

Specific objective 1.3

Expand and secure humanitarian access to all people in need.

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
# of people living in NGCA receiving assistance	1.67M	-	0.77M	OCHA 5W	Quarterly
MT of relief items delivered to Donetsk oblast NGCA	N/A	619.9	860	LSWG	Quarterly
MT of relief items delivered to Luhanska oblast NGCA	N/A	691.4	860	LSWG	Quarterly
# of humanitarian actors who are able to deliver humanitarian assistance in NGCA through both direct implementation and implementing partners	N/A	21	23	OCHA 5W	Annually

Strategic Objective 2

Respond to the protection needs and strengthen protection of 1.5 million conflict-affected people, including 189,000 IDPs, with due regard to international norms and standards.

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
# of positive legal frameworks / policies / regulations adopted and /or implemented	N/A	19	20	Protection Cluster / UNHCR	Annually
# of people in need of protection support targeted for receiving assistance	2.80M	-	1.52M	HNO	Annually

Specific objective 2.1

Step up efforts to protect civilians and civilian infrastructure according to IHL and other legal instruments.

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
# of incidents of attacks on education (Physical damage of schools infrastructure, Temporary Schools closure due to the conflict, military use of schools, close proximity of military sites)	N/A	11	0	Education Cluster & MoE monitoring	Annually
# of WASH incidents	N/A	61	40	WASH Cluster incident monitoring	Twice a year
# of damaged or destroyed houses	55,000	-	-	Shelter and NFI Cluster	Annually
# of people who received compensation for destroyed housing due to the conflict	N/A	74	380	Ministry of RTOT	Annually
# of civilian casualties due to shelling and SALW fire	N/A	68	-	OHCHR Reports	Annually

Specific objective 2.2

Improve access to social entitlements and civil documentation for civilians residing in NGCA.

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
# of people who have access to their pensions	1.27M	635,800	635,800	Pension Fund	Annually
% of children born in NGCA who have received a birth certificate from the Ukrainian authorities	N/A	35.7%	40%	Ministry of Justice; open sources	Annually
# of NGCA graduates with widely recognized education certificates	1,000	-	300	Education Cluster	Annually

Specific objective 2.3

Improve conditions and ease restrictions on movement for civilians and goods across the “contact line”.

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
# of crossing times over the “contact line”	N/A	3.0M	3.5M	SBGS	Monthly
MT of relief items delivered to Donetsk oblast NGCA	N/A	619.9	860	LSWG	Quarterly
MT of relief items delivered to Luhanska oblast NGCA	N/A	691.4	860	LSWG	Quarterly

Specific objective 2.4

Prevent and mitigate physical harm and risks of landmines and explosive remnants of war (ERW).

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
# of civilian casualties due to landmines and ERW	N/A	73	-	OHCHR Reports	Annually
# of people receiving explosive ordinance risk education (EORE) through awareness raising sessions	870,000	115,000	125,000	Protection Cluster 5W	Quarterly
Land cleared of land mines and/or unexploded ordinances (m2)	N/A	8.54M	4.2M	Protection Cluster 5W	Annually

Specific objective 2.5

Promote durable solutions for IDPs living in GCA.

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
% of IDPs reporting feeling "fully and partially" integrated into host communities	N/A	89%	95%	IOM NMS Reports	Quarterly
# of internally displaced families who have been provided with durable housing solutions	N/A	1,093	700	State Fund for Youth Housing	Twice a year

Strategic Objective 3

Ensure implementation of a humanitarian exit strategy in Government-controlled areas from 2021-2023.

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
# of people in need in GCA (including IDPs)	1.7M	1.7M	1M	HNO	Annually
# of people targeted in GCA	1.13M	1.13M	< 1M	HRP	Annually

Specific objective 3.1

Increase national and regional Government ownership of and responsibility for the provision of services that deliver humanitarian assistance in GCA.

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
% of Clusters/Sub-Clusters meetings having participation of Government representatives	N/A	20-30%	40-50%	Cluster transition plans	Annually

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
# of people from national, region and local authorities trained on all types of response programming (all sectors)	N/A	-	5,500	5W	Annually

Specific Objective 3.2

Strengthen capacity of local responders (NGOs, CSOs, and private sector) to complement the Government-led response.

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
# of people from local NGOs, CSOs, trained on all types of response programming (all sectors)	N/A	-	3,500	5W	Annually
% of direct funding to local responders (national, local NGOs and CSOs)	N/A	1.7%	2%	FTS	Annually

Specific Objective 3.3

Implement transitional programming, ensuring complementarity between humanitarian and development actions, and build the resilience of conflict-affected population.

INDICATOR	IN NEED	BASELINE	TARGETED	SOURCE	FREQUENCY
# of people benefiting from WASH DRR approaches	N/A	-	156,000	WASH Cluster	Annually
# of the affected HHs in the GCA who received shelter repair assistance from SESU	N/A	1,300	1,000	Government	Annually
# of Cluster Transition Plans developed and approved	N/A	6	6	ICCG	Annually
# of Ukraine Humanitarian Fund allocation for Nexus activities	N/A	1	TBD	UHF	Annually
Technical and programmatic support to Nexus IM systems	N/A	4	4	# of times of sharing consolidated response data	Quarterly

Part 3:












Cluster/Sector Objectives and Response





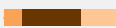
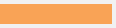



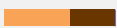

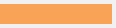




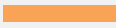



NOVOTOSHKIVSKE VILLAGE, LUHANSKA OBLAST, GCA, UKRAINE

Olena, 80 years old, stands with a walker in her bedroom. She cannot walk without assistance and has to rely on others, including humanitarian organizations, to survive. Photo: OCHA/Yevhen Maloletka



Overview of Sectoral Response

SECTOR	FINANCIAL REQUIREMENTS (US\$)	OPERATIONAL PARTNERS	NUMBER OF PROJECTS	PEOPLE IN NEED	PEOPLE TARGETED	IN NEED TARGETED
Protection	 50M	25	31	2.8M	1.5M	
Health	 29M	16	20	1.5M	1.3M	
WASH	 27M	15	17	3M	1.9M	
Shelter / Non-Food Items	 23M	14	17	175k	119k	
Food Security & Livelihoods	 21M	15	17	1.5M	80k	
Common Services & Support	 7M	4	4			
Education	 6M	4	5	404k	105k	
Multipurpose Cash Assistance	 5M	8	8		20k	

SECTOR	BY GENDER WOMEN / MEN (%)	BY AGE CHILDREN / ADULTS / ELDERLY (%)	WITH DISABILITY (%)
Protection	57 / 43 	22 / 59 / 19 	6% 
Health	60 / 40 	15 / 51 / 33 	12% 
WASH	54 / 46 	14 / 45 / 41 	13% 
Shelter / Non-Food Items	59 / 41 	16 / 56 / 28 	12% 
Food Security & Livelihoods	62 / 38 	18 / 41 / 41 	13% 
Education	51 / 50 	98 / 2 / - 	-
Multipurpose Cash Assistance	59 / 41 	18 / 41 / 41 	13% 

3.1 Education

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
404k	105k	\$6M



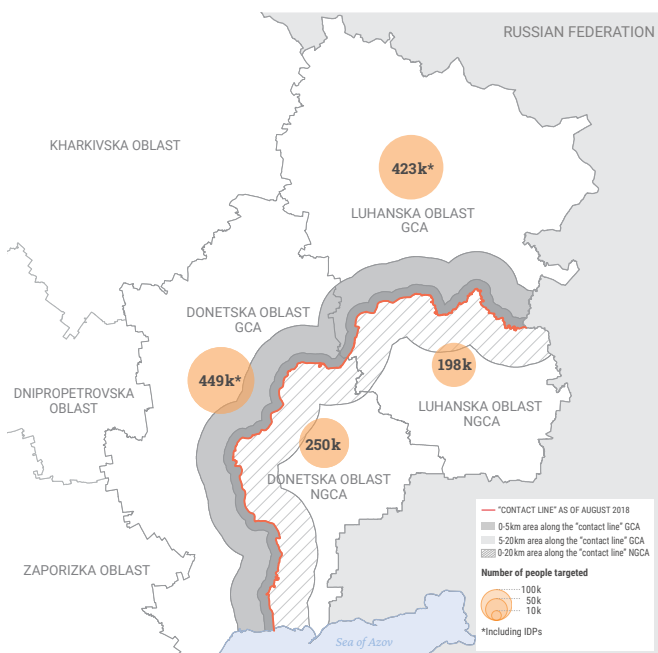
3.2 Food Security and Livelihoods

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
1.5M	80k	\$21M



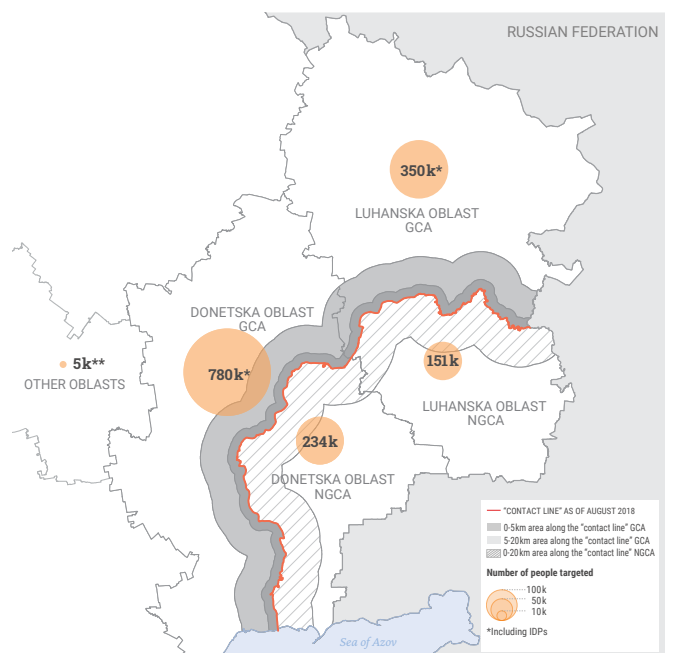
3.3 Health

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
1.5M	1.3M	\$29M



3.4 Protection

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
2.8M	1.5M	\$50M



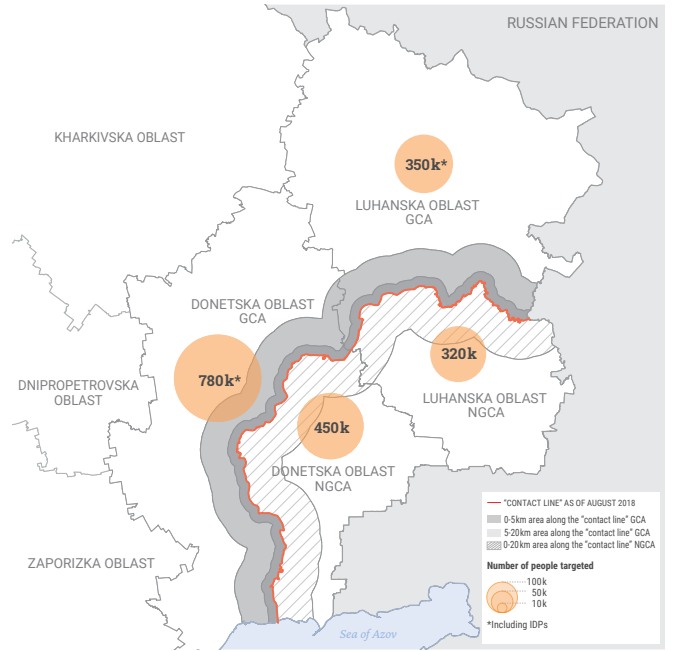
3.5 Shelter and Non-Food Items

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
174k	119k	\$23M



3.6 WASH

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)
3.1M	1.9M	\$27M



3.1 Education



PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	PARTNERS	PROJECTS
404k	105k	\$6M	4	5

Cluster objectives

The Education Cluster’s four objectives contribute directly to Strategic Objectives 1 and 2 of the 2021 HRP.

Cluster Objective 1: Ensure conflict-affected children’s access to safe quality, inclusive and conducive learning environments. Priority of the response is to support the boys and girls who live in the areas with the highest severity of needs, namely along the “contact line” in GCA and in the entire NGCA. The response includes conflict-related repair and rehabilitation of education facilities, supply of different types of education kits and learning materials, provision of life-skills education, social and emotional

learning and support to accessing distance learning to minimise the negative impact of the COVID-19 pandemic as well as ensuring safe return to school. Strengthening the education system by targeting education facilities that need support to maintain their operation is a pre-condition to ensure continuous access to education for all boys and girls affected by the crisis.

Cluster Objective 2: Promote a protective learning environment for conflict-affected students and teachers. Through supporting the implementation of the endorsed Safe Schools Declaration (SSD), Education Cluster partners aim to ensure that all children and teachers are able to reach and attend their

People targeted by zone

Thousands of people

TOTAL SECTOR TARGET	MAIN AREAS	GCA – DONETSKA OBLAST		GCA – LUHANSKA OBLAST		NGCA – DONETSKA OBLAST		NGCA – LUHANSKA OBLAST		OTHER OBLASTS
105		0-5km	11	0-5km	5	0-20km	27	0-20km	8	
		5-20km	16	5-20km	6					
	SUBZONES	20+km	0.5	20+km	6	20+km	19	20+km	7	
	TOTAL BY AREA		28		17		46		15	-



**NOVOTOSHKIVSKE, LUHANSKA
OBLAST, GCA, UKRAINE**

Oleksii walks through a hallway of his school, which was damaged by crossfire.

Photo: UNICEF/Oleksii Filippovapher

education facility without fear of shelling and other conflict-related insecurity.

