

Multi-Sectoral Needs Assessment (MSNA) 2022

Education Findings

March 2023

REACH Informing
more effective
humanitarian action

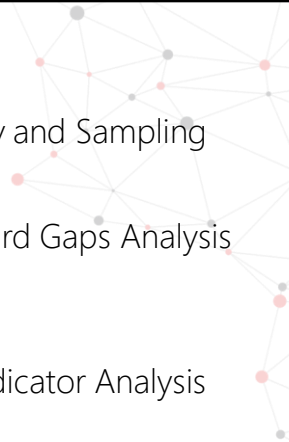


Education Key Takeaways

- **A very small proportion of HHs were found to have Education Living Standard Gaps**, however, this **proportion increased when examining HHs with school-age (6 to 17 years old) children**, although this sample was much smaller, particularly in the North macro-region.
- **The proportion of HHs reporting at least one child not enrolled in the 2021-2022 school year was highest in the East, North and West macro regions**, with HHs with a boy aged 12 to 17 most likely to report their child not enrolled in formal school.
- Of HHs reporting children enrolled in school, **HHs in the East and South were more likely to report at least one child not attending school regularly** (4 days per week) in the 2021-2022 school year than those in other regions.
- **Only 1% of HHs with school-aged children reported children were unable to access distance learning** while schools were closed in the 2021-2022 school year.
- **COVID-19, security concerns and school closures** were the main barriers for boys and girls to access education reported by HHs, with **HHs rarely using reduced education expenditures and acquiring debt to pay for education** as coping strategies.
- HHs with school-age children with certain demographic characteristics were found to more frequently have Education needs, particularly **rural HHs and HHs with a boy aged 12 to 17**.



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Donor and Partners

Donor:



Partners:



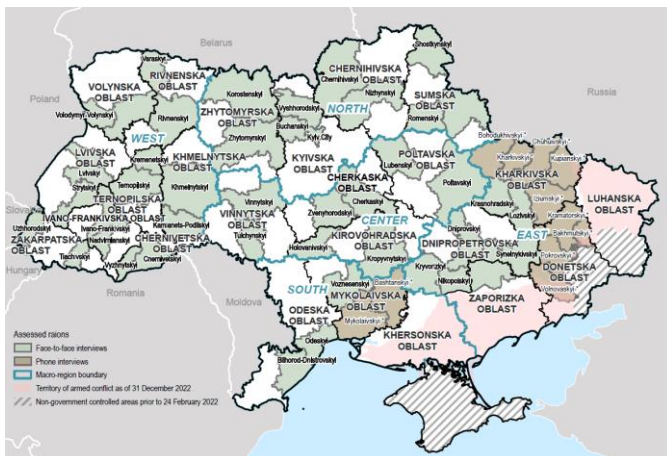
Complementary
assessments:





01 Methodology and Sampling

Coverage



Overall, the MSNA collected **13,449 household-level** interviews across **23 oblasts** and **55 raions**.

- **12,804 face-to-face interviews** in accessible areas (REACH), and **645 computer assisted telephone interviews (CATI)** in inaccessible areas (WFP).
- The sample was structured to **prioritize data collection in conflict-affected areas**, with increased coverage of raions and resulted in a higher level of precision.
- Findings are representative at the raion level. Therefore, findings related to subsets of the total sample are indicative. When aggregated to the oblast and macro-region levels, findings also do not account for areas not covered by data collection, thus should be considered as indicative.

Overall, the MSNA collected 13,449 household-level interviews in 23 oblasts and 55 raions across the whole of Ukraine.

These interviews were collected using a mixed method face-to-face (f2f) and telephone (CATI) interview data collection. REACH collected 12,804 household (HH)-level interviews with the support of its own enumerators (data collection period 10 October - 4 November 2022). In inaccessible conflict-affected areas, the World Food Programme (WFP) conducted 645 HH-level CATI interviews (data collection period 14 November - 21 December 2022).

For reference, the CATI 'grouped' raions were in Donetska oblast (Bakhmutskiyi, Kramatorskiy, Pokrovskiy, Volnovaskiy), Kharkivska oblast (Bohodukhivskiy, Chuhuivskiy, Iziumskiy, Kharkivskiy, Kupianskiy), and Mykolaviska oblast Bahstanskyyi and Mykolaivkiy.

Findings aggregated to the oblast, macro-region and national level do not take into consideration areas not covered by data collection and should therefore be considered as indicative rather than representative. It is also important to flag that data collection for Khersonska oblast was only conducted using the area of

knowledge (AoK) approach, the findings of which are shared below, and this oblast is therefore not captured in the f2f or CATI findings.

Demographically, the sample consisted of 8,712 (65%) female and 4,737 (35%) male respondents. These respondents were varied in age; 675 (5%) aged 18 to 25 years old, 4,725 (35%) aged 26 to 50 years old, 3,510 (26%) aged 51 to 65 years old and 4,590 (34%) aged 65+ years old. In terms of displacement, 1,080 were displaced, 1,350 were returnees and 11,069 were non-displaced, non-returnees (host community) respondents.

