

Appeal

Ukraine, Russia

Crisis affected civilians in conflict zone and IDPs in Ukraine & refugees in Russia: Follow on appeal – UKR171

Appeal Target: US\$ 587,724

Balance Requested: US\$ 587,724

Geneva, 30 May 2017

Dear Colleagues,

The humanitarian situation in Eastern Ukraine remains difficult and continues to deteriorate. This is due to the fighting clashes, which began in April 2014 between militia-armed groups in the Donetsk and Luhansk regions of Ukraine, and the forces and armed groups under the central government in Kiev.

Because of active hostilities hundreds of thousands of internally displaced persons (IDPs) and refugees continue to flee to the neighbouring regions of Ukraine and Russia. A total of 1,583,827 IDPs were registered in Ukraine as of April 25, 2017, and over 1.2 million refugees are in Russia. In Ukraine, 3.8 million people are in need of some form of humanitarian assistance due to the conflict. The civilian population in the conflict regions of Eastern Ukraine is in dire need of humanitarian assistance, suffering from the ongoing hostilities, lack of access to basic services and financial resources, and the destruction of local social, communal and economic infrastructure. War affected people suffer death, injury, property damage and have difficulty accessing basic necessities like food, clean water, medicines, and medical services among others. The deterioration in the security situation also further impedes access to basic services. Since the beginning of the conflict at least 10,000 people have been killed (among them nearly 2,000 civilians); and another 22,420 were wounded.

The current humanitarian situation requires concerted actions by many participating stakeholders. The response faces financial difficulties. For example the UNOCHA Humanitarian Response Plan (HRP) for Ukraine remains significantly underfunded.





ACT Alliance members Russian Orthodox Church -Department for External Church Relations (ROC/DECR) and Hungarian Interchurch Aid (HIA) plan to continue their humanitarian support to IDPs in Ukraine, refugees in Russia and vulnerable war affected civilians in the war regions of Eastern Ukraine to contribute to the alleviation of their suffering by addressing their most pressing needs in the sectors of Food Security, Water, Sanitation and Hygiene, Health/Psychosocial support and Shelter and Non Food Items. The ACT Appeal UKR171 follows on the response to the ACT Appeal UKR161.

I EXECUTIVE SUMMARY

TITLE: Crisis affected civilians in conflict zone and IDPs in Ukraine & refugees in Russia: Follow on appeal

ACT APPEAL NUMBER: UKR171

APPEAL AMOUNT REQUESTED (US\$): 587,724

DATE OF ISSUANCE: 30 May 2017

NAMES OF ACT FORUM AND REQUESTING MEMBERS: ROC/DECR; HIA

ACT FORUM	N/A
ACT REQUESTING MEMBERS	Russian Orthodox Church / Dept. for External Church Relations (ROC/DECR)
	Hungarian Interchurch Aid (HIA)

THE CRISIS

The humanitarian situation in Eastern Ukraine remains difficult and continues to deteriorate. This is due to the fighting clashes which began in April 2014 between militia armed groups in Donetsk and Lugansk regions of Ukraine, and the forces and armed groups under the central government in Kiev. As a result of active hostilities hundreds of thousands of internally displaced persons (IDPs) and refugees continue to flee to the neighbouring regions of Ukraine and Russia. The civilians remaining in the conflict zone are in the deepest humanitarian crisis.

PRIORITY NEEDS

Food Security; Water, Sanitation and Hygiene; Shelter and NFI; Health/Psychosocial support

PROPOSED EMERGENCY RESPONSE

KEY PARAMETERS:	Russian Orthodox Church (ROC/DECR)	Hungarian Interchurch Aid (HIA)
Project Start/Completion	01 June 2017 – 31 May 2018	01 June 2017 – 31 May 2018
Dates		
Geographic areas of response	Conflict area of Donetsk and	Ukraine 4 regions:
	Luhansk regions (NGCA) in the	Zaporizhie, Kherson, Donetsk,
	Eastern Ukraine (Ukraine);	Luhansk
	Belgorod, Kursk, Rostov,	
	Stavropol, Voronezh regions	
	(Russia)	
Sectors of response &	WASH (3,420 individuals);	Food Security (app. 10,800
projected target population	Shelter & NFI (1,620	individuals); WASH (app. 11,400
per sector	individuals);	individuals); Shelter and NFI (approx.
	Health/Psychosocial support	720 individuals); Health/Psychosocial
	(16,158 individuals)	support (approx. 200 individuals)



TABLE 1: SUMMARY OF APPEAL REQUIREMENTS BY ACT MEMBER AND SECTOR:

Appeal Requirements	RUSSIAN ORTHODOX CHURCH / DECR (ROC/DECR)	HUNGARIAN INTERCHURCH AID (HIA)	Total Requirements
Total requirements US\$	288,051	299,673	587,724
Less: pledges/contributions US\$	0	0	0
Balance of requirements US\$	288,051	299,673	587,724

TABLE 2: REPORTING SCHEDULE

Type of Report	Russian Orthodox Church / DECR (ROC/DECR)	HUNGARIAN INTERCHURCH AID (HIA)
Situation reports	Bi-monthly	Bi-monthly
Interim narrative and financial report	30 November 2017	30 November 2017
Final narrative and financial report	31 July 2018	31 July 2018
Audit report and management letter	31 August 2018	31 August 2018

Please kindly send your contributions to either of the following ACT bank accounts:

US dollar Euro

Account Number - 240-432629.60A Euro Bank Account Number - 240-432629.50Z IBAN No: CH46 0024 0240 4326 2960A IBAN No: CH84 0024 0240 4326 2950Z

Account Name: ACT Alliance

UBS AG 8, rue du Rhône P.O. Box 2600 1211 Geneva 4, SWITZERLAND Swift address: UBSWCHZH80A

For earmarking of pledges/contributions, please refer to the spread sheet accessible through this link http://reports.actalliance.org/

The ACT spread sheet provides an overview of existing pledges/contributions and associated earmarking for the appeal.

Please inform the Head of Finance and Administration, Line Hempel (<u>Line.Hempel@actalliance.org</u>) and Senior Finance Officer, Lorenzo Correa (<u>Lorenzo.Correa@actalliance.org</u>) with a copy to the Regional Programme Officer, Jana Schroder (jana.schroder@actalliance.org), of all pledges/contributions and transfers, including funds sent direct to the requesting members.

We would appreciate being informed of any intent to submit applications to the EU, USAID and/or other back donor funding and the subsequent results. We thank you in advance for your kind cooperation.

For further information, please contact:

ACT Regional Representative, Gorden Simango (gsi@actalliance.org)

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ACT Regional Programme Officer, Jana Schroder (jana.schroder@actalliance.org)

ACT Web Site address: http://www.actalliance.org

Alwynn Javier Global Humanitarian Coordinator ACT Alliance Secretariat



OPERATIONAL CONTEXT

1. The crisis

The humanitarian situation in Eastern Ukraine remains difficult. This is due to the fighting clashes which began in April 2014 between militia armed groups in Donetsk and Luhansk regions of Ukraine, which proclaimed autonomy/independence of their territory from the central authorities of Ukraine, and on the other side – the forces and armed groups under the central government in Kiev.

To date, the conflict territories of Donetsk and Luhansk regions of Ukraine declared that they are autonomous and not controlled by Ukraine. They are referred to as Non-government Controlled Areas of Ukraine - NGCA. These are self-named are Donetsk and Lugansk People's Republics. The territories of Donetsk and Lugansk regions that remain under control of Kiev, are commonly referred to as GCA.

As a result of active hostilities with the use of aircraft, tanks, heavy artillery and multiple rocket launcher systems, industry and infrastructure in the region, a major industrial centre of Ukraine, by the fall of 2014 almost stood still as it was largely destroyed. Thousands of homes, factories, mines were destroyed, including - in the largest metropolitan areas of Eastern Ukraine – Donetsk and Luhansk. Agriculture of this fertile region came to desolation.

One of the consequences of hostilities in the Donetsk and Luhansk regions is hundreds of thousands of internally displaced persons (IDPs) and refugees fleeing to the neighbouring regions of Ukraine, located west of the site of hostilities; as well as to the East, i.e. to the territory of Russia and to other countries as well. Prior to the active hostilities the population of Luhansk and Donetsk regions was about 6.6 million.

