REPORT

REACH UKRAINE CALIBRATION ASSESSMENT 2024-2025

March 2025

Ukraine

KEY MESSAGES

- **Between June and December 2024, the percentage of households in need in at least one sector slightly increased (from 81% to 86%). However, the severity of needs worsened,** with **34%** of households having extreme needs in at least one sector in December, compared to **29%** in June. **Compared to the 2024 MSNA, the prevalence of needs increased in all sectors except WASH.** The severity of needs increased notably in the South macro-region (41%, compared to 28% in June).
- **Over half of assessed households had unmet livelihoods (68%) and health (51%) needs, indicating a greater focus on these two sectors may be appropriate.** Access to employment and sufficient income remained especially tenuous in the eastern and southern oblasts, where disproportionally more people rely on pensions, governmental benefits and internally displaced persons (IDPs) payments. Higher reliance on humanitarian assistance in frontline oblasts would make households particularly vulnerable in case of aid reductions. Healthcare and medicines remained generally available, though increasingly unaffordable for many households.
- **Protection needs also remained widespread, affecting almost half (45%) of all assessed households. They were especially prevalent and severe in the East and South macro-regions.** A notable emerging trend is how households are adapting to the presence of mines/UXOs: while these hazards were frequently reported in frontline and previously occupied areas, they were rarely cited as a safety and security concern. This may indicate higher levels of mine/UXO risk education or that, after three years of war, households have adjusted their behavior despite mines/UXOs contamination.

ASSESSMENT COVERAGE

CONTEXT & RATIONALE

Results from REACH's 2024 Multi-Sectoral Needs Assessment (MSNA) have shown widespread humanitarian needs across the country, with over four in five households being identified as in need in at least one sector, and 29% identified as in extreme need. The annual MSNA is supplemented by other regular research cycles, such as the Humanitarian Situation Monitoring (HSM) to provide up-to-date multi-sectoral data on the evolution of humanitarian needs in Ukraine.

ASSESSMENT OVERVIEW

Building on these two research cycles, REACH Ukraine conducted the third round of the Calibration Assessment between December 2024 and January 2025 to understand the evolution and seasonal changes of humanitarian needs. The Calibration Assessment was primarily aimed at understanding the evolution and seasonal changes of humanitarian needs, comparing findings with MSNA baseline data to identify patterns of change across multiple humanitarian indicators.

METHODOLOGY

Data was collected at household-level through randomized Computer-Assisted Telephone Interview (CATI) structured questionnaire. The Calibration questionnaire is aligned with the 2024 MSNA questionnaire, ensuring comparability between datasets.

REACH conducted 3,874 household-level CATI interviews in 23 oblasts and Kyiv city. The data is representative at oblast level with a 95% confidence level and an 8% margin of error. To enhance sample representativeness across population segments, post-stratification weights were applied to correct for an overrepresentation of respondents aged 35–59, ensuring alignment with general population age distributions as estimated by UNFPA.

HAVEN

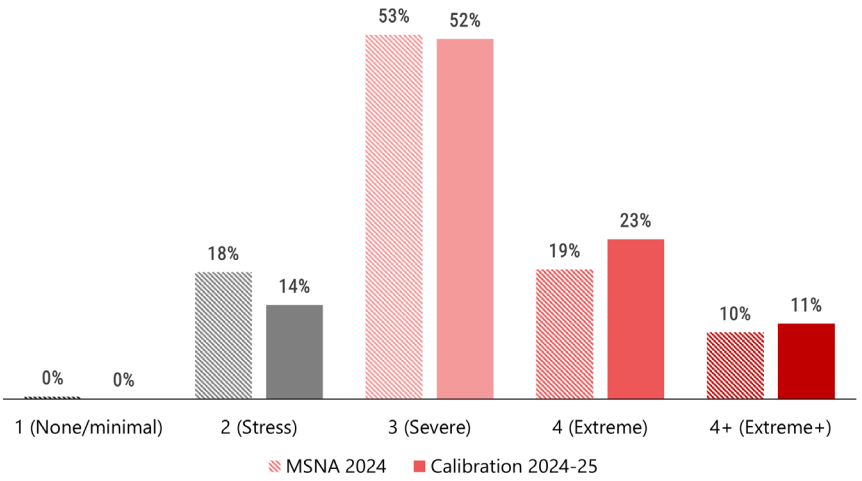
REACH Informing more effective humanitarian action

Contextualised Composite Indicator Analysis (CCIA)

About CCIA

The **Contextualized Composite Indicator Analysis (CCIA)** is a Ukraine-specific framework developed by REACH in consultation with Humanitarian Clusters, Working Groups, and Areas of Responsibility in Ukraine. **The CCIA measures the magnitude and complexity of humanitarian needs across sectors** through Sectoral Composites. Needs are analyzed in the Education, Food Security, Health, Livelihoods, Protection, Shelter and Non-Food Items (NFIs), and WASH sectors. The CCIA categorizes each household based on the severity of its needs into five categories: None/ minimal (1), Stress (2), Severe (3), Extreme (4), and Extreme+ (4+). A household is considered in need if any of its sectoral composite scores is 3 or higher, and in extreme need if it has a score of 4 and/ or 4+. The household's sectoral severity is determined by a composite indicator for each sector. A final severity score is determined for each household based on the highest sectoral severity score. The CCIA framework is different from REACH's Multi-Sector Needs Index (MSNI). Further information on the CCIA can be found in the CCIA Methodological Note.

Figure 1: Percentage of households in need during Calibration Round 3 and 2024 MSNA, by severity phase



During the 2024-2025 winter season, **86% of the households in Ukraine were found to be in need in at least one sector, and 34% were in extreme need**. Compared to the 2024 Multi-Sector Needs Assessment conducted in the summer 2024, the percentage of households classified as in severe need remained constant (52% in Calibration and 53% in MSNA), while the proportion of households facing extreme needs increased by 6 percentage points.

Table 1: Percentage of households in need during Calibration Round 3 and 2024 MSNA, by sector

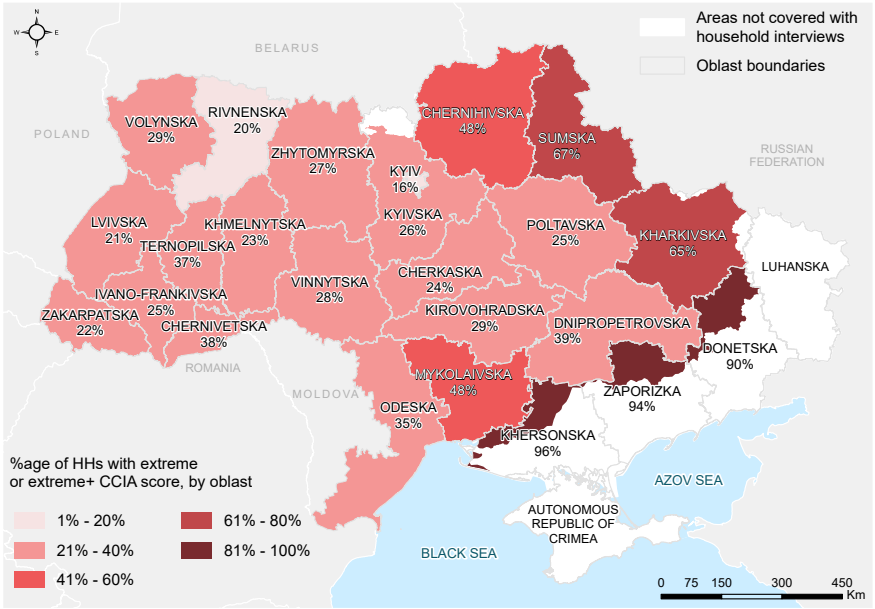
Sector	MSNA 2024	Calibration 2024-2025
Livelihoods	58%	68%
Health	35%	51%
Protection	39%	45%
Shelter and NFIs	28%	35%
WASH	26%	26%
Food Security	9.5%	13%
Education	6%	9%

The sectors with the highest proportion of households in need were **Livelihoods (68%), Health (51%), Protection (45%), and Shelter and NFI (35%).**

Compared to the 2024 MSNA, **the prevalence of needs increased for most sectors,** with the sole exception of WASH needs.

The most significant increase was recorded for Health[1], where the percentage of households in need increased by 16 percentage points since the 2024 MSNA, and Livelihoods, recording an increase of 10 percentage points.

