

# Rapid Assessment of Support for the Evacuation of Older People from Eastern Ukraine

July 2024







Implemented by:



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## Introduction

This report, prepared by HelpAge, seeks to provide a deeper understanding of the gaps in support for the evacuation of older people from conflict-affected areas in Eastern Ukraine as of July 2024. It aims to highlight the key challenges and barriers faced by older evacuees and those assisting them, offering insights into the ongoing evacuation efforts.

The findings are based on focus group discussions, key informant interviews, and telephone surveys conducted with evacuees and organisations involved in the evacuation process. HelpAge hopes this report will contribute to ongoing discussions and collaboration with partners to better address the needs of older people during evacuations.

**Objective:** To identify and analyse the current gaps in support for the evacuation of older people from frontline areas, with a focus on improving understanding and awareness of their specific needs during the evacuation process.

# Methodology

The assessment was carried out using several methodologies to provide a deeper understanding of the challenges and potential solutions for supporting older people during evacuations. In addition, a desk review of online publications was conducted.

- 1. Focus groups with recent evacuees: An in-person focus group discussion with beneficiaries of a HelpAge project (Canada-Ukrainian Foundation) was held in the city of Dnipro. This was conducted in order to collect the experience of older people. The participants were 7 older women and 1 older man.
- 2. **Key informant interviews with key stakeholders:** Detailed information was gathered on the



- specific challenges faced by those evacuating and staying in new environments and the support needed by partners. Five organisations providing evacuations were contacted, including Volunteer 68, East-SOS, Vostok-SOS, Help To Leave, and ADRA. Interviews were conducted with various staff members involved in mobile support in Kharkiv and Dnipro, such as heads of organisations, mobile team leads, volunteers, psychologists, doctors, and drivers. Representatives from ADRA and Vostok-SOS engaged in evacuations from Kharkiv, Donetsk, Kherson, Sumy, and Zaporizhzhia regions were also interviewed. Additionally, interviews were conducted with two Heads of the Department of the Ministry of Social Protection in Kharkiv and Dnipro, three representatives from Humanitarian Coordination Centres in Kharkiv, Zaporizhzhia, and Kherson, and 29 managers of collective centres in Dnipro.
- 3. Telephone surveys of those living in collective centres: Information on the experiences and needs of beneficiaries living in collective centres and their living conditions was collected through telephone interviews with 75 HelpAge beneficiaries (58 women and 17 men) from projects funded by the German Federal Foreign Office, Canada-Ukraine Foundation, and Disasters Emergency Committee.

# Limitations

This assessment was conducted between June 24 and July 25, and several limitations affected the information-gathering process:

- **Travel restrictions:** The assessment took place amid active hostilities, limiting the possibility of direct field visits and face-to-face interviews.
- **Information gaps:** Obtaining up-to-date and accurate figures on the number of evacuees and their destinations was challenging. Organisations were also hesitant to discuss the costs required to address the challenges they faced in evacuating older people. Furthermore, predicting the scale of future attacks, and therefore the likely size of the future internally displaced population, remains difficult.
- **Rapid nature of assessment:** The period for collecting data was short, impacting the amount and depth of data collected.

# **Context Analysis**

## **Geographic Location of Evacuation**

- Areas requiring evacuation: The regions with the most significant displacement are Donetsk (22% of IDPs originated), Kharkiv (20%), Kherson (14%), Zaporizhzhia (12%), and Luhansk (7%). Recently, Donetsk, Kharkiv, and Sumy have seen increased displacement due to the new front lines opened by Russian forces. However sporadic displacement has occurred across all sections of the front line, often because of regular shelling. Please see the map section of the report for further detail.
- Scenarios for the potential impact of the Russian offensive: Predicting the location and scale of future evacuations is challenging. However, recent Russian advances in Kharkiv, Sumy, and Donetsk suggest that these areas are likely to continue to experience frequent displacement. Increased Russian air attacks could further damage critical infrastructure (bridges, roads), complicating logistics for future evacuations.