Despite the fact that active hostilities were stopped with international mediation, and OSCE monitors the established demarcation line, to this day fighting continues unabated in eastern Ukraine. Civilian casualties continue to be recorded. The highest record in 2017 so far was in February, with 73 civilian casualties reported.

Fighting continues to affect civilians in NGCA and many communities along the contact line. Civilians suffer death, injury, property damage and difficulty accessing basic necessities like food, clean water, medicines, medical services and other basic services. Shelling continues to affect basic service provisions across the demarcation line, particularly critical lifesaving water, as well as schools, health facilities, and power lines, among others. As an example, the Donetsk Filter Station (DFS) operations came to a halt during at least 30 days since the beginning of the year, triggering a domino effect of water, electricity and heating cuts in NGCA and GCA. Repair teams continue to put their lives at risk as fragile ceasefires are often broken. The conflict also increases the threat of catastrophic chemical disaster with potentially fatal consequences as fighting is ongoing in areas where large chemical and industrial facilities are located. Humanitarian partners continue to call on parties to the conflict to respect the civilian nature of infrastructures, de-militarise the adjacent areas and give a wide berth during fighting. Mines and unexploded ordnance also pose a daily danger, and may inhibit economic recovery.

The number of displaced people has decreased. By 25 April 2017, MoSP (Ministry of Social Policy of Ukraine) had registered 1,583,827 IDPs in Ukraine (actual number of IDPs is higher, as not all of them register). As of March 2017, according to government sources in receiving countries, the total number of Ukrainians seeking asylum in neighboring countries now stands at 434,284, with the majority going to the Russian Federation (427,240), Poland (4,320) and Belarus (2,278). As of the end of 2016, since the beginning of the crisis, in the receiving countries of the European Union there were 9,625 applications

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for international protection in Germany, 9,310 in Italy, 3,530 in France and 3,155 in Sweden. An additional 1.3 million is also seeking other forms of legal stay, mainly in the Russian Federation (912,370), Belarus (244,621) and Poland (216,351).

Queues at checkpoints between GCA and NGCA in Ukraine registered a record hit in March 2017, with over 960,000 crossings compared to 550,000 in February. This is largely due to the compulsory verification for IDP pensioners imposed by the Ukrainian Government (resolution #637, 28 December 2016) at Oshchadbank. The verification takes place every three months from the date of opening their account at Oschadbank. Should they fail to present themselves, their social benefits could be suspended. This mandatory requirement has resulted in a massive movement of people, mostly pensioners, across the 'contact line', long queues and overcrowding at the bank branches (reportedly up to 500 people a day) and bus stations. At least one death and three hospitalizations among pensioners at the checkpoints have been reported in March. Field reports indicate that some people from NGCA were not able to complete their ID verification and were forced to stay overnight in GCA at their own expenses, while some had to wait for three days to complete the verification process.

According to the latest Food Security and Vulnerability Analysis, an estimated 620,000 people in Donbas area (NGCA+GCA) are food insecure, nearly 38,000 of whom are IDPs.

According to UN OCHA, the Humanitarian Response Plan (HRP) for Ukraine is underfunded. Persistent underfunding will lead to suspension of lifesaving services, including health and psychosocial services through mobile outreach for thousands of most vulnerable women and adolescent girls affected by the conflict, according to UNFPA; the services may cease in less than a month due to lack of funding. WFP's provision of food assistance and early recovery activities aimed at enhancing local livelihoods and people's resilience to shocks are also at risk. Handicap International's operations to respond to the needs of people with disabilities in Eastern Ukraine came to a halt at the end of March due to the lack of funds.

To date the humanitarian responses are undermined by a combination of factors. The heavily politicized nature of the crisis ignores the humanitarian dimension, resulting in undermining access and impediments to much needed humanitarian assistance in NGCA. While humanitarian needs are acute, in particular in the NGCA, the conflict in Eastern Ukraine has moved quickly to a protracted crisis.

The number of Ukrainian refugees from the conflict zone in Russia is increasing. Neither for them nor for the Russian authorities is it clear how long their migration will last. There is almost no international assistance for them. The lack of a definitive and sustainable progress in political settlement of the armed conflict in Eastern Ukraine, unclear status and future structure of NGCA territories and degradation of the local infrastructure does not allow to hope that refugees will soon be able to return home. The current updates indicate that the local population is continuing to leave the territory affected by the armed conflict in NGCA and become refugees in Russia. Over the past six months, the number of Ukrainian refugees in Russia, according to official figures, has increased by almost 200,000 people.

It is important to note that currently only about a half of refugees have any legal status and cannot formally count on the help of the authorities and social payments (including pensions) in Russia. These legal problems, but also the massive character of migration flows, lack of adequate mechanisms to provide the necessary assistance and the lack of funds do not allow the authorities in Russia to meet present urgent needs of Ukrainian refugees as at the moment, and most likely in the foreseeable future. So, in the current phase, the refugees in Russia still are in great need of emergency relief.



2. Actions to date

2.1. Needs and resources assessment

In Ukraine, IDPs are placed in different locations and types of accommodation, such as sanatoriums, empty hotels, houses, community centres, etc. However, the majority of them are left with no other choice but to rent their own accommodation (an apartment or a house), which puts them into a very difficult position as rent is very expensive. They receive a minimum provision from the state, and local people, as well as volunteers try to take care of them. Given that their resources for assistance have ended by now, international resources are necessary to involve.

Hungarian Interchurch Aid (HIA) has been providing humanitarian assistance to IDPs and people living in the war zone since the beginning of the conflict in early 2014. A number of needs assessments have been conducted in the project locations as the number of IDP households (HHs), and number of HHs in the conflict zone in need of emergency assistance is continuously changing. These assessments have been conducted in partnership with HIA's local partner organizations.

From the beginning of the conflict the **Russian Orthodox Church (ROC)** / Moscow Patriarchate (MP) has been actively providing assistance to the most vulnerable civilian population in the conflict zone, and the refugees and IDPs in Russia and Ukraine. The ROC MP and its self-governing part - the Ukrainian Orthodox Church of Moscow Patriarchate - is the largest and traditional Church in Ukraine and Russia. Dioceses, parishes and church organizations have provided assistance to the tens of thousands of the neediest people in all affected regions. For this, ROC used its own funds and assistance of inter-Christian Church partners.

So, in 2014-2015, more than 130 Mln. Rubles (about 2.03 million USD) were centrally collected by ROC parishes and dioceses to help the affected civil population in Eastern Ukraine and refugees. Church congregations and Faith Based Organisations (FBOs) provided funds and in-kind donations for humanitarian activities of the parishes in the affected regions. In general, funds were allocated for hot meals, purchase of food, medicine, hygiene and clothing, as well as transportation and accommodation. It should be noted that in addition to humanitarian aid, the local clergy and church volunteers (including doctors) visit people in temporary accommodation centers and settlements to provide pastoral, psychological and other assistance. To date, all these church funds have been spent. Parishes and FBOs in the affected areas continue to provide assistance to the most needy from their limited resources and with minimal external support. They have lists with about 90,000 people, who are the most severely affected by the war, the most disadvantaged, and urgently need help (30,000 are refugees in the regions of Russia bordering with Ukraine, and 60,000 in the NGCA).

ROC's Department for External Church Relations (ROC/DECR) ACT appeal is based on the requests, received from church social structures, providing humanitarian support to the needlest victims of the war in the field. ROC/DECR with the support of ACT Alliance provided assistance to the most affected refugees and IDPs from Eastern Ukraine on the territory of Russia and Ukraine - hygiene kits, bedding and psychosocial support - within ACT Appeals UKR151, UKR152, UKR161 and RRF 03_2017. ROC/DECR also implemented projects with support of other international partners, in particular - Samaritan's Purse and Billy Graham Evangelistic Association in 2015-2016.