Map 1: Percentage of households in Extreme need, by oblast



LOCATION OF HOUSEHOLDS IN NEED

Echoing findings from the 2024 MSNA, the Calibration assessment shows that the prevalence and severity of needs are more pronounced in the oblasts along the front line and Ukraine-Russia border. The percentage of households with extreme need was higher in the **East, South, and North macro-regions, equaling 56%, 41%, and 37%** respectively. Notably, the prevalence of extreme needs significantly increased in the South (by 13 percentage points, compared to 28% in the 2024 MSNA) and the North (by 6 percentage points, compared to 31%), while the increase was smaller in the East (3 percentage points). Within the East macro-region, extreme needs were driven by **Protection** (36%) and **Livelihoods** (20%). In the South, extreme needs are driven by **Livelihoods** (24%) and **Health** (13%). In the North, 14% of households were in extreme need in **Livelihoods** and 12% in **Protection**.

Table 2: Percentage of households in extreme need, by oblasts with highest prevalence of extreme need

Oblasts	% in Extreme need
Khersonska	96%
Zaporizka	94%
Donetska	89%
Sumska	67%
Kharkivska	65%

In the **West** and **Center** macro-regions, **25%** and **26%** of the households were classified as in extreme need respectively, with a 4 and 7 percentage points increase from the MSNA (21% and 20%). In these macro-regions, extreme needs were driven by **Livelihoods** (19% and 15%), **Health** (8% in both), and **WASH** unmet extreme needs (6% and 8%), remaining consistent with the findings of the 2024 MSNA.

The oblasts displaying the highest proportion of households in extreme need were **Khersonska (96%), Zaporizka (94%), Donetska (90%), Sumska (67%), and Kharkivska (65%).** Compared to the 2024 MSNA, Kharkivska recorded less severe needs, with the percentage of households in extreme need decreasing by 18 percentage points from 82% in 2024. Conversely, there was an increase in the prevalence of extreme needs in Chernihivska (from 31% to 48% in Calibration, driven by Protection and Health needs), Mykolaivska (from 29% in MSNA to 48%, driven by an increase in Health and Livelihood needs), and Poltavska (from 11% to 25%, due to an increase in extreme Livelihood need), which could be partly due to the higher proportion of displaced households and households with a member with disability in these oblasts compared to MSNA.

DEMOGRAPHIC PROFILES OF HOUSEHOLDS IN NEED

The prevalence and severity of needs differed significantly across demographic groups.

IDP and returnee households showed a higher prevalence of extreme needs, with 41% of the IDP and 36% of the returnee households classified as in extreme need, compared to 31% among non-displaced households. The difference between groups, however, narrowed since mid-2024, as the extreme vulnerability of non-displaced increased from 25% in MSNA to 31% in Calibration.

Compared to the 2024 MSNA, the prevalence of extreme need among **households with at least one member with a disability** increased, rising from 35% to 41%, compared to 21% of households without members with disability. The Calibration results underscore an increase in the severity of needs among **rural households,** with extreme needs rising from 30% in MSNA to 39% in Calibration, compared to 31% among households living in urban areas.

Large households with more than five members were more likely to experience extreme needs (45%) compared to other household size groups (33% of households with 2-4 children and 30% of households with one single member were classified in extreme need). **Mixed-age households** comprising both elderly and younger adult members (39%) were more vulnerable than non-elderly households (35%), while elderly households emerged as the least vulnerable group (27%). For both large and mixed-age households, the severity of needs increased from MSNA 2024, when the prevalence of extreme needs was 37% for both groups.

Table 3: Percentage of households per demographic groups and severity phase

	1	2	3	4	4+
IDP HHs (n=662)	0	5%	**54%**	**29%**	**13%**
HHs with one single female adult with children (n=233)	0	13%	**46%**	**32%**	**8%**
HHs with 5+ members (n =528)	0	10%	**46%**	**36%**	**9%**
Mixed HHs (60+ members and under) (n=928)	0	10%	**52%**	**29%**	**10%**
HHs with children (n =1577)	0	13%	**48%**	**29%**	**9%**
Returnee HHs (n=668)	0	15%	**49%**	**22%**	**14%**
Rural HHs (n=1664)	<1%	17%	**52%**	**19%**	**11%**
HHs with a member with a disability (n =1302)	0	<1%	**58%**	**27%**	**14%**
HHs living within **30 km from the frontline** or border with the Russian Federation (n=642)	0	0	**0**	**15%**	**85%**

EDUCATION

Education CCIA score

Around one in five households with children (22%) below 18 years old were found to have unmet education needs (9% overall). This represented a 4 percentage-point increase from the 2024 MSNA (**18%** of households with children). The prevalence of needs was higher in the South, East, and North macro-regions, and was mainly driven by education disruption events: **22%**, **20%**, and **17%** of the households with children in these regions, respectively, reported that war-related events including displacement, evacuation, or damage to the educational facility or home disrupted the education of at least one child.

Table 4: Percentage of households by Education CCIA severity score and macroregion

Macroregion	# of HHs	Minimal (1)	Stress (2)	Severe (3)	Extreme (4)
				in need	
West	1256	85%	10%	4%	0%
Center	634	77%	16%	6%	1%
North	789	78%	14%	8%	1%
East	644	67%	19%	10%	4%
South	471	75%	13%	9%	3%
Overall	**3794**	**77%**	**14%**	**7%**	**2%**

Children of school-age not attending school

While almost all school-age children were attending education in Ukraine (**97%** of school-age children reported in assessed households, n=2295), **the percentage of children not attending school was much higher in frontline oblasts**: in Donetska, **17%** of school-age children were not attending school, while in Khersonska and Zaporizka, the figure stood at **11%**. This is a similar proportion than the 2024 MSNA (**96%** of children attending school).

Among children not attending school (n=76), the main reported reason was the child's health or disability preventing attendance (**26%**). While the sample is too small sample to draw definitive conclusions, protection concerns did not appear to be a major driver of education needs: around one in four children not attending schools reportedly faced inadequate or damaged (unsafe) facilities[2], while one in ten of such children reportedly faced protection risks while at or traveling to the school.

Learning modality

In Ukraine, learning modalities varied considerably by oblast: the more exposed they were to the frontline, the more likely education was provided remotely. Overall, the majority (**54%**) of school-age children attended in-person, with a quarter (**25%**) reportedly attending mixed education (both in-person and remote) and almost another quarter (**21%**) remote education only. In the 2024 MSNA, **53%** of children attended in-person education.

Table 5: Percentage of households by learning modality of children in the household, by macro-regions and oblasts

Macroregion	Oblast	# of HHs	In-person	Mixed (remote and in-person)	Remote	Do not know/Prefer not to answer
West		885	80%	16%	4%	0%
Center		356	52%	33%	15%	0%
North		415	53%	33%	13%	1%
East	Dnipropetrovska	102	24%	30%	44%	1%
	Donetska	56	8%	1%	91%	0%
	Kharkivska	77	1%	4%	91%	4%
	Zaporizka	73	13%	21%	66%	0%
South	Khersonska	70	8%	3%	89%	0%
	Mykolaivska	80	21%	37%	41%	0%
	Odeska	100	57%	23%	18%	3%

- In the West macroregion, education was overwhelmingly reported as being in-person (**80%**).
- In the Centre macroregion, education was also reported in-person for a slim majority of school-age children (**52%**).
- In the North macroregion, a slim majority of school-age children attended in-person education (**53%**), with the exception of Sumska oblast (in majority remote).
- In the East macroregion, school-age children in frontline oblasts (Donetska and Kharkivska) were overwhelming reported to attend remote education (**91%** for both oblasts), while in Zaporizka and Dnipropetrovska, households reported a mix of in-person, blended and remote education.
- In the South macroregion, major differences emerged between Odeska (**57%** of school-age children attending school in-person) and Khersonska (**89%** of school-age children attending remote education); with households in Mykolaivska reporting a mix of in-person, blended and remote education.

The support needed to ensure Ukrainian children can access safe and adequate education therefore appeared dependent on the learning modality, which sometimes varied within the same oblast. Previous REACH assessments (ABA 2024) highlighted the challenges related to remote education, namely electricity cuts disrupting education[3], the lack of socialization space for children[4] (particularly acute in frontline areas where children face adverse mental health conditions[5]), and kindergartens not being able to operate remotely, preventing caretakers from working[6].

Health

Health CCIA score

Unmet health needs remained widespread in Ukraine, affecting one in two households (51%). While the prevalence of health needs varied across macro-regions, differences were smaller compared to other sectors, indicating that needs were common across all of Ukraine and not limited to frontline oblasts. The percentage of households in need increased considerably since the 2024 MSNA (35%), driven by more households reporting **healthcare needs** - including consultation and medication needs for acute and chronic illnesses, surgery, and trauma care - as well as an increase in households with at least one member with a **disability** (**31%** in Calibration R3 vs. **18%** in MSNA). The latter rise may reflect differences in data collection methods, as previous research suggests that remote CATI surveys (the modality used for Calibration) tend to oversample people with disabilities compared to F2F interviews (the primary modality used for the MSNA)[8].

