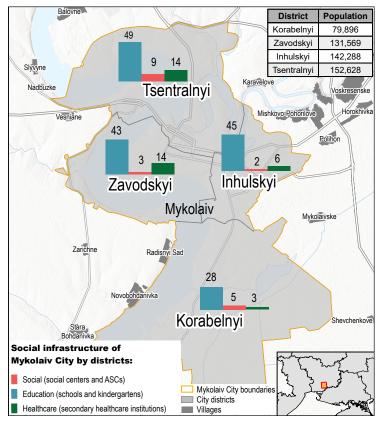
AREA-BASED ASSESSMENT IN CONFLICT-AFFECTED AREA Basic service provision for women and children in Mykolaiv city

March 2023 | Ukraine

CONTEXT & RATIONALE

Since February 24th, 2022, Mykolaiv has been a key location of Ukrainian defence on the southern front. Due to the geographical location and strategic importance of the city, Mykolaiv has been the centre of bombardments by Russian forces. Access to public services in the city was severely restricted, particularly in areas close to the front line. Facilities such as schools, hospitals, administrative and protection services and other essential infrastructure have been damaged or destroyed due to shelling. The withdrawal of Russian forces from the part of Khersonska oblast, including Kherson, at the beginning of November 2022 has prompted relief in Mykolaiv. However, the situation in Mykolaiv remains critical due to the damage to water infrastructure, the destruction of residential buildings and the increased demand for services among IDPs and people returning home. Population continuously faces different types of risk and many lack access to life-saving services. Women and children, who are among the most vulnerable population groups in humanitarian settings, require special service provision and protection measures, access to which might be limited or absent due to the active conflict settings. To inform the humanitarian response, REACH conducted Area-based Assessment in Mykolaiv city. It aims to **fill in the information gap about** the level of public services disruption in Mykolaiv due to the conflict and capacity gaps of public service providers and humanitarian actors to fulfil the needs of women and children residing in the city.

Map 1: Basic public service infrastructure of Mykolaiv city



KEY FINDINGS

- Women and children in Mykolaiv suffer from difficulties in accessing basic services, since a year of war in Ukraine has passed. The main challenges in accessing basic services were reportedly the lack of Internet connection and equipment for distance learning, insufficient number of medical personnel and the affordability of medicines, along with the need for childcare services and information about humanitarian aid, among others. Displaced women, returnees and local residents reported a drastic increase in needs, such as financial assistance, employment support, and humanitarian aid, as well as the need for mental health recovery.
- **Energy disruptions, overall stress and anxiety and infrastructure damage** severely impacted the ability of local actors to provide public services in a comprehensive manner. The shortages of electricity and interruptions in the Internet supply have hampered the provision of administrative services and documentation, caused the lack of access to databases, long queues in healthcare institutions, and changes in lesson schedules at schools.
- **Material and human resources of local actors have reportedly decreased** and were insufficient to fully meet the needs of women and children. The interviewed public service providers reported a lack of necessary equipment and premises, bomb shelter capacities and a lack of transportation means (healthcare and social sectors). Meanwhile, the outflow of labour strongly impacted the service provision of public service providers and CSOs. The need for psychological support for social workers as well as capacity-building trainings were named.
- The presence of international responders in Mykolaiv is paired with **complex coordination mechanisms and response regulations.** The public service providers regretted mostly the length of partnership procedures and called for more flexible support as well indicated a lack of coordination and that the aid was not always relevant to the needs.



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METHODOLOGY OVERVIEW

To inform response actors on needs and challenges related to basic service provision and the needs of women and children residing in Mykolaiv city, REACH conducted **18 semi-structured Key Informant (KI) interviews with three types of KIs:** public service providers (PSP-KIs), representative of local authority' departments (LAD-KIs), responsible for basic service provision for woman and children (health, education, social services, child protection department), and civil society organizations (CSO-KIs) to understand the impact of the crisis on each of these services, their functionality and opportunity for better collaboration among actors to deliver basic services in a timely and effective manner. In addition, **six focus group discussions (FGDs)** were conducted with the local female residents, displaced female population, and female returnees, who currently reside in Mykolaiv using basic services and having children. The discussion guide of the FGDs explored perceptions of the priority needs and barriers for women and children in Mykolaiv in terms of access to basic public services. The data collection was conducted between the **10th and 25th of March, 2023.** Preliminary search of KIs involved in the public service provision was conducted and participants were selected using a snowballing technique based on their perceived relevance and availability.