ROC/DECR needs assessment for this appeal, builds on:



- the information about the situation and needs from the regional social church structures in the
 affected areas, involved in efforts to assist refugees, IDPs and civilians in Ukraine (including
 NGCA) and in Russia,
- information about assistance from various sources, already received by the refugees, IDPs in Ukraine and Russia, and also civilians in NGCA to avoid duplication of effort,
- ROC/DECR assessments and evaluations, carried out by various Church social structures and Russia Round Table (RRT)¹ (their results were presented earlier by DECR to the ACT secretariat),
- Experience in helping victims of this armed conflict, and many years of experience in emergency work on the territory of the former Soviet Union.

ROC/DECR will conduct a detailed needs assessment also prior to distribution activities, taking into account the time and the amount of received funding in order to update beneficiaries list and provide assistance in a tailor way to an individual level.

Food Security

The humanitarian crisis in Ukraine remains a protracted humanitarian emergency. Since the conflict began three years ago, fighting has never ceased completely. As a food-exporting nation, food availability is not a concern in most of Ukraine; however, recent political and economic constraints further threaten food security in affected areas. IDPs (7%) and people living in NGCA (13%) are the most food insecure. In all areas, women are more food insecure than men; and so are elders living alone (REACH). The significant devaluation of the national currency (estimated as much as 50%) has seen consumer prices growing at a faster pace than household income, limiting family purchasing power and general access to food.

A recent Food Security and Vulnerability assessment showed that:

- Share of people with poor and borderline levels of food consumption is estimated at 7.3% in GCA, 9.2% for IDPs residing in GCA and 15.2% among the general population in NGCA.
- Donetsk NGCA has the highest level of poor and borderline levels.
- Among all areas observed females continue to be much more vulnerable than males with 14.8 % and 5.5% of average poor and borderline level of food consumed accordingly. Most of those are single headed with children. Elders living alone are another very vulnerable category.
- Across all areas observed chronically ill and people with disabilities have higher levels of poor and borderline food consumption score with 13.5% and 12.6% accordingly.
- In NGCA the situation has a clear seasonal trend of the poor and borderline food consumption score rising from 15% in the summer period to 30% in the winter.
- Almost half of the population in both GCA and NGCA continue to apply negative coping strategies. IDPs apply them more, with 59% of household applying stress, crisis and emergency coping strategies.
- Among the stress coping strategies spent savings is the most common. Around 40% of the households interviewed reduced health expenditures. Some of the respondents used degrading sources of income or high-risk jobs with average 3.2 %. More households in NGCA for sold house or land. Among all areas female-headed households with children, households living without spouse apply more negative coping strategies.
- Application of coping strategies with regard to food intake is higher among the population in NGCA with 11.32 points, IDPs residing in GCA 9.95 point and Non-IDPs 7.4. Reducing

¹ Russia Round Table (RRT) is a special institution of DECR, dealing with emergencies on behalf of the ROC. RRT was established in 1992 and set among main goals: projecting and implementation of various social, diaconal, educational and emergency programs, including programs supported by interchurch partners of ROC.





expenditure on food and reducing portion of meals are among the negative strategies most in use.

- The analysis for the food expenditure show that the average percentage of share of food expenditure among the population in GCA and IDPs are on the same level respectively estimated at 52% and 53%. This goes in line with statistics from the State Statistics Service of Ukraine. The same indicator in NGCA stands higher with households spending 69% of their budget on food. In NGCA data shows that some 45% of the population is spending as much as 75% of their budget on food. It could be explained with the same average of income and total expenditure for GCA and NGCA on the one side and 25% of higher prices in NGCA on the other side.
- Food Security Index, a combination of the above mentioned food security indicators are higher in GCA where 7% were found food insecure, 8% among IDPs and around 13% for NGCA. Luhansk oblast continues to have the higher level of food insecurity levels with 14% of the population affected by food insecurity.
- Across all areas observed the most vulnerable groups are single headed households with children, elder (60+) living alone mostly and most often females, chronically ill and people with disabilities.

As a result of the above-mentioned analysis, the number of food insecure people in Donbass is estimated to be around 620,000. Among those, nearly 38,000 are IDPs.

Water, Sanitation & Hygiene

According to Ukraine's WASH cluster, "surveys and observations during field visits suggest that there is a sustained need for hygiene supplies, especially among vulnerable families". Based on HIA's own assessments in conflict-affected areas and among IDPs across eastern Ukraine, the need for hygiene supplies — especially for women, children, new-borns and other vulnerable individuals such as the elderly, people accommodated in social institutions, etc. — is still high.

Based on direct observations made during HIA staff visits to the conflict-affected areas, as well as from feedback received from partners, it has been confirmed that conflict-affected communities have little to no access to cleaning products such as disinfection solution, washing powder, toothpaste, hypoallergenic soap among others.

Additionally, diapers of all sizes are considered a priority need by all counterparts in the field and at the de facto municipal level, both for single households with little children and/or bedridden family members, and for social institutions hosting the most vulnerable, such as homes for the elderly, geriatric centers, rehabilitation centers for disabled, hospitals and public clinics, orphanages, etc. The limited or lack of access to these goods is mostly determined by their absence in remote areas, especially those close to the contact line. This often requires vulnerable individuals to travel along unsafe roads to reach the nearest market. Their high costs makes them unaffordable for low income families or families that need to prioritize costs for rent, medicines, food, water, etc., as well as for social institutions that need such commodities in larger quantities.

In addition to ongoing shelling and artillery fire, the continued tenuous financial status of utility providers servicing areas on both sides of the contact line in NGCA and GCA jeopardizes civilians' access to safe drinking water. For example, as of December 2016, approximately 4 million people were at risk of water access disruptions, OCHA reports.

Russia According to local church structures in Russia providing assistance to refugees and according to ROC/DECR field assessments, the refugees are currently in dire need of hygiene items, bedding and psychosocial assistance. This is due to the fact that only about half of them have any legal status and can formally count on the help of the authorities and social payments (including pensions). However,



according to ROC's assessments and experience of the field emergency work in Rostov and Belgorod regions (border areas with Ukraine, the largest in terms of the number of refugees), even those refugees, who have legal status and receive help from the local authorities (mostly - utensils, food, medicine, a little money), are in need of the most essential household things such as hygiene items and bedding. It is also important to note that even those refugees, who could find a job, usually receive very low wages because of the economic crisis and drop in the living standards. The most demanded hygiene products are washing agents and antibacterial detergents, soap, shampoo, tooth paste & brushes, diapers. The most demanded bedding products are bed linen and blankets. According to church social services in the Russian border areas with Ukraine, currently there are about 30,000 of the poorest Ukrainian refugees in their lists, who need this assistance in Hygiene and NFI sectors.

Shelter & Non-Food-Items (NFI)

Neighbouring to Luhansk and Donetsk oblasts - Kharkiv, Dnipropetrovsk, Kherson and Zaporizhia regions - host the majority of IDPs. Numerous IDPs have fled to those regions during the last 3 years. A part of them, who find it difficult or impossible to pay rent at more or less decent place, stay in shabby old buildings, barracks or old abandoned village houses. In March, cluster partners revealed new assessment data, which showed that IDPs continued to report strained coping mechanisms to afford the expense of renting, utilities, and heating.

Health/Psychosocial Support

In Ukraine, there has been strong decline in public health provisions, especially in conflict-affected areas. The loss of lives, destruction of livelihoods, social fragmentation and family separation, coupled with intense uncertainty about the future endangered by the ongoing conflict, have had a clear and widespread negative impact on the mental health of IDPs and conflict-affected population. UNHCR findings indicate that displacement has led to trauma, stress and mental health issues. This is corroborated by findings from focus group discussions conducted as part of this assessment, in which many groups reported suffering from psychological illnesses, anxiety and depression due to the trauma caused by the conflict. They stated both that they believe they need mental health support, but also that they are not accustomed to seeking help and are reluctant to do so. The widespread need for psychosocial services is also reflected in the findings of the household level survey, where less than half of the population reported not needing to access such services. This is not as direct as saying "I need psychosocial support" but it should be concerning that potentially half of the population of Donetsk and Luhansk needs psychological support.

Households closer to the contact line responded more frequently (57%) that psychosocial support services were not available, and less frequently (31%) that they had no need of the services. Therefore, an increased need of mental health support within the areas close to the contact line is clearly seen.