Table 6: Percentage of households by Health CCIA severity score and macroregion

				in need		
Macroregion	# of HHs	Minimal (1)	Stress (2)	Severe (3)	Extreme (4)	Extreme+ (4+)
West	1218	11%	44%	38%	5%	2%
Center	626	9%	38%	45%	5%	3%
North	765	11%	41%	39%	7%	2%
East	625	11%	33%	46%	8%	2%
South	468	8%	33%	46%	12%	1%
Overall	**3702**	**10%**	**39%**	**42%**	**7%**	**2%**

Access to healthcare

Healthcare was reportedly mostly accessible for people needing it in Ukraine - although more tenuous in the East and South. Amongst the **46%** of household members nationally who reportedly needed to access healthcare in the preceding 3 months, **15%** reported being unable to obtain it when needed. The most pronounced inaccessibility of healthcare appeared in Donetska (reported by **26%** of household members out of those needing healthcare), Mykolaivska (**21%**), and Odeska (**19%**).

While **85%** of household members nationally reportedly could obtain healthcare when needed, there were four oblasts where accessibility was better. In Vinnytska, **90%** of household members were able to obtain healthcare when they needed it. The next highest rates of positive responses were in Zhytomyrska (**90%** of household members), followed by Zakarpatska (**90%**) and Volynska (**89%**).

Access to healthcare appeared somewhat worse than in the 2024 MSNA, where **32%** of household members reportedly needed to access healthcare, and **9%** of these could not obtain it when needed. This pattern of degraded access in Calibration compared to MSNA was also noticeable in Calibration Round 2 (February 2024). This difference may be influenced by seasonal factors, with MSNA conducted in summer and Calibration in winter.

Access to medicines

Medicines remained widely available in Ukraine, although affordability was a growing issue. Almost three in four households (**74%**) reported they had sought medicine in the past three months, and of these, **93%** said they were able to obtain them. This corresponds with the December JMMI findings[7], which indicated that **87%** of customers nationally reported that medication was available. However, both JMMI and Calibration identified above average accessibility/ availability issues in the east and south of Ukraine. This is a slight decrease compared to the 2024 MSNA, where **97%** of households could access medicines when they needed to.

According to JMMI, **10%** of customers in the East and **15%** in the South reported medicine availability issues, compared to **6%** nationally. In Calibration, Donetska and Odeska drove above average prevalence of reported accessibility/ availability issues for their macroregions (each at **13%**, compared with **6%** nationally).

Table 7: Percentage of households by most commonly reported barriers to accessing healthcare and medicine, and macroregion

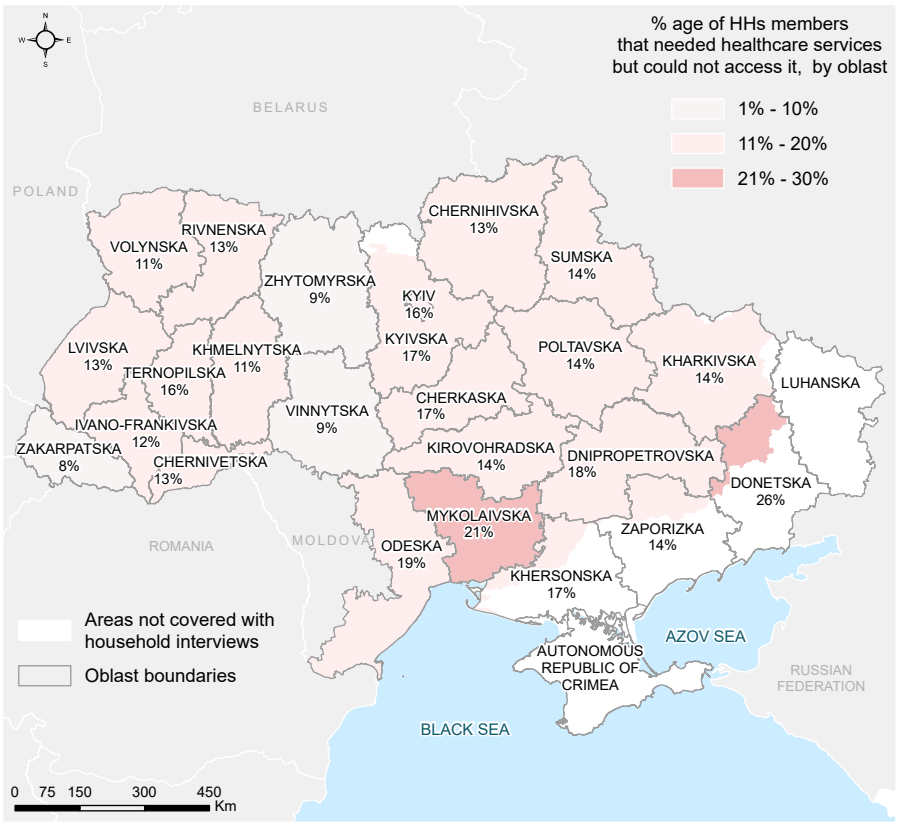
Macroregion	# of HHs	None	Cost of medicine	Cost of treatment
West	1111	71%	17%	8%
Center	562	69%	17%	6%
North	705	64%	17%	8%
East	561	65%	21%	10%
South	416	55%	29%	13%
Total	**3355**	**66%**	**19%**	**9%**

Barriers to accessing healthcare and medicines

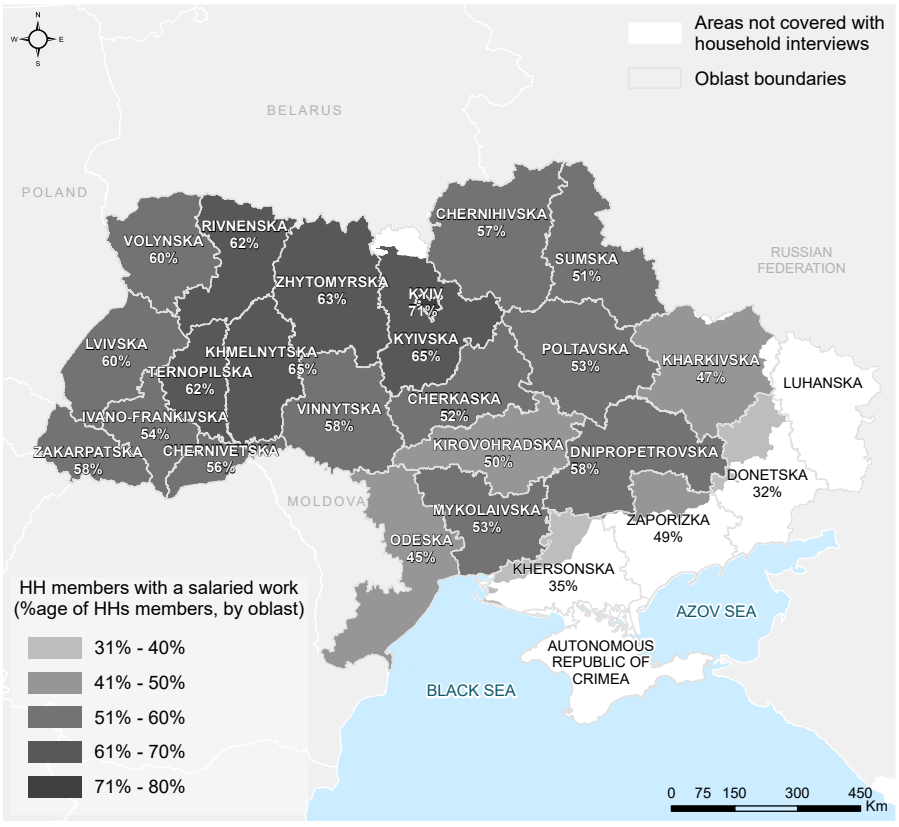
While two thirds of households needing healthcare/medicines could access it easily, affordability was identified as the main barrier preventing access to healthcare/medicines. When asked about the barriers to accessing healthcare and medicine, **66%** of households reported no barriers. Among reported barriers, financial constraints were the most common, with **19%** of households that sought medicine or healthcare citing the cost of medicine and **9%** the cost of treatment. These challenges were particularly prevalent in the East and South macroregions.

Some other barriers to healthcare were also highly localised in their prevalence. Security-related barriers were reported by **2%** of households nationally, but by **26%** in Khersonska. Transport barriers were low nationally at **2%**, but prominent for households in Donetska at **13%**.