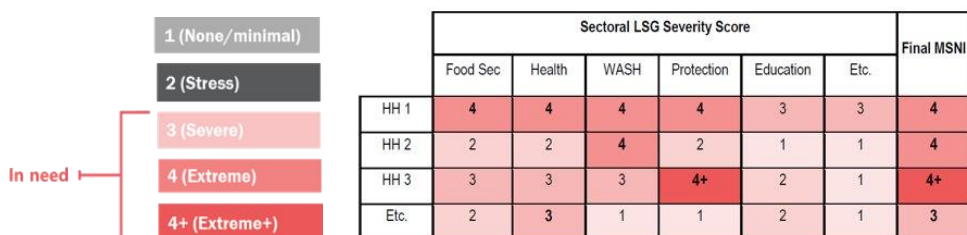
For more information on the MSNA methodology, sampling approach, research aims and questions, and limitations please go to: https://www.impact-repository.org/document/reach/a55a0d01/REACH_UKR_Methodology-Overview_MSNA-Bulletin_February-2023.pdf

Analysis Framework

Multi-Sectoral Needs Index (MSNI) and Living Standard Gaps (LSG) Analysis

The MSNI is a measure of both the magnitude and severity of unmet humanitarian needs across sectors, measured through Living Standard Gaps (LSGs)

- The *magnitude* is the total proportion of households affected (with at least one LSG)
- The *severity* is measured on a 5-point scale with the highest LSG forming the MSNI



The MSNI is a measure of the household's overall severity of humanitarian needs scale of 1 (None/Minimal) to 4 or 4+ (Extreme/Extreme+), as seen in the figure to the left, based on the highest severity of sectoral LSG severity scores identified in each household. This methodology is roughly in line with the JIAF, however, we cannot go to a scale of 5 ('Catastrophic' in the JIAF) since this classification cannot be based on household reporting alone, requiring an area-level approach and data triangulation.

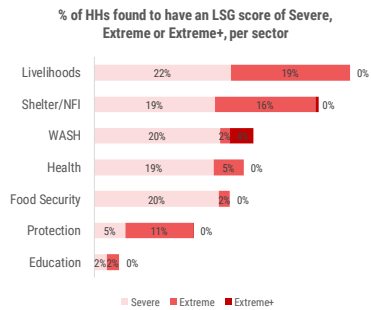
The MSNI is determined through the following steps: First, the severity of each sectoral LSGs is calculated per household, with HHs considered to meet a severity level criteria if one HH member meets the criteria. Next, a final severity score (MSNI) is determined for each household based on the highest severity of sectoral LSGs identified in each household.

As shown in the example in the figure to the right, the highest severity score across the three households (HH) is taken to determine the MSNI.

Living standard gaps (LSGs) by sector

Sectors with the highest proportion of households found to have Severe or Extreme LSG severity scores were:

- Livelihoods
- Shelter & Non-Food Items (NFI)
- Health





02

Education Living Standard Gap Analysis and Drivers

Of the total sample – 13,449 HHs – questions on education were only relevant to only 2,470 HHs (18%) and therefore all further analysis

Analysis Framework

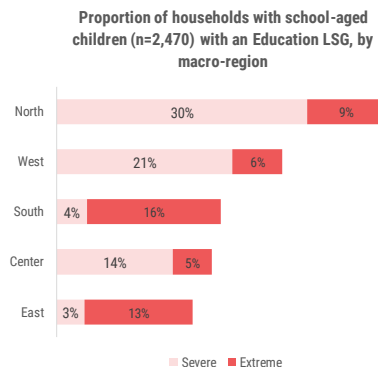
Education Living Standard Gap Framework

Critical indicators:

1. % of HHs with school-aged children (6 to 17-year-olds) enrolled and regularly attending school regularly, and if relevant, experiencing any barriers in accessing education in the 2021-2022 school year
2. % of HHs with school-aged children accessing and regularly attending distance learning while schools were closed in the 2021-2022 school year

22% of assessed HHs with school-aged children (n=2,470) were found to have a Severe or Extreme Education LSG.

Findings suggest that HHs with an Education LSG reside in regions affected and unaffected by the conflict, with 39% of interviewed households with school-aged children in the North (n=381) and 27% of interviewed households with school-aged children in the West (n=656) found to have Severe or Extreme Education needs (LSG score of 3 or 4).



The Education Living Standard Gap (LSG) framework consists of 2 composite critical indicators. The first examines the enrolment, regular attendance and barriers for HHs with school-aged children in accessing school; and the second examines access and regular attendance for HHs with school-aged children in distance learning.

The following are the % of households with Severe and Extreme severity levels in the critical indicators;

1. HHs with school-aged children enrolled and regularly attending school regularly, and if relevant, experiencing any barriers in accessing education in the 2021-2022 school year – 22%
2. HHs with school-aged children accessing and regularly attending distance learning while schools were closed in the 2021-2022 school year – 14%

% of HHs with Severe (3) or Extreme (4) Education LSG severity scores

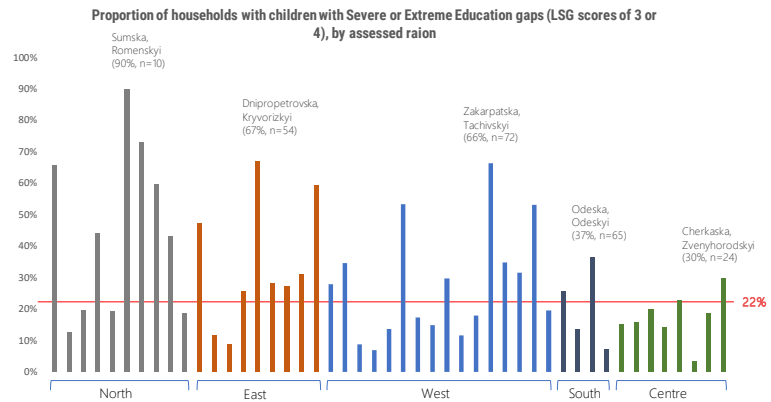


Here you have a map of the proportion of HHs falling into Severe or Extreme severity levels of Education LSGs when implementing the Health LSG framework.