#### **Population Demographics:**

- Population density in communities/regions close to the front line: The areas on the front line, ranked by population density are Donetsk, Kharkiv, Luhansk, Zaporizhzhia, Sumy, and Kherson. Cities near the front line with the highest populations are Kharkiv (1,421,125 2022 Est), Zaporizhzhia (710,052 2022 Est), Mykolaiv (470,011 2022 Est), and Kherson (279,131 2022 Est). These figures are based on the last available census and may well only be indicative of current population sizes. Please see the map section of the report for further detail.
- Higher numbers of older people and people with disabilities near the front line: Approximately 20-25% of the population within 25 kilometres of the front line are older people, and 10-12% are people with disabilities. However, from conversations with those actively working on the front line they report that a higher number of older people are present, even as high as 50%. This is corroborated by anecdotal evidence suggests that older people are often the last to evacuate due to a reluctance to leave their possessions and fear of having to adapt to a new environment.

#### **Evacuation Processes**

- Initial stage of evacuation: In high-risk areas with active hostilities, evacuation orders
  are issued by the government, though forced evacuations are only mandated for
  children. The police, often referred to as "white angels," conduct evacuations,
  transporting evacuees to assembly points. In areas not blocked by police or the army,
  evacuees must manage their own evacuation, with options including various evacuation
  organisations, government entities like the State Emergency Service of Ukraine, or
  private taxi companies.
- The role of evacuation organisations: Several types of evacuation organisations exist, including small volunteer teams, commonly funded through private donations on platforms like Facebook, and registered NGOs such as Vostok-SOS, which has conducted over 25,500 evacuations, including over 1,850 for individuals with reduced mobility. Evacuation organisations typically receive requests for help via evacuees, their families, friends, or government officials. They then proceed to the evacuees' addresses or assembly points coordinated by local authorities. Evacuees are transported to requested locations, ranging from friends' or relatives' homes or rented accommodations. If no housing is available, organisations attempt to place evacuees in collective centres, although these are often full and may not be equipped to support individuals with disabilities and thus such people are often turned away.
- The role of state services: It should be noted that many evacuations are done by state services these include the State Emergency Service of Ukraine, city councils and the Ministry of Reintegration of the Temporarily Occupied Territories of Ukraine. This is the case especially for non-mobile people who are often evacuated by ambulance. In addition, the authorities inform those in areas where evacuation orders are issued about the various modes of transport they can take to their onward locations. These are communicated widely through a variety of channels and are typically free of charge.

#### **Number of People in Need of Evacuation**

**Current evacuating numbers:** In recent months it has been reported that on average between 3,000 to 7,000 evacuations have occurred per month from front-line areas. Despite increased evacuation orders and intensified military operations, displacement flows have remained relatively stable in many settlements as of July 2024. However, getting accurate data is challenging. For example, Volunteer 68, reportedly supports an average of 15-20 people per day but other days may conduct no evacuations. Furthermore, East SOS reports they are providing evacuations on average 5,000 evacuations monthly. Our assumption is that evacuation organisations may also count those displaced from non-front-line areas.

#### **Destination of Evacuees**

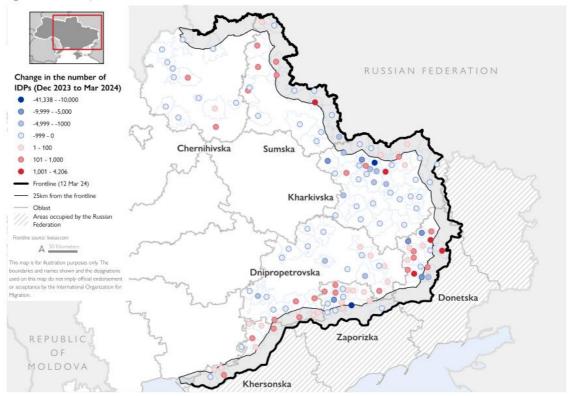
**Popular destinations for evacuees:** The most popular destinations for internally displaced persons (IDPs) are Dnipropetrovska (14%), Kharkivska (12%), Kyiv City (10%), and Zaporizka (7%). However, most recent evacuees have tended to remain within the same oblast or moved to urban areas with substantial security risks, such as Kharkiv, Okhtyrka, and Pokrovsk. This indicates a preference to stay close to their residences in the hope of returning soon. This is also a result of those most likely to flee further having already done so. Please see the map section of the report for further detail.