Map 2: Percentage of household members that needed health services but could not access them, by oblast



Map 3: Percentage of household members (>14yo) reporting salaried work, by oblast



FOOD SECURITY

Food security CCIA score

Food insecurity remained relatively rare in Ukraine, with around one in ten households (13%) nationally identified as being in need, and almost no households with extreme needs (risk of significant harm to physical or mental well-being). Needs were most common in the East and South macro-regions (18% in both).

Compared to the 2024 MSNA, this is a four percentage-point increase (when **9%** of households were identified as being in need), indicating a slight deterioration. However, even under winter conditions, food security remained mostly stable in Ukraine.

Table 8: Percentage of households by Food Security CCIA severity score and macroregion

Macroregion	# of HHs	Minimal (1)	Stress (2)	Severe (3)	Extreme (4)
				in need	
West	1183	33%	57%	10%	0%
Center	590	30%	57%	13%	0%
North	731	36%	53%	11%	0%
East	619	23%	58%	18%	1%
South	452	27%	55%	17%	1%
Overall	**3575**	**31%**	**56%**	**13%**	**0%**

Food Consumption Score (FCS)

While food insecurity remained relatively limited in Ukraine, it varied depending on the household's characteristics, with single, elderly households in the South macroregion more likely be food insecure. Overall, nine in ten households had an acceptable FCS, but scores were poorer in the South macroregion and Kirovohradska oblast. Rural households were more likely to have borderline FCS (no significant difference for "poor" scores between rural and urban), indicating food security is somewhat poorer in rural areas. Similarly, age appeared to have some influence on food security: households with older adults were more frequently identified as having poor or borderline FCS, compared to mixed or households without older adults. The key factor influencing FCS was household size: single-person households were more often identified as having poor or borderline scores compared to households with two to four members, or households with five or more members. This is likely due to single-person households being, on average, older persons relying on smaller incomes such as pensions and humanitarian assistance (see next page).

Table 9: Percentage of households by Food Consumption Score and oblast

Macroregion	Oblast	# of households	Poor	Borderline	Acceptable
West	Chernivetska	144	2%	12%	87%
	Ivano-Frankivska	143	1%	6%	93%
	Khmelnytska	149	2%	5%	93%
	Lvivska	148	1%	5%	94%
	Rivnenska	147	1%	4%	95%
	Ternopilska	153	1%	6%	93%
	Volynska	155	1%	6%	93%
	Zakarpatska	146	3%	5%	92%
Center	Cherkaska	145	0%	12%	88%
	Kirovohradska	148	7%	8%	86%
	Poltavska	151	3%	8%	90%
	Vinnytska	148	1%	11%	88%
North	Chernihivska	143	2%	7%	91%
	Kyiv	149	3%	8%	89%
	Kyivska	146	3%	5%	92%
	Sumska	140	3%	8%	89%
	Zhytomyrska	153	1%	5%	94%
East	Dnipropetrovska	154	2%	8%	89%
	Donetska	152	4%	11%	86%
	Kharkivska	164	4%	10%	86%
	Zaporizka	151	3%	16%	81%
South	Khersonska	148	8%	14%	78%
	Mykolaivska	150	6%	10%	85%
	Odeska	154	8%	9%	83%
Overall		**3581**	**3%**	**8%**	**89%**

Households adopting consumption-based coping strategies

Households in the East and South macroregions more frequently relied on consumption-based coping strategies when they did not have enough money for food in the 7 days prior to data collection, especially for the more severe strategies. Households in the East and South were considerably more likely to reduce both the number and size of meals compared to other macroregions

Table 10: Percentage of households who reported adopting consumption-based coping strategies, by macroregion

Macroregion	# of HHs	Rely on less preferred and less expensive food	Borrow or rely on relatives or friends	Limit portion size of meals	Restrict consumption by adults for children to eat	Reduce number of meals eaten in a day
West	1233	33%	10%	13%	8%	9%
Center	633	35%	13%	14%	12%	11%
North	781	35%	14%	16%	6%	12%
East	634	45%	18%	22%	11%	18%
South	473	46%	19%	20%	15%	17%
Overall	3754	38%	14%	17%	9%	13%

LIVELIHOODS

Livelihood CCIA score

Unmet livelihoods needs were common in Ukraine, mainly driven by livelihood coping strategies and insufficient income. Over two-thirds of households nationally (**68%**) were identified as being in need (corresponding to degraded or collapsing living standards), with 17% in extreme need (risk of significant harm to physical or mental well-being). Needs were most common in Donetska oblast (83% of households were in need).

Compared to the 2024 MSNA, the overall proportion in need increased by 10 percentage-points, rising from 58% of households in need (and 11% in extreme need).

Table 11: Percentage of households by Livelihood CCIA severity score and macroregion

Macroregion	# of HHs	Minimal (1)	Stress (2)	in need: Severe (3)	in need: Extreme (4)
West	1048	4%	32%	45%	19%
Center	516	3%	28%	53%	15%
North	621	4%	34%	50%	12%
East	547	2%	21%	58%	20%
South	404	2%	21%	54%	24%
Overall	**3136**	**3%**	**29%**	**51%**	**17%**

Employment status of household members (>14 y.o.)

Regarding the employment status of household members, disproportionally more people were identified as being retired in frontline oblasts. In Donetska for example, **34%** of households' members were reported to be retired, and in Khersonska **38%** (compared to **23%** nationally). This could be attributed to the previously identified pattern of older people being more likely to stay in active conflict zones (REACH RNAs[9], ACAPS, 2024). One of the identified limitations of the CATI modality is that older people (60+) are usually underrepresented, so this issue is likely underestimated[10].

Similarly, household members being unemployed was generally more frequently reported in the East (11%) and South (12%) macroregions, compared to **8%** overall. Unemployment in frontline areas was already reported as an issue in REACH's 2023 MSNA. Kyiv city and Kyivska oblasts stood out as having the highest percentage of household members with a permanent job (**45%** and **41%**, respectively), highlighting the unequal livelihoods opportunities in Ukraine between frontline and other oblasts on one side, and between the capital and the rest of the country on the other side.

Map 3 (page 6) provides a visual representation of the percentage of household members over 14 years old with a salaried work.

Primary sources of income for households over the preceding 30 days

The majority of assessed household members reported relying on regular income and social benefits. The most commonly reported primary sources of income nationally were salaried work (**58%**), pensions (**44%**), and other government benefits[11] (**31%**). Households could report multiple primary sources of income. The primary sources of income did not change much since the 2024 MSNA, where **59%** of households reported salaried work and **46%** reported pensions.

Sources of income varied a lot by oblast however, with fewer households reporting salaried work in Donetska (**32%**) **and Khersonska** (**35%**) **but reporting a reliance on pensions much more often** (**60%** and **63%**, respectively). This is consistent with the previous findings that more retired people were living in these two oblasts compared to the national average. In all eastern and southern oblasts, consistent with displacement patterns[12], more households reportedly relied on IDP benefits[13] compared to the national average (**12%**). While there are also many IDPs in Kyiv city and Kyivska, the lower reliance on IDP benefits in these areas could mean they have more livelihoods opportunities/ alternative sources of income compared to those the South and East macroregions.

Humanitarian assistance (cash assistance) as a primary source of income was reported by little to no households in the Centre (**1%**) and West (**1%**) macroregions, but was much more frequently reported in frontline oblasts (from **9%** in Zaporizka up to **23%** in Khersonska)[14]. However, even in these oblasts, very few households reporting relying exclusively on humanitarian assistance (**2%** in Zaporizka, **1%** in Mykolaivska and Khersonska) and most of assistance-receiving households also reported alternative sources of income – though they likely were not sufficient by themselves. The unequal access to income sources in Ukraine, coupled with higher reliance on humanitarian assistance in frontline oblasts, indicate that if there is a reduction in cash assistance, it could have considerable financial impact on affected households.