Overall, the Education LSG was not one of the main drivers of the MSNI. We do see high levels of HHs with Education LSGs in Romenskyi, North (90%, n=10), Shostkynskyi, North (73%, n=26), Kryvorizkyi, East (67%, n=54), Tiachivskyi, West (66%, n=72), Buchanskyi, North (66%, n=50), and Sumskyi, North (60%, n=43), however, the samples within these raions are extremely small.

Localised Education Living Standards Gaps

In some locations, higher than average % of HHs with severe and extreme gaps were found, suggesting a localised approach to prioritisation may be needed.

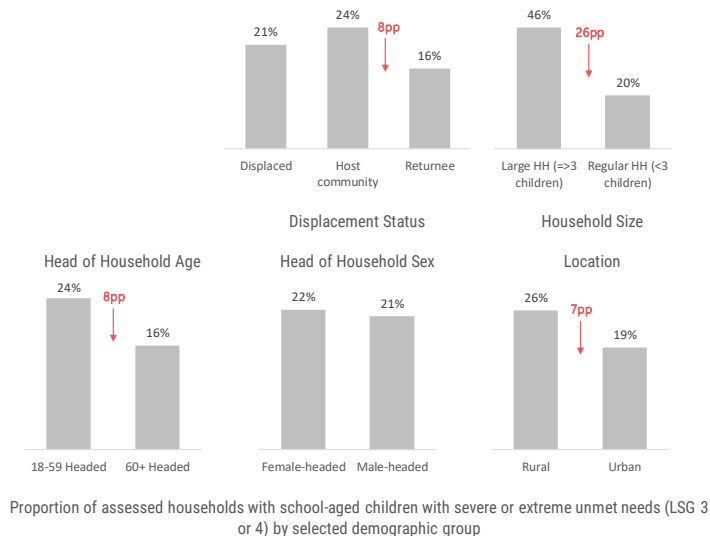


Here you have a map of the proportion of HHs falling into Severe or Extreme severity levels of Education LSGs when implementing the Health LSG framework.

Overall, the average proportion of HHs across the raions sampled was 24%, with the South region (to the left of the graph) having the highest regional average and the West region (to the right of the graph) having the lowest regional average.

Severe or Extreme unmet needs by demographic

Response to Education needs should consider the following:



Firstly, it is important to flag here that the sample used to create these findings, households with school-aged children, was small and therefore disaggregated analysis of the LSGs has not been conducted at the macro-regional level.

Overall, findings suggest that almost a quarter (22%) of HHs across Ukraine have Education LSGs, with the highest levels observed in the North (39%), which was more than double those in the East (16%) and Center (19%), and almost double those in the South (20%).

HH Size – Large HHs (3 or more children) were found to have Education LSGs more than twice as often (46%), and double the overall average, than regular HHs (less than 3 children) (20%), although the sample of large HHs (n=252) was significantly smaller than the sample of regular HHs (2,212).

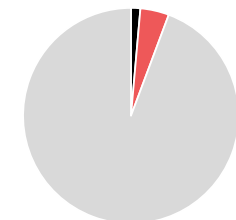
Displacement Status – Almost a quarter of host community HHs (24%) were found to have Education LSGs, compared to 21% of displaced HHs and 16% returnee HHs.

HoHH Sex – Interviewed 60+ headed HHs were less likely (16%) than 18-59 headed HHs (24%) to have Education LSGs.

Rural/Urban – Assessed urban HHs were less likely (19%) than rural HHs (26%) to have Education LSGs.

Education LSG needs profile

% of HHs by co-occurrence of Education LSGs



- HHs with only one LSG in Education
- HHs with LSGs in Education and other sectors
- HHs with no Education LSGs

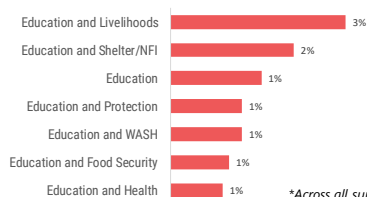
The most common combination of LSGs found among HHs with a Education LSG was the combination with a Livelihoods LSG (3% of HHs had concurring LSGs in these two sectors). Livelihoods was also the sector with the highest proportion of HHs found to have unmet needs (LSG), compared to the other assessed sectors.

Most interviewed HHs that were found to have Severe or Extreme Education gaps (LSG 3 or 4) did not have concurring LSGs in any other sectors.

4% of assessed HHs* were found to have a Severe or Extreme LSG in Education and at least one other sector.

1% of assessed HHs were found to have a Severe or Extreme LSG only in Education.