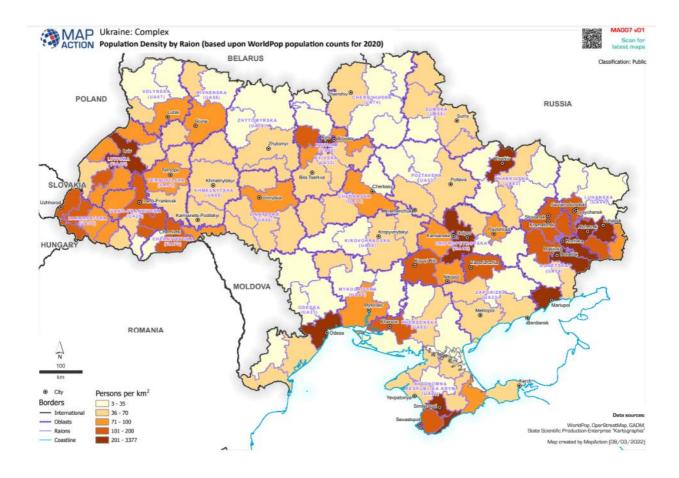
#### **Collective Centres**

- Evacuees in collective centres: Many evacuees without support end up in one of the 1,924 collective centres, which are often in poor condition. Many of these vulnerable individuals do not have the means to pay rent or anyone to host them. Currently, over 109,000 people reside in these centres, with 91% hosting at least one older woman, 80% hosting at least one older man, and 62% hosting at least one person with a disability. Please see the map section of the report for further details.
- Conditions of collective centres: In addition to high occupancy, many centres are ill-equipped to accommodate individuals with disabilities. The centres are often cramped. For example, one woman over 60 reported that she stayed in a dormitory for two months after evacuation, sharing a room with eight people and sleeping on mattresses laid out on the floor. Also finding long-term solutions for residents of collective centres is challenging. A recent survey revealed that 57% of the residents had been living there for the past 18 months.

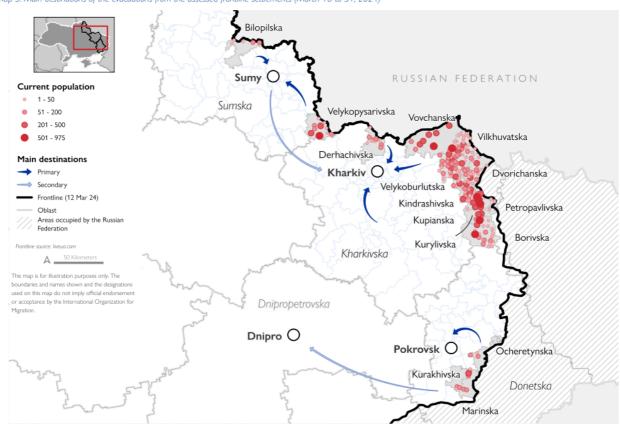
## **Maps**

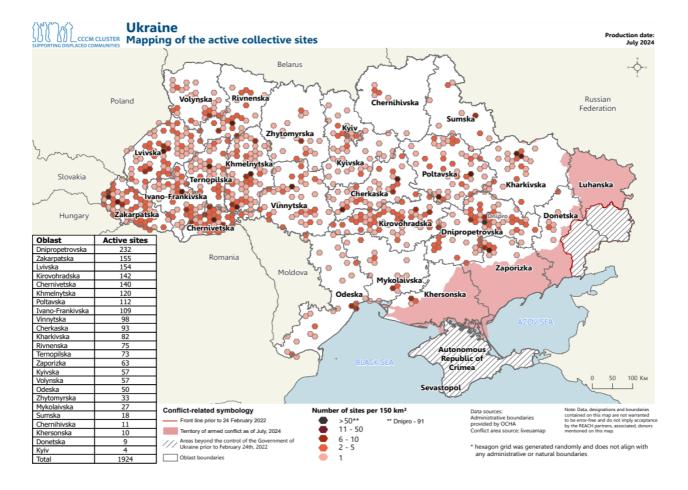






Map 3: Main destinations of the evacuations from the assessed frontline settlements (March 16 to 31, 2024)





#### **Evacuation Stories**

#### Svitlana and Ivan's Story

Svitlana and Ivan, 60 and 62 years old, respectively, live in Vovchansk, Kharkiv region. Ivan has serious complications after a stroke and needs constant medical care. Svitlana was injured in the shelling and was hospitalised but escaped from the hospital to return home and pick up her husband.



#### **Evacuation process:**

- 1. **Initial stage:** Svitlana, being in a serious condition after being wounded, was able to organise the evacuation only with the help of a random oncoming volunteer car. She gratefully thanked the driver with a jar of honey, although he initially refused the gift.
- 2. **Transportation:** In conditions of danger and constant shelling, the volunteer quickly transported Svitlana and Ivan to the nearest safe place. After that, they were moved to a rented room in a dormitory in the city of Dnipro.
- 3. **Accommodation:** In the dormitory, Svitlana and Ivan lived in a small room. Here they were allocated temporary housing, but there were problems with Svitlana's health. Doctors diagnosed her with cancer.