Table 12: Percentage of households by most commonly reported primary source of income, by macroregions and oblasts

Macroregion	Oblast	# of HHs	Salaried work	Pension	Other government social benefits or assistance	Casual or daily labour	Loans or support within Ukraine	IDP benefits from government	Humanitarian aid	None
West		1272	60%	43%	36%	15%	13%	4%	1%	0%
Center		646	54%	46%	33%	12%	14%	16%	1%	0%
North		801	65%	42%	25%	13%	13%	8%	3%	1%
East	Dnipropetrovska	163	58%	44%	27%	15%	11%	18%	4%	1%
	Donetska	160	32%	60%	40%	13%	15%	31%	16%	0%
	Kharkivska	173	47%	47%	37%	15%	16%	27%	8%	0%
	Zaporizka	166	49%	47%	26%	13%	17%	24%	9%	1%
South	Khersonska	157	35%	63%	22%	13%	15%	18%	23%	1%
	Mykolaivska	158	53%	41%	34%	16%	12%	20%	11%	1%
	Odeska	163	45%	42%	30%	21%	15%	13%	5%	0%
Overall		3859	58%	44%	31%	14%	13%	12%	3%	0%

Total income per capita for households who reported income in the 30 days prior to data collection

The median monthly total income per capita varied largely between households. Similarly, there was a large difference between mean and median monthly total income, suggesting considerable financial disparities between households and oblasts in Ukraine. Overall, the mean monthly total income per capita of interviewed households was 11589 UAH. Compared to the median income per capita of 7150 UAH, this confirms the income inequalities across Ukraine reported by other organizations[15]. The median monthly total income per capita varied by oblasts: it was the highest in Kyiv city (12400 UAH), Zakarpatska (10500) and Kyiv oblast (10000) and the lowest in Donetska (5800), Kharkivska (5750) and Mykolaivska (5200). The median monthly total income was lower in all oblasts in the East and South macroregions compared to the national median; while it was generally higher in western oblasts. These differences in median monthly income are particularly concerning for eastern and southern households, suggesting they face greater challenges in affording food and non-food items, especially as JMMI data indicates median basket prices were similar across oblasts and not cheaper in oblasts wither lower median income[16]. The median total income per capita increased slightly since the 2024 MSNA, where it was 6667 UAH.

Coping strategies used by households when they did not have enough resources to meet their needs

Households were presented with a list of coping strategies[17] and for each, reported if in the past 30 days they used this coping mechanism, if they previously used this coping strategies and exhausted it, if they did not have to use this coping mechanism, or if they did not have access to this coping mechanism. The analysis below examines the percentage of households that reported using this coping mechanism or previously using but having exhausted it.

The majority of households (62%) reported using or having used but exhausted coping strategies in the past 30 days due to lack of money, with the most common being "spending savings/stocks" (**45%**) and "reducing essential health expenditures" (**35%**). The most severe coping mechanism were very rarely reported: **3%** of households reported coping by using (or having used and exhausted) degrading source of income, illegal work, high risk jobs; **2%** of households reported asking strangers for money, and **1%** reported selling housing/land.

Households who reported using or having used and exhausted coping mechanism (n=2096) most commonly reported using them to access or pay for food (**49%**), to access or pay for healthcare (**47%**), and to access or pay for shelter (**41%**).

Table 13: Percentage of households reporting using, having used but exhausted, or not using livelihoods coping strategies

	Selling household assets/goods	Spending savings or consuming stocks	Reducing essential health expenditures	Purchasing food on credit or borrowed food	Getting an additional job	Selling productive assets	Reducing essential education expenditures	Selling housing or land	Using degrading sources of income	Asking strangers for money
No, never used it	81%	36%	63%	83%	64%	78%	81%	84%	92%	97%
Not applicable	11%	19%	2%	2%	17%	18%	14%	15%	5%	2%
Used and exhausted	2%	6%	1%	0%	1%	1%	0%	1%	0%	0%
Yes, using it	6%	39%	34%	15%	19%	2%	5%	0%	3%	2%

PROTECTION

Protection CCIA score

Unmet protection needs were frequent in Ukraine, identified in almost half (45%) of all assessed households. They were especially prevalent and severe in the East (**78%**) and South (**66%**) macroregions, and were driven by households reporting conflict-related safety and security concerns, as well as their proximity to the frontline and border with Russia[25]. **20%** of households also reported housing, land, and property concerns, mostly related to having damaged or destroyed housing in government-controlled and occupied areas. The proportion of households in need increased by 7 percentage points compared to the 2024 MSNA (**38%**), indicating that protection needs continued to deteriorate between summer and winter

Table 14: Percentage of households by Protection CCIA severity score and macroregion

Macroregion	# of HHs	Minimal (1)	Stress (2)	Severe (3)	Extreme (4)	Extreme+ (4+)
				in need		
West	1166	30%	49%	20%	1%	0%
Center	600	23%	43%	33%	1%	0%
North	756	14%	44%	35%	1%	6%
East	650	4%	18%	42%	6%	30%
South	467	12%	22%	60%	1%	5%
Overall	**3639**	**17%**	**38%**	**35%**	**2%**	**9%**

Factors influencing households' sense of safety

The most frequently reported factors influencing households' sense of safety in the three months prior to data collection were all linked to conflict-related violence: nationally, the majority of households reported violence impacting public[18] and private[19] infrastructure and violence impacting civilians[20], confirming acute needs related to protection of civilians and civilian infrastructure in Ukraine. While the war caused the majority of households across Ukraine to have unmet protection needs, some were more affected than others: households closer to the frontline[21], border with Russia[22] and in Kyiv city[23] more often reported protection concerns, aligning with the higher incidence of reported security incidents in these areas[24]. The percentage of households reporting these concerns increased since the 2024 MSNA, when **43%** of households reported violence impacting private infrastructure, **41%** impacting public infrastructure, and **40%** violence against civilians, highlighting growing protection needs.

Table 15: Percentage of households by most commonly reported factors influencing sense of safety and macroregions

Macroregion	# of HHs	Violence impacting private infrastructure	Violence impacting public infrastructure	Violence impacting civilians	None	Conscription	Do not know	Social tension in the community
West	1269	48%	47%	42%	39%	3%	2%	2%
Center	647	51%	50%	48%	36%	4%	2%	1%
North	801	64%	58%	59%	23%	2%	1%	2%
East	663	70%	64%	56%	19%	1%	2%	1%
South	482	62%	56%	50%	28%	1%	3%	2%
Overall	**3862**	**59%**	**55%**	**52%**	**29%**	**2%**	**2%**	**2%**

Factors influencing women and men's sense of safety

Regarding gender-specific factors influencing the sense of safety: besides conflict-related violence, few households reported specific factors for women. For men, conscription was widely reported (**28%** of households) as a specific factor, especially in the West (**35%**) macroregion.

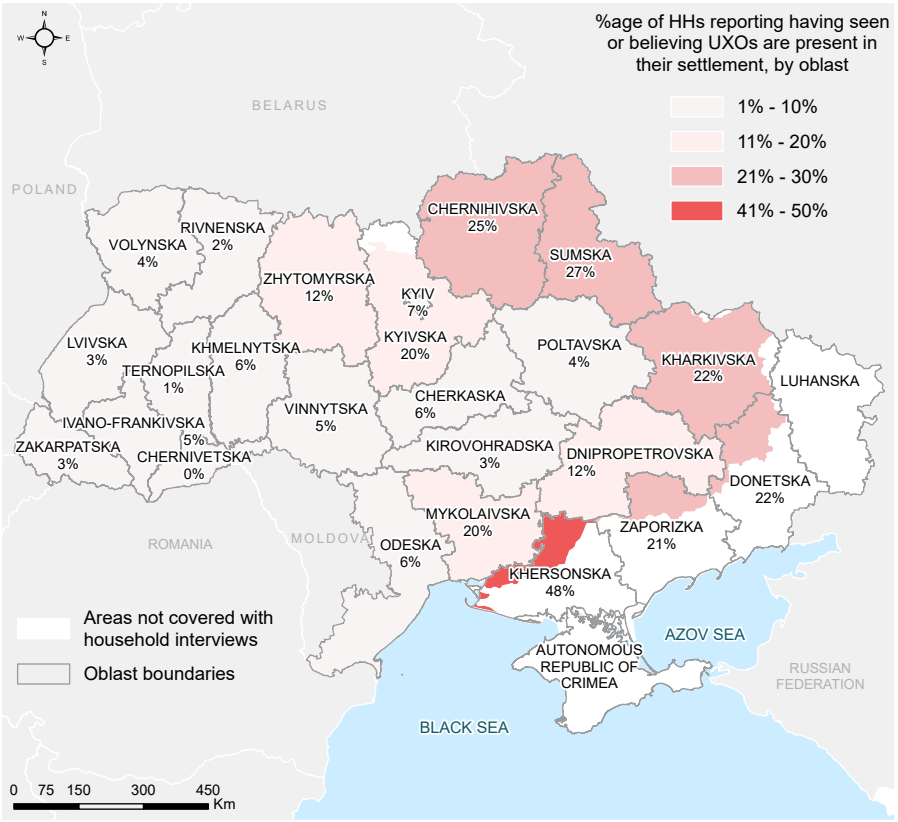
Separated children

Separated children appeared to be a rare issue in Ukraine, with **4%** of households reporting having children that were not currently living in the household. Among these households (n=157), the most commonly reported reason for separation was the child living with a foster family (**53%**), followed by children leaving to study (**22%**) and to live abroad (**19%**). Very few households (8/157) reported the child being separated during displacement.