NEEDS AND PRIORITIES OF WOMEN AND CHILDREN

Increasing vulnerabilities of women and children

The full-scale invasion enters its second year increasing the disadvantages of women and children in Ukraine. According to the UN Women, women and girls in Ukraine are facing severe impacts, from heightened trafficking and gender-based violence to the loss of crucial livelihoods and rising poverty levels.¹

In Mykolaiv, displaced women and returnees who participated in FGDs corroborated this point by reporting a drastic increase in women's needs, such as financial assistance, employment support, and need for humanitarian aid. Many of them, especially IDPs, reported losing savings and income sources, rendering their economic empowerment difficult in the face of price increases. Moreover, displaced women reported the problem with accommodation, pointing out that IDPs were not provided with free housing modalities in the city, and they have to pay unaffordable rent. REACH Arrival and Transit Monitoring (Round 6, March 2023) also indicated that the top needs of households travelling with women and children were accommodation (42% of HHs), food items (37%), medicines (36%), hygiene products (34%), and employment (33%).²

Female residents taking part in the FGD also tended to discuss the emotional and psychological implications of war. Despite the availability of psychological services (women and children are able to receive free psychological support at social service centres and apply for psychological help to local and international organisations through "hotlines"³), participants of FGDs often mentioned a need in **support of mental health recovery.** Similarly, KIs expressed preoccupations regarding the need for psychological support for residents (especially children) who stayed in the city during the period of active shelling and were not displaced.

"The psychological aspect is that there are no specialists for children, no center where they would be receiving support."

Participant of FGD

Overall, the war has a devastating impact on the mental health and well-being of children.⁴ An estimated 1.5 million children are at risk of depression, anxiety, post-traumatic stress disorder and other mental health issues, with potential long-term effects and implications.⁵

In addition, women emphasized the additional **need for hygiene items and food for children**, pointing out that humanitarian aid rarely involves the provision of it. Access to water was another serious concern for women, which was repeatedly mentioned by FGD participants. The provision of water supply to Mykolaiv city has been a cause for concern since Russian forces damaged the water supply infrastructure on 12 April 2022.⁶ The participants reported that the water was of poor quality (dirty and rusty) and they face the problem of finding distribution points with drinking water and delivering it to their homes. The situation was more complicated with single mothers and women with children who were forced to carry water on their own without outside help.

"The main problem of the city is water supply; it is the basic need of all women and children and all citizens in general."

Participant of FGD

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Access to basic public services: benefits and barriers

Among the positive changes in the experience of using public services since February 24, 2022, participants of FGDs pointed out the less administrative burden and the possibility of receiving services online (registration of IDPs, the appointment of social benefits etc.). In addition, adequate access to healthcare services was mentioned in four out of six FGDs. The participants noted the availability of medicines in the city and the possibility of easily obtaining a medical consultation online, as well as the availability of specialists and the possibility of quick appointments. Such significant problems with public service provision as the lack of personnel in healthcare and administrative facilities as well as closed educational facilities (kindergartens and schools) were frequently mentioned. As reported by the Ukrainian Center for Health Care's study "Medicine during war: the impact of the full-scale invasion of Russia on the health care system of

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Ukraine", the total number of doctors in Ukraine in 2022 decreased by 14% compared to 2021.⁷ A shortage of personnel was observed in other sectors as well. According to the Head of the Education Department of the Mykolaiv City Council, 64% of teachers were based in the city, many of whom were displaced and have returned since February 24th, 23% of teachers were internally displaced in other regions of the country and 13% continued to be abroad, as of March 2023.⁸ More detailed findings on the barriers and needs of women and children in each sectors are described below.

Education sector

Since the beginning of the full-scale invasion, 91 educational institutions, or 61% of the total number of institutions, have been damaged in Mykolaiv due to shelling as of March 2023.9 Mykolaivska oblast is the third oblast with the largest number of educational institutions being damaged and destroyed. ¹⁰ Due to the destruction of educational buildings, attacks on energy infrastructure and the security situation, the availability of education in Mykolaiv has deteriorated. The ABA's findings show that parents were concerned about the poor quality of online education and the lack of socialization activities for children. According to REACH Education Sector Assessment in Conflict-Affected Areas (February 2023), the lack of communication with classmates was identified as a limiting factor in the social development of children, especially of those with disabilities. Most parents reported that their children suffered from anxiety and stress, which affected their ability to concentrate at work. Some parents reported that this, combined with less contact with teachers, affected their child's learning rate and motivation to learn.¹¹ One KI reported the need for special equipment and programs for children with disabilities.