Cluster Objective 3: Support equal, non-discriminatory opportunities for all boys, girls with and without disabilities and their teachers to access education on both sides of the “contact line”. Education Cluster partners will build the capacity of teachers, parents and education authorities on identified priority topics (psychological first aid, stress management, psychosocial issues, distance learning, inclusive and conflict-sensitive education, Disaster Risk reduction, etc.) with involvement of CP sub-cluster technical expertise where feasible.

The cluster encourages all cluster partners’ activities to align with the Education Cluster Strategy⁴³ to deliver a relevant and accountable education response and make sure interventions are protective and inclusive and promote children’s engagement at different stages of the project cycle.

⁴³ Current Education Cluster Strategy will be extended with relevant changes in coordination structure and response priorities.

Response

For the 2021 response planning, Education Cluster partners aim to reach 105,000 of the most vulnerable conflict-affected boys and girls and their teachers in Donetsk and Luhanska oblasts. Partners are encouraged to prioritise interventions targeting the identified vulnerable groups including boys and girls with disabilities, children from families in difficult life circumstances, those without access to education during COVID-19-related quarantine as well as children from minority groups and adjust their activities as appropriate. As most activities are due to be implemented in NGCA, in-kind support will be the main response modality while partners will also look for new opportunities to implement “soft” activities. Special attention will be given to needs caused by the COVID-19 pandemic, including issues related to access distance learning by providing equipment and training teachers in providing remote education. Improving hygiene practices in schools is another priority related to COVID-19.

The types of support will be driven by existing needs at school level. In the geographical areas with the highest severity of needs, activities will primarily aim at improving access to safe education. This includes interventions to address the most acute humanitarian needs such as providing equipment to damaged education facilities and distributing individual and institutional learning kits as well as equipment and materials for distance. In GCA partners are encouraged to look for sustainable solutions by seeking partnerships with local education authorities and development organizations, specifically in areas beyond 0-5km from the “contact line”. Partners in GCA will aim to increase access to life-skills education, build capacity and respond to needs derived from COVID-19.

The Education Cluster will continue to strengthen child safeguarding measures, including PSEA, to ensure that all interventions are safe for children and in line with “do no harm” and best interests for the child principles. The cluster will also advocate for the importance of consulting children throughout the project. The education response will be as participatory and consultative as possible.

Education response is an entry point to provide all types of humanitarian assistance and protection services to conflict-affected children as education facilities are often the natural meeting point in each settlement. The cluster in coordination with the Child Protection Sub-Cluster facilitates the referrals of people in need of protection assistance. A good coordination with the WASH Cluster will be particularly important to facilitate a safe return to school in times of the COVID-19 pandemic. The Education Cluster maintains close coordination and information-sharing with the respective clusters and sub-clusters to ensure the response is accountable and coordinated and meets the critical humanitarian needs of conflict-affected children.

Education Cluster partners rehabilitate damaged education facilities and provide individual education or early childhood kits by using local resources and

liaise with local humanitarian partners, where feasible. Partners are encouraged to use cash-based assistance in 2021 while the cluster will further explore and share positive practices of how it could be used as an alternative response modality.

Cost of Response

The overall financial requirement for the five projects included in the 2021 Humanitarian Response Plan amounts to some \$5.6 million which is a slight decrease compared to 2020. However, the decrease in funding requirements does not reflect a decrease in needs but represents prioritised activities based on access restrictions and partners’ estimates of their capacity to respond. More than 80 per cent of the proposed activities were marked as critical to ensure children have access to safe and conducive education within the geographical areas with the highest severity of needs in both GCA and in NGCA.

The Education Cluster Strategy sets contextualised standards and estimated costs for the most common types of activities implemented by Education Cluster partners. These standards guide all partners in their response planning to ensure all beneficiaries are reached with appropriate and accountable response. The minimum standards and estimated cost of each activity will be regularly revised based on existing needs as the cluster partners deem necessary.

Education interventions in NGCA tend to be more expensive compared to GCA. The predominant cost drivers are equipment and material for the rehabilitation of damaged education facilities.⁴⁴ Costs may vary based on the limitations due to restriction of movement and cargo transfer across the “contact line” as well as availability of goods at the local market. While there are functional markets in NGCA where partners can procure equipment to rehabilitate education facilities, some partners are doing procurement in GCA to transfer supplies to NGCA. This is mainly a cost-saving measure as market prices tend to be higher in NGCA while there is less diversity of goods.

⁴⁴ EC partners have solid internal procurement arrangements.

Cluster's strategy to support the multi-year humanitarian exit in GCA from 2021 to 2023

In an effort to support the HCT in working towards optimisation and cost efficiency of existing coordination structures and increasing the role of local actors for transitioning from humanitarian to development programming, the Education Cluster will initiate a gradual transition of key cluster functions.

Linking humanitarian and development agendas through the Education in Emergencies Working Group (EiE WG), which is co-led by the Ministry of Education and Science (MoES), would guarantee a more holistic approach and possibly generate longer-term multi-year funding. Within an EiE WG framework, donors could support, complement and supplement the MoES's activities with some support from international actors who are committed to the humanitarian principles. An EiE WG would absorb the structure of the Education Cluster dealing with routine tasks and serve as a forum for partners to share data, consolidate efforts and align the response in the best interest of conflict-affected boys and girls. The MoES' ability to take up a leading role will be assessed and the MoES would be given sufficient time to prepare for a fully-fledged transition, if feasible. The transition of the Education Cluster into an EiE WG could serve to better integrate EiE at policy level by being partially embedded in the MoES structure. This would make coordination more efficient and achieve stronger, more consistent advocacy outcomes.

In order to facilitate the transition process, the Education Cluster supports multi-year strategic partnerships with a transfer of technical and institutional capacity from international to national actors, including national NGOs. As national civil

society organizations (CSOs) engaged in the Education Cluster will continue to be critical for the smooth functioning of the future EiE WG, their capacity should be assessed and strengthened to sustain their self-sufficiency and capacity to mobilise necessary human and financial resources. The cluster will take concrete steps to cost institutional capacity needs of its national partners and advocate for addressing those needs in structural partnerships.

Monitoring

As part of the inter-cluster response monitoring framework, regular 5W monitoring of the response will be conducted on a school level using education specific tools (Education Cluster Monitoring Tool – ECMT) and feed into the inter-cluster analysis of quarterly achievements.

Children have a right to engage in the design, implementation, monitoring and evaluation of programmes that intend to support them. In order to generate credible evidence and learn how school children can be safely and meaningfully engaged in monitoring and evaluating the EiE responses, the Education Cluster will run a pilot initiative to involve children in response monitoring which will be incorporated in the existing reporting system.

A school survey for education facilities in GCA of both Luhanska and Donetska oblasts is conducted. The findings from this survey helps partners to adjust their planned response as required following reported changes in the operational context. The collected information feeds into the process to develop appropriate strategies for partners based on needs and gaps assessments, analysis, monitoring and response.

Objectives, Indicators and Targets

	OBJECTIVE	ACTIVITY	INDICATOR	TARGETED
Strategic Objective 1	Provide emergency and time-critical assistance and ensure access to basic essential services for 1.9 million people affected by the conflict (including 189,000 IDPs), exacerbated by COVID-19			
Specific Objective 1.1	Provide life-saving assistance for people affected by the conflict, including IDPs in GCA			
Specific Objective 1.2	Improve living standards through ensuring people's access to essential services			
Sectoral Objective	Ensure access for conflict-affected boys and girls to safe, inclusive, enabling learning environment as a basic essential service	Conflict-related repair and rehabilitation of education facilities	# of education facilities repaired and rehabilitated	120
			# of girls and boys benefitting from repaired education facilities or additional learning spaces	16,850
		Procurement and distribution of equipment to conflict-affected education facilities including equipment to support distance learning	# of girls and boys benefitting from provision of equipment to education facilities	41,600
		Supply of education, ECD, or recreation kits and learning materials or related cash interventions including materials required for distance learning	# of girls and boys benefitting from supplied education, ECD and recreation kits or learning materials or related cash interventions	14,350
		Distribution of hygiene kits and PPE to education facilities	# of education facilities with improved hygiene practices in times of COVID-19 pandemic	610
			# of boys and girls have access to education facilities with improved hygiene practices in times of COVID-19 pandemic	91,500
		Procurement and distribution of equipment to conflict-affected education facilities	# of girls and boys benefitting from provision of equipment to education facilities	
Specific Objective 1.2	Improve living standards through ensuring people's access to essential services			
Sectoral Objective	Improve quality of learning and teaching for conflict affected boys and girls where feasible	Provision of life skills education and social and emotional learning (SEL) through after school activities, summer camps and other learning opportunities	# of girls and boys benefitting from provision of life skills and SEL	10,000
		Capacity building of teachers and parents on identified priority topics (i.e. psychological first aid (PFA), stress management/selfcare, psychosocial issues, inclusive education and distance learning)	# of male and female teachers and parents trained	1,050
			# of girls and boys benefitting from trained teachers	12,000

	OBJECTIVE	ACTIVITY	INDICATOR	TARGETED
Strategic Objective 2	Respond to the protection needs and strengthen protection of 1.5 million conflict-affected people, including 189,000 IDPs, with due regard to international norms and standards			
Specific Objective 2.1	Step up efforts to protect civilians and civilian infrastructure according to IHL and other legal instruments			
Sectoral Objective	Promote equal access to safe education as a protective environment to conflict affected boys and girls	Trainings of educators, UaF representatives and other relevant actors to ensure SSD guidelines implementation	# of trained civil military officers and UaF on the SSD and the Guidelines	100
			# of trainees who are subject of the roll out of the conflict sensitive education trainings in eastern Ukraine	100
		Advocate for implementation of the Safe Schools Declaration	# of statements as a result of discussions of MOFA and UN Ukr Mission on protection of education from attack and of educational facilities from military use, and the continuation of education during armed conflict at the global/UN level	10
			# of state reports to relevant treaty monitoring bodies and mechanisms, with the information on efforts to monitor, prevent and protect educational facilities	5
Specific Objective 2.2	Improve access to social entitlements and civil documentation for civilians residing in NGCA			
Sectoral Objective	Promote non-discriminatory opportunities for continuation of education for conflict affected boys and girls	Advocate for non-discriminatory opportunities for continuation of education for conflict affected boys and girls in eastern Ukraine	# of public statements of the key government officials (MoES, Verkhovna Rada and Presidential Ombudsman, relevant Parliamentary Committees) publicly supporting equal opportunities for conflict affected boys and girls	5
			# of events with agenda containing equal opportunities for education of conflict affected boys and girls	5
		Provide consultations for boys and girls from NGCA on transition from schools to the job market, vocational or higher education	# of male and female children and youth provided with consultations	300

3.2 Food Security and Livelihoods

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	PARTNERS	PROJECTS
1.5M	80k	\$21M	15	17

Cluster objectives

The Food Security & Livelihoods Cluster (FSLC) has three Cluster Objectives in 2021 that contribute directly to achieving the three Strategic Objectives of the HRP. They are as follows:

- **Cluster Objective 1:** Ensure immediate access to food for the most vulnerable people affected by conflict and/or COVID-19.
- **Cluster Objective 2:** Improve food security through the provision of emergency and time-critical agriculture assistance.
- **Cluster Objective 3:** Enhance resilience of vulnerable people affected by conflict and/or COVID-19 through restoring agricultural and

non-agricultural livelihoods and promoting resilience to shocks.

The cluster will prioritise areas with a high severity ranking and/or a high concentration of people experiencing increased food insecurity, including urban areas in both GCA and NGCA of Luhanska and Donetsk oblasts. The cluster also prioritises geographic areas with limited mobility, locations closest to the “contact line” and isolated settlements. For livelihoods activities, projects will focus on areas within GCA and, where feasible, in NGCA.

People targeted by zone

Thousands of people

TOTAL SECTOR TARGET	MAIN AREAS	GCA – DONETSKA OBLAST		GCA – LUHANSKA OBLAST		NGCA – DONETSKA OBLAST		NGCA – LUHANSKA OBLAST		OTHER OBLASTS
		0-5km	22	0-5km	22	0-20km	11	0-20km	6	
		5-20km	5	5-20km	4					
	SUBZONES	20+km	1	20+km	1	20+km	8	20+km	<0.1	
80	TOTAL BY AREA		28		27		19		6	-



**PIVNICHNE VILLAGE, DONETSKA
OBLAST, GCA, UKRAINE**

A woman feeds chickens in her barn.
Photo: FAO/Viktoriiia Mykhalchuk

Response

In 2021, the cluster targets 80,114 out of the 1.5 million people in need of food assistance and livelihood support. Overall, 62 per cent of all people targeted are female, 41 per cent are elderly, 18 per cent are children, and about 13 per cent are people with disabilities (PwDs). IDPs account for about 10 per cent of all people targeted. The limited number of people targeted is a result of equally limited humanitarian access (or restricted humanitarian space), funding, and institutional capacity. Hence, a more realistic targeting approach was adopted.

Cluster Objective 1: Ensure continued access to food for the most vulnerable people affected by conflict and/or the COVID-19 pandemic in the conflict-affected areas. Cluster partners will align their beneficiary selection with the commonly agreed-on vulnerability criteria as per the severity of needs in the 2021 Humanitarian Needs Overview. In the same vein and directly related to the Strategic Objectives of the HRP, the cluster aims to increase access to

livelihood protection—agricultural and non-agricultural livelihoods—by strengthening food production for own consumption, coping strategies, and resilience capacity. Considering pre-COVID-19 humanitarian challenges and the impact of the pandemic, the cluster response strategy will focus on early actions such as lifesaving activities and protecting agricultural- and non-agricultural-based livelihoods by restoring productive capacity.