% of HHs with Education and Other LSGs



**Across all surveyed HHs (with and without school-aged children)*

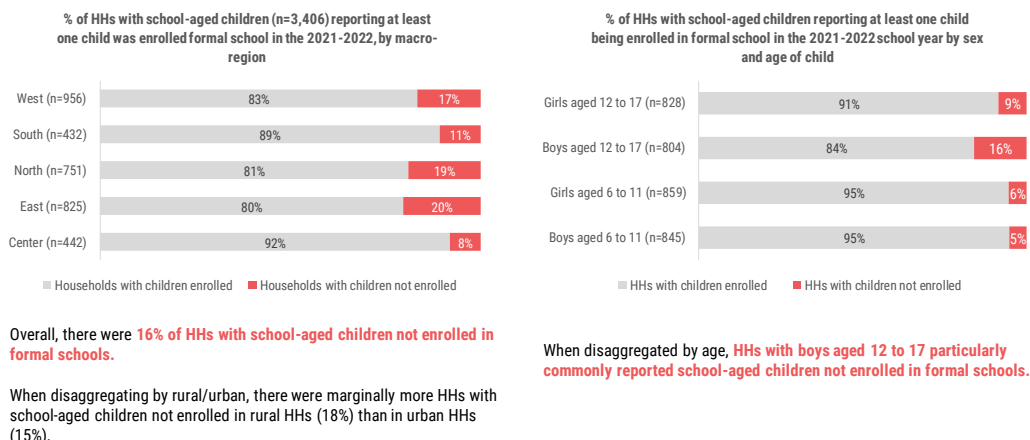


03

Education Indicator Analysis

Education Analysis

Household Enrolment of School-Aged Children



For the 2021-2022 school year, how many school-aged children in your household were enrolled (registered) in formal school?

Overall, there were 16% of HHs with school-aged children not enrolled in formal schools. Regionally, this was highest in the East where one-fifth (20%) of HHs had school-aged children not enrolled in formal schools and lowest in the Center (8%) where this percentage was less than half that in the East.

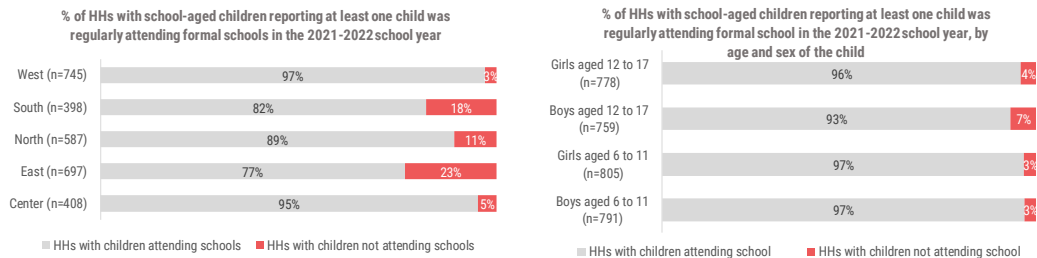
When disaggregating by rural/urban there were marginally more HHs with school-aged children not enrolled in rural HHs (18%) than in urban HHs (15%). This disparity was significantly worse in the East, where rural HHs were more than twice as likely (32%) to have school-aged children not enrolled in formal schools as urban HHs (14%).

Finally, when disaggregated by displacement there were marginally more host community HHs with school-aged children not enrolled (18%) than displaced and returnee HHs (13%).

When disaggregated by age, as we can observe in the graph on the right, HHs with boys aged 12 to 17 were almost twice as likely (16%) to have school-aged children not enrolled in formal schools as HHs with girls of the same age, and more than three-times as likely as HHs with boys aged 6 to 11. In particular, this issue was significantly worse for HHs with boys (33%) and girls (23%) aged 12 to 17 in the East, which were both more than the average (16% and 9%, respectively), although the samples were small (207 and 195 HHs, respectively).

Education Analysis

Household Regular School Attendance of School-Aged Children



Overall, of the 84% (2,835) of the HHs with school-aged children whose children were enrolled in the school, **11%** (314) reported that boys and girls were **not attending formal schools regularly** (at least 4 days a week).

When disaggregating by rural/urban the level of attendance was the same, with 11% of HHs with school-aged children not attending regularly. **In the East the number of rural HHs with school-aged children not attending was more than three-times higher (34%) than the average.**

When disaggregated by age, HHs with boys aged 12 to 17 more commonly reported school-aged children not attending formal schools regularly as HHs with girls of the same age, and more than twice as likely as HHs with children aged 6 to 11.

While schools were open in the current school year of 2021-2022, how many school-aged children in the household were attending formal school regularly (at least 4 days per week)?

Overall, there were 16% of HHs with school-aged children not enrolled in formal schools. Regionally, this was highest in the East where almost a quarter (23%) of HHs had school-aged children not attending formal schools regularly and lowest in the Center (5%) and West (3%) where this percentage was 5% or less.

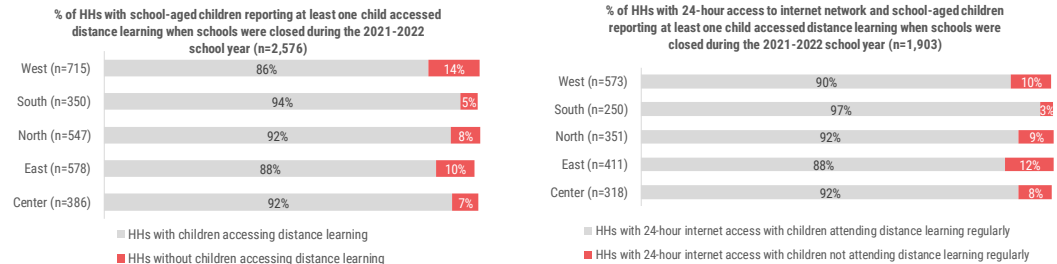
When disaggregated by rural/urban HHs, the level of attendance was the same, with 11% of HHs with school-aged children not attending regularly. There was a significant difference in the East, however, where the number of rural HHs with school-aged children not attending was more than three-times higher (34%) than the average.