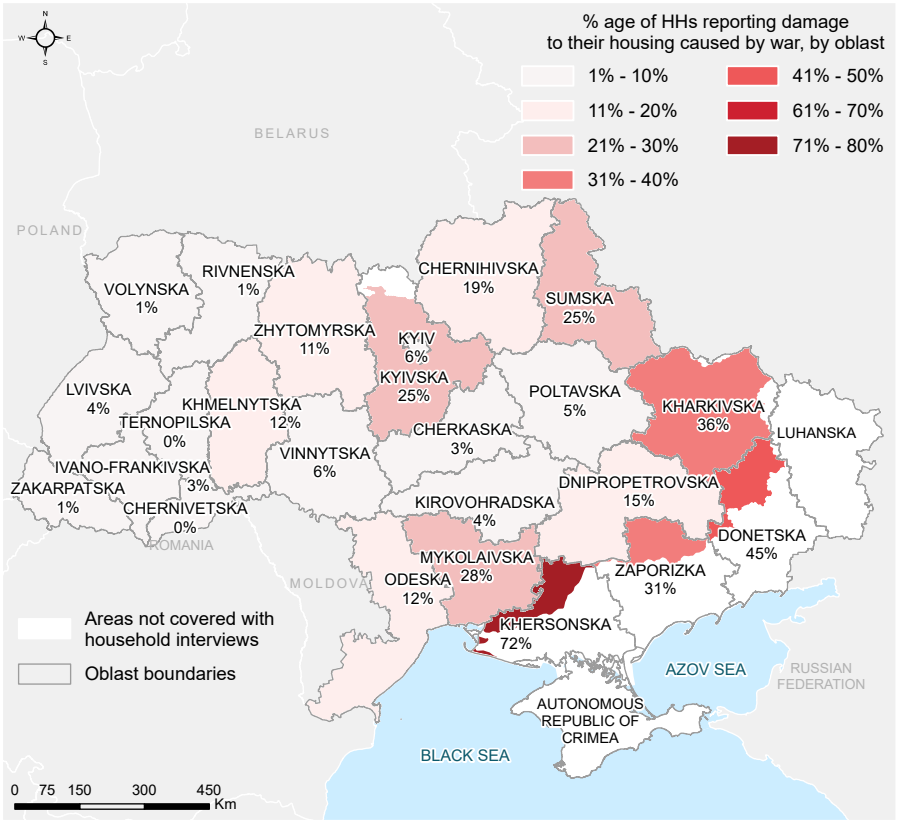
Presence of unexploded ordnances (UXO) and/or landmines

Households who reported observing or suspecting UXOs/landmines in their settlement were mostly limited to frontline areas and territory regained by Ukraine: it was reported by **3%** of households in the West and **4%** in the Center macroregions, compared to **16%** in the East, **15%** in the North and **12%** in the South macroregions. Khersonska stands out with around half of households reporting the presence of UXOs/landmines in their settlement (**48%**). In addition to protection risks, the presence of landmines/UXOs can exacerbate challenges related to livelihoods (agricultural lands contaminated by UXOs)[26] and access to services (too dangerous to travel to facilities)[27]. However, despite these frequent reports of UXOs/landmines, they were almost never reported to be a safety or security concern - possibly reflecting a higher level of mine education after three years of war, or that households learned to cope with them regardless of the protection risks associated.

Map 4: Percentage of HHs who reported observing or suspecting UXOs/landmines in their settlement, by oblast



Map 5: Percentage of households reporting damage to their housing caused by war, by oblast



SHELTER AND NON-FOOD ITEMS (SNFI)

SNFI CCIA score

Unmet SNFI needs were identified in around a third of assessed households (35%), indicating a deterioration compared to the 2024 MSNA (28%). Households in the East and South macro-regions were more frequently identified as having unmet needs (47% and 43%, respectively). Similar to the 2024 MSNA, SNFI needs were driven by **missing winter non-food items** (16%), including winter clothes, heating appliances, and fuel for heating, as well as tenure security issues (10%), due to a significant percentage of IDPs sampled that reported being currently being hosted for free.

Table 16: Percentage of households by SNFI CCIA severity score and macroregion

Macroregion	# of HHs	Minimal (1)	Stress (2)	Severe (3)	Extreme (4)	Extreme+ (4+)
				in need		
West	1096	7%	68%	24%	1%	0%
Center	569	7%	60%	33%	1%	0%
North	661	4%	62%	30%	3%	0%
East	546	6%	47%	43%	4%	0%
South	419	4%	53%	38%	5%	1%
Overall	**3291**	**6%**	**59%**	**32%**	**2%**	**0%**

Damage to housing

Damages to shelter - caused by the war or not - remained frequently reported in Ukraine. Overall, 20% of households reported at least one problem with their shelter that was not caused by the war, and 15% of households reported damage of some kind caused by the war since February 2022. There was little difference across macroregions for the prevalence of non-war-related problems, ranging from an average of 21% of households in the center to 17% in the west. However, households were considerably more likely to report war-related damage in the south (71% in Khersonska) and east (45% in Donetska), whereas no households reported such damage in Chernivetska or Ternopilska in the west.

Among households that reported damage caused by the war (n=586), at the national level, they most commonly reported insignificant, minor or moderate damage to their shelters. The situation was especially severe in Khersonska, which continues to experience frequent shelling and attacks from the other side of the Dnipro river[28]: 79% of households who reported damage to their housing estimated it was moderate, major or catastrophic[29]. 74% of households who reported damage caused by the war since February 2022 also reported the damage has been or is being repaired, indicating a mostly effective shelter response.

Table 17: Severity of damage to shelter, for households that reported some sort of damage, by oblast

Macroregion	Oblast	# of HHs	Insignificant	Minor	Moderate	Major	Catastrophic	Don't know
North	Kyivska	41	17%	22%	33%	18%	10%	
	Sumska	41	30%	21%	30%	11%	4%	4%
East	Donetska	69	16%	16%	39%	21%	4%	5%
	Kharkivska	64	13%	28%	34%	17%	7%	2%
	Zaporizka	49	25%	29%	26%	18%	2%	
South	Khersonska	116	8%	13%	32%	27%	19%	
	Mykolaivska	48	21%	16%	36%	19%	8%	
Overall		**586**	**22%**	**21%**	**31%**	**17%**	**6%**	**2%**

Amongst households who reported damage (non-war-related and war-related), the most prevalent reported issue nationally was damaged windows (8%), followed by roofs (4%) and interior walls (3%). For the most-affected oblasts, the prevalence amongst households was considerably higher. In Khersonska, 55% of all households surveyed reported they had damaged windows, 32% in Donetska and 25% in Kharkivska. Damaged roofs were also highly prevalent amongst households in Khersonska (49%) and in Donetska (24%).

Occupancy

Nationally, 90% of households reported living in their own unshared accommodation, 6% reported sharing their accommodation with other households, and 3% reported being hosted by friends or relatives. This corresponds with the The 2024 MSNA, where 94% of households reported having unshared accommodation, 4% reported sharing, and 1% reported being hosted.

Non-food items (NFIs)

Over a third (35%) of households reported missing or having inadequate essential NFIs in the previous 6 months, consistent with 2024 MSNA findings when it was reported by 31% of households. Nationally, the most frequently reported missing/inadequate items were winter clothes (12%), hygiene products (8%) and large kitchen appliances (8%). Households were particularly likely to report missing or inadequate items in Khersonska (48%), Donetska (47%), Mykolaivska (47%) and Kirovohradska (47%). In other oblasts, the rate of deprivation on key items was between 10% and 20% of households.

WATER, SANITATION, AND HYGIENE

WASH CCIA score

WASH needs were identified in around one in four (26%) of the households in Ukraine, with higher prevalence in the South (34%), East and Center (both 30%) macroregions. Compared to the 2024 MSNA, the prevalence of WASH needs remained constant, suggesting that WASH needs did not deteriorate between summer and winter 2024. Needs were mostly driven by drinking water quality issues, with **10%** of households classified as in need due to unacceptable water quality or relying on unimproved water sources. Additionally, **7%** had difficulties performing personal hygiene due to considerable challenges such as inadequate or unsafe space, and the same percentage had issues accessing technical water.