"Children don't recognise their classmates. My children have not communicated face-to-face with their classmates for 3 years [due to quarantine and then war]. There is no socialisation activities." Participant of FGD

Children's socialization activities, followed by equipment for studying and proper Internet connection for distance learning were the most commonly reported educational needs, according to FGDs' participants. Two Cls also highlighted the lack of extracurricular activities and closed clubs for children.

Healthcare services

The most commonly reported healthcare needs in Mykolaiv city were **medical personnel and affordability of medicines.** According to the State Statistics Service of Ukraine, pharmaceutical products, medical products, appliances and healthcare equipment increased in price by 21.3%, and outpatient services by 18.9% in February 2023 in comparison with February 2022.¹² Most of IDP women who participated in the FGD reported that, in general, Two Cls also highlighted the lack of extracurricular activities and closed clubs for children. were difficult to access due to high prices. This is in line with ATM findings, according Image 1. Damage to educational facility following missile strikes in Mykolaiv.



Source: Inés Dadda, ACTED Ukraine, 2023

to which access to medicine was also a prioritized need for IDP and returnee households in Mykolaiv (35%).¹³ One participant of FGD also indicated the difficulties in access to medicines for children with disabilities, in particular, the need to wait for receiving them in pharmacies. Participants of the FGDs also mentioned the need for psychological support, particularly from professional psychologists. According to the IOM's recent study, over 15 million Ukrainians reported that they have experienced the deterioration of their mental health since the start of the war.¹⁴ Whereas those people who remained in Mykolaiv during the shelling were most in need, people who were displaced and decided to return to the city also under enormous stress.

"Women are now experiencing violence in various forms, and they are afraid to go to psychologists, to seek help at all, perhaps because of our society and stereotypes, but I think most of them are because there is no one to turn to." Participant of FGD

Social services

Local residents and returnees reported the need for childcare services (for single mothers, and in general for all women because kindergartens are closed and women cannot find work but have to care for their children). Other reported needs in the social sphere were information about humanitarian aid (reported by IDPs only), timely payment of social benefits and need for humanitarian aid for returnees. The participants of FGDs reported the general fact that **older women had higher needs** due to their isolation, immobility, and the need for outside help. The participants pointed out that shelters and state institutions were often physically inaccessible to older people with disabilities and did not have enough staff to support them. In Ukraine, people over 60 years old comprise nearly one-fourth of the population. Older people were disproportionately vulnerable to attacks: according to the UN Office of the High Commissioner for Human Rights (OHCHR), which collects data on civilian casualties in Ukraine, people over 60 made up 34% of civilians killed from February to September 2022 for cases in which age was recorded.¹⁵



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CAPACITIES OF LOCAL ACTORS TO PROVIDE PUBLIC SERVICES

Increase in services and users

Mykolaiv acts as a main route of egress for those fleeing areas under the temporary military control of the Russia, specifically residents from Khersonska oblast.¹⁶ The number of registered IDP population has increased in Mykolaivska oblast by 2,909 IDPs in February 2023 compared to January 2023. ¹⁷ According to majority of KIs, there was a significant increase in the needs of IDPs for their services, particularly due to the influx of IDPs from Khersonska oblast. In the educational sphere, all three interviewed service providers stated that there was no change in the modality of work due to the implementation of distance learning during the COVID-19 pandemic, but there was an increase in the number of pupils due to IDP enrolment. According to half of the interviewed key informants, there has been an increase in demand for children's services as parents are coming back to Mykolaiv with their children. Numerous KIs reported initiation of new activities after 24 February 2022, the most common among them were provision of humanitarian aid, psychological support, healthcare assistance. To mitigate security risks, the majority of KIs reported implementing remote work, including online consultations. Some KIs also stated that they carried out their activities in bomb shelters to ensure the safety of their staff and clients.

External factors constricting service provision

Shelling

According to the Mayor of Mykolaiv city, in total, 149 civilians have been killed (including 2 children), and 698 people were seriously injured, including 10 children, during hundreds of attacks by Russian forces in the Mykolaiv city since 24 February, 2022.¹⁸ Since the oblast came under the control of the Government of Ukraine on 11 November 2022, there is no longer any active ground conflict. The last recorded armed clash on the mainland occurred on 13 November, 2022. As a result, shelling has significantly decreased in Mykolaiv oblast but continues to drive safety and security concerns.¹⁹ The vast majority of KIs indicated that shelling was the biggest barrier to providing service, as it causes suspension of activities, cancellation of business trips, and a massive wave of injured people.