Finally, when disaggregated by displacement, displaced HHs with school-aged children were almost twice as likely (17%) to have school-aged children not attending regularly as HC HHs (9%) and significantly worse than returnee HHs (12%).

When disaggregated by age, as we can observe in the graph on the right, HHs with boys aged 12 to 17 were almost twice as likely (7%) to have school-aged children not attending formal schools regularly as HHs with girls of the same age (4%), and more than twice as likely as HHs with children aged 6 to 11 (3%). In particular, this issue was significantly worse for HHs with boys aged 12 to 17 in the South (15%) which were more than double the average, although the sample was small (n=113).

Education Analysis

Household Access to Distance Learning



* Overall, 0.5% answered "Not sure" and 0.4% preferred not to answer

Overall, 1% of HHs with school-aged children (n=2,335) reported children were unable to access distance learning while schools were closed in the 2021-2022 school year.

Overall, findings for this indicator do not show considerable differences between urban and rural HHs, except for the South, where the number of rural HHs with school-aged children reportedly unable to access distance learning was more than double that of urban HHs.

When disaggregated by HHs with 24-hour access to internet network (n=1,903), 9% of HHs were still unable to access distance learning.

HHs in the East with 24-hour internet access were four-times more likely to report children not accessing distance learning than the South, meaning that access to internet network was less likely to be the cause of school-aged children from these HHs being unable to access distance learning.

While schools were closed in the last school year (2021-2022), did any school-aged children in the HH access distance learning?

Overall, there were 10% of HHs with school-aged children unable to access distance learning while schools were closed in the 2021-2022 school year. Regionally, this was highest in the West (14%) and lowest in the South (5%) where HHs with school-aged children were half as likely to be unable to access distance learning while schools were closed.

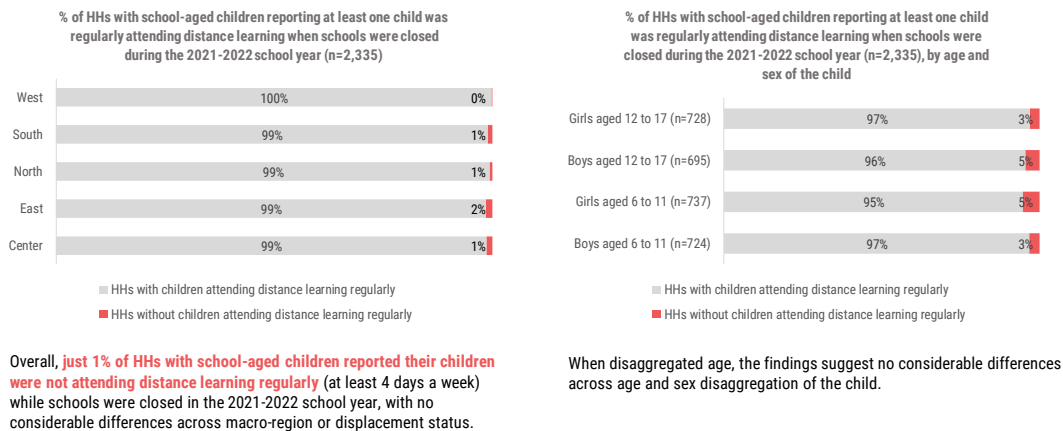
When disaggregating by rural/urban the level of access was practically the same, with 10% of urban HHs and 9% of rural HHs with school-aged children unable to access distance learning. There was a significant difference in the South, however, where the number of rural HHs with school-aged children unable to access distance learning was more than double (8%) that of urban HHs (3%).

When disaggregated by HHs with 24-hour access to internet network (n=1,903), 9% of HHs were still unable to access distance learning.

HHs in the East with 24-hour internet access were four-times more likely to report children not accessing distance learning than the South, meaning that access to internet network was less likely to be the cause of school-aged children from these HHs being unable to access distance learning.

Education Analysis

Household Regular Distance Learning Attendance of School-Aged Children



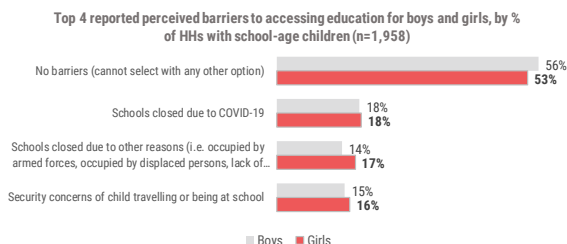
[If some children were enrolled and having access to distance learning] How many school-aged children in the HH were accessing distance learning regularly in the current school year (2021-2022)?

Overall, there were just 1% of HHs with school-aged children who were unable to access distance learning regularly attending (at least 4 days a week) while schools were closed in the 2021-2022 school year. This was the same pattern when disaggregated by rural/urban and displacement status

When disaggregated age, we can see that HHs with girls aged 6 to 11 and boys aged 12 to 17 were most likely (5%) to have school-aged children not accessing distance learning while schools were closed in the 2021-2022 school year. Interestingly, HHs with children of both sexes and all ages in the East were two- to four-times as likely to be unable to access distance learning as the average.

Education Analysis

Barriers to access primary education



While the difference in reported barriers for boys and girls to access education were negligible, findings suggest differences between macro-regions, with barriers being most commonly reported in the East and least in the North.