Overall, access of IDPs to health care and medicines is limited. Vulnerability level is quite high, especially in households with new-born babies, pregnant and lactating women and elderly and disabled people.

In Russia, the psychological and psychosocial assistance to refugees is provided within the local health care system, if refugees have obtained refugee status or received documents, confirming their right to asylum or Russian citizenship. Only about half of the refugees have such documents, while others do not even have a formal possibility to apply for this assistance: in many places, where refugees are accommodated in Russia, there are not enough respective specialists or they are not there at all. Even having the formal right to such assistance, refugees cannot obtain it.

The psychological state of refugees is determined by angst and confusion vis-a-vis multiple real-world problems, concern for their loved ones, frustration, mood swings: agitation, aggression, depression, and





apathy. Traumatic events and complex social situation lead refugees to psychological and social maladjustment, nervous and mental breakdown and conflict. It is necessary to consider the long-term character of this traumatic situation. Psychological problems of refugee children are complex and affect all the main spheres of their personality (emotional, cognitive, behavioral, motivate and communicative). Children mainly need assistance to overcome the post-traumatic syndrome.

Church experts estimate that about 8,000 children and 15,000 women and retired persons among refugees, staying in the border regions of Russia, are in need of psychological assistance. The treatment of the post-traumatic syndrome or associated chronic disorders require long-term care of professionals, as well as respective infrastructure, equipment and supplies.

NGCA. The lasting armed conflict has negatively affected the psychological state in particular of the NGCA population. Fighting of varying intensity has been going on there for almost three years. The psychological state of the local population living in constant fear for their lives and the lives of their loved ones is characterized by nervous breakdowns, depressions, post-traumatic disorders. Obviously this traumatic situation will have a long-term character and need professional help.

One of the most affected categories is children. Obviously, the situation of a permanent long-term traumatic syndrome, especially negatively affects children. The experienced psychological trauma affects all the main spheres of their personality (emotional, cognitive, behavioral, motivate and communicative). Children mainly need assistance to overcome the post-traumatic syndrome.

According to professional psychologists, speech therapists and doctors - employees and volunteers of church social services and parishes in the Donetsk and Lugansk dioceses, - currently 95% of children in the NGCA need psychological assistance, 25% have various serious psychological disorders and need constant supervision and professional help (a survey of specialists conducted in April 2017).

At the same time, local systems for providing respective psychological and pedagogical assistance in NGCA even before the outbreak of hostilities were not very strong and not focused on post-traumatic and psychosocial care for children. At present, they are even weaker, as they lost many of the staff and the necessary funding; plus many schools and hospitals were also destroyed during the war.

For example, (as of 01.03.2017) 24 psychological, medical and pedagogical consultation services are functioning in cities and districts within the education and healthcare system of Donetsk part of the NGCA (its self-name is Donetsk People's Republic - DPR); 15 of them function on a permanent basis, 9 on a voluntary basis. Examination of the psychological state of children in them revealed:

- In the 2014-2015 school year, 6,789 children were examined, of them the disorders were first diagnosed in 4,482 children,
- In the 2015-2016 school year, 7,256 children were examined, of which the first diagnosed disorders were in 5,448 children.

As of 01.06.2016, these consultation services have studied the oral speech of 17,079 preschool children, which, according to local authorities, is only 16% of the total number of preschool children living in the DPR. It was revealed that 44.5% of the examined preschool children had impairments in speech development of varying severity and needed specialized correctional and developmental care (speech therapy and psychological). In the DPR, there are only 59 logopedic children's centers, with makes 20.4% of the required norm of 289 centers. They employ 52 specialists - speech therapists. Only 4,625 children with already identified speech impairments are now receiving the assistance they need.



As of 01.10.2016, according to official data, the psychological services of the DPR had 971 specialists. They were staffed by practical psychologists by 72.8%, and by social educators - by 25.9%. Due to the war and difficult economic conditions, many experienced specialists have left the region. Currently, 70% of the staff of psychological services are beginners and do not have the necessary experience to work with post-traumatic disorders.

Thus, NGCA has very weak medical and educational system that would control the individual psychoemotional and behavioural development of the affected. Besides, most professionals that currently work in NGCA (including doctors and teachers) lack training in this specific field.

It is important to note that the NGCA has a number / network of various social and humanitarian initiatives, created or supported by the Church in order to help the neediest. In particular - in providing psychosocial assistance to children. These local NGOs have different forms and areas of work. However, this important work, as a rule, does not have permanent funding and is carried out on a volunteer basis. Economic problems in the region (closure of factories, unemployment, depreciation of local currencies, a sharp drop in the standard of living), together with the difficult political situation and the absence of a final peaceful settlement of the conflict, also have a cumulative negative effect on their capacity.

2.2. Situation analysis

Ukraine

More than three years into the conflict, the impact on human security, and access to shelter, services, income, water, food, hygiene supplies and other necessities is still very acute. A fragile and regularly violated ceasefire and incidents of shelling led to continued vulnerability of the population, especially those residing close to contact line and in NGCA. The situation was aggravated by the rigid weather conditions this past winter as IDPs and conflict affected populations needed to purchase basic non-food items, in particular winter clothes, and to resolve shelter issues, such as heating and utility bills.

Humanitarian situation continues to worsen in actually all eastern Ukraine (Kharkiv, Kherson, Zaporizhia, Dnipropetrovsk, Donetsk and Luhansk oblasts). The infrastructure, agriculture and other sectors in Donetsk and Luhansk oblasts have suffered enormous losses due to the conflict and ensuing instability. Prices of basic food have increased dramatically due to disruption of trade links and a significant reduction in local production. With the high price of fuel on the market, growing insecurity, devaluation of the Ukrainian Hryvnia (UAH) against the US Dollar (USD), and increased transportation costs, prices for basic products have risen significantly during the conflict, whereas nominal income (in UAH) of Ukrainian citizens stayed the same as before the conflict, or even was lost due to massive job cuts.

The situation is prone to further deterioration since the parties strive to gain territory in the buffer zone and, in several locations, have been moving their positions closer to one another. Shelling frequently occurs at and in the vicinity of checkpoints, adding to the risks faced by thousands of people crossing the 'contact line' every day.

Despite ongoing hostilities and fighting, civilians have shown an increased intent to move back and forth across the contact line, including to check on their property and to visit relatives in the areas controlled by armed groups. Many travel regularly to the Government-controlled territory to collect their social benefits, withdraw cash, to seek medical care and purchase food and medicines. Therefore, there is an acute need to improve the situation at the crossing points between the GCA and NGCA.



The security situation has been deteriorated during past months and continues to seriously affect the safety of people living along the contact line. Fighting is going on both government controlled and non-government areas such as Avdiivka, Chermalyk, Hnutove, Kalynove, Kamianka, Kamianka, Dokuchaievsk, Krasnohorivka, Krymske, Lebedynske, Luhanske, Malynove, Marinka, Mykolaivka, Novhorodske, Novotroitske, Pavlopil, Shyrokyne, Pisky, Talakivka, Troitske, Vodiane, Verkhniotoretske, Zaitseve. Shelling continues to damage basic services infrastructure, leaving many civilians without access to safe water, power and other essential services. The safety of the civilians in the conflict area is of great concern in Ukraine. People in areas affected by fighting are facing security threats due to military operations that have often been concentrated in the densely populated urban areas. Basic life-supporting services are disrupted, supplies at best intermittent and limited, and lack of rule of law widespread, probably with a deteriorating trend. The resilience of the IDPs, of host communities and of the conflict-affected population is steadily depleting.

The economic stagnation in Donbas has been aggravated by three years of conflict. Families have depleted their savings and reduced their spending on health and education in order to afford food. Some 45% of the IDPs have difficulties in finding new jobs. According to a recent research, 38% of IDPs are unemployed. The reduction of income coincides with an increase in the price of commodities and utilities costs.

Currently, it is almost impossible to set up scenarios regarding the conflict in Eastern Ukraine. According to local people and representatives of Ukrainian NGOs, it can be foreseen that the crisis and the armed clashes will not end in the close/mid future. It is more realistic to expect a long conflict in the region that will further deteriorate the country's economic and social situation. Economic recovery in Ukraine will be a very long and challenging process in the years ahead even after the conflict ends in the Eastern part of the country.