Cluster Objective 2: Improve food security through the provision of emergency and time-critical agriculture assistance with the following priority interventions: support to backyard kitchen gardening; distribution of seeds, seedlings and agricultural equipment; and livestock and poultry distribution and feed.

Cluster Objective 3: Enhance the resilience of vulnerable people affected by conflict and/or COVID-19 by restoring non-agriculture livelihoods and promoting resilience to shocks. Activities under this objective include access to non-agricultural livelihoods

and income-generating opportunities; job creation grants at an enterprise level; access to employment, training, and capacity-building events; promotion of community-level resilience to shocks; provision of livelihood assets to households; and rehabilitation of community livelihood assets.

The cluster will continue to work closely with other sectors to harmonise all aspects of the response, including assessments and research, analysis, geographical targeting, selection criteria, monitoring, response modalities, and cross-learning initiatives on outcomes and cross-cutting issues. Multisectoral synergies with the WASH (water for agriculture and livestock), Health and Protection Clusters as well as Cash Working Group (cash-based transfer activities), and other relevant working groups will be ensured. The cluster adheres to the importance of protection and encourages its partners to consider protection issues, including accountability to affected population (AAP) and mainstream of protection, gender-based violent (GBV), gender, age, and disability concerns to ensure non-discriminatory access to assistance. The response will be adapted to the COVID-19 pandemic by adopting special measures while respecting restrictions imposed by the government to prevent the transmission of COVID-19.

The trends of the 4W reporting matrix and partners' feedback indicate that the majority of beneficiaries prefer cash and vouchers to in-kind assistance, especially in areas where markets are functional. This modality gives the beneficiaries flexibility and the ability to make decisions regarding their needs. However, people in isolated settlements and areas where markets are not functional and/or accessible prefer an in-kind modality as it is difficult to purchase what they need. Older people and people with chronic illness prefer in-kind/home delivery to cash and voucher as a result of their susceptibility and/or increased risk of contracting COVID-19. In view of this, the cluster plans to scale up the use of cash and voucher assistance in 2021 while the modality of assistance (in-kind, cash, or a combination of modalities) will be determined by context and feasibility. The cluster and its partners will undertake regular and in-depth food security and livelihood assessments that will inform programming.

Cluster programming is informed by effective AAP mechanisms, however, the cluster will focus on a two-way flow of information between the partners and the community. The cluster promotes good community entry and participatory approaches throughout the humanitarian project cycle. Community feedback and complaint response mechanisms are envisaged in partners' interventions in the form of assessments including post-distribution monitoring, hotlines, complaints and response mechanisms as well as field visits. On top of that, community engagement will be increased.

Cost of Response

The budget to carry out planned activities in 2021 is \$21 million. Lifesaving food assistance accounts for 44 per cent of the overall financial requirement, followed by emergency agricultural assistance and non-agricultural assistance (56 per cent). Overall, 60 per cent of the response will be delivered by voucher or cash modalities (mainly in areas with operational markets and access to markets), which is a five per cent increase compared to the previous year. The majority of assistance planned for NGCA will be provided in-kind due to limited opportunities for cash interventions and disruption of markets that limit the beneficiaries' opportunities to redeem food vouchers or cash.

Cluster's strategy to support the multi-year humanitarian exit in GCA from 2021 to 2023

With support from the lead agencies, the cluster will develop an exit or way-forward strategy with the line ministries as part of the transition process. This includes the willingness of the government to lead coordination of residual needs in GCA, identification of training needs and an actionable timetable to ensure transition takes place.

The 2021 HRP, in its aim to provide food assistance and livelihood support, will have a special focus on resilience building of communities affected by the armed conflict. Among key activities under restoring livelihoods of affected people are promotion of community-level resilience to shocks (including wildfire, unemployment, higher prices, and other hazards) and rehabilitation of community livelihood assets through

cash and food-for-work modalities. Cash-for-work activities will benefit both men and women and will include community rehabilitation activities contributing to improving community infrastructure and home-based care. Implementing these activities is due to improve the resilience of the conflict-affected people, prevent further degradation of the humanitarian situation and promote recovery and social cohesion.

Cluster partners plan to provide assistance in NGCA in 2021 not only for emergency access to food but also by providing agricultural and non-agricultural livelihood support, which will also contribute to building the resilience of local communities, including returnees. The cluster encourages its partners to engage with relevant government actors, particularly

at the local level, to define and contribute to the development priorities of the specific area.

Monitoring

The 2021 humanitarian activities implemented by cluster partners will be monitored against the three sectoral objectives and measured based on the agreed indicators. The data collected will be used for activity progress monitoring, indicating gaps in response across each of the Cluster Objectives and coordination of humanitarian efforts among cluster partners. Dashboards, partner presence maps, and other informational products based on monitored data will be produced on a quarterly basis and will be available publicly on the [FSL Cluster website in Ukraine](#).

Objectives, Indicators and Targets

	OBJECTIVE	ACTIVITY	INDICATOR	TARGETED
Strategic Objective 1	Provide emergency and time-critical assistance and ensure access to basic essential services for 1.9 million people affected by the conflict (including 189,000 IDPs), exacerbated by COVID-19			
Specific Objective 1.1	Provide life-saving assistance for people affected by the conflict, including IDPs in GCA			
Sectoral Objective	Ensure immediate access to food for the most vulnerable people affected by conflict and or COVID-19	Provision of food assistance (food, cash or voucher) to meet the immediate needs of the conflict affected population in Eastern Ukraine	% of households with improved food consumption	70%
			% of people in targeted receiving food, cash transfer and voucher assistance.	-
			# of affected people receiving in-kind food assistance, including through home delivery.	17,724
			# of affected population who receive adequate food/cash responses, in a timely manner	35,450
Sectoral Objective	Improve food security through the provision of emergency and time-critical agriculture assistance	Timely provision of appropriate varieties of assorted crop seeds and agricultural inputs that allow conflict affected vulnerable populations restore their livelihoods	% of people who have improved access to nutritious food	100%
			% of people who report improvements on agricultural yields	90%
			# of conflict affected people assisted on time with appropriate agricultural livelihood assistance	14,965

OBJECTIVE	ACTIVITY	INDICATOR	TARGETED	
	Support backyard poultry and kitchen gardening activities to improve access to nutritious food	% of people who report improved dietary diversity	-	
	Provision of animal (livestock and poultry) feed and fodder production	% of people who report improved dietary diversity	-	
		# of animals receiving feed and acres cultivated	100	
	Distribution of livestock (including honeybees) and poultry/domestic fowl	% of people who report improved dietary diversity	100%	
		# of poultry / domestic fowl distributed	90,200	
	Timely provision livestock health support to improve production and productivity	# of animals vaccinated and treated	-	
	Distribution of agricultural equipment and support to backyard kitchen gardening activities to improve access to nutritious food	# of people and type of agro-based inputs received to increase food access through own production	8,235	
		% of people who report improved agricultural yields.	95%	
Specific Objective 1.2	Improve living standards through ensuring people's access to essential services			
Sectoral Objective	Enhance resilience of vulnerable people affected by conflict and/or COVID-19 through restoring of agriculture and non-agriculture livelihood and promoting resilience to shocks.	Job creation grants (enterprise level) or access to employment	% of people who are employed or self-employed	100%
		Rehabilitation of community livelihood assets through cash and food for work modalities	% of people who report improved access to food and income	-
			# of agriculture infrastructure or community assets constructed or rehabilitated	10
		Provision of livelihood agricultural grants and assets (self-employment or micro-enterprise)	% of people who report improved access to income	80%
		Provision of in-kind livelihood assets	% of people who report improved access to livelihoods opportunities.	80%
			# of individuals and types of asset support received	180
		Provision of livelihood non-agricultural grants (household level)	% of people who report improved access to income / livelihoods	75%
			# of people and types of services based on IGA (income generation activities) received to improve productive assets and support recovery.	2,590

OBJECTIVE	ACTIVITY	INDICATOR	TARGETED
	Provide training extension and advisory services focusing one agricultural practice	% of people with improved agriculture practices	85%
	Trainings and capacity-building events (focusing on non-agricultural practice)	% of people who report improved skills	80%
	Cash or food for work for community asset creation of restoration	% of people who report increase in income and or access to food	80%
		# of people who received cash / food assistance	1,240
		# of public / private assets rehabilitated or restored	-
	Promote community level resilience to shocks (including wildfire, unemployment, higher prices, and other hazard)	% of people / communities with improved ability to absorb shocks.	80%
		# of households applying key DDR (disaster risk reduction), NRM (natural resource Management and CCA (climate change adaptation practices	180

3.3 Health

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	PARTNERS	PROJECTS
1.5M	1.3M	\$29M	16	20

Cluster objectives

Cluster Objective 1: Reduce infectious disease transmission and hospitalization rates by supporting the healthcare system including laboratories, immunisation and COVID-19 incident management system (Surveillance, Infection Prevention and Control, Case Management, EECPs, Risk Communication and Community Engagement). The COVID-19 pandemic has exacerbated risks and needs of infectious diseases transmission while overwhelming health system capacity in terms of surveillance, beds occupancy, case management, isolation, laboratories and immunisation. Health Cluster partners will support the COVID-19 response within the framework of the incident management system.

Cluster Objective 2: Improve access of conflict-affected population, exacerbated by COVID-19, to essential healthcare services including HIV and TB, mental health and psychosocial support. The impact of COVID-19, insecurity and low income have prevented people from accessing health care. This has had detrimental consequences on the health of the elderly, people with disabilities as well as on reproductive health services, particularly in the areas close to the “contact line”. Pre-existing mental health and psychosocial support needs of the affected people have intensified as a result of the significant distress and indirect socio-economic effects caused by the COVID-19 pandemic. Incidence of infectious diseases, including TB, HIV and respiratory infections such as

People targeted by zone

Thousands of people

TOTAL SECTOR TARGET	MAIN AREAS	GCA – DONETSKA OBLAST		GCA – LUHANSKA OBLAST		NGCA – DONETSKA OBLAST		NGCA – LUHANSKA OBLAST		OTHER OBLASTS
1.3M		0-5km	14	0-5km	159	0-20km	132	0-20km	106	
		5-20km	185	5-20km	159					
	SUBZONES	20+km	119	20+km	106	20+km	119	20+km	92	
	TOTAL BY AREA		449	423	251	198	-			



**RUBIZHNE TOWN, LUHANSKA
OBLAST, GCA, UKRAINE**

A WHO staff member helps a healthcare worker put on COVID-19 personal protective equipment (PPE). Photo: WHO

influenza and pneumonia, is a concern as COVID-19 has made the implementation of related health programmes difficult. Repercussions affect the already weak vaccination system and could lead to outbreaks of preventable diseases such as measles and polio, particularly among the paediatric population.

Cluster Objective 3: Improve capacity, sustainability and quality of healthcare services provided at different levels of care for the conflict-affected population – exacerbated by COVID-19 – and ensure the implementation of humanitarian exit strategy in GCA from 2021-2023. Within the framework of the health reform and towards a transition model, this objective aims to encourage development partners to take over health humanitarian activities in GCA.

Response

In order to promote the response strategy, a series of assessments have been conducted by Health Cluster partners to inform the determination of the feasibility of different response options. A review

committee composed of the Humanitarian Coordinator, UN agencies and NGOs has rated uploaded projects against pre-agreed inter-cluster prioritisation criteria and other contextual and technical observations, feedback and comments. Out of the 20 approved projects about 60 per cent have been rated as “critical”, 20 per cent as “high priority” and 20 per cent as “medium-low priority”.

In all COVID-19-related projects (Cluster Objective 1), the response modalities will be structured around the Incident Management System (Surveillance, Infection Prevention and Control, Case Management, EECs, Risk Communication and Community Engagement). This includes the provision of necessary medical and laboratory equipment, supplies as well as a minimum number of PPE packages (based on generic PPE estimation tool) to ensure the safety IPC standards among healthcare workers. On a technical side, cluster partners will focus on improving outbreak investigation and identifying potential super-spreader groups. This will include tracking down moderate, mild

and suspected cases and putting them into isolation while adopting and disseminating case definition to all healthcare facilities.

COVID-19 related training provision and expertise sharing will be a crucial part of the strategy, including the adoption of national and global guidance on IPC, risk communication, clinical care, surveillance, laboratory and MHPSS.

Support to the local authorities will consist of recruitment surge capacity staff to support the COVID-19 response at national and sub-national level, and activities aimed to protect health workers from exhaustion and mental stress through targeted MHPSS interventions. Crossing point staff will be provided with the latest disease information, including clear instructions in case of a suspected COVID-19 passenger at the EECP.

Social media communication strategies will be developed including regularly updated messages in the local language. This aims to address rumours and myths and promote social distancing and other practices to prevent transmission (wearing of mask, hand washing, etc.). Local hotline numbers and other types of MHPSS counselling related to COVID-19 will be launched for community members.

Cluster partners will also identify vulnerable groups in need of special care, provide care (including home care, especially in remote and isolated areas) and support safe transport to designated isolation or healthcare facilities for suspected and confirmed COVID-19 cases.

For the projects indirectly related to COVID-19 or focused on strengthening the health system and access to care (Cluster Objective 2), modalities will be considered for targeted populations (children, aged people, women), basic health needs (immunisation, SRH, HIV, TB, MHPSS, disability). Partners' activities will be directed to procure, pre-position and distribute medical supplies, essential medications and equipment through established and mobile healthcare services. Partners will also provide direct life-saving and primary healthcare services (through fixed and

mobile clinics) including emergency services, HIV and TB services, integrated sexual and reproductive health services and mental health and psychosocial support and restore and/or rehabilitate health services and infrastructure damaged by the armed conflict. This includes the provision of financial and in-kind support to the vulnerable population (e.g. elderly, people with disabilities, minorities, children) through cash and vouchers for healthcare expenses.