#### **Challenges:**

- **Medical needs:** Ivan needs constant care, and Svitlana, in addition to injuries, has also become a victim of a serious illness. They face great difficulties in accessing the specialised medical care and support they need.
- **Living conditions:** Their rented dormitory room does not provide appropriate conditions for people with disabilities and those who need special care.
- **Psychological stress:** Both need psychological support after trauma and stress of displacement.

#### **Elena and Vasily Story**

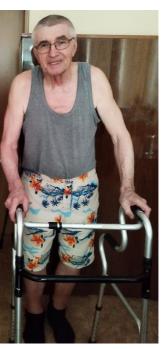
Olena, 68, lived in a village near Sumy. She is immobile due to severe arthritis, which limits her ability to move around unassisted. Her husband Vasily, 70, has chronic heart disease and also needs regular medical care.

#### **Evacuation process:**

- 1. **Initial stage:** Due to the intensification of hostilities in the Sumy region, local humanitarian organisations have launched a specialised evacuation program for older people with disabilities. Olena and Vasily turned to a local government social worker for help, who organised their evacuation. The evacuation was carried out by Vostok-SOS.
- Transportation: A specialised minibus equipped to transport people with disabilities was used to evacuate Olena and Vasily. The transport was equipped with a wheelchair ramp and soft seats for the long ride.
- 3. **Accommodation:** After the evacuation, Olena and Vasily were placed in a collective centre for people with disabilities in the city of Poltava. The centre was equipped with medical equipment and had special conditions for people with limited mobility, including adapted rooms and bathrooms.

#### **Challenges:**

- **Technical needs:** The availability of special vehicles greatly facilitated the evacuation process. However, despite the availability of specialised equipment in the collective centre, it was still not fully adapted to all the needs of people with limited mobility, such as an insufficient number of ramps and specialised furniture.
- Medical care: The availability of medical care at the collective centre was limited, making it difficult for Vasyl to follow regular medical procedures.



 Adaptation: Moving to a new environment has been stressful for Olena and Vasily, especially due to the need to get used to a new place of residence and the changes in routines.

# **Needs Analysis**

# Specific challenges older people face during evacuation

During evacuation, older people face several serious challenges. The challenges outlined below are based on the findings of our survey conducted in collective centres and the focus group with recent evacuees. It was subsequently triangulated with key informant interviews and secondary research.

- Lack of awareness of available evacuation services: Many older evacuees are unaware of the evacuation services available, making it much more difficult for them to get the support they need. 35% of older people interviewed in the collective centre reported they were unaware of the available evacuation services. This is exemplified in the two case studies within this report. While we do not have specific data based on focus group discussions, we can assume that less than half of the respondents turned to such organisations. The rest tried to find a solution on their own due to the escalation of the situation and the inability of evacuation teams to respond to every call.
- Financial difficulties in paying for services: Many older people struggle to find ways of accessing private evacuation services and are unaware that there are free options. Pensions are low in Ukraine and approximately 40% of respondents reported that they could not afford to pay private companies to transport their personal belongings. This financial strain often forces them to leave behind essential items or evacuate without basic necessities, exacerbating their vulnerability and stress during an already difficult time.
- Insufficient specialised vehicles: Some older people, especially those with limited mobility, cannot use standard vehicles for evacuation. While several evacuation organisations report having appropriate vehicles for transporting those with disabilities, 25% of older people with disabilities interviewed still reported trouble accessing these specialised vehicles. This lack of appropriate transportation means that some older people may face significant delays in evacuating to safety or are forced to travel in considerable discomfort.
- Lack of qualified evacuation staff: It was reported that sometimes there was a lack of qualified personnel to assist during evacuation for those with disabilities. 30% of older people interviewed reported that they did not receive the necessary care or assistance from staff during the evacuation, affecting their physical and psychological well-being. It should be noted that some of these respondents were transported not only by specialised evacuation organisations but also by-passing vehicles, military personnel, and most commonly by train. Our estimates are that around 15% of those who received specialised evacuation support services were dissatisfied with the care provided by staff of these organisations.
- **Problems with the availability of temporary housing:** Collective centres are often not adapted for older people with limited mobility, making it difficult for them to live in those environments. About 45% of older people reported problems with accessibility and

comfort in collective centres, citing issues such as lack of ramps, inaccessible sanitary facilities, and overcrowding.