The main risk for deterioration of the humanitarian situation is escalation of the armed violence as well as further depletion of coping mechanisms within population residing along the contact line and in NGCA. Limited and often obstructed humanitarian access to these areas prevent an effective humanitarian response of UN agencies, international Non-Government Organizations (INGOs) and local Non-Government Organizations (NGOs). Another challenge is that the conflict in Ukraine is on the verge to become yet another forgotten crisis.

Russia

Families and friends hosting refugees in Russia cannot be expected to keep providing the necessary assistance for a long period. They already have been providing assistance for almost three years. Resources are limited. Furthermore, an economic crisis is developing in Russia. Production declines, jobs are cut, inflation has risen. In 2014-2017 the Russian Ruble was devalued by 100% against the dollar. The living standards of refugees-receiving families and communities have dropped significantly.

The lack of a definitive and sustainable progress in the political settlement of the armed conflict in south-eastern Ukraine, unclear status and future structure of the NGCA and degradation of the local infrastructure does not allow hoping that refugees will soon be able to return home. Moreover, the current updates indicate that the local population is continuing to leave the territory covered by the armed conflict in NGCA and become refugees in Russia. Over the past half year, the number of Ukrainian refugees in Russia, according to official data, has increased by almost 200,000 people.

In the future, in the event of stable and sustainable end of the armed conflict in the region, the vector of migration flows is likely to change. The refugees will return to their places of residence in the Donetsk and Luhansk regions of Ukraine. In this case it will be necessary to develop a series of measures to assist



them in the recovery and rehabilitation (e.g. assistance in the reconstruction/construction of housing, psychosocial support, assistance to children and their socialization, the revival of home gardens and farms, creation of jobs, particularly with small agricultural farms and workshops). So, in case of sudden changes in migration flows and massive return of refugees from Russia to south-east of Ukraine, it is planned to intensify the respective ROC/DECR work already in progress in the NGCA.

Thus, we have to note that the main difficulty is the unpredictable political and economic situation in the areas of conflict, and possible resumption of hostilities.

2.3. Capacity to respond

HUNGARIAN INTERCHURCH AID

Hungarian Interchurch Aid (HIA), founded in 1991, is one of Hungary's largest charity organizations that also gained international recognition. It assists those in need and deprivation through its expanding community of experts, volunteers, donors and corporate partners. HIA-Hungary provides assistance regardless of nationality, religion and ideology. The organization helps in accordance with the strictest professional and transparency rules in Hungary, and in the international arena as a member of the international community. HIA has been implementing humanitarian and development aid programs in 36 countries since its foundation.

HIA has been present in Ukraine since 1993, primarily in the Transcarpathian region (Zakarpatska Oblast) but it also implemented humanitarian and development programs in other parts of the country. In the initial period, HIA-Hungary carried out humanitarian work and social support programs in Berehove/Beregszász and its neighbourhood and established cooperation with the UNHCR office in Kyiv that had been opened in 1994. For the sake of effective implementation of reconstruction works following the" massive Transcarpathian flooding" in 1998, HIA-Hungary opened an independent office in Berehove/Beregszász. During program implementation, HIA identified the region's most striking shortcomings as well.

In 2000 HIA-Hungary established – together with HEKS (Swiss Protestant Aid Organization) – the Berehove Social Foundation, a new civil organization whose main task was to carry out social and training programs. Since 2006 the foundation has been operating under the name 'ADVANCE Transcarpathian Advocacy and Development Center'. Hungarian Interchurch Aid provides continued support to work of the Center, which includes mainly the following assistance: labour-market development, development programs for children, legal and social counselling, accredited vocational training programs, humanitarian assistance, and social development program.

Besides directly implementing aid projects (as registered NGO in Ukraine), HIA has developed a countrywide formal and informal network of NGOs and current project is based on this co-operational structure.

Hungarian Interchurch Aid started implementing a program on emergency assistance to internally displaced persons in Ukraine within ACT Alliance Appeal (Emergency Assistance to Refugees from Eastern Ukraine in Russia & Ukraine – UKR151) on January 01, 2015. The assistance has been continued under UKR152 appeal (Emergency Assistance to Refugees from Eastern Ukraine in Russia & Ukraine – UKR152), and, in 2016-2017, under UKR161 Appeal.

Outside the UKR151, UKR152 and UKR161 Appeals HIA distributed food and hygienic parcels in Dnipropetrovsk, Kyiv, Zakarpatia regions with the support of the Hungarian Ministry of Foreign Affairs



and Trade. Besides supporting IDPs in Transcarpathia under ACT Appeals HIA is also supporting larger households (HHs), kindergartens and the elderly in Transcarpathia from its own funds.

HIA's office in Berehove, Ukraine, and its headquarters (HQ) in Budapest, Hungary, will be responsible for implementation of this response with the involvement of HIA's office in Zaporizhia. Activities are also coordinated on Kyiv level and HIA has been involved in the international coordination led by UN OCHA, in the relevant cluster meetings, with embassies and NGO Forum.

Responding to the emergency situation in Ukraine, Hungarian Interchurch Aid was among the first agencies (during the winter/spring period of 2014) that provided medical and psychosocial assistance to the affected population and later provided food and NFI assistance to IDPs in Ivano Frankivsk and Lviv with the support of the Hungarian Ministry of Foreign Affairs and Trade and private donors.

HIA-Hungary provided humanitarian assistance to St. Michael's Monastery in Kiev in February 2014 and also contacted the Lutheran Church in Kyiv. The first shipment contained medicines and medical kits to the monastery that was operating as a temporary hospital. HIA-Hungary provided further hospital equipment to other hospitals, caring for victims of the violence. Later on in May/June 2014 HIA Hungary provided psychosocial assistance in Hungary for a total of 47 doctors and nurses participating in the medical assistance for the injured in Kyiv during the crisis in February. The support was provided in cooperation with the Hungarian Ministry of Foreign Affairs and Trade.

In Ivano-Frankivsk, an IDP coordination center has been established on the basis of an earlier HIA capacity building process for Western Ukrainian stakeholders. The coordination mechanism includes the establishment of a coordination committee with state and non-state actors, regular meetings and establishment of IDP reception centers, registration of and contracting with the arriving IDPs. Besides assisting IDPs in Ivano-Frankivsk and Lviv with food parcels and NFIs, HIA provided assistance and counselling for local NGOs and state actors on cooperation mechanisms.

Besides the funds from the Hungarian Ministry of Foreign Affairs, Hungarian Interchurch Aid has initiated a fundraising campaign in Hungary for supporting the victims of the present crisis in Ukraine and is continuously in contact with local NGOs in order to coordinate further assistance.

All participating offices are fully equipped with necessary office infrastructure and personnel.

As a result, HIA has a long standing experience in Ukraine, build up a nationwide network with local partners and is well accepted in the Ukraine civil society and among government authorities.

RUSSIAN ORTHODOX CHURCH

To carry out this project ROC/DECR has the mandate, infrastructure, qualified staff and years of experience in emergency work in providing assistance regardless of nationality, religion and ideology in different regions of the country and abroad (including more than two decades of experience in implementing projects in the framework of the ACT Alliance²).

The Department for External Church Relations of the Moscow Patriarchate (DECR) of the Russian Orthodox Church is an ACT Alliance member, implementing emergency projects, using its qualified and experienced staff and infrastructure, supported by its dioceses, parishes and church organizations in various parts of the world.

² Including « ACT International », prior to 2010.





In the last years the Russian Orthodox Church has been actively restoring and developing its diaconal service, carried out by numerous parish based groups and NGOs, monasteries, brotherhoods and sisterhoods etc. An important area of its social involvement is assistance to people suffering in emergency situations.

Russia Round Table (RRT) is a special institution of DECR, dealing with emergencies on behalf of the ROC. RRT was established in 1992 and set among main goals: projecting and implementation of various social, diaconal, educational and emergency programs, including programs supported by interchurch partners of ROC.