An important part of the responses' projects and activities in GCA are structured to prepare the health system for transition and bring it in line with the reform plan (Cluster Objective 3). Partners activities will aim to restore and/or rehabilitate disrupted health services and infrastructure (due to lack of maintenance), including for people with specific needs and provide direct support to laboratories (including blood bank services) to improve the availability, quality and safety standards. They further aim to support health & nutritional education and promotion to update and improve knowledge and skills of healthcare providers as well as promote activities to raise awareness among the affected people by social mobilisation and advocacy activities.

The support will also seek to promote modalities of care based on primary and community health care, including e-health, tele-medicine, delivery of routine medication, etc. and improve the quality and coordination of referrals through linkages and harmonisation of the classification of diseases between the three levels of health care, including communities.

Cluster partners will target 1.3 million people out of the total 1.5 million people in need. This number includes 198,117 children (15 per cent), 673,598 adults (51 per cent) and 435,857 elderly (33 per cent). More than half (60 per cent) of the response will focus on the female population and 12 per cent (or 158,494 people) on people with disabilities. Around 30 per cent of the projects have a cash component with an average of 12 per cent of the budget allocated for this activity. This amounts to \$1,217,283 (or four per cent) of the total health budget. Given the holistic nature of the health response it has not been possible to calculate the split between service and in-kind.

Aligned to the overarching collective AAP Framework (the response-wide system to support listening to and acting upon the voices of the people throughout the HPC), the Health Cluster adheres to the three-step-approach consisting of assessments and feedback collection based on a validated methodology; performance-based management by promoting an appropriate programme design through the provision of expertise in health system and financing; and monitor the activities.

Cost of Response

The estimated cost for education projects in the 2021 HRP amounts to \$28 million which aims to reach 1.3 million people in need through 20 projects. With a requirement of \$16,442,916, or 57 per cent of the requirement, the GCA component is slightly higher than the NGCA component with \$12,290,000, or 47 per cent. This discrepancy can be attributed to better access to the people in need in GCA than in NGCA. The financial requirements for the response in Donetska oblast are higher than in Luhanska oblast (\$19,132,916, or 67 per cent, in Donetska oblast compared to \$9,600,000, or 33 per cent, in Luhanska oblast) which is due to the difference in severities of needs as per analysis conducted by the Health Cluster as part of the Joint Intersectoral Analysis Framework (JIAF).

Around 60 per cent of all sectoral responses under Cluster Objective 1 focus on supporting health facilities including the provision of necessary medical equipment and supplies such as ventilators, oxygen concentrators and dispensers. Just under 20 per cent of the cost is allocated to the provision of a minimum number of PPE packages needed to run health facilities at full capacity and ensure high safety IPC standards among healthcare workers.

The majority of the resources for Cluster Objective 2 will be allocated to the procurement and distribution of medical supplies, essential medications and equipment through established and mobile healthcare services. It accounts for almost half (or 47 per cent) of the financial requirement. About one third of the sectoral requirement is estimated to cover provision of direct lifesaving and primary healthcare services and restoration of disrupted health services and

infrastructure, induced by armed conflict. About six per cent of the sectoral response will prioritise the direct provision of financial and in-kind support to the vulnerable conflict-affected people such as the elderly, people with disabilities, minorities and children.

Most of the cluster response under Cluster Objective 3 focuses on restoring and rehabilitating disrupted health services and infrastructure, which became non-functional due to lack of maintenance (38 per cent of the requirement). Some resources will be allocated to improve laboratories' capacity to respond to COVID-19 and other infectious diseases. A smaller portion of the response (less than 10 per cent) will support health and nutritional education and awareness-building of the affected population including through social mobilisation and advocacy activities

Cluster's strategy to support the multi-year humanitarian exit in GCA from 2021 to 2023

It requires a well thought through approach to bridge the humanitarian and development responses efficiently and effectively in the conflict-affected areas. Coordination structures between humanitarian and development actors are currently put in place. At the beginning of 2020, the Government of Ukraine through the Ministry of Health (MoH) and the National Health Service of Ukraine (NHSU) rolled out a major health care reform plan to change the way healthcare facilities deliver services across the country. Due to COVID-19, despite early signs of both opportunities and concerns, the reform has slowed down, and it remains to be seen how it has impacted the humanitarian response. The emergence of these issues and Health Cluster partners' interest to better understand the nature of the health care reform and the transition raise the need for a shared vision and the establishment of a Technical and Strategic Advisory Group (SAG) coordinated by the Health Cluster. The Strategic Advisory Group (SAG) will focus on the effects and impacts of the reform and on monitoring the Health Cluster transition. It seeks to identify gaps and inform strategies for further planning as well as to establish and share evidence-based arguments and bring these insights to the attention of the relevant authorities for consideration.

Monitoring

The Health Cluster will conduct regular 5W monitoring as part of the inter-cluster response monitoring framework and feed into the inter-cluster analysis of quarterly achievements. The cluster aims to issue bulletins on a monthly or a less regular basis

depending on the frequency of activities and plans to organise. The Health Cluster will also work on reinforcing operational monitoring as well as set up a key performance indicators systematic collection and analysis.

Objectives, Indicators and Targets

	OBJECTIVE	ACTIVITY	INDICATOR	TARGETED
Strategic Objective 1	Provide emergency and time-critical assistance and ensure access to basic essential services for 1.9 million people affected by the conflict (including 189,000 IDPs), exacerbated by COVID-19			
Specific Objective 1.1	Provide life-saving assistance for people affected by the conflict, including IDPs in GCA			
Specific Objective 1.2	Improve living standards through ensuring people's access to essential services			
Specific Objective 1.3	Expand and secure humanitarian access to all people in need			
Sectoral Objective	Reduce infectious disease transmission and hospitalization rate by supporting healthcare system, including laboratories and immunization, and COVID-19 incident management system (Surveillance, Infection Prevention and Control, Case Management, EECs, Risk Communication and Community Engagement)	Recruit surge capacity staff to support COVID-19 response at national and sub national level	# of surge staff recruited	39
		Develop social media communication strategies and distribution of updated messages in local language to address rumors and myths, promote physical distancing and other practices to prevent transmission (wearing of mask, hand washing, etc.)	# of people reached with information and communication campaigns	91,840
		Activate local hotline numbers/other types of MHPSS counseling related to COVID-19 for community members	# of consultations provided	5,000
			Hotline is in place in GCA and/or NGCA	2
		Support health authorities in:	# of healthcare facilities supported	29
		<ul style="list-style-type: none"> investigating outbreak and potential super spreader groups; establishing tracking of moderate or mild cases and suspected cases and Isolating them into home confinement; adopting and disseminating case definition to all health care facilities. 	# of contacts (of confirmed cases) for whom contact tracing has been completed	5,000
Support local rapid response teams, in areas where COVID-19 is confirmed, to provide technical support (according to the national strategy)	# of RRTs	101		

OBJECTIVE	ACTIVITY	INDICATOR	TARGETED
	Provide direct support to laboratories, including through provision of lab test kits and other consumable supplies (e.g. RNA extraction and enzymes), training of the laboratory staff, ensuring timely reporting and providing other technical support as required	# of laboratories supported	30
		% of laboratory results available for all suspected cases within 48 hours in supported laboratories	75%
		# of laboratory staff trained	360
	Disseminate latest disease information and provide crossing point staff with clear messages to follow in case of encountered suspected COVID-19 passenger at EECP	# of EECPs supported	6
	Prepare rapid health assessment/isolation facilities for suspected passenger(s) and to safely transport them to designated hospitals	# of EECPs supported	4
	Provide minimum package of PPE (based on generic PPE estimation tool) that can run health facilities at full capacity to ensure high safety IPC standards among healthcare workers	# of healthcare facilities supported	179
	Support the effective implementation of screening and triage protocols at all points of access to the health system, including primary health centers, clinics, etc.	# of healthcare facilities supported	80
	Provide health facilities with necessary medical equipment and supplies, including ventilators, oxygen concentrators and dispensers	# of healthcare facilities supported	205
	Identify vulnerable groups in need of special care; provide care, including home care, especially in remote and isolated areas	# of people assisted with special care services, including through home care	3,600
	Ensuring safe conditions for planned health services, including immunization	# of healthcare facilities supported	360
	Set up COVID-19 designated wards in primary healthcare facilities, at least two per raion, where mild and moderate cases are treated	# of healthcare facilities supported	33
	Support transportation of required supplies, including testing kits, PPEs and other consumables to designated locations	# of healthcare facilities reached	360
	Provide COVID-19 related training and expertise sharing, including adoption of national and global guidance (both, online and offline), including on IPC, risk communication, clinical care, surveillance and contact tracing, laboratory and MHPSS	# of people trained	27,533
	Protect health workforce from exhaustion and mental distress through targeted MHPSS interventions	# of healthcare workers who benefited from targeted interventions	3,977

	OBJECTIVE	ACTIVITY	INDICATOR	TARGETED
	Improve access of conflict-affected population, exacerbated by COVID-19, to essential healthcare services, including HIV/TB and MHPSS	Procure, pre-position and distribute medical supplies, essential medications and equipment through established and mobile healthcare services	# of health facilities supported	194
		Provide direct lifesaving and primary health care services (through fixed and mobile clinics), including emergency medical health care services, HIV and TB services, integrated Sexual and Reproductive Health services and Mental health and Psychosocial support	# of people benefiting from direct health services provision	178,050
		Provide financial and in-kind support to vulnerable affected population (e.g. elderly, people with disabilities, minorities, children) through cash and vouchers for healthcare expenses	# of people benefiting from cash/voucher/in-kind assistance (for health including transportation)	9,064
		Restore and/or rehabilitate disrupted health services and infrastructure (conflict-induced)	# of health facilities supported	23
			# of people benefiting from direct health services provision	52,163
		Provide clinical management of mental disorders by non-specialized health care providers (e.g. PHC, post-surgery wards)	# of people benefiting from clinical management	3,416
	Provide clinical management of mental disorders by specialized mental health care providers (e.g. psychiatrists, psychiatric nurses and psychologists working at PHC/ general health facilities/ mental health facilities)	# of people benefiting from clinical management	3,410	
Strategic Objective 3	Ensure implementation of a humanitarian exit strategy in Government-controlled areas from 2021-2023			
Specific Objective 3.1	Increase national and regional Government ownership of and responsibility for the provision of services that deliver humanitarian assistance in GCA			
Specific Objective 3.2	Strengthen capacity of local responders (NGOs, CSOs, and private sector) to complement the Government-led response			
Specific Objective 3.3	Implement transitional programming, ensuring complementarity between humanitarian and development actions, and build the resilience of conflict-affected population.			
Sectoral Objective	Improve capacity, sustainability and quality of healthcare services provided at different levels of care for conflict-affected population, exacerbated by COVID-19, and ensure implementation of humanitarian exit strategy in GCA from 2021-2023	Support community-based health care services including but not limited to first aid services, community-based outreach and capacity building	# of people benefiting from emergency medical services via supported community-based health care services	13,408

OBJECTIVE	ACTIVITY	INDICATOR	TARGETED
	Restore and/or rehabilitate disrupted health services and infrastructure (due to lack of maintenance), including for people with specific needs	# of healthcare facilities supported	31
	Provide direct support to laboratories (including blood bank services) to improve availability, quality and safety standards	# of laboratories supported	20
	Support health & nutritional education and promotion activities to raise awareness of affected population, including through social mobilization and advocacy activities	# of people reached and sensitized	182,002
	Support health & nutritional education and promotion to update and improve knowledge and skills of healthcare providers	# of healthcare providers trained and sensitized	1,191
	Build capacity of health authorities and health managers to take over humanitarian health activities, including the ones which minimize the impact of COVID-19 on access to essential healthcare service	# of authorities trained	30
	Promoting models of care based on primary and community healthcare, including e-health, tele medicine, delivery of routine medication, etc.	# of healthcare providers supported	300
		# of people who benefited from ambulatory service provision	3,730
		# of teleconsultations	5,000
	Promote affected population right to timely emergency medical health care services, starting from community level all the way to hospital-based care	# of advocacy activities focused on citizens right to timely emergency medical services at all levels of care	10
	Improve quality and coordination of referrals through linkages and harmonization of nosological classification between the three levels of healthcare, including communities	# of healthcare facilities supported	4
		# decisions related to implementation of referrals	5

3.4 Protection

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	PARTNERS	PROJECTS
2.8M	1.5M	\$50M	25	31

Cluster objectives

The Protection Cluster objectives specifically target conflict-affected people, including IDPs, and prioritise those with specific needs, such as people with disabilities, persons with chronic illnesses and serious medical conditions, older persons, single-headed female households, survivors of gender-based violence (GBV), children and people experiencing socioeconomic hardship. Due to the nature of protection activities and the need to pay particular attention to people residing in NGCA and IDPs living throughout the country, these objectives are geographically crosscutting. The objectives focus on strengthening protection and social cohesion through prevention and mitigation of rights’ violations and

community-based protection for conflict-affected people support IDPs in identifying durable solutions, improving resilience of conflict-affected people as well as systems of service provision.