# Specific challenges faced by organisations when evacuating older people

Organisations involved in the evacuation of older people face several challenges that complicate their work. To assess this, we spoke to a range of stakeholders and triangulated the magnitude of these challenges marking down frequency of specific responses. It should be noted that when asked which activities they would like HelpAge to fund they struggled to answer this and typically provided a general response that they simply need funding to pay for staff and for the upkeep of their vehicles.

Organisations and representatives consulted:

- 1. ADRA: Evacuation Program Coordinator
- 2. Helping to Leave: Evacuation Program Coordinator
- 3. SOS Vostok: Program Coordinator, Evacuation Team
- 4. Volunteer 68: Program Manager, Program Coordinator, Mobile Team
- 5. Volunteers: Two independent volunteers who carry out evacuations on their own.
- Older people don't want to leave their homes:
   Many older people are reluctant to leave their homes
   due to emotional attachment, fear of the unknown,
   or dissatisfaction with potential new living conditions.
   Just under a half of the organisation staff we spoke
   to reported difficulties in persuading older people to
   leave their homes, leading to delays that put both
   the evacuees and the evacuation organisations at
   risk as well as reducing their operational efficiency.
- Financial constraints and reliance on volunteers: Some organisations operate on limited budgets, leading to financial difficulties in paying employees and forcing them to rely on volunteers. Half of the organisations mentioned they faced financial constraints, resulting in a shortage of professional staff and a lower quality of services.



Beneficiary Lyudmila Rybalka

Notably, ADRA has reported that their project funding is coming to an end. Meanwhile, Volueteer68 continues to rely heavily on volunteer support due to insufficient financial resources. However, anecdotal information suggests that comparatively evacuation organisations have stronger funding compared to those providing support to evacuees in new locations.

• Lack of vehicles for people with disabilities: Some organisations lack access to vehicles suitable for transporting people with disabilities or reduced mobility, such as those equipped with lifts or ramps. Approximately a third of the organisations indicated they do not have specialised vehicles in their fleet, making it more difficult to evacuate people with disabilities and often resulting in delays and discomfort for evacuees. However, it should be noted that those who are immobile can be evacuated by government services such as ambulances, unless there is severe shortage.

- Coordination and communication problems: A lack of coordination between different
  organisations and institutions can lead to duplication of efforts or loss of critical
  information. A third of the organisations noted issues with coordination and
  communication, which hinder quick response and affect the overall effectiveness of
  evacuation efforts.
- **Inadequate staff training:** Some organisations face challenges related to inadequate training, particularly on how to work with older people and persons with disabilities. A quarter of the organisations indicated a lack of training among their staff and/or volunteers, which could impact the quality-of-service delivery and safety during evacuation.

# Specific challenges older people face in collective centres

Many collective centres are in poor condition, as observed during numerous visits by HelpAge staff to such centres. They are usually not equipped for those with severe health conditions or disabilities. The following information is based on focus group discussions, triangulated with observational visits.

- Living on the upper floors without an elevator: Many older evacuees are placed on upper floors which creates significant difficulties for people with reduced mobility or other physical problems.
- The need to pay for accommodation: Around 19% of collective centres charge for accommodation. Most of these are independent charities which simply do not have the money to operate the centre without charging people. Subsequently this financial burden adds to the stress for those with limited resources and an inability to make a living.
- **Overcrowding**: Some shelters are overcrowded, creating additional problems for all residents, especially older people with limited movement who may struggle to leave their rooms frequently. This is more likely to occur in large urban areas.
- **Unsanitary conditions**: Many collective centres lack separate toilets as they are communal for both sexes. In addition, many lack sanitary facilities, such as showers or toilets that are appropriate for this with health conditions or people with disabilities.
- Lack of ramps: Older people, especially those in wheelchairs, face difficulties moving in and out of collective centres due to the lack of ramps and other appropriate modifications.
- Lack of specialised care staff: For people with limited mobility, the absence of dedicated staff to provide necessary care is a significant problem.
- **Involuntary vacancy**: A large number of the centres are in educational institutions like kindergartens, schools, technical schools, and universities. At the start of the school year, these centres may have to allocate spaces for non-local students.