Over the past years ROC/DECR/RRT has implemented different ACT Alliance emergency projects both, nationally and internationally as indicated in the list below:

- Relief aid and rehabilitation projects for flood-affected people in Moldova, Tajikistan and different parts of Russia,
- Emergency assistance to the survivors of wild fires in various regions of Russia,
- Support projects for IDPs in Chechnya and North Caucasus (Dagestan, Ingushetia, North Ossetia
 Alania, Stavropol Kray),
- Emergency food assistance project for needy children in different parts of Russia,
- Emergency aid projects for IDPs in Serbia,
- Emergency relief project for the Afghan refugees on the Tajik-Afghan border,
- Emergency and rehabilitation assistance to victims of the hostage crises in Beslan, Republic North Ossetia Alania, Russia,
- Emergency assistance to displaced persons and post-conflict relief and recovery in South Ossetia.
- Emergency and rehabilitation assistance for refugees from south-east Ukraine in Russia and Ukraine.

The Moscow Patriarchate/Russian Orthodox Church is the largest national canonical Church in Ukraine and Russia. The Ukrainian Orthodox Church of the Moscow Patriarchate – has autonomous status. In all regions of Russia, receiving refugees and in NGCA, there are dioceses, parishes, monasteries and developed infrastructures of the ROC/UOC (Moscow Patriarchate).

It should be specially noted that at present no international humanitarian organizations (with the exception of the ICRC) are working in the NGCA on a regular basis, due to access constraints. The strong ROC/UOC infrastructure that is traditional for the region, provides a practical platform to implement humanitarian and social initiatives to assist the affected civilians in the NGCA with direct access to beneficiaries and is independent in choosing recipients and organizing their work.

From the very beginning of the armed conflict in the south-east of Ukraine, ROC has been helping civilians both in the conflict zone and in the neighboring areas in Ukraine and Russia. For this, ROC used its own funds and assistance of inter-Christian Church partners. ROC/DECR operated within ACT Appeals UKR151, UKR152 and UKR161 in 2015-2017 to assist the most affected refugees and IDPs in Ukraine and Russia, providing hygiene kits and psychosocial support with financial support from Finn Church Aid (FCA), Wider Church Ministries, Evangelical Lutheran Church of America (ELCA), Diakonie Katastrophenhilfe (DKH) and Disciples of Christ.

According to ROC/DECR and local church structures assessments in Russia and Ukraine the places of highest concentration of the needlest war affected are:

refugees at the border areas of Rostov, Voronezh and Belgorod regions, as well as the nearby



Kursk and Stavropol regions of Russia,

NGCA areas in south-east of Ukraine.

These people in mentioned regions are currently in dire need of hygiene items and bedding as well as psychological assistance.

Church structures located in areas of the mass concentration of disadvantaged refugees/civilians, have appealed to the ROC/DECR requesting urgent assistance for the needlest.

In this project, ROC/DECR plans to focus on the distribution of hygiene products, bedding and psychosocial support. Prioritization of assistance and the composition of kits were discussed with the regional structures of the church providing assistance in targeted areas based on the most pressing needs of the beneficiaries.

The project will be implemented by ROC/DECR/RRT with participation and support of the church parishes and organizations in the project regions of Russia and NGCA. The ROC/DECR/RRT field offices in the project locations will also have ongoing support from ROC headquarters in Moscow and UOC headquarters in Kiev.

2.4. Activities of forum and external coordination

HUNGARIAN INTERCHURCH AID

Besides the main coordination forum in Kiev, several other locations are important for regional coordination where HIA is planning to implement proposed appeal activities. In Zaporizhie, Kherson, Donetsk, Luhansk, local level coordination with NGOs and relevant state authorities is ongoing.

The coordination between the two implementing member organizations is ensured. Since the beginning of the conflict, ROC and HIA have been occasionally coordinating both future plans and ongoing assistance. However and since January 2016, the two member organizations have started regular coordination in order to provide better planned and more effective assistance to the conflict affected population, refugees and IDPs.

RUSSIAN ORTHODOX CHURCH

There is no ACT forum either in Russia or in Ukraine. At the same time, a Church-wide coordinating center to assist refugees has been established in Russia. There are also regional coordinating church structures in Russia, Ukraine and NGCA. They support and coordinate efforts to assist refugees and IDPs, which is carried out in the Russian Orthodox Church widely from the first days of the crisis in southeastern Ukraine.

In the course of its work, ROC/DECR seeks to participate in all forms of coordination efforts to assist those in need. In particular, the work that was implemented inside and outside of ACT Appeals in Russia was coordinated with all the church structures, social institutions and local authorities, local NGOs and volunteer groups.

Most international organizations focus on providing assistance only on the territory of Ukraine. Only few of them provide episodic assistance to NGCA in the south-east of Ukraine or to refugees on the territory of Russia. Accordingly, there are currently no mechanisms for coordinating the efforts of INGOs in these territories.



Besides, ROC/DECR informs about the results of cooperation with ACT at various thematic church related, secular and international meetings and forums. Also relevant information is to be provided in the course of working contacts of ROC/DECR with INGOs and UN agencies as well as other international institutions in Moscow and more widely.

II. PROPOSED EMERGENCY RESPONSE

HUNGARIAN INTERCHURCH AID

1. Target populations, and areas and sectors of response

ACT	Sector of response	Geographic	Planned target population
member		area of response	
HIA	Food security (basic food distribution)	In 4 regions of Ukraine: Zaporizhia, Kherson, Donetsk, Luhansk	10,800 people
HIA	Water, sanitation & hygiene (hygiene kit distribution)	In 4 regions of Ukraine: Zaporizhia, Kherson, Donetsk, Luhansk	10,800 people
HIA	Water, sanitation & hygiene (baby hygiene kit distribution)	In 4 regions of Ukraine: Zaporizhia, Kherson, Donetsk, Luhansk	600 children less than 2 years old
HIA	Health/Psychosocial Support (psychosocial assistance)	In 1 region of Ukraine: Zaporizhia	100 women and seniors and 100 children
HIA	Shelter & NFI (heating material)	In 2 regions of Ukraine: Zaporizhia, Donetsk	300 HH (720 people)
Totals (in in	ndividuals):		12,320 people

Planned target population							
0-2 2-18 18-65 + 65 Totals							
M/F	M/F	М	F	М	F	M/F	
1377	4193	1703	3512	396	1139	12320	

Target population are both, IDPs and affected members of the host community3

Beneficiary selection will be carried out in close cooperation with local Ukrainian authorities and NGOs (as well as target population). HIA targets both IDPs and most vulnerable affected host communities in order to avoid tension. The following criteria will be applied:

³ Members of affected host community will only be included in the shelter component.







- Elderly people (+ 65),
- Large households (with large numbers of children 2 and more),
- Women/single headed households,
- Households with disadvantaged children,
- Households with no or low level of income,
- Households with pregnant and/or lactating women,
- Disabled people (1st, 2nd, 3rd group),
- Households with child(ren) less 2 years old (Baby hygienic packages),

Preference will be given to the households that have not received any assistance yet (especially in remote areas).

2. Overall goal of the emergency response

2.1 Overall goal

The overall goal is to contribute to alleviate the suffering of most vulnerable conflict affected people in Ukraine and in Russia.

2.2 Outcomes

1) Food Security:

IDPs have ensured access to essential food to meet nutrition needs for at least 0, 5 month.

2) Water, Sanitation and Hygiene:

IDPs personal hygiene significantly improved and diseases resulting from poor personal hygiene are mitigated.

3) Health/ Psychosocial support:

Vulnerable IDPs have access to psychological assistance that reduces mental health problems.

4) Shelter and Non-Food-Items:

People have heating material during the winter period.

3. Proposed implementation plan

3.1 Narrative summary of planned intervention

HIA's emergency response is based on continuous interaction with the beneficiaries. Members of target groups have been consulted on their preferred form of assistance and the content of the food, hygienic, baby hygienic and heating material packages. Culturally appropriate items and items that are familiar to the target group have been identified and selected for distribution. Information on the timing, location of distributions and content of packages will be disseminated among the target group in time.

Planned assistance and activities are based on information and experience gathered in the former UKR151, UKR152 ACT and UKR161 Appeals. Hence, HIA formulates the following four objectives (one objective per sector):



1) Food Security:

To ensure access to essential food to meet nutrition needs of IDPs and affected host communities for 1 month.