Cluster Objective 1: Ensure conflict-affected people, including IDPs, benefit from full and non-discriminatory access to quality essential services and enjoyment of their rights, with particular attention to people with specific needs. Protection Cluster partners will provide legal counselling and assistance, individual protection assistance (in cash and in-kind), individual and group psychosocial support, social accompaniment, outreach support, safe spaces and shelters for GBV survivors as well as community

People targeted by zone

Thousands of people

TOTAL SECTOR TARGET	MAIN AREAS	GCA – DONETSKA OBLAST		GCA – LUHANSKA OBLAST		NGCA – DONETSKA OBLAST		NGCA – LUHANSKA OBLAST		OTHER OBLASTS
		0-5km	5-20km	0-5km	5-20km	0-20km	20+km	0-20km	20+km	
1.5M		148	361	79	93	159	74	111	40	
	SUBZONES	20+km	271	20+km	178	20+km	74	20+km	40	
	TOTAL BY AREA		780		350		233		151	5



**MYRNA DOLYNA VILLAGE, LUHANSKA
OBLAST, GCA, UKRAINE**

A deminer manually clears a field contaminated with unexploded ordnance (UXO).

Photo: DRC-DDG/Oleksandr Ratushniak

spaces for older persons and persons with disabilities and mine victim assistance to 400,000 people.

Cluster Objective 2: Strengthen protection and social cohesion through prevention and mitigation of rights' violations and community-based protection for conflict-affected people, and support IDPs in identifying durable solutions. Protection Cluster partners will achieve this objective through advocacy activities focused on freedom of movement and humanitarian access, needs assessments, protection and human rights monitoring, information dissemination, explosive ordnance risk education (EORE) and marking hazards. In 2021, 200,000 people will benefit from peaceful coexistence projects, community support initiatives and durable solutions support.

Cluster Objective 3: Improve resilience of conflict-affected people and systems of service provision. Partners will work to build up and strengthen the resilience of conflict-affected and displaced people

and aim to empower communities by working on capacity building of local authorities and service providers while also engaging with development actors to ensure sustainability of humanitarian response.

Response

Protection Cluster partners are focusing on lifesaving interventions that meet the most acute protection needs of people with multiple vulnerabilities living close to the “contact line”, including in isolated settlements with little access to services as well as those living in NGCA, where access is more limited and needs are high.

The Protection Cluster is targeting 1.5 million people, of whom 22 per cent are children, 59 per cent adults, 19 per cent older people and 6 per cent people with disabilities. Specific interventions targeting IDPs, who make up 12 per cent of the targeted population, include information dissemination to raise awareness about existing government support programmes, protection counselling and legal assistance to ensure

enjoyment of rights and access to services as well as community support initiatives to promote social cohesion and facilitate the integration of IDPs into host communities. Due to the limited number of partners with established presence in NGCA and restrictions on protection programmes in NGCA, partners will be able to reach only 500,000 people in NGCA through community-based protection activities, protection counselling, information dissemination and limited number of PSS interventions.

The Protection Cluster supports the coordination of protection advocacy, operational provision of protection services, protection monitoring, and documenting human rights violations. In the area close to the “contact line”, where establishing safe and sustainable provision of services can be challenging due to the volatile security situation, lack of government service provision and difficulties in recruiting and retaining personnel as a result of security concerns, partners will focus on lifesaving activities. These include mobile teams providing assistance to GBV survivors and those at risk of GBV, psychosocial support to children, families and older persons, individual protection assistance, marking areas contaminated with mines and ERW and explosive ordnance risk education. Protection partners will also prioritise assistance in isolated settlements located along the “contact line”. This assistance will include social accompaniment, individual protection assistance, support to older people and families with children and legal assistance to ensure access to civil documentation and Housing, Land and Property (HLP) rights through the work of mobile teams. Conducting a thorough HLP needs thematic assessment in GCA is a priority task for 2021. In the area farther away from the “contact line”, Protection Cluster partners will provide protection assistance such as facilitating child-friendly spaces, supporting service delivery and safe shelter solutions for GBV survivors and undertaking mine clearance operations.

The protection response in NGCA includes counselling, individual protection activities and community-support initiatives. Partners who are unable to operate in NGCA will continue to strengthen their outreach to NGCA residents via hotlines providing legal counselling,

psychosocial support and referrals for protection assistance. Information on available services and assistance programmes, including explosive ordnance risk education information, will also be provided at the crossing points. There are limitations on providing psychosocial support, assistance to GBV survivors and implementation of mine action activities in NGCA. Partners will be able to expand these activities into NGCA if humanitarian access improves.

A strong emphasis is also put on ensuring access to sustainable and specialised services to GBV survivors. This includes activities such as advocacy, capacity building, technical assistance and support to local authorities which aim to enhance accountability for preventing and addressing cases of violence. Fostering greater coordination is therefore key and also contributes to increased referrals, in particular to accessing legal and health support as well as to ensure mechanisms are put in place by law enforcement for the protection of GBV survivors.

In areas farther away from the “contact line” in GCA, protection and human rights monitoring, referral to GBV and child protection services and legal assistance will be provided to ensure equal and non-discriminatory access to services, mostly for IDPs with specific needs, older people, people with disabilities, children and their families and GBV survivors. Community-support initiatives and peaceful coexistence projects will be implemented to assist IDPs and conflict-affected communities in achieving durable solutions and strengthening resilience, participation and social cohesion.

In response to the COVID-19 pandemic, Protection Cluster partners will continue to ensure that the protection needs of the most conflict-affected communities, older people and people with disabilities are covered by including the distribution of PPE and hygiene items in individual and community assistance programmes, and ensuring that service delivery modalities for protection support are in line with infection prevention protocols. More than 700,000 people will receive information about COVID-19 prevention through information dissemination and community campaigns.

Protection Cluster partners will work closely with other sectors to strengthen synergies and ensure a cohesive multisectoral response to humanitarian needs. For example, there are strong links with the WASH and Health Clusters regarding the provision of assistance to older people and people with disabilities as the impact of individual protection assistance and the provision of home-based care is maximized with the delivery of hygiene items, adult diapers and the provision of assistive devices and support. The Protection Cluster will continue working with the Health Cluster on identifying and addressing barriers regarding access to health care and coordination of psychosocial support under the MHPSS Technical Working Group.

Protection assistance will be provided via a range of modalities, including mobile teams, individual and group counselling, face-to-face and telephone counselling and working through community centres. In light of the COVID-19 pandemic, service provision will incorporate online and remote working modalities, where possible, while still guaranteeing quality protection support. Home-based care and case management is also a key modality which has been prioritised due to identified needs. Mobile assistance to facilitate legal support, psychosocial counselling and support to GBV survivors will also be important.

Protection partners will provide in-kind assistance where assistive devices and diapers for the older people and people with disabilities are required due to the unavailability of these items in the areas along the “contact line”. In NGCA, individual protection assistance will be provided in-kind due to limitations on operating with cash.

Ensuring accountability to the affected population is mandatory for all protection projects submitted under the HRP. All partners are required to include a participatory approach and coordination with communities, information on accessible and functioning feedback and complaints mechanisms, in cooperation with partners, national authorities, service providers or commercial entities. The Protection Cluster plans to continue delivering trainings on AAP to ensure that partners are able to operationalise the HCT Framework on AAP.

Cost of Response

The protection response to the needs of 1.52 million people requires \$50.1 million. This includes \$13.4 million for mine action activities. The response by child protection partners requires \$4.4 million for psycho-social support to children and caregivers, individual case management and protection assistance, as well as capacity building activities for service providers and caregivers. \$900,000 is required for GBV prevention and response activities, such as information dissemination about lifesaving assistance, provision of psycho-social support through mobile teams, shelters for GBV survivors and capacity building for national service providers. Other protection activities include community-based protection activities for almost 200,000 people, provision of community spaces for 1,285 older people and people with disabilities, legal assistance and protection counselling for more than 100,000 people.

With the required funds, protection partners aim to provide individual protection assistance to over 70,000 people, including individual case management and social accompaniment, cash and in-kind assistance. Modalities will be determined by individual protection assessments considering the availability of market, however, it is estimated that 3,540 or five per cent of people will be provided with cash support.

Cluster's strategy to support the multi-year humanitarian exit in GCA from 2021 to 2023

The response of Protection Cluster partners promotes community resilience by focusing on community-based protection to strengthen protection and facilitate durable solutions. An emphasis on capacity building and working with local authorities further supports a responsible humanitarian exit. Approximately \$4.1 million is required for capacity building of local authorities, national services providers and community-based organizations to ensure sustainability of response and prepare for gradual scale down of services provided by protection partners in GCA, in line with the humanitarian exit strategy in GCA from 2021-2023.

The Protection Cluster will support the humanitarian exit strategy in GCA by building capacity of local

authorities and national service providers to address existing protection needs, strengthening resilience of conflict-affected populations at community level as well as advocating for sufficient allocation of funds to implement policies already adopted by the authorities (such as compensation for destroyed property). Trainings on protection coordination and information management will be provided to boost the capacity of the Ministry of Reintegration at the national level and in the field as part of the Protection Cluster Transition Strategy.

The Protection Cluster will also contribute to the ongoing decentralization reform by building the capacity of local authorities in the newly created amalgamated Territorial Communities to increase awareness about their roles and responsibilities and to empower them to address the needs of the conflict-affected population. Following the adoption of the Law on Social Services, local authorities at the community level are responsible for the provision of social services to people with specific needs – older people without family support, people with disabilities, GBV survivors and families with children. Linkages will be strengthened with development actors providing technical support to local authorities on launching needs assessments in social services in order to ensure sustainability of services currently provided as a part of protection response as well as to maximise the impact of thematic trainings on disability inclusion, multi sectoral response to GBV, and child protection in emergencies.

Protection partners engage with national authorities to advocate for amendments to the legal framework, particularly regarding pensions, birth certificates, HLP-rights, freedom of movement and IDP integration. In the area of legal aid, protection partners work to enhance the capacity of national stakeholders by providing training and technical support to representatives of free legal aid centres, national NGOs, local authorities, the State Migration Service, National Police, lawyers, judges and the legal academic sector.

Mine action programmes undertaken by humanitarian actors include measures to enhance capacity and skills as well as efforts to develop national policies,

legislation and standards, support the establishment of the relevant national authorities, bring national information management systems in line with international standards and improve tracking of victim assistance.

The Protection Cluster will work with other sectors to ensure protection mainstreaming in the humanitarian and development response and work with partners conducting capacity-building activities to help integrate accountability to the affected populations and mainstream protection in other sectors. The Protection Cluster has been actively engaged in promoting the humanitarian-development nexus and has provided protection support to development actors and local authorities. The Protection Cluster first released its [“Peacebuilding and Reconciliation in Ukraine”](#) guidance note in 2016, which highlights how peacebuilding and reconciliation support protection and durable solutions in Ukraine. The cluster also produced a note on [“Protection for Development Actors in Ukraine”](#) which provides guidance on how to integrate a rights-based approach into development programmes to ensure protection mainstreaming in development programming.

Monitoring

The Protection Cluster has developed a robust monitoring system which includes quarterly 5W reporting at settlement level against a set of indicators disaggregated by sex, age, disability and displacement which allows to monitor progress against the set targets, identify gaps and coordinate response at the field level. The Protection Cluster will also be able to estimate the number of people residing in NGCA and of those receiving legal assistance, protection counselling and psychosocial support from partners through hotlines at the crossing points and towns near the “contact line”. The 5W reporting is mapped at the [Protection Cluster Dashboard](#) and [Explosive Ordnance Risk Dashboard](#) mapping activities at the educational establishment level. Protection partners implementing protection monitoring activities submit their findings to the Protection Cluster on a monthly basis, which is used for protection analysis highlighting key protection concerns as well as determining operational response, advocacy and capacity building activities.

Objectives, Indicators and Targets

	OBJECTIVE	ACTIVITY	INDICATOR	IN NEED	TARGETED
Strategic Objective 1	Provide emergency and time-critical assistance and ensure access to basic essential services for 1.9 million people affected by the conflict (including 189,000 IDPs), exacerbated by COVID-19				
Specific Objective 1.1	Provide life-saving assistance for people affected by the conflict, including IDPs in GCA				
Specific Objective 1.2	Improve living standards through ensuring people's access to essential services				
Sectoral Objective	People of concern benefit from full and non-discriminatory access to quality essential services and enjoyment of their rights, with particular attention to the most vulnerable	HRP1 Provision of essential services (including PSS, Legal assistance, GBV, Mine assistance, etc.) and individual protection assistance (incl. cash)	# of women, men, boys and girls with access to essential services (including PSS, Legal assistance, GBV, Mine victim assistance, etc.) and individual protection assistance (incl. cash)	1,450,000	400,000
Strategic Objective 2	Respond to the protection needs and strengthen protection of 1.5 million conflict-affected people, including 189,000 IDPs, with due regard to international norms and standards				
Specific Objective 2.1	Step up efforts to protect civilians and civilian infrastructure according to IHL and other legal instruments				
Specific Objective 2.2	Improve access to social entitlements and civil documentation for civilians residing in NGCA				
Specific Objective 2.3	Improve conditions and ease restrictions on movement for civilians and goods across the "contact line"				
Specific Objective 2.4	Prevent and mitigate physical harm and risks of landmines and ERW				
Specific Objective 2.5	Promote durable solutions for IDPs living in GCA				
Sectoral Objective	Strengthen protection and social cohesion through prevention and mitigation of rights' violations and community based protection for conflict-affected people; support IDPs in identifying durable solutions	HRP2-A Protection Monitoring	# of protection monitoring visits conducted and recorded	N/A	6,100
HRP2-B Awareness raising and Information Dissemination		# of persons receiving information on trafficking, violence against children (VAC) risks and GBV, prevention, referrals, and availability of life-savin services, EORE Information, Mine Victim Assistance (MVA), HLP, documentation (including birth and death registration), IDP residence registration, social benefits, legal assistance or entitlements	2,802,000	1,500,000	
HRP2-C Explosive Ordnance Risk Education		# of persons receiving Explosive Ordnance Risk Education through EORE awareness sessions	870,000	125,000	

	OBJECTIVE	ACTIVITY	INDICATOR	IN NEED	TARGETED
		HRP2-D Support to Peaceful Coexistence & Durable Solutions	# of local and displaced women, men, girls and boys supported through peaceful coexistence/peace-building/social cohesion projects, or community support initiatives	930,000	200,000
Strategic Objective 3	Ensure implementation of a humanitarian exit strategy in Government -controlled areas from 2021-2023				
Specific Objective 3.1	Increase national and regional Government ownership of and responsibility for the provision of services that deliver humanitarian assistance in GCA				
Specific Objective 3.2	Strengthen capacity of local responders (NGOs, CSOs, and private sector) to complement the Government-led response				
Specific Objective 3.3	Implement transitional programming, ensuring complementarity between humanitarian and development actions, and build the resilience of conflict-affected population				
Sectoral Objective	Improve resilience of conflict-affected people and system of service provision	HRP3 Capacity building	# of persons trained	N/A	10,000

3.5 Shelter and Non-Food Items

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	PARTNERS	PROJECTS
174k	119k	\$23M	14	17

Cluster objectives

For the humanitarian response in 2021, shelter/NFI agencies build their activities around three Cluster Objectives:

- **Cluster Objective 1:** Address critical gaps in essential shelter and NFI needs
- **Cluster Objective 2:** Contribute to adequate transitional shelter solutions
- **Cluster Objective 3:** Provide or upgrade permanent shelter

While most of the activities associated with the cluster's strategic activities correspond to Specific Objective 1.1 "Provide lifesaving assistance for the

population affected by the conflict", one activity, namely the repair of utility networks, corresponds to Specific Objective 1.2 "Improve living standards".