Other commonly reported barriers for boys and girls included financial issues (such as affordability of school supplies, tuition, etc), distance to school or lack of transportation, as well as a lack of children's interest in education.

The three main reported barriers for both girls and boys to access schools were **school closure due to COVID-19**, **security concerns for children travelling to school** and **school closure to conflict-related reasons** (occupied by armed forces/displaced persons or lack of students).

Lesser reported perceived barriers to accessing education for boys and girls, by % of HHs with school-aged children (n=1,958)

		Distance/lack transportation	Financial issues	Lack of children's interest
Center	Boys	1%	2%	2%
East		12%	13%	12%
North		1%	1%	1%
South		0%	4%	1%
West		3%	3%	4%
Overall		3%	4%	4%
Center	Girls	1%	2%	4%
East		13%	14%	15%
North		1%	1%	0%
South		0%	4%	2%
West		2%	3%	3%
Overall		3%	4%	4%

In your view, do boys face any barriers in accessing education? Please select the top five barriers you perceive

Boys - Overall more than half of the HHs with school-aged children reported no barriers to access elementary education. Across the regions, the **South** reported lower levels of barrier absence. Most common barriers faced by boys to accessing education were schools closed due to COVID (greater proportion in the South), security concerns of child travelling to school (predominantly in the Center) and schools closed due to other reasons (higher in the East).

In your view, do girls face any barriers in accessing education? Please select the top five barriers you perceive

Girls - Same trend found for school-aged children girls - with half of the HHs reporting no barriers to access elementary education. Across the regions, the **East** reported lower levels of barrier absence. Most common barriers faced by girls to accessing education were schools closed due to COVID (greater proportion in the South), security concerns of child travelling to school (predominantly in the North) and schools closed due to other reasons (higher in the East).

Interestingly, in other barriers reported, the East region had higher proportion comparatively to other regions. They were the distance or lack of transportation, financial issues (including affordability to purchase school supplies, pay tuition, etc) as well as lack of children's interest in education.

Education Analysis

Reduced education expenditure



Reducing education expenditure was the **sixth most reported used living coping strategy mechanism** used in the 30 days prior to data collection.

Average reported monthly education-related expenditure (UAH) according to HHs with school-aged children (n=2,779)

Region	Sample	Average education-related expenditure
Center	376	UAH 2,497.88
East	695	UAH 1,822.20
North	622	UAH 2,233.23
South	318	UAH 2,461.03
West	768	UAH 2,608.27
overall	2779	UAH 2,329.18

In the last 30 days, did your household reduce essential education expenditures due to a lack of resources to cover basic needs (such as food, shelter, health, education, fuel for heating, bottled water, etc.)?

In terms of livelihood coping strategies, HHs reported the adoption of many mechanisms to cover basic needs, including the reduction of education expenditure. Comparatively with other mechanisms it was the 6th most reported overall.

Average educational expenditures suggest that the use of reduced education expenditure was most adopted in the East where average educational expenditure (1,822 UAH) was the lowest at the date of data collection (as we can see in the table above).

Education Analysis

Financial debt and priority needs

% of HHs that reported new debts taken to cover basic needs, among those reporting debt repayment as HH expenditure over the last 6 months (n=1,728)



Among those HHs who reported having taken on debt since February 2022 to cover basic needs, most reported reasons for taking on debt, compared to paying for education (n=1,497)

	Accessing food	Paying for healthcare services or medicines	Paying for shelter maintenance	Paying for education
Center	11%	25%	8%	5%
East	17%	39%	6%	0%
North	19%	5%	11%	2%
South	11%	7%	9%	0%
West	10%	11%	9%	3%
overall	13%	12%	9%	2%

Overall, **2% of the HHs reported that they had acquired debt to pay for education since the escalation of the war in February 2022**, compared to 13% of HHs reporting that they had acquired debt to pay food and 12% reporting they had done so to pay for healthcare.

These HHs reporting patterns of acquiring debt correspond to those of top three priority needs (seen below), in which HHs reported food (39%), medicine (31%) and healthcare (20%) as priority needs far more often than education (3%) overall.

% of HHs reporting top three priority needs, compared to education (n=13,448)

Region	Food	Medicines	Healthcare	Education
Center	31%	37%	27%	3%
East	41%	29%	19%	3%
North	43%	35%	21%	2%
South	33%	23%	15%	4%
West	41%	30%	20%	3%
overall	39%	31%	20%	3%

What was your household's primary reason for taking on debt?

HHs interviewed also reported taking on debt to cover basic needs in the context of the conflict escalation (since February 2022). Overall, it corresponded to at least 34% of the HHs interviewed. Of those, the majority of the HHs reported the access of food (13%), purchase medicines or healthcare services (12%) as well as paying for shelter maintenance (9%) as their reason. The reason related to education expenses was comparatively low overall (2%), with a higher proportion of HHs in the Center region (5%) reporting it more commonly.

What are the top five priority needs of your household?

On the top 3 current priority needs, overall, HHs informed food (39%), medicine (31%) and healthcare (20%) most often. Elementary education was pointed out as a priority for only 3% of the households, with the HHs from the South region (4%) reporting more frequently.