Table 18: Percentage of households by WASH CCIA severity score and macroregion

in need

Macroregion	# of HHs	Minimal (1)	Stress (2)	Severe (3)	Extreme (4)	Extreme+ (4+)
West	1101	37%	41%	16%	5%	1%
Center	585	27%	43%	21%	7%	2%
North	698	27%	50%	17%	5%	1%
East	567	14%	56%	21%	8%	1%
South	422	19%	47%	26%	7%	2%
Overall	**3373**	**26%**	**47%**	**19%**	**6%**	**1%**

Water utility functionality

Disruption to (centralized) cold water supply was more frequently reported in frontline oblasts and in the South macroregion, indicating unequal access to reliable cold water across Ukraine.

Table 19: Percentage of households who reported daily interruptions to cold water supply and sewage for 3 hours or more in the 30 days prior to data collection, by oblasts

Macroregion	Oblast	# of HHs	Cold water supply	Sewage
West	Chernivetska	156	11%	2%
	Ivano-Frankivska	157	8%	3%
	Khmelnytska	157	11%	4%
	Lvivska	154	10%	3%
	Rivnenska	156	8%	1%
	Ternopilska	159	9%	3%
	Volynska	158	13%	2%
	Zakarpatska	157	9%	1%
Center	Cherkaska	163	13%	1%
	Kirovohradska	160	17%	4%
	Poltavska	162	14%	2%
	Vinnytska	158	8%	2%
North	Chernihivska	154	9%	1%
	Kyiv	157	17%	4%
	Kyivska	155	17%	1%
	Sumska	155	21%	3%
	Zhytomyrska	164	16%	4%
East	Dnipropetrovska	164	18%	4%
	Donetska	160	38%	10%
	Kharkivska	172	16%	5%
	Zaporizka	163	16%	3%
South	Khersonska	160	37%	11%
	Mykolaivska	155	28%	5%
	Odeska	161	18%	7%
Overall		**3817**	**15%**	**3%**

Main source of drinking water

Households reported a wide variety of drinking water sources across Ukraine, with differences across oblasts and between rural and urban areas. On-premises tap water, water kiosks and bottled water were commonly reported by households in urban settlements, with bottled water also frequently reported in the East macroregion, Kyivska and Kyiv city. In rural areas, households more commonly reported protected wells as a main source of drinking water; a trend also observed in the West and Centre macroregions.

Nearly all households in Ukraine used an improved drinking water sources[30] (**97%**), although the percentage of households using unimproved water sources[31] was higher in rural areas (**5%**, n=1163) than in urban (**1%**, n=2150). This is consistent with the 2024 MSNA, which found that **3%** of households relied on unimproved water sources.

Main source of technical water

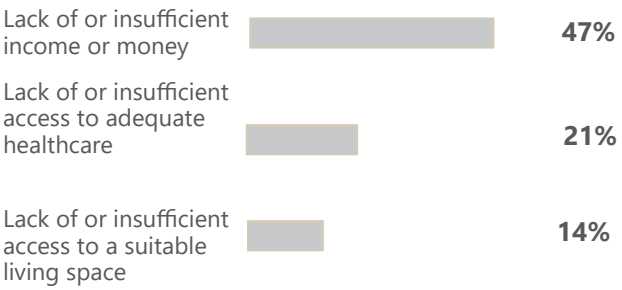
Regarding technical water[32]: in all oblasts but Chernihivska, the majority of households relied on tap water in their dwelling (**70%** overall). Another commonly reported source of technical water was protected wells, especially in the West (**28%**) and Centre (**25%**) macroregions, as well as in the North (**20-35%** of households in northern oblasts, with the exception of Kyiv city) .

Main toilet facilities

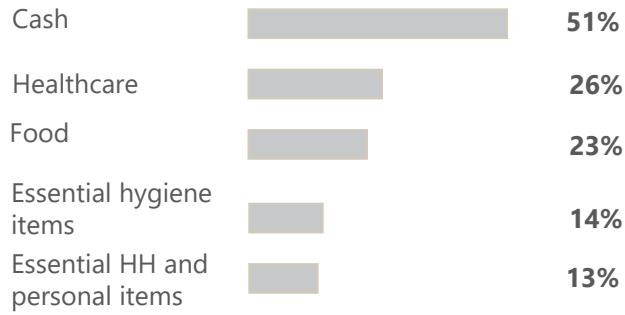
Access to safe and adequate toilets did not appear to be an issue in Ukraine: **98%** of households reported using improved sanitation facilities[33], with only **2%** of households reporting unimproved sanitation facilities or open defecation[34]. This is consistent with the 2024 MSNA, which found that **1%** of households reported relying on unimproved sanitation facilities. The most commonly reported toilet facilities varied considerably based on urbanity/rurality: urban households (n=2151) overwhelmingly reported using facilities that flushed to a piped sewer system (**79%**), compared to **22%** of rural households (n=1164). Rural households more commonly reported facilities that flushed to a pit latrine (**28%**) and a pit latrine with a slab (**32%**).

ACCOUNTABILITY TO AFFECTED POPULATIONS

Top 3 - self-reported challenges



Top 5 - preferred humanitarian assistance



In line with Calibration results indicating widespread Livelihoods, Health, and SNFI needs, the most frequently reported top three challenges faced by the households were the **lack of or insufficient income or money** (reported by 47%), **lack of or insufficient access to adequate healthcare** (21%), and **lack of or insufficient access to a suitable living space** (14%). Compared to the 2024 MSNA, the prevalence of income and healthcare-related challenges has not changed, while shelter challenges were highlighted by a greater number of households (compared to 4% in MSNA). A considerably lower percentage reported protection concerns (12%, compared to 32% in MSNA).

Among the households reporting challenges, the preferred types of humanitarian assistance were **cash transfers** (51%), **healthcare support** (26%), and **food** (23%), aligning with the 2024 MSNA. However, some key changes were observed: the percentage of households wanting essential household and personal items – clothes, blankets, cooking items, sleeping items – rose to 13% (up from 6% in the MSNA), while the need for support in accessing fuel sources increased to 12% (up from 7%).

Households with at least one member with a **disability** preferred **healthcare support** more often than households with no members with a disability (34%, compared to 18%). Additionally, **IDP households** were considerably more likely to report the need for **shelter** and housing support (22%, compared to 6% of non-displaced). Finally, **rural households** reported preferring access to **fuel** for winter heating nearly four times more than urban households (22%, compared to 6%).

Preferred assistance modality

46%
Cash (one lump-sum payment)

14%
In-kind

11%
Cash (multiple smaller payments)

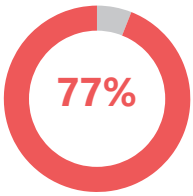
Cash assistance was the most frequently reported modality preference, in line with the MSNA findings. Households reported a clear preference towards **one lump-sum payment** (46%), compared to multiple smaller payments (11%). A minority of respondents (14%) preferred in-kind assistance. Among households that reported needing assistance in the form of fuel sources, the majority reported preferring cash support (49%), representing a significant change from the MSNA, which highlighted a preference for in-kind support (66%).

Households reporting receiving assistance, and barriers

Half of households (51%) reported receiving assistance, compared to a lower percentage (38%) in MSNA. 17% reported receiving assistance within the preceding three months (compared to 10% in MSNA), while 33% reported receiving assistance 3 or more months prior data collection (compared to 27% in MSNA).

Positively, the percentage of households who did not face any barrier accessing aid increased from 27% in MSNA to 44% in Calibration. The most reported barriers were not having enough information on how to register for assistance and not having enough information on how assistance works and is provided (both reported by 11%). Additionally, 6% reported that assistance was not regularly available or functioning in the area, with a higher percentage reporting this in the South (10%).

Satisfaction with aid received:



of aid-recipient households reported being satisfied or very satisfied with the aid received. 6% reported dissatisfaction.

Information needs

The most reported types of information households wanted from humanitarian assistance providers were related to **how to register for aid** (23%), **how to get more money and financial support** (17%), and **how to get healthcare and medical attention** (13%), mirroring the results of the 2024 MSNA.

There was an increase in households wanting information on how to get shelter and accommodation (9%, compared to 4% in MSNA), likely due to rising SNFI needs during the winter season, especially among IDP households. Additionally, 47% reported not needing any information.

RATIONALE AND METHODOLOGY

Purpose of the assessment: The Calibration Assessment Round 3, conducted in winter 2024-25, aimed to provide updates on humanitarian needs and multi-sectoral data from the 2024 MSNA (May-July 2024). The assessment sought to track shifts and emerging trends in the severity and drivers of needs, inform strategic and programmatic decision-making, and support an evidence-based approach to humanitarian response and prioritization.