For the selection of projects for the 2021 Humanitarian Response Plan, the following criteria were considered: lifesaving nature of the response, vulnerability, geographical priority, time-sensitivity, feasibility and appropriateness.

- All winterization projects were considered lifesaving by default.
- Time-sensitivity is applied to shelter projects, giving the highest score to those projects that are planned for implementation during the warmer

People targeted by zone

Thousands of people

TOTAL SECTOR TARGET	MAIN AREAS	GCA – DONETSKA OBLAST		GCA – LUHANSKA OBLAST		NGCA – DONETSKA OBLAST		NGCA – LUHANSKA OBLAST		OTHER OBLASTS
119		0-5km	20	0-5km	9	0-20km	32	0-20km	27	
		5-20km	5	5-20km	5					
	SUBZONES	20+km		20+km	1	20+km	13	20+km	7	
	TOTAL BY AREA		25		15		45		34	-



ZHOVANKA VILLAGE, DONETSKA OBLAST, GCA, UKRAINE

Most of the houses in Zhovanka village, which is located at the “contact line” next to the “Maiorske” crossing point, were damaged or destroyed during active hostilities. Photo: OCHA/Max Levin

months when construction is feasible. As for winterization projects, it is important to start the activities before the heating season.

- Feasibility is considered lower for the projects in NGCA, especially for those agencies that have never worked there before and have not yet obtained permission to operate there.
- Appropriateness refer to those projects that have a complementary/gap-filling nature and do not overlap with the assistance of the Government of Ukraine.

Response

The priority of Shelter/NFI Cluster partners for 2021 is to reach the most vulnerable people such as single-headed households, the elderly and people with disabilities and serious medical conditions in need of winterization and shelter assistance. In terms of geographic coverage, partners aim to reach people living in areas that state agencies cannot access (i.e. areas with limited access to basic services, insecure settlements along the “contact line” and in NGCA).

In 2021, Cluster partners will carry out light, medium and heavy repairs on houses damaged by the armed conflict only in NGCA, as in GCA the State Emergency Service of Ukraine (SESU) has actively taken over the repair of civilian properties. The delivery of emergency shelter kits will cover both sides of the “contact line”, along with the improvement of the insulation of private houses by replacing old windows (not damaged by the armed conflict). Winterization assistance will cover both sides of the “contact line” and will include the provision of fuel, stoves, warm clothing and insulation (for both, private houses and social institutions) mainly in “isolated areas” where gas supply or central heating stopped and access to functional markets is limited.

Based on the needs’ analysis exercise and the qualitative evidence provided by partners, the Cluster has concluded that most shelter and winterization needs are in NGCA. The response planned by partners in the sector corresponds to these identified needs with almost 70 per cent of the planned activities targeting vulnerable conflict-affected people in NGCA.

Cluster partners will use a variety of implementation modalities (both in-kind and cash-based), however, in NGCA, banking restrictions make it impossible to use a cash-based modality. In GCA, in the area close to the 'contact line,' lifesaving assistance delivered by partners (shelter kits, emergency repairs, solid fuel, heaters, cash for winterization) will equal some 24 per cent of the overall response. Farther away from the "contact line", cluster partners will also provide cash for winterization mainly focusing on social and medical facilities as well as shelter assistance to villages that suffered from the wildfires in Luhanska oblast.

Several projects involve the upgrading and providing NFIs to social and medical facilities. These projects have an intersectoral nature with strong WASH and Health components. They aim to increase facilities' capacity to deliver services safely during the COVID-19 pandemic. Likewise, winterization assistance is a lifesaving response that contributes to better health and protection.

In GCA, most forms of assistance will be delivered in kind, e.g. shelter repairs and distribution of solid fuel and NFIs. Some assistance will be delivered through a cash-based modality such as winterization assistance and labour to help people deal with the consequences of the wildfires. In GCA, the cluster recommends delivering winterization assistance using a cash-based modality except for in remote settlements where there is insufficient market access.

Cost of Response

The cost of the Shelter/NFI response in the 2021 HRP totals \$23 million and aims to reach 117,000 people through 14 partners. In comparison with the 2020 response, this is \$3 million less which is due to the smaller amount of shelter repairs planned for 2021. An estimated 63 per cent of the response will be allocated to shelter assistance while 37 per cent go to winterization assistance. It is important to note that the shelter repairs provide households with a long-term solution as each household benefits only once from shelter repairs. While winterization assistance is often cheaper than shelter assistance, it is recurrent as the same vulnerable people receive the assistance in

consecutive years. The further breakdown of response modality by activity shows that partners mainly plan to use in-kind assistance with some portion of cash interventions to meet the humanitarian needs. Out of the total, some 33 per cent will be used for light/medium/heavy shelter repairs, some 35 per cent for solid fuel and heater distribution and 13 per cent for NFI distribution. Of the 17 projects, three will use a cash-based modality to meet winterization needs and one more will have a cash component in a mixed project, which totals some 3.2 per cent of the total budget estimated for Shelter/NFI activities.

Since 2016, the cluster has maintained a matrix with estimated cost per activity and provides partners with cost efficiency recommendations. For example, it is recommended in locations along the "contact line" as they are difficult to reach with the transport of solid fuel. People can arrange procurement and select a preferred supplier. Shelter interventions in NGCA are in general some 20 to 30 per cent more costly than those in GCA due to higher market prices and more expensive supplier services.

Cluster's strategy to support the multi-year humanitarian exit in GCA from 2021 to 2023

As no shelter repairs are planned by humanitarian agencies in GCA for 2021, the main coordination efforts will be built around the winterization response. In this regard, the cluster will reduce its footprint in GCA by arranging a winterization working group to oversee the timeliness and preparedness and provide coordination services for this response. For the shelter response in GCA, the oblast authorities in Donetsk and Luhansk will coordinate the repairs of the residual number of houses needing repairs and organise the commissions to provide compensation for fully destroyed houses.

HLP partners operating in both shelter and protection sectors will continue providing expertise to the policy-making processes concerning compensation for the destroyed houses. In 2020, the State adopted the decree on compensation and allocated some UAH 20 million (\$740,000) to pilot the compensation mechanism. This amount will cover approximately 60 families leaving some 400-450 families waiting for

compensation. There are plans to proceed with this process in 2021, simplifying it as much as possible. For this purpose, the Ministry for Reintegration of the Temporarily Occupied Territories is creating a database where the cases for compensation will be recorded. Shelter partners contribute with their expertise to the workflow of this process.

Monitoring

The main monitoring tools used by partners are 5W, winterisation matrix and post-distribution monitoring (PDM). In 2021, the Shelter/NFI Cluster will continue conducting regular winterization monitoring by filling in the coordination matrix and conducting the lessons learned session. For the shelter programmes, there

will be regular contact with the SESU as well as local administrations. In order to ensure accountability to affected populations and achieving the quality results of the strategy in the sector, the cluster advocates for common and transparent processes of the production of PDMs. Since 2015, cluster partners in Ukraine have been collectively working to mainstream post-distribution monitoring into their programmes and findings are fed into the planning of future interventions. Based on the findings of post-distribution monitoring, the cluster has set out best practices and prepared guidance for partners that they may use in the planning and implementation, e.g. recommended amount of coal per household to survive the winter season.

Objectives, Indicators and Targets

	OBJECTIVE	ACTIVITY	INDICATOR	IN NEED	TARGETED
Strategic Objective 1	Provide emergency and time-critical assistance and ensure access to basic essential services for 1.9 million people affected by the conflict (including 189,000 IDPs), exacerbated by COVID-19				
Specific Objective 1.1	Provide life-saving assistance for people affected by the conflict, including IDPs in GCA				
Sectoral Objective	Address critical gaps in essential shelter and NFI needs of the most vulnerable IDPs and conflict affected population	Acute emergency shelter	# of HHs receiving acute emergency shelter support		567
		Solid fuel & heater distribution	# of HHs receiving solid fuel and heaters for winter		20,570
		NFI distribution	# of individuals receiving NFIs (clothing sets, bedding sets, and other general NFIs)		28,861
		Winterization cash grant transfers	# of HHs receiving winterization cash grants		1,750
		Winterization of collective centers and social institutions	# of individuals living in non-specialized collective centres/social institutions receiving winterization support		15,200
	Contribute to adequate transitional shelter solutions (monetised or in-kind)	Light and medium repairs	# of HHs supported with light and medium repairs	8,895	2,750
		Cash for rent or other shelter-linked monetized solutions	# of HHs receiving cash grants for rental accommodation or other monetized shelter solutions		0
	Winterization insulation	# of HHs supported with full-house insulation solutions		150	

	OBJECTIVE	ACTIVITY	INDICATOR	IN NEED	TARGETED
Specific Objective 1.1	Provide life-saving assistance for people affected by the conflict, including IDPs in GCA				565
Specific Objective 1.2	Improve living standards through ensuring people's access to essential services				
Sectoral Objective	Provide/upgrade permanent shelter solutions for the most vulnerable conflict-affected population	Structural repairs ("heavy repairs")	# of HHs supported with structural/heavy repairs	1,420	565
		Permanent housing (incl. relocation)	# of HHs supported with permanent housing solution (reconstruction or relocation)	409	40
		Repairs of essential utility networks and connections	# of individuals within communities benefiting from utility network and connection repairs		19,500

3.6 WASH

PEOPLE IN NEED	PEOPLE TARGETED	REQUIREMENTS (US\$)	PARTNERS	PROJECTS
3.1M	1.9M	\$27M	15	17

Cluster objectives

Assessments in Luhanska and Donetsk oblasts show that a high number of people need assistance to receive adequate water supply or sanitation services or to have an adequate level of hygiene to protect themselves against COVID-19. Fifteen WASH agencies seek \$27 million in 2021 to assist 1.9 million people through three main objectives and advocacy. Partners will:

Cluster Objective 1: Ensure immediate and sustainable access to sufficient safe water and minimal levels of sanitation provision for people affected by the conflict and COVID-19. 622,000 people will be targeted.

Cluster Objective 2: Provide critical hygiene-related supplies and information for the prevention of infectious diseases. 1,270,000 people will be targeted.

Cluster Objective 3: Promote resilience, recovery and sustainable access to sufficient safe water, minimum levels of sanitation, and minimum hygiene standards. 156,000 people will be targeted.

Cluster Objective 4: Increase the safety of utility workers and the safe continuous usage of water infrastructure through effective advocacy.

WASH actions proposed by partners have been prioritised on the basis of whether they provide

People targeted by zone

Thousands of people

TOTAL SECTOR TARGET	MAIN AREAS	GCA – DONETSKA OBLAST		GCA – LUHANSKA OBLAST		NGCA – DONETSKA OBLAST		NGCA – LUHANSKA OBLAST		OTHER OBLASTS
		0-5km	105	0-5km	55	0-20km	400	0-20km	290	
		5-20km	514	5-20km	143					
	SUBZONES	20+km	161	20+km	152	20+km	50	20+km	30	
1.9M	TOTAL BY AREA		780		350		450		320	-



HRANITNE VILLAGE, DONETSKA OBLAST, GCA, UKRAINE

A teenager carries two bottles with water he fetched from the well as the water supply system in the village where his family lives remains disrupted due to hostilities. Photo: Save the Children/Oksana Parfeniuk

a truly lifesaving approach, address the needs of vulnerable groups and are provided in the right areas. They are also examined whether they are feasible, are appropriately implemented and take into account any seasonal factors around implementation. On this basis as well as WASH activities' importance in the fight against COVID-19, \$20.1 million (75 per cent of the total) is classified as the highest priority and critically needed in 2021.

Response

The initial phase of WASH activities will focus on responding to the COVID-19 crisis in 2021. Partners will raise awareness on the risks of COVID-19 and ensure that older and vulnerable people have adequate hygiene materials at community levels. Particular attention is given to those living close to the "contact line" but also to those living in hotspots. Agencies will provide assistance to health facilities with a focus on designated COVID-19 hospitals. They will also support smaller health facilities to improve their levels of hygiene during the pandemic. Cleaning

materials as well as better access to basic water and sanitation, infectious waste management and improved Infection Prevention and Control (IPC) are further needed. Other institutions need similar support, especially when vulnerable groups live in the area or users could spread the virus. Homes for elderly and disabled people will be targeted as well as orphanages, schools and kindergartens. Some partners intend to use an electronic voucher-based distribution system to increase efficiency and make distributions more hygienic as it avoids visits to communities.