Education Analysis

Data Friendly Spaces' SDR

The following are some key findings on barriers to education from Data Friendly Space's secondary data review (published in August 2022), related to the context after the conflict escalation since February 2022;

- Most of out-of-school children belong to the Roma disadvantaged families. The socio-economic situation in the family plays an important role ([Chiricli](#) 20/06/2022)
- Out-of-school children belong to several groups: some children belong to families in difficult life circumstances. A significant part of these children may beg. Mostly, these children are from Roma families. A smaller proportion of out-of-school children are disabled.
- One of the reasons for not attending schools in rural and mountainous areas may be explained by transportation difficulties – transport connections were not always sufficient, making it particularly an issue for children with disabilities.
- According to the children interviewed, the main reason for not attending school is lack of funds: no money for meals (lunch costs UAH 20), winter clothes, stationery items/backpack, and the class fund.

The table to right the right indicates education institutions damaged or destroyed as of 8th December 2022 ([Save Schools](#) 12/08/2022)

Oblast	Macro Region	Educational institutions destroyed	Educational institutions damaged	Total
Donetska	East	65	682	747
Kharkivska	East	47	517	564
Luhanska	East	22	164	186
Dnipropetrovska	East	6	142	148
Zaporizka	East	127	11	138
Kyiv City	North	0	94	94
Kyivska	North	13	180	193
Chernihivska	North	12	103	115
Sumska	North	1	91	92
Zhytomyrska	North	1	80	81
Mykolayivska	South	25	211	236
Khersonska	South	23	84	107
Odesska	South	0	21	21
Vinnyska	Central	0	20	20
Cherkaska	Central	0	11	11
Polravska	Central	0	11	11
Kirovogradska	Central	0	9	9
Khmelnyska	West	0	5	5
Rivnenska	West	0	2	2
Temopilkska	West	0	2	2
Lvyska	West	0	1	1
Chernivetska	West	0	0	0
Ivano-Frankivska	West	0	0	0
Volynska	West	0	0	0
Zakarpatska	West	0	0	0

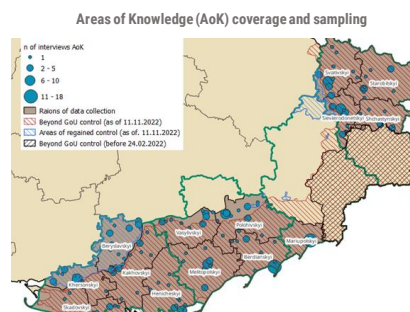
Area of Knowledge Analysis

Methodology

- Area of Knowledge interviews were conducted by WFP with respondents who had either moved out of or had been in regular contact with families/friends in Luhanska, Zaporizka, Khersonska or Donetsk oblasts, within the 14 days prior to data collection;
- Relatively small sample size of 268 interviews. Respondents reported not about their own households, but about their knowledge of the general situation in the areas of interest. Thus, findings are indicative (non-representative);
- Due to the complexity and sensitivity of data collection in these areas, an adjusted and shortened questionnaire was used, focusing only on the most critical indicators.

Education Findings

- More than half of the respondents indicated that children in the assessed areas have limited access to education, while 25% reported that children did not have access at all.
- For respondents aware of children dropping out of school in the assessed areas, the main reasons mentioned were lack of schools in the community, protection risks while commuting to school and while at school.



Because of inaccessibility of some areas after February 2022 (temporarily beyond control of Ukrainian Government or closeness to the contact line), WFP conducted an assessment there using “Area of Knowledge” approach (interview with key informants, having the recent knowledge about the area). Respondents were asked to describe the conditions and needs of people they know in the area/settlement, or to assess the situation in the whole settlement. The sample was drawn from people internally displaced from the areas of interest. Data was collected via telephone interviews between early November 2022 and mid January 2023. Because of the sensitivity and the methodology, used for this survey, the questionnaire was adjusted. The cutoff dates used in the map were set to correspond with the commencement of data collection. Source for territory control: Institute of War Studies.

Considering the small sample size, sampling methodology (convenience sampling) and key informant-type approach, these findings should be considered as indicative only. Findings cannot be interpreted directly as prevalence for the people living in the settlements, but rather shares of respondents asked about living conditions in the settlements/areas of interest.



04

Collective Site Population Indicator Analysis

Collective Site Monitoring: HHs in Collective Sites

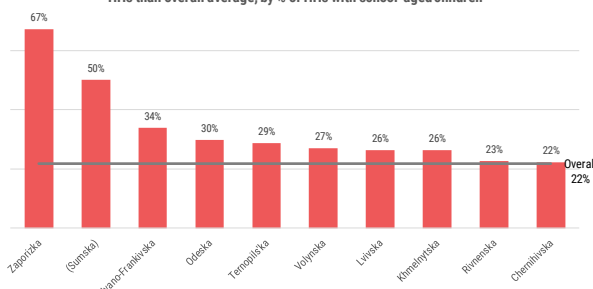
Camp Coordination – Camp Management Vulnerability Index

- Adapted MSNA methodology and indicators to Collective Sites population
- 3,617 IDP households interviewed (8,472 members)
- 877 collective sites in 21 oblasts
- Non-representative – Indicative results only
- Factsheet available in [English](#) and in [Ukrainian](#)

31% of interviewed households had at least one school-aged child.

Out of 1778 school-aged children who were reportedly enrolled in schools in the year 2021-2022, **86%** (1529) were attending formal school regularly (at least 4 days per week).