Modality: The Calibration Assessment Round 3 employed a quantitative methodology to gather household-level data through randomized Computer-Assisted Telephone Interview (CATI) surveys. The CATI approach involved trained interviewers conducting voice-call interviews with respondents selected from a randomized list of phone numbers, reaching a predetermined quota in each oblast. As in previous years, data collection was performed through a third party data collector - the Kyiv International Institute of Sociology (KIIS).

Questionnaire: The assessment maintained alignment with the 2024 MSNA questionnaire, ensuring comparability between datasets. However, the questionnaire was shortened to include only critical indicators.

Coverage: REACH conducted 3,874 household-level CATI interviews in 23 oblasts and Kyiv city with at least 159 interviews in each oblast. The sampling approach ensured a 95% confidence level (CL) and an 8% margin of error (MoE). To account for potential non-response and sampling inconsistencies, a 5% buffer was incorporated into target interview numbers.

Weighting: To enhance sample representativeness across population segments, post-stratification weights were applied to correct for an overrepresentation of respondents aged 35–59, ensuring alignment with general population age distributions as estimated by UNFPA.

Food security and livelihood: Following data cleaning, the data on food security and livelihood indicators (Livelihood Coping Strategy Index, Food Consumption Score, and Reduced Coping Strategy Index) is representative at the oblast level with a 95% confidence level and an 8-8.6% margin of error.

LIMITATIONS

Remote data collection:
The expected poor connectivity and the lack of personal interaction during a phone-based interview led to limiting the length of the questionnaire compared to 2024 MSNA to prevent losing the respondent's attention. Due to the phone-based interviews and limited control to ensure privacy during the interview, sensitive topics were excluded from the questionnaire as much as possible to avoid creating risks for the respondents.

Sampling and response bias
Due to the phone-based modality of interviews some groups might be overrepresented in the sample. The assessment observed an increased proportion of displaced households (mostly in the Center and South macro-regions) and an increased proportion of households with a member with disability (mostly in the West macro-region), compared to the face-to-face sample in the 2024 MSNA. Overrepresentation of these groups might influence some indicators which usually correlate with displacement status (Protection, SNFI, Livelihoods sectors) or the disability of a household member (Health, Livelihoods sectors). Results for Dnipropetrovska oblast should be interpreted with caution due to significant variations compared to the 2024 MSNA.

Reporting bias: Certain indicators may be under- or over-reported due to the subjectivity and perceptions of respondents. For instance, indicators with an extended recall period of six months (such as questions related to expenditures) may be liable to a certain degree of inaccuracy, as they are dependent on respondents' ability to remember events in the past.

Subset indicators: Findings related to a subset of the overall population may have a wider margin of error, yielding results with lower precision. Any findings related to subsets are indicated as such throughout the output.

Seasonality: Given the 2024 MSNA was conducted in the summer and 2024 Calibration Assessment in the winter, seasonal factors may affect the comparison of the findings, and therefore should be accounted for when interpreting the shifts in the reported needs and drivers.

ABOUT REACH

REACH Initiative facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT).

ENDNOTES

PAGE 2-4

[1] Caveats on the interpretation of Health findings are discussed at page 5 (Health CCIA Score), and page 15 (Limitations).

[2] No or damaged school facilities, no or inadequate bomb shelters

[3] ABA 2024: Kherson key informant (page 22).

[4] ABA 2024: Izium and Kherson key informants (page 13, page 22).

[5] Save the Children (2024).

[6] ABA 2024: Izium and Trostianets key informants (page 13, page 34).

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[7] REACH Joint Market Monitoring Initiatives (JMMI) tracks the price and availability of all components of the WASH and Food Minimum Expenditure Basket (MEB), as well as other food and non-food items. It also monitors the functionality of the markets by assessing the supply chain and vendors' perceptions of the market and their businesses. Findings can be access here.

[8] American Journal of Public Health (2005).

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[9] In coordination with OCHA, IOM Ukraine and REACH frequently conduct Rapid Needs Assessments (RNAs) to provide humanitarian partners with up-to-date data on demographics, displacement, priority needs, and market functionality of frontline settlements. RNAs are available upon request.

[10] For the 2024 MSNA, within the same oblast, REACH conducted face-to-face (F2F) interviews in certain raions and CATI in other raions. The proportion of older respondents (65+ yo) as head of household was systematically lower in CATI-assessed raions compared to F2F-assessed raions. Given differences in the demographic profile of interviewees between F2F and CATI are unlikely to be caused by external factors due to the similar situation in these raions, it can be assumed that CATI under-assesses 65+ yo head of households. Given that older people are more likely to be single-households (Calibration, MSNA), it can also be assumed 65+ yo are generally underrepresented in CATI.

[11] For example, disability pensions and maternity benefits.

[12] IOM DTM (2024).

[13] Donetska: 31%; Kharkivska: 27%; Zaporizka: 24%; Mykolaivska: 20%; Dnipropetrovska: 18%; Khersonska: 18%; compared to the national average of 12%. national.

[14] Khersonska: 23%; Donetska: 16%; Mykolaivska: 11%; Zaporizka: 9%: Kharkivska: 8%.

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[15] This finding is consistent with income inequalities reported by the Friedrich-Ebert institute: "The issue of economic inequality in Ukraine has been exacerbated by the ongoing war [...] leading to a skewed distribution of wealth that is not accurately captured by the relatively low Gini coefficient. Regional disparities and discrepancies between the public and private sectors further contribute to this inequality". Friedrich-Ebert Stiftung (2024).

[16] In December 2024, for example, the median prices for food and non-food baskets were very similar in oblasts with higher median total monthly income such as Kyiv city (1195 UAH) and Zakarpatska (1108 UAH), compared to oblasts with lower median total monthly income such as Kharkivska (1234 UAH) and Mykolaivska (1208 UAH).

[17] The list of coping strategies is: "Sell household assets/goods (furniture/household appliances, smart phone, jewelry); Spend savings or consumed stocks for a rainy day; Purchase food on credit or borrowed food; Get an additional job; Sell productive assets or means of transport; Reduce essential health expenditures; Reduce essential education expenditures; Sell housing or land; Use degrading sources of income, illegal work, or high risk jobs.

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[18] Violence related to the conflict (e.g. armed violence, shelling, missile attacks) impacting public infrastructure and facilities (schools, telecommunication networks).

[19] Violence related to the conflict (e.g. armed violence, shelling, missile attacks) impacting private infrastructure (e.g. private housing).

[20] Violence related to the conflict (e.g. armed violence, shelling, missile attacks) impacting civilians.

[21] Percentage of households that reported no protection concerns in frontline oblasts: Donetska (17%), Kharkivska (14%), Khersonska (11%), Zaporizka (11%).

[22] Percentage of households that reported no protection concerns in Sumska: 14%.

[23] Percentage of households that reported no protection concerns in Kyiv city: 15%.

[24] Households within 30km from the frontline/ border were assigned a score of at least "extreme", and households 31-100km from the frontline/border a score of at least "severe".

[25] INSO Ukraine conflict monitor (2024).

[26] In December 2024, according to REACH HSM,KIs in Huliaipole (Zaporizka) reported residents cultivate land suspected to be contaminated by mines/UXOs for subsistence farming as a coping mechanism.

[27] In December 2024, according to REACH HSM, KIs in 5% of the 392 assessed settlements in the crescent area reported the presence of mines/UXOs as a barrier for people to access markets.

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[28] As frequently reported by OHCHR: "The majority of civilian casualties from short-range drones have occurred in government-controlled parts of Kherson, particularly along the Dnipro River." (OHCHR, 2025).

[29] In general, a major or catastrophic level of damage would make it difficult to remain in a house, especially if the householders have alternative options.

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[30] Improved drinking water sources include: Bottled water; Water kiosk; Trucked-in water; Protected well; Protected spring; Public tap/standpipe; Public well or boreholes (shared access); Piped into compound, yard or plot; Piped to neighbour; Tanker-truck; Cart with small tank/drum; Sachet water; Tap drinking water / Piped into dwelling; and Technical piped water.

[31] Unimproved drinking water sources include: Unprotected well; Unprotected spring; Rainwater collection; Surface water (river, dam, lake, pond, stream, canal, irrigation channel).

[32] Technical water is defined as water used for cooking, cleaning, bathing and washing.

[33] Improved sanitation facilities include: Flush to piped sewer system; Flush to septic tank; Flush to pit latrine; Composting toilet; and Pit latrine with slab.

[34] Unimproved sanitation facilities include: Flush to don't know where; Flush to open drain; Flush to elsewhere; Pit latrine without slab / open pit; Hanging toilet/hanging latrine. Open defecation include: Plastic Bag; Bucket; No facility/bush/field.