Planned content of the food packages: oil, flour, rice, pasta, sugar, canned meat, buckwheat, dry peas, tea, biscuits, and condensed milk. Food packages will be distributed per HHs (one package/households) and 2 times during the 12 months project period.

Final content of food kits could change according to actual local needs (consulted and coordinated with beneficiaries) and availability of products in Ukraine. The final cost of food kits might differ according to actual needs, prices, extreme variance in Ukraine Hryvnia (UAH) exchange rate and availability. Distribution of aid items will be thoroughly recorded on a day-to-day basis, such as the progress of the implementation.

2) Water, Sanitation and Hygiene:

To improve IDPs personal hygiene significantly and mitigate diseases resulting from poor personal hygiene.

Planned content of the hygienic kits: soap, shampoo, washing powder, toothbrush, toothpaste, disinfectant, toilet paper, dishwashing liquid. Sanitary napkins for women will be also included. Separate baby hygienic kits will be provided for households with children under 2 years old.

Hygiene kits will be distributed per HHs (one package/households) and 2 times during the 12 month

Hygiene kits will be distributed per HHs (one package/households) and 2 times during the 12 month project period.

3) Health/ Psychosocial support:

To provide psychological assistance to IDPs and affected host-community.

Trainings and counselling for pregnant and young mothers with new-born babies (under 1 year); children's club for IDP children and art therapy for traumatized elderly IDPs will be provided.

4) Shelter and Non-Food-Items:

To ensure that IDPs and people living in conflict zones receive heating material and are protected from extreme cold and harsh winters.

Distribution of heating material (wood/wood bricks fuel/coal) for 300 HH (720 people). Locally procured heating material will be distributed. The type of the heating material will be selected after close coordination with beneficiary households (HHs).

3.2 Log frame Hungarian Interchurch Aid (HIA)

Project structure	Indicators	Means of Verification (MoV)	Assumptions
Overall Goal: The overall goal is to contribute to alleviate the suffering of most vulnerable conflict affected people in Ukraine and in Russia.			
Outcome: 1) Food Security: IDPs have ensured access to essential food to meet nutrition needs for 1 month.	By the end of the project, at least 80% of beneficiaries state that food was sufficient and their nutritional needs adequately met for 1 month.	Baseline data, perception survey, human touch story, pictures, monitoring and evaluation reports Baseline data, perception	 Regional or national security and stability remains relatively stable. Socio-economic situation remains relatively stable Coordination structures remain in place. Availability and sufficient capacity of cooperating partners
2) Water Sanitation and Hygiene: IDPs personal hygiene significantly improved and diseases resulting from poor personal hygiene are mitigated.	By the end of the project at least 80% states that their personal hygiene significantly improved and hygiene related diseases reduced significantly.	survey, human touch story, pictures, monitoring and evaluation reports	 Pipeline uninterrupted Sufficient food and hygiene stocks, heating material available in local markets. Engagement of target population in project implementation.
3) Health/ Psychosocial support: Vulnerable IDPs have access to psychological assistance that reduces mental health problems.	By the end of the project, 90% of beneficiaries had access to adequate psychological assistance.	Baseline data, perception survey, human touch story, pictures, monitoring and evaluation reports	project implementation.

4) Shelter and Non-Food-Items: People have heating material during winter period to protect them from extreme weather conditions such as cold and harsh winters.	By the end of the project, all selected beneficiaries state that they feel well protected from weather, especially cold and harsh winter conditions.	Pictures, human touch story, perception surveys		
Key-Activities 1) Food Security Pre-assessment, coordination, final assessment, beneficiary selections, M&E	List of Key inputs Food packages (oil, flour, rice, past	a, sugar, canned meat, buckwheat,	dry peas, tea, biscuit, condensed milk)	
2) Water, Hygiene and Sanitation Pre-assessment, coordination, final assessment, beneficiary selections, distributions, M&E	Hygienic kits (soap, shampoo, washing powder, toothbrush, toothpaste, disinfectant, toilet paper, dishwashing liquid, sanitary napkins) Hygiene kits for babies (diapers, baby powder, baby cream, wet wipes, baby shampoo)			
3) Health/ Psychosocial Support Pre-assessment, coordination, final assessment, beneficiary selections, conducting psychosocial assistance sessions, M&E	During the psychosocial support HIA local partner's methodology (Santis Foundation) will be used such as trainings, Art Therapy and community events. Heating material (wood/wood bricks fuel/coal) Human and infrastructural capacity of implementing agency and partner organizations. Transportation, distribution points, field offices, locations of psychosocial services Local and international travels for M&E			
4) Shelter and Non-Food-Items: Pre-assessment, coordination, final assessment, beneficiary selections, procurement process, distributions, M&E.	Vehicles			



3.3 Implementation methodology

3.3.1 Implementation arrangements

HIA will be responsible for project management, coordination, monitoring and reporting. The implementation will be carried out in cooperation with HIA's partner NGOs in Ukraine, having well established infrastructure and long term operational experience in similar actions. HIA has concluded a Memorandum of Understanding with its partners, having local offices in the following regions:

- Overall programme coordination and implementation: HIA offices in Berehove and Zaporizhia and HIA HQ in Budapest.
- Zaporizhia, Donetsk, Luhansk, Kherson: Santis Foundation and League of Socially Responsible Women /HIA office in Berehove and Zaporizhia

3.3.2 Partnerships with target populations

The IDP communities and affected host community, being in permanent relationship with HIA and its partner organizations are involved in the preparation and implementation of the project. Information obtained from them and their suggestions were taken into account in the preparation of project proposals. HIA is maintaining regular contact with them in the course of the project implementation; their representatives will participate in the preparation of the final lists of recipients. Their opinion will also be important in the course of monitoring and evaluation.

3.3.3 Cross-cutting issues

Participation of women and elderly persons will be ensured in all stages of the project implementation. Women and children specific hygiene needs will be identified and addressed. Special attention will be paid to gender and age balance across all areas of the response. The ACT Alliance Child Safeguarding Policy will be a guiding document that informs the response implementation.

3.3.4 Coordination

HIA is coordinating its activities on different levels: HIA is participating in the international coordination mechanism headed by the UN, regularly participating in coordination meetings in Kyiv, and all the project locations included in current project. HIA is in contact also with the Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO), at the same time it is coordinating its efforts on regional and local level, as well with NGOs, INGOs and any ACT Alliance member(s) working in the same operational areas, and other donors in the region (embassies, UNOCHA, NGO Forum).

Selection of the project locations have been done in co-operation with the local authorities and NGOs in order to avoid any duplication.

3.3.5 Communications and visibility

During the communication of the projects, general public in Ukraine and Hungary, national, regional and local government, civil society, and UN organizations will be targeted. Local communities as key stakeholders will be also targeted. ACT Alliance communications and visibility guidelines will be followed and the visibility of the Alliance will be ensured. Activities will be presented by local and national Ukrainian media.

3.3.6 Advocacy

During the project implementation, HIA will advocate the importance to support IDPs and people living in conflict zones in Ukraine. Ukrainian and Hungarian local and national media channels will be used to raise the awareness of wider public in Ukraine and Hungary towards the situation of IDPs and people living in conflict zones of Ukraine. Besides advocating the appropriate emergency response and coordination, HIA will make efforts to raise the attention of the wider Ukrainian society and local governments to the problems, living conditions of IDPs and conflict affected people. One of the most



important aims of HIA's advocacy work in Ukraine is to enhance the cooperation among stakeholders from civil and governmental sector in the field of humanitarian work. HIA will continue its regular advocacy work in the education and other sectors HIA has been involved.

3.3.7 Sustainability and linkage to recovery – prioritization

The project offers short-term recovery that will, however, result in an extended security for the affected population. HIA will ensure that local communities are actively involved in the selection of beneficiaries, distribution of assistance and monitoring. Prioritization is made in close cooperation with local communities.

3.3.8 Accountability - complaints handling

HIA is committed to the humanitarian accountability principles, most prominently described in the CHS benchmarks. HIA will ensure that a safe and accessible complaints mechanism will be put in place.