Education Vulnerability Score of severe or extreme, by oblast with higher % of HHs than overall average, by % of HHs with school-aged children



21% of interviewed households with school-aged children in collective sites had an Education vulnerability score of severe, and **1%** of extreme



The Camp Coordination Camp Management (CCCM) Vulnerability Index is a round of data collection undertaken by the Collective Site Monitoring unit in coordination with the CCCM Cluster and with funding from the UNHCR.

The CCCM Vulnerability Index adapted the MSNA methodology and indicators to the population of IDPs living in collective sites. Note that some **indicators are specific to the CCCM Vulnerability Index**. A dedicated Factsheet with sectoral Vulnerability Scores and the overall CCCM Vulnerability Index, alongside a dataset with the results for every indicator (at the overall, rural-urban disaggregation, and oblast levels), is available following this [link: https://www.impact-repository.org/document/reach/ce5f497c/REACH_UKR_IDP-Collective-Sites-Monitoring-Household-Survey_Factsheet_November-2022.pdf](https://www.impact-repository.org/document/reach/ce5f497c/REACH_UKR_IDP-Collective-Sites-Monitoring-Household-Survey_Factsheet_November-2022.pdf)

The results from the CCCM Vulnerability Index are only indicative.

In terms of coverage, 3,617 HHs were interviewed in face-to-face interviews, for a total of 8,472 IDPs. 877 collective sites were assessed in 21 government-controlled oblasts (all oblasts except Khersonska, Luhanska, Donetska, parts of Zaporizka). Sixty per cent (60%) of IDPs were women, and 40% men, with the age disaggregation as

follows: 6% 0-5; 21% 6-17 years old; 48% 18-59; 25% above 60 years old.

Overall, the sector of Education showed a low level of unmet needs in CS population. However, negative outstanding results were gathered in Zaporizka oblast.

Thirty-one percent of HHs reported having at least one school-aged child (6-17 years old). The majority of school-aged children in CSs were between 6 and 10 years old (42%), then between 11 and 14 years old (36%), and finally, between 15 and 17 years old (23%).

Education was the sector with the least % of HHs with a vulnerability score of severe or extreme, with 93% with no or minimal score. However, this score becomes more important when considered in relation to the number of HHs with school-aged children – 22% of them had a vulnerability score of severe or extreme in education. Zaporizka's high percentage is overwhelmingly due to the closure of schools given conflict (Note that in Sumska, only 2 HHs with school-aged children were interviewed)

The difference between the proportion of HHs in need in **rural** vs **urban** CSs was minimal for the Education vulnerability score.

While schools were open in the last school year of 2021-2022, how many school-aged children in the household were attending formal school regularly (at least 4 days per week)?

NOTE: Formal schools are defined as schools within a system of full-time education developed by public organisations and recognised private bodies.

1529 children, or 86% of all children in collective sites, were attending formal school regularly (at least 4 days per week). 14% were reportedly not attending regularly

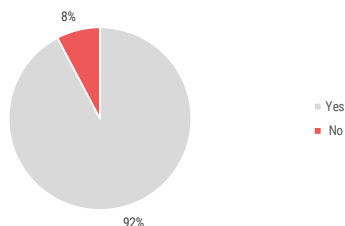
For the 2021-2022 school year, how many school-aged children in your household were enrolled (registered) in formal school? Note: this does not mean going physically to school (as schools might have been partially closed), but that the child was registered/affiliated/'signed-up' with a school.

NOTE: This includes enrolment in either full-time public schools or recognised private schools.

There was a total of 1730 children 6 to 17 years old present in the HHs. In turn, 1778 school-aged children were reported to have been enrolled in school in the year 2021-2022. The discrepancy is likely to come from the varying age of enrollment in the first grade and graduation, respectively (can happen at 5, 18 years, etc.) Overall, it is reasonable to state that all or nearly all school-aged children were enrolled in the previous study year.

Collective Site Monitoring: HHs in Collective Sites

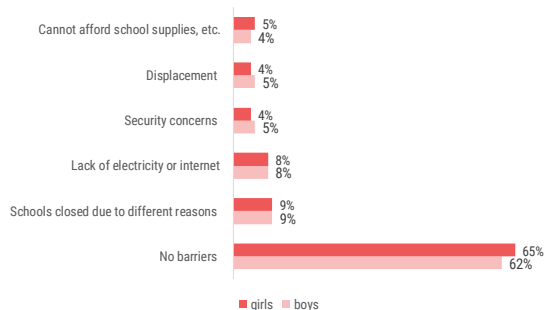
Percentage of HHs with children in collective sites with access to distance learning



1573 children (88% of the enrolled) were accessing distance learning **regularly** in the school year of 2021-2022.

68% of households experienced **interruptions** in mains electricity and 12% in wired internet in 14 days prior to data collection.

Top barriers for boys and girls in the site in accessing education, % of HHs with at least one school-aged child of the respective sex, n=800 for boys, n=782 for girls



What are the top five barriers, if any, that boys in the site face in accessing education?

There was no noticeable difference in education barriers between boys and girls. The majority of HHs in CSs reported no barriers.

While schools were closed in the last school year (2021-2022), did any school-aged children in the HH access distance learning?

How many school-aged children in the HH were accessing distance learning regularly in the school year of 2021-2022?

This means they were doing some distance learning activities at least 4 days per week, for at least 3 hours per day e.g. listening to radio/TV broadcasts, textbook learning, online learning

HHs indicated no/minimal issues in terms of accessing distance learning when the schools were closed during the school year 2021/2022 (only 4% of HHs scored a severe level)

For any questions on these findings
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