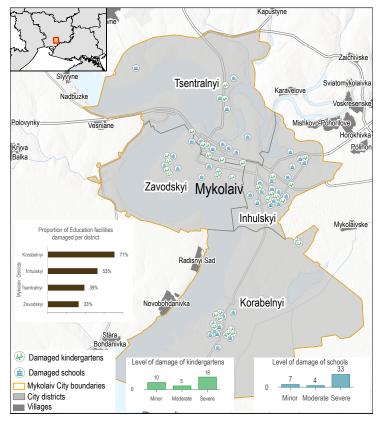
Power and water disruptions

Mykolaiv was a frontline region and its power facilities were subject to regular shelling with artillery, drones, and missiles.²⁰ The shortages of electricity and interruptions in the Internet supply discomposed access to databases, and sharpened the provision of services, caused long queues in healthcare institutions, and changes in lesson schedules. At the same time, **lack of proper drinking water** was frequently reported problem. Since April 2022, many families living in Mykolaiv have been left without safe drinking water, as a result of damaged water pipes.²¹ Participants of FGDs reported that the access to water distribution centres was limited and most significantly affects the elderly and those living with reduced mobility.²² The use of salty water has reportedly caused extensive corrosion of the pipelines, which leads to almost daily ruptures of pipers and major breakdowns of the water facilities.²³ To solve the issue of access to water, city authorities transitioned from emergency repairs to more comprehensive reconstruction efforts.²⁴

Infrastructure damages

As a result of hostilities, Mykolaiv suffered significant damage to residential buildings and infrastructure. All the city's districts and surrounding settlements were affected to various degrees.²⁵ According to REACH Damage Assessment, the most affected areas were Ingulskyi and Korabelnyi districts, located in the eastern and southeastern parts of Mykolaiv, near industrial facilities.²⁶ Over 1,500 residential buildings were damaged; more than 40% of critical infrastructure, half of social facilities were damaged or destroyed.²⁷ Maps 2 and 3 show damaged educational and healthcare institutions in the city of Mykolaiv, according to data from the Mykolaiv City Council. In particular, the largest number of damaged educational institutions was observed in Korabelny district (71% of all facilities). In addition, the vast majority of damaged educational institutions had a severe level of damage. While the largest number of damaged healthcare institutions were located in the Inhulskyi district, and more than half of them have minor or moderate levels of damage. This indicates the vulnerability of the educational sector and the impossibility of restoring a full-fledged educational process that existed before February 24th, 2022.

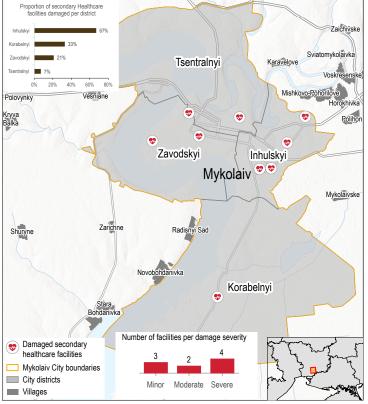
Map 2: Damaged educational facilities in Mykolaiv, by district



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Map 3: Damaged healthcare facilities* in Mykolaiv, by district

* The map shows only the damaged secondary healthcare facilities, i.e. public hospitals, polyclinics, clinics.

Needs of local actors to provide public services

Material needs

The vast majority of KIs (14 out of 18) indicated a lack of equipment, including office equipment and the need for repairs and reconstruction of existing premises. More than half of KIs (11 out of 18) reported the issue with premises for staff and office. Additionally, KIs emphasized the need for bomb shelters to be adapted, renovated, and equipped to be suitable for long-term stays and service delivery. The most difficult situation with bomb shelters in Mykolaiv city is in the healthcare sector. According to Iryna Shamrai, Head of the healthcare department of the Mykolaiv City Council, health care facilities in Mykolaiv do not have bomb shelters that would meet all safety requirements. Only the bomb shelter in the 1st City Hospital could be used in emergency situations, but it also needs to be further upgraded to meet the requirements of the State Emergency Service.28

In addition, KIs have indicated that there was a **need for additional vehicles** to meet the increasing demand for crisis and emergency services. Specialized transport for people who use wheelchairs was also needed, including vehicles with lowered floors or lifts and vehicles to transport loads. The burden of material aid and service provision primarily falls onto the national non-profits and volunteer collectives, which were overstretched in their capacity and under supported. Such structures have substantial capacity but lack the material and monetary resources for current sustainability and subsequent scaleup. Finally, KIs often reported a lack of necessary funding to attract employees, purchase necessary equipment, rent, repair or reconstruct necessary premises and bomb shelters.