Hospitals, schools, orphanages, kindergartens, and old people's homes continue to demand urgent assistance. Some struggle without full access even to water supplies while toilets in others are grim. WASH Cluster partners aim to restore the dignity for old people and female pupils as well as for those crossing the entry exit crossing points into the NGCA areas.

In the second half of 2021, WASH partners will focus on ensuring access to adequate water supplies and

sanitation, emergency repairs on piped water and sewerage networks, with smaller scale rural approaches that are suitable for hard-to-reach areas. Solid waste management and the emptying of septic tanks will be addressed so that health levels can be maintained. In GCA, the emergency response will be supported by transitional programming with agencies adopting Disaster Risk Reduction (DRR) approaches and looking to implement Water Safety Plans which are supported by the construction of critical infrastructure. Proper handover and training to local authorities will be ensured.

Government plans to improve the EECPs that allow access to NGCA include the opening of two new crossing points at Shchastia and Zolote (Luhanska oblast) as well as the provision of additional services on the GCA side at all locations. WASH Cluster partners – especially PUI and NRC – are ready to provide support, however, only on the condition that the local authorities are not able to provide adequate water and sanitation or keep things clean.

WASH actors will prioritise the most vulnerable groups, in the conflict-affected areas. Of the 1.9 million people targeted, 779,000 (41 per cent) are elderly, 247,000 (13 per cent) have a disability, 266,000 (14 per cent) are children and 1,026,000 (54 per cent) are female. In 2021 all WASH programming will be supported by activities to strengthen the participatory roll of the affected population and local authorities. Accountability to the Affected Population (AAP) remains a high priority, and WASH actors are encouraged to build on participatory post distribution monitoring modalities to include full feedback mechanisms and, where possible, involvement of the affected population in project design.

Cost of Response

WASH Cluster partners seek \$27 million to assist 1.9 million people in 2021, at an average cost of around \$14 per person. \$16.1 million will assist 1,130,000 people in GCA whereas \$10.9 million will assist 770,000 people in NGCA. The support is disproportionately aimed at GCA which is due to the lack of access. In 2020, some humanitarian goods have struggled to reach NGCA while the COVID-19 pandemic has restricted movement due to the temporary closure of the crossing points.

Nine per cent of the WASH response (\$2.5 million) will focus on voucher-based programming while six per cent (\$1.7 million) will promote recovery approaches in GCA. Priorities include moving away from water trucking options, even in hard-to-reach areas, and encouraging sustainable recovery of water and sanitation systems, some of which are affected by shell damage while others are neglected due to localised and conflict-related poverty.

Evidence shows that the cost of hygiene items increased in areas near the “contact line” during 2020. A market survey conducted by the ACCESS Consortium and NRC in April 2020 recorded a seven per cent increase between February and April 2020. WASH agencies can bypass those price hikes by bulk buying and assist those who can no longer afford hygiene items. There are other risks the population is faced with. For example, water companies often fail to pay their electricity bills which is due to the debts they have incurred over the past seven years by continuing to deliver services in NGCA where tariffs are set lower than the costs of running the company. In Luhansk falling demand for water from NGCA has forced the water company to increase tariffs even in GCA. Meanwhile the market for key chemicals, including chlorine, needed to treat drinking water as global good practice, is very limited in Ukraine, and prices have increased significantly during the seven years of the armed conflict.

Cluster's strategy to support the multi-year humanitarian exit in GCA from 2021 to 2023

In GCA, WASH Cluster partners will support humanitarian exit strategies, particularly in areas farther away from the “contact line”. However, even in the area close to the “contact line”, the WASH Cluster aims to provide sustainable water and sanitation support, wherever possible, making a lasting impact on people's lives. Further away from the “contact line”, partners are proposing to continue Disaster Risk Reduction (DRR) approaches initially outlined in 2018. WASH agencies will use both Water Risk Assessments and Water Safety Planning processes to plan recovery projects at hromada- (district) or raion- (larger district) level, involving local authorities and water companies, and attempting some handover

of emergency distributions to the State Emergency Services of Ukraine.

The WASH Cluster is proud to host a multisectoral DRR working group led by ACTED which is taking the first steps in Ukraine to link agency programming with the wider ambitions of Ukraine as set out in the Sendai Framework.

In practical terms, the principles of sustainable implementation will be prioritised and promoted by the WASH Cluster coordination, under UNICEF, in 2021. Advocacy on major issues which have so far prevented such progress since the start of the armed conflict is also a high priority. There is need for legislation at national level that resolves the operating issues and debts of water companies working in the conflict area. Meanwhile, the WASH Cluster will work to resolve issues faced by water companies working on both sides of the “contact line”. The free movement of water workers and the security issues they are faced with is also a challenge that needs attention and support.

Monitoring

In order to confirm progress towards 622,000 people gaining access to sufficient safe water and minimal levels of sanitation provision, the WASH Cluster will monitor three top-level indicators:

- Number of people provided with access to sufficient quantity of water (target 328,000 people)

- Number of people provided with access to sufficient quality of water (target 42,000 people)
- Number of people provided with improved access to adequate sanitation (target 252,000 people)

In order to gauge progress against the provision of critical hygiene-related supplies and information for the prevention of infectious diseases to 1,270,000 people, the WASH Cluster will monitor:

- Number of people provided with critical hygiene- or COVID-19-related supplies and/or awareness (target 1,270,000)

In order to ensure that agencies promote resilience, recovery and sustainable access to sufficient safe water, minimal levels of sanitation, and minimum hygiene standards, in a recovery sense, the WASH Cluster will monitor among other things:

- Number of people provided with sustainable access to sufficient quantity of water (target 137,000 people)
- Number of people provided with improved sustainable access to adequate sanitation (target 5,000 people)
- Number of people benefiting from capacity-building or DRR approaches in WASH (target 14,000 people)

A fully annotated matrix of WASH sub-indicators and targets is available upon request.

Objectives, Indicators and Targets

	OBJECTIVE	ACTIVITY	INDICATOR	IN NEED	TARGETED
Strategic Objective 1	Provide emergency and time-critical assistance and ensure access to basic essential services for 1.9 million people affected by the conflict (including 189,000 IDPs), exacerbated by COVID-19				
Specific Objective 1.1	Provide life-saving assistance for people affected by the conflict, including IDPs in GCA				
Sectoral Objective	Ensure immediate and sustainable access to sufficient safe water, and minimal levels of sanitation provision for conflict- and COVID-19-affected people	Access to sufficient quantity of water	# of people provided with access to sufficient quantity of water	1,730,000	328,000

	OBJECTIVE	ACTIVITY	INDICATOR	IN NEED	TARGETED
		Access to sufficient quality of water	# of people provided with access to sufficient quality of water		42,000
		Improved access to adequate sanitation	# of people provided with improved access to adequate sanitation	1,110,000	252,000
Sectoral Objective	Provision of critical hygiene-related supplies and information for the prevention of infectious diseases	Access to critical hygiene- or COVID-19-related supplies and/or awareness	# of people provided with critical hygiene- or COVID-19-related supplies and / or awareness	1,850,000	1,270,000
Strategic Objective 2	Respond to the protection needs and strengthen protection of 1.5 million conflict-affected people, including 189,000 IDPs, with due regard to international norms and standards				
Specific Objective 2.1	Step up efforts to protect civilians and civilian infrastructure according to IHL and other legal instruments				
Sectoral Objective	Increase the safety of utility workers and safe continuous usage of water infrastructure	WASH advocacy	# of advocacy activities focused on making utility workers and infrastructure safer		50
Strategic Objective 3	Ensure implementation of a humanitarian exit strategy in Government-controlled areas from 2021-2023				
Specific Objective 3.1	Increase national and regional Government ownership of and responsibility for the provision of services that deliver humanitarian assistance in GCA				
Specific Objective 3.2	Strengthen capacity of local responders (NGOs, CSOs, and private sector) to complement the Government-led response				
Specific Objective 3.3	Implement transitional programming, ensuring complementarity between humanitarian and development actions, and build the resilience of conflict-affected population				
Sectoral Objective	Promote resilience, recovery and sustainable access to sufficient safe water, minimal levels of sanitation, and minimum hygiene standards	Sustainable access to sufficient quantity of water	# of people provided with sustainable access to sufficient quantity of water		137,000
		Sustainable access to sufficient quality of water	# of people provided with sustainable access to sufficient quality of water		0
		Sustainable improved access to adequate sanitation	# of people provided with improved sustainable access to adequate sanitation		5,000
		Sustainable access to WASH-related supplies and / or awareness	# of people provided with WASH-related supplies and / or awareness		0
		Capacity building and Disaster Risk Reduction approaches in WASH	# of people benefiting from capacity-building or DRR approaches in WASH		14,000

Part 4: **Annexes**

HNUTOVE VILLAGE, DONETSKA OBLAST, GCA, UKRAINE

A humanitarian worker explains procedures to people on a bus waiting to cross the "contact line" (prior to the COVID-19 pandemic). Photo: OCHA/Yevhen Maloletka



4.1

Response Analysis

The 2021 response plan is elaborated based on a joint intersectoral assessment of significant changes in the operational context driving/impacting humanitarian needs, as evidenced in the HNO. The continued application of the Joint Intersectoral Analysis Framework (JIAF) in the 2021 Humanitarian Programme Cycle (HPC) has allowed for a granular examination and, where feasible, comparison of how the armed conflict have affected the groups of people in the different areas differently over the past two years. Gaps and limitations evident in response planning are also recognised. The analysis gives due consideration to how the effects of COVID-19 have exacerbated the existing humanitarian situation facing the conflict-affected populations as well as how it helps creating opportunities for new approaches, including for improving access. The response analysis also builds on the progress made in humanitarian deliveries from January to September 2020 – tracked as part of the ongoing response monitoring.⁴⁵ This has enabled the humanitarian community to identify shortcomings and trends in aid delivery and factored them in the 2021 response planning.

While the armed conflict has remained the key driver of humanitarian needs in Ukraine, the COVID-19 pandemic is a key factor exacerbating pre-existing developmental deficits and accelerating socioeconomic degradation in the conflict-affected region. The HNO reveals precarious humanitarian conditions among the affected populations, particularly those living in NGCA, as a result of the many restrictions on movement on both civilians and humanitarian actors alike in response to COVID-19. Therefore, priority will be given to addressing immediate humanitarian needs and promoting a

protective environment for the affected population, while, where feasible, allowing for stronger linkages with longer-term development efforts where appropriate. Priority will also be given to the elderly, people with disabilities and female-headed families, particularly those living in rural areas, as a large number of them depend on social entitlements and face additional difficulties in accessing them.

Although the HNO reveals the higher severity of needs in NGCA, the response planning opts for a “realistic” approach, factoring in the limited operational capacity and access reality there. In 2021, the response seeks to assist 770,000 vulnerable people in need in NGCA, accounting for 45 per cent of the 1.7 million people in need in the area. However, should humanitarian access improve, the humanitarian community maintains the capacity to upscale the response.

The response analysis takes into account people’s preference of response modality. The needs analysis reveals that 76 per cent of the conflict-affected people in GCA⁴⁶ prefer to receive assistance in cash rather than in-kind, as markets remain open and postal or bank services offer a safe and efficient delivery mechanism. The use of cash in the Ukraine response has been on a steady rise and is one of the “safe and efficient” ways to deliver assistance in the times of COVID-19. Around 50 per cent of projects included in the 2021 response plan have a cash or voucher component,⁴⁷ which is the same proportion compared to the 2020 HRP. However, discussions with communities have revealed that cash or voucher modality is not always preferred, particularly among the people living in isolated settlements along the “contact line” or people with disabilities, due to

⁴⁵ For more information, please refer to the [Humanitarian Dashboard](#).

⁴⁶ REACH, Humanitarian Trend Analysis in GCA, 2020.

⁴⁷ Compared with 50 per cent in the 2020 HRP; 45 per cent in the 2019 HRP; 40 per cent in the 2018 HRP; and even less in the HRPs in 2017 and 2016.

logistical and physical constraints to access markets or during certain periods of the year. For example, the public transport service during the COVID-19 lockdown temporarily restricted the movement of people living in remote locations, limiting their ability to access markets, postal and bank services. Under these conditions, people tend to prefer in-kind assistance to be delivered to their houses.

Finally, recognising that COVID-19 could result in additional stress to Member States in 2021, the critical priority requirements were identified to guide donors towards those activities that urgently require funding to ensure that the funding received will be targeting the most in need. Commitment has been made to step up efforts in implementing humanitarian-development nexus programming over the coming three years (2021-2023) to facilitate the transition and handover of the response to local responders in GCA.