# Specific challenges that those running collective centres face when hosting older people

To assess the needs of those running collective centres, we interviewed 29 managers and staff members. The majority requested support from HelpAge to improve the quality of their facilities or purchase items needed. Notably, while there is a significant need for more specialised and trained staff to care for older people with health conditions or disabilities, a

problem identified in other sections of this report, this was not mentioned by the managers with whom we spoke. Many respondents expressed a preference for HelpAge to directly fix their facilities or provide them with equipment, rather than offering grants. This preference likely stems from concerns about the logistical and bureaucratic burdens associated with grant management and subsequent construction as well as fear of compliance with due diligence processes.

#### Frequent issues raised include:

- **Insufficient quality beds**: Many of the managers mentioned the quality of beds was unsatisfactory, with many being old Soviet-era beds that do not provide adequate comfort. The issue is particularly severe with mattresses, which often need replacement.
- Lack of funds for repairs: They are aware that many dormitories are in poor condition and require renovation, especially in common areas such as showers, toilets, and kitchens. There is a need to renovate doors and replace damaged or outdated windows to improve energy efficiency.
- Heating problems: Some of the managers mentioned they feared increased power outages, especially in winter when heating becomes a critical issue. They are also partially as result of outdated power grid which struggles to handle the demand. Therefore, many mentioned the need for generators.
- **Insufficient furniture**: They also requested new furniture, including wardrobes, tables, chairs, beds, and bedside tables. These shortages also create difficulties for residents.
- **Insufficient equipment for common areas**: Many managers informed us that they lacked essential appliances such as refrigerators, boilers, stoves, microwave ovens, and washing machines. This lack of equipment complicates daily life for residents and adds to their inconveniences.

# Gaps Analysis

To obtain an accurate picture of the gaps in evacuation support, it is essential to go beyond talking to those directly involved in evacuations, who may have specific interests. Therefore, we consulted neutral stakeholders to understand the current level of resources available for evacuation organisations and the types of support currently accessible to evacuees.

#### Representatives consulted:

- 1. **State Administrations**: Heads of the Department of Social Protection of Kharkiv and Dnipro.
- 2. **Humanitarian Coordination Centres**: Heads of the Humanitarian Centre of Kharkiv, Zaporizhzhia and Kherson. These centres are responsible for coordinating the evacuation in their areas.
- Resource Availability in Evacuation Organisations: Many evacuation organisations, particularly in Kharkiv, including volunteer groups and local NGOs, appear to have access to resources, allowing them to organise transportation and accommodation for evacuees. However, there remain challenges in coordinating these resources efficiently, particularly when it comes to addressing the specific needs of older people and those with mobility issues. In comparison, organisations providing more complex, long-term support to displaced people often operate with more limited resources.
- **Specialised Ambulance Services:** Government agencies have the capacity to deploy specialised ambulances equipped for evacuating older people with health conditions or

disabilities. While these services are crucial, their availability can be limited during peak demand periods, and access may be further hindered by poor road conditions resulting from ongoing conflict.

- Counselling and Psychological Support: Social services offer counselling and
  psychological support to older evacuees, including individual and group sessions aimed at
  easing anxiety and stress. Despite being readily available, these services are often
  underutilised, largely due to limited awareness, especially among older people who may
  struggle to access online information where many of these services are promoted.
- Access to Health Facilities: Older evacuees have access to medical facilities for
  continued care, both for inpatient and outpatient treatment. However, rural and remote
  areas often face a shortage of medical personnel, which complicates routine care. While
  emergency services are able to transport patients to facilities, regular outpatient care
  remains difficult to access, and the costs of higher-quality care can be prohibitive for
  many older evacuees.
- Cash Assistance for Recently Displaced Persons: Large humanitarian organisations, such as UNHCR, have been prioritising multi-purpose cash assistance, particularly for newly displaced people, including older person-headed households. This support is often targeted toward those displaced within the last six months, highlighting that recent evacuees are often more likely to receive financial assistance than those displaced for longer periods.
- **Temporary Housing and Collective Centres:** While temporary housing, including collective centres, is available for older evacuees, the living conditions in many of these centres remain inadequate for those with specific needs, particularly mobility issues. Furthermore, high demand for rental properties in urban areas where many evacuees relocate can push rental prices beyond what many can afford, forcing some into substandard accommodations.

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# HelpAge International is a global network of organisations promoting the right of all older people to lead dignified, healthy and secure lives.

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