Human resources

Similarly to FGDs findings, numbers of KIs reported that many specialists have left the city, which causes pressure on those employees who stayed and continued their work. KIs pointed out the great demand for PTSD (posttraumatic stress disorder) therapists. Moreover, 12 out of 18 KIs reported conflict-related stress and anxiety as a barrier for service provision. It caused a decrease in work performance, and need for psychological trainings for staff. The need for provision of emotional support and **stress management training** for caregivers experiencing burnout, including healthcare staff, social workers, and volunteers was reported.

"Some employees are very affected; they even refuse to go to some cities to provide assistance, and this affects the organization's activities." [PSP-KIs in social sphere]

In addition, KIs indicated the need for **training for staff** in areas such as case management, how to work with people with PTSD (post-traumatic stress disorder), victims of gender-based violence (GBV), and children with PTSD. According to REACH Education Needs Assessment, teachers reported requiring additional training on online education best practices, as well as the need for advanced training courses to develop IT skills and subjectspecific vocational skills, and the need for face-to-face communication with colleagues to maintain communities of practice.²⁹

"We aren't interested in some webinars. We need an indepth systemic training with methodological materials and post-training support." [PSP-KIs in social sphere]

Other needs

One CSO-KIs mentioned **the lack of visibility** indicating that beneficiaries were often not aware on who were distributing aid. People often felt distrust because a part of Mykolaivska oblast was occupied, and people were quite sceptical of some organisations, offering assistance. Therefore, collection of personal data was also reported to be problematic.

Another CSO-KIs pointed out **the issue of inaccessibility to newly accessible areas** in Mykolaivska oblast to reach their beneficiaries and distribute aid due to the mined roads. Mykolaivska oblast is currently among the top three regions with the largest number of explosive objects. According to the head of Mykolaiv Civil Military Administration Vitaly Kim, the total area that currently needs to be demined exceeds 270,000 hectares, or more than 10 percent of the whole territory of the oblast.³⁰ This greatly complicates the work of both local volunteer initiatives and international organizations, which were forced to cancel their field trips to poorly accessible areas.

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COORDINATION OF THE RESPONSE

Mykolaiv city is a hub for the humanitarian response in Mykolaivska oblast and Kherson, which connotes the presence of many large organisations, including international organisations, local NGOs, and large national NGOs. The existence of international responders was accompanied by complex coordination mechanisms and response regulations. According to KIs, small local NGOs experienced a reduction in their activities, as complex procedures and regulations limited their scope of work and programs. At the same time, the presence of many large organisations and the establishment of procedures create aid delivery channels that allow for routine deliveries and faster resolution of response gaps.³¹ All interviewed KIs were reportedly collaborating with international actors, such as UN agencies, EU programmes, and various INGOs. In addition to this established cooperation, CSO-KIs mostly cooperate with local authorities, PSP-KIs and LAD-KIs - with local CSOs. Among the strengths of such collaboration, tremendous support (purchase of expensive equipment by INGOs), willingness to cooperate and actual information owned by local authorities were named. Nevertheless, the public service providers regretted mostly the length of partnership procedures and called for more flexible support as well indicated lack of coordination and that the aid was not always relevant to the needs (e.g. provision of expired medical consumables, a children's hospital received medicines for adults). Besides, according to KIs, local and national organisations remain under-resourced. Resources are centralised by international actors, and the humanitarian system is struggling to effectively localise the response. Inconsistent provision for multilingual communication also undermines the meaningful participation of local and national organisations.³²

"Bureaucracy with the time-consuming procedures of reviewing our applications and assistance delivery had its impact on our collaboration. We submit an application, it takes 2-3 months for them [international organisation] to review our application. In the meantime, we have already completed this project with our other partners, and in 3-4 months we get an acceptance letter informing us that they will provide us with the funding."

[PSP-KIs in healthcare sphere]

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 interagency 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).

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