4.2 Participating Organizations

ORGANIZATION	SECTORS	REQUIREMENTS (MILLION US\$)	PROJECTS
International Organization for Migration	Coordination and common services, Food Security and Livelihoods, Health, Multipurpose cash, Protection, Shelter / Non-Food Items (NFI), WASH	\$34.5 	10
United Nations High Commissioner for Refugees	Protection, Shelter / Non-Food Items (NFI)	\$22.1 	2
United Nations Children's Fund	Education, Health, Protection, WASH	\$15.4 	4
HALO Trust	Protection	\$8.9 	1
World Health Organization	Health	\$7.8 	1
People in Need	Food Security and Livelihoods, Multipurpose cash, Protection, Shelter / Non-Food Items (NFI), WASH	\$6.9 	7
Save the Children	Education, Food Security and Livelihoods, Multipurpose cash, Protection, Shelter / Non-Food Items (NFI), WASH	\$5.5 	4
Médicos del Mundo Spain	Health, Protection	\$5.3 	2
Norwegian Refugee Council	Food Security and Livelihoods, Protection, WASH	\$5.0 	3
Agency for Technical Cooperation and Development	Coordination and common services, Food Security and Livelihoods, Multipurpose cash, Protection, Shelter / Non-Food Items (NFI), WASH	\$5.0 	6
Arbeiter-Samariter-Bund Deutschland e.V	Food Security and Livelihoods, Multipurpose cash, Protection, Shelter / Non-Food Items (NFI), WASH	\$4.9 	6
Charity Foundation "NEW WAY"	Education, Health, Shelter / Non-Food Items (NFI), WASH	\$4.2 	4
United Nations Development Programme	Protection	\$4.0 	1
Office for the Coordination of Humanitarian Affairs	Coordination and common services	\$3.7 	1
Charitable Organization Charitable Foundation "Donbass Development Center"	Education, Food Security and Livelihoods, Health, Shelter / Non-Food Items (NFI), WASH	\$3.1 	6
Danish Refugee Council	Protection	\$3.1 	4
Première Urgence Internationale	Health, Shelter / Non-Food Items (NFI), WASH	\$2.7 	1
Caritas Ukraine	Food Security and Livelihoods, Health, Multipurpose cash, Protection, Shelter / Non-Food Items (NFI), WASH	\$2.6 	2

ORGANIZATION	SECTORS	REQUIREMENTS (MILLION US\$)	PROJECTS
Triangle Génération Humanitaire	Food Security and Livelihoods, Protection, WASH	\$2.6	3
Polish Humanitarian Action	Food Security and Livelihoods, Health, Multipurpose cash, Protection, WASH	\$2.3	1
United Nations Population Fund	Health, Protection	\$2.2	2
Ukrainian Deminers Association	Protection	\$1.9	1
Adventist Development and Relief Agency	Food Security and Livelihoods, Multipurpose cash	\$1.6	1
Office of the High Commissioner for Human Rights	Protection	\$1.4	1
NGO Proliska	Health, Protection, Shelter / Non-Food Items (NFI)	\$1.3	1
Food & Agriculture Organization of the United Nations	Food Security and Livelihoods	\$1.0	1
HelpAge International	Protection	\$1.0	1
Emmanuel Charity Association, International Public Organization	Shelter / Non-Food Items (NFI)	\$1.0	1
Charitable Organization "ICF "MIRA" (International Children's Fund "Mira")	Food Security and Livelihoods, Health, Shelter / Non-Food Items (NFI), WASH	\$1.0	4
Charitable Foundation "Humanitarian Aid and Development Center"	Food Security and Livelihoods, Protection, WASH	\$0.9	3
All-Ukrainian Charitable Foundation "Right to Protection"	Protection	\$0.9	1
Fondation Humanitaire Internationale AICM Ukraine	Health	\$0.8	2
International charitable organization "International Medical Care"	Health	\$0.7	1
Malteser International Order of Malta World Relief	Health	\$0.7	2
Charitable Organization Movement for the spiritual revival of Donbass "Plich-o-Plich"	Shelter / Non-Food Items (NFI)	\$0.4	1
International NGO Safety Organisation	Coordination and common services	\$0.4	1
SOS Children's Villages	Protection	\$0.3	1
Donbas SOS	Protection	\$0.2	1
Non-Governmental Organization "AirLight"	Food Security and Livelihoods, Health, Protection	\$0.1	1

4.3 Planning Figures by Sector and Geography

By sector

SECTOR/MULTI-SECTOR	PEOPLE IN NEED	PEOPLE TARGETED	BY GENDER WOMEN MEN (%)	BY AGE CHILDREN ADULTS ELDERLY (%)	WITH DISABILITY (%)	REQUIREMENTS (MILLION US\$)	HRP PARTNERS	NUMBER OF PROJECTS
Protection	2.8M	1.5M	57 43	22 59 19	6	\$50	25	31
Health	1.5M	1.3M	60 40	15 51 33	12	\$29	16	20
WASH	3M	1.9M	54 46	14 45 41	13	\$27	15	17
Shelter / Non-Food Items	175k	119k	59 41	16 56 28	12	\$23	14	17
Food Security & Livelihoods	1.5M	80k	62 38	18 41 41	13	\$21	15	17
Common Services & Support						\$7	4	4
Education	404k	105k	51 49	98 2 -	-	\$6	4	5
Multipurpose Cash Assistance		20k	59 41	18 41 41	13	\$5	8	8
Total	3.4M	1.9M	54 46	14 45 41	13		40	96

By geography

LOCATION	PEOPLE IN NEED	PEOPLE TARGETED	BY GENDER WOMEN MEN (%)	BY AGE CHILDREN ADULTS ELDERLY (%)	WITH DISABILITY (%)	REQUIREMENTS (MILLION US\$)	HRP PARTNERS	NUMBER OF PROJECTS
GCA	1.2M	450k	54 46	16 35 49	14	62	26	72
Luhanska	416k	350k	54 46	11 35 54	14	47	23	70
NGCA	1M	780k	54 46	11 59 26	12	37	10	44
Luhanska	650k	320k	54 46	14 59 27	12	20	4	24
Other Oblasts	159k	5k	57 43	22 59 19	6	2	5	5

4.4

What if we fail to respond?

Education

- Thousands of conflict-affected children and teachers on both sides of the “contact line” will have no access to a safe and inclusive learning environment increasing the risk of drop-outs.
- Increased risk of a “lost generation” as children’s rights continue to be violated by the armed conflict.
- Children will be denied the opportunity to develop skills essential for their future.
- The first generation of children born during the armed conflict entered their first school year in 2020 which makes them likely to perceive a conflict-environment as normal.

Food Security and Livelihoods

- If we do not provide timely lifesaving and livelihood support, 80,000 people in need of humanitarian aid will resort to negative coping strategies.
- Against this backdrop, a failed response is likely to result in further stress that may be irreversible.

Shelter/NFI

- In the worst-case scenario, all 117,000 targeted persons will struggle to survive the cold season. Given the harsh winters and the difficulties added by COVID-19, these vulnerable persons will face exposure to illness and possibly death. The resources that they will have to use to insulate their homes and purchase heating fuel and related goods would not be available for use to meet other basic needs.
- At least 55,000 vulnerable conflict-affected people living in collective centres and social institutions would face health issues and have difficulties to survive the winter.
- If the house repair programme is not implemented in NGCA, 3,300 families will remain in their damaged houses and live yet another year in sub-standard and undignified living conditions as no other options are available.

Health

- Even though the impact of the COVID-19 pandemic is difficult to gauge, the conflict-affected population, particularly vulnerable and marginalised groups, will not receive the needed medical services to fight the virus.
- The conflict-affected population is likely to increasingly face serious health risks such as preventable communicable diseases as well as non-communicable diseases in 2021. If we fail to respond, they may not get sufficient treatment for such diseases.
- Vulnerable populations, especially elderly with chronic diseases, people with disabilities and TB/HIV patients, will go without lifesaving medication.
- More than 1.3 million people will be denied quality and lifesaving healthcare services, including psychosocial and mental health support.
- As the situation protracts, conflict-induced stress and emotional distress will inevitably become long-term mental health issues.
- Tens of thousands of children will be deprived of lifesaving immunisations exposing them to vaccine-preventable illnesses.

Protection

- Increase in civilian casualties due to absence of humanitarian mine action, including surveying, marking, mine risk education and demining.
- Children living along the “contact line” will be at higher risk of psychological distress, risky behaviour, family separation and institutionalisation due to lack of appropriate protection assistance.
- People at risk of GBV and GBV survivors will not have access to appropriate assistance.
- Increase in the number of IDPs and conflict-affected people resorting to negative coping mechanisms due to their inability to meet basic needs.

- Increase in involuntary returns to NGCA and areas near the “contact line” in GCA due to lack of humanitarian assistance in areas of displacement.

WASH

- Increased risk of hospitals, schools and old people’s homes in the conflict-affected areas to become transmission centres for COVID-19.
- Increasing cuts to water and sanitation services with shortages and hardship implied by those cuts.
- Stoppages of centralised heating systems which rely on water supplies putting old people at severe health risk during cold winters.
- Failure to progress towards recovery in the water sector.

4.5

How to contribute

Contributing to the Humanitarian Response Plan

For more information on Ukraine's 2021 Humanitarian Needs Overview, Humanitarian Response Plan, other monitoring reports or on how to donate directly to organizations participating in the plan, please visit:

www.humanitarianresponse.info/operations/ukraine

Donating through the Ukraine Humanitarian Fund (UHF)

Donors can contribute through the Ukraine Humanitarian Fund (UHF) which was launched in February 2019. This country-based pooled fund (CBPF) aims to support coordinated humanitarian action, in line with this Humanitarian Response Plan and address some of the most critical needs, which are of strategic priority and would otherwise go unfunded. The UHF allows donors to pool their contributions into single, unearmarked funds to support local humanitarian efforts which will, in turn, not only enable a coordinated, flexible and inclusive humanitarian response, but also strategically maximise available resources. For more information, visit the OCHA Ukraine web page:

www.unocha.org/ukraine

Donating through the Central Emergency Response Fund (CERF)

CERF provides rapid initial funding for lifesaving actions at the onset of emergencies and for poorly funded, essential humanitarian operations in protracted crises. The OCHA-managed CERF receives contributions from various donors – mainly governments, but also private companies, foundations, charities and individuals – which are combined into a single fund. This is used for crises anywhere in the world. Find out more about the CERF and how to donate by visiting the CERF website.

www.unocha.org/cerf/ourdonors/how-donate

In-kind Relief Aid

The United Nations urges donors to make cash rather than in-kind donations, for maximum speed and flexibility, and to ensure the aid materials that are most needed are the ones delivered. If you can make only in-kind contributions in response to disasters and emergencies, please send an email with relevant information concerning your in-kind contribution to:

logik@un.org

4.6 Acronyms

AAP	Accountability to affected populations or people	GoU	Government of Ukraine
ACTED	Agency for Technical Cooperation and Development	HC	Humanitarian Coordinator
AFU	Armed Forces of Ukraine	HCT	Humanitarian Country Team
AMRF	Access Monitoring and Reporting Framework	HH	Household
CIMIC	Civil-Military Cooperation Directorate of the Armed Forces of Ukraine	HLP	Housing, land and property
CMCoord	Civil-Military Coordination	HNO	Humanitarian Needs Overview
CoM	Cabinet of Ministers of Ukraine	HPC	Humanitarian Programme Cycle
COVID-19	2019 novel coronavirus disease (also 2019-nCoV)	HRMMU	United Nations Human Rights Monitoring Mission in Ukraine
CSO	Civil society organization	HRP	Humanitarian Response Plan
CVA	Cash and voucher assistance	HSM	Humanitarian Situation Monitor
CWG	Cash working group	ICCG	Inter-Cluster Coordination Group
DDG	Danish Demining Group	ICRC	International Committee of the Red Cross
DPA	United Nations Department of Political Affairs	IDP	Internally Displaced Persons
DRC	Danish Refugee Council	IED	Improvised Explosive Device
DTP	Diphtheria, Tetanus, and Pertussis	IHL	International Humanitarian Law
DV	Domestic violence	IHRL	International Human Rights Law
ECD	Early Childhood Development	IMD	Institute for Management Development
EECP	Entry-Exit Crossing Point	INFORM	Index for Risk Management
ERW	Explosive Remnants of War	INGO	International Non-Governmental Organization
FSLC	Food Security and Livelihoods Cluster	INSO	International Safety Organization
GBV	Gender-Based Violence	IPC	Infection prevention and control
GCA	Government Controlled Area	IOM	International Organization for Migration
GDP	Gross Domestic Product	JFO	Joint Forces Operation
		JIAF	Joint Inter-Sectoral Analysis Framework
		JIPS	Joint IDP Profiling Service

MEB	Minimum Expenditure Basket	TB	Tuberculosis
MH	Mental Health	TCG	Trilateral Contact Group
MHPSS	Mental Health and Psychosocial Support	UAH	Ukrainian Hryvnia (national currency of Ukraine)
MoSP	Ministry of Social Policy	UHF	Ukraine Humanitarian Fund
MPC	Multi-purpose cash	UNFPA	United Nations Population Fund
MRE	Mine Risk Education	UNHCR	United Nations High Commissioner for Refugees
MSNA	Multi-Sectoral Needs Assessment	UNICEF	United Nations Children’s Fund
MRToT	Ministry of Reintegration of Temporarily Occupied Territories	WASH	Water, sanitation and hygiene
NFI	Non-food item	WHO	World Health Organization
NGCA	Non-Government Controlled Area	WoS	Windows of Silence
NGO	Non-Governmental Organization		
NMAA	National Mine Action Authority		
NMS	National Monitoring System		
NRC	Norwegian Refugee Council		
OCHA	United Nations Office for the Coordination of Humanitarian Affairs		
OECD	Organization for Economic Development and Cooperation		
OHCHR	United Nations Office of the High Commissioner for Human Rights		
OSCE	Organization for Security and Co-operation in Europe		
PiN	People in need		
PoC	Protection of civilians		
PSEA	Protection against sexual exploitation and abuse		
PPE	Personal Protection Equipment		
PSS	Psychosocial support		
PTSD	Post-traumatic stress disorder		
PUI	Premiere Urgence Internationale		
RPM	Response planning and monitoring		
SCORE	Social Cohesion and Reconciliation		
SESU	State Emergency Service of Ukraine		

**HUMANITARIAN
RESPONSE PLAN**
UKRAINE

ISSUED FEBRUARY 2021