The assistance will be implemented in cooperation with local Civil Society Organisations (CSOs) and in coordination with local governments. Such cooperation ensures that the target group has possibility for complaints that is handled on local level at the first stage and by HIA offices in Ukraine. Humanity, impartiality, independence, neutrality will be ensured during the project implementation.

The project will be implemented in conformity with the ACT rules and regulations, Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief, Sphere standards as well as the ACT Code of Conduct – Prevention of sexual exploitation and abuse, fraud and corruption and abuse of power.

3.4 Human resources and administration of funds

HIA has an established human resources development department with required human resources (HR) tools. Preference is given to the local human resources (local HIA staff and staff of local NGOs). Staff related to implementing the program will be based in the project sites while support will also be provided from HIA headquarters in Hungary. HIA's accounts comply with national laws. Regulations, accountability and transparency will be observed in all transactions and reporting.

During the project period, HIA is deploying 1-2 staff from headquarters (part time), 2 project coordinators and 1 driver.

Headquarter staff will travel to the region and will directly manage and monitor the implementation of the appeal. At HIA HQ, part time programme director, programme assistant and financial coordinator will ensure the smooth and professional implementation of the project.

Procurement of aid items will be done according to HIA's and ACT procurement guidelines. During the procurement process preference will be given to Ukrainian companies.

3.5 Planned implementation period

The proposed timeframe for the implementation is 12 months (01 June 2017 – 31 May 2018).

3.6 Monitoring, reporting and evaluation

HIA will be responsible for overall program implementation and management both in the region (with its emergency staff delegated there) and from the HQ. Financial progress is followed separately, also on weekly and monthly basis. The field staff and the HQ staff of the project are in permanent electronic contact for feedback and advising. Post distribution monitoring is ensured, monitoring report will be prepared during the project lifetime.

Monitoring will be coordinated by HIA Program Director. Reports will be prepared by the local partners that will form the basis of agreed regular reports prepared by HIA on agreed designated dates. Interim

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and final financial and narrative report, as well as audit will be prepared based on the guidelines set by ACT Alliance and will be in conformity with ACT policies. The project will be financially audited by an independent auditing company. During the implementation period Situation Reports will be prepared on bi-monthly basis. Monitoring missions and phone calls will be made in order to crosscheck the distributions.



RUSSIAN ORTHODOX CHURCH/DECR

1. Target populations, areas and sectors of response

ACT member	Sector of response	Geographic area of response	Planned target population
	Water, sanitation & hygiene (Iindividual hygiene/dignity unisex kits distribution)		2,700 people
	Water, sanitation & hygiene (Individual hygiene/dignity women kits distribution)	In 2 regions of NGCA (conflict zone in Eastern Ukraine): Donetsk, Luhansk;	390 people
Water, sanitation & hygiene (Individual hygiene/dignity children kits distribution)	(Individual hygiene/dignity	Upon selection out of 5	330 people
ROC/DECR	Shelter & NFI (Individual unisex bedding kits distribution)	regions of Russia (border and neighbouring regions with Ukraine): Rostov, Voronezh, Belgorod, Kursk, Stavropol	1,620 people
	Health/Psychosocial Support (Appointment to specialist/counselling)		1,700 people
	Health/Psychosocial Support (Training seminars)		8,150 people (150 – directly, 8,000 – indirectly)
	Health/Psychosocial Support (Support of psychosocial and palliative work of local social NGOs in the war zone in the NGCA)	In 2 regions of NGCA (conflict zone in Eastern Ukraine): Donetsk, Luhansk	6,308 people
Totals (in inc	lividuals):	•	21,198 people

Planned target population						
0-5 6-17 18-65 > 65 Totals						
M/F						
2,381	10,477	1,387	3,443	1,050	2,460	21,198

Beneficiaries regional division					
Water, sanitation & hygiene (Hygiene/dignity kits)	Shelter & NFI (Bedding kits)	Psychosocial Support:			
50% - Russia, 50% - NGCA	50% - Russia, 50% - NGCA	67% - NGCA (Ukraine), 33% - Russia (Appointment to specialist/counselling and Training seminars), 100% - NGCA (Support of psychosocial and palliative work of local social NGOs in the war zone in the NGCA)			

The following **selection criteria** will be applied:

- Large households with more than 2 children;
- Households with at least one disabled child;
- Single female headed households;



- Disabled people;
- Elderly people (> 65);
- HIV positive people;
- Households with no or a low level of income

The project will be implemented in in two NGCA regions (Donetsk and Luhansk regions) and in selected neighboring with Ukraine locations in Russia. ROC/DECR will conduct a detailed needs assessment prior to distribution activities, taking into account the time and the amount of received funding in order to update beneficiaries list and provide assistance in a tailored way to an individual level.

Preparation of the final beneficiaries and locations lists will be done together with stakeholders:

- target refugees and war affected communities in NGCA,
- local church social services,
- local authorities & social services (& relevant authorities from education and health sectors for psychosocial support).

In preparing the final list of project locations and beneficiaries the level of the needs of refugees and war affected civilians in NGCA, established at the time of the assessment, will be taken into account, as well as the assistance received from other sources.

ROC/DECR employs a participatory approach throughout the project cycle. ROC/DECR considers affected communities as partners in the preparation and implementation of the project. Information obtained from them and their suggestions were taken into account in the design of this appeal (i.e. kits composition and proposed design of the Psychosocial support). Project staff in co-operation with the local church and civil authorities will carry out the distributions. The information on the timing, locations of distributions/psychosocial support and content of kits/aid will be made available ahead of time to wide public. Beneficiaries will sign special relief receipt forms developed by ROC/DECR. To enhance transparency local civil and church authorities will be invited to observe distributions and verify distribution documentation.

2. Overall goal of the emergency response

2.1 Overall goal

The overall goal is to contribute to alleviation of suffering of most vulnerable war affected civilians in NGCA (Donetsk and Luhansk areas) and Ukrainian refugees in Russia.

2.2 Outcomes

1) Water, Sanitation and Hygiene:

Personal hygiene is maintained and diseases resulting from poor personal hygiene are prevented, for vulnerable refugees and war affected civilians, particularly women and children below 5 years of age.

2) Shelter & NFI

Vulnerable refugees and war affected civilians are secured with adequate household bedding.

3) Health/Psychosocial support:

Vulnerable refugees and war affected civilians particularly children have access to psychosocial assistance that reduces posttraumatic and mental health problems.



III. Proposed implementation plan

3.1 Narrative summary of planned intervention

The relief items to be purchased and distributed are generic hygiene and household items, customary and traditional for recipients. They are to be distributed in kit form, while special sanitary items for children and women will be distributed as separate items in an appropriate and sensitive way. The kits will have individual, rather than household format, because the size of the beneficiaries' households varies from 1 to 12 persons.

Taking into account the sharp fluctuations in the local currency and inflation as well as security situation in NGCA, ROC/DECR would like to reserve from the very beginning a certain flexibility, in particular in the composition and number of hygiene kits, the number of warm blankets and bedding.

All the kits distributions will be carried out within six months. Distributions of different kits and psychosocial assistance will be done simultaneously.

1) Water, Sanitation and Hygiene:

An individual unisex hygiene/dignity kit (total 2,700 kits) will be composed of the following items:

Shampoo 300 ml., antimitotic	2 pieces
Toilet paper	4 rolls
Bathing & laundry soap 90 gr.	6 pieces
Washing powder 450 gr.	2 pieces
Tooth brush	1 pieces.
Tooth paste 150 gr.	2 pieces.
Antibacterial cleaning gel 500 ml.	1 pieces
Antibacterial dishwashing detergent 1 L.	1 pieces
Bag for packaging the kit	1 pieces

In addition to the individual unisex hygiene/dignity kits above, the following items will be handed out:

- 390 individual hygiene/dignity kits for women/girls will include 3 packs of sanitary pads,
- 330 individual hygiene/dignity kits for children will include 2 big packs of diapers.

2) Shelter & NFI

Each beneficiary will receive one warm blanket and one set of bedding. Total amount: 1,620 unisex bedding kits.

3) Health/ Psychosocial Support

3.1) Psychosocial experts consultations. Urgent psychosocial support

It is planned to provide refugees with the assistance of professional psychologists (including speech therapists) with special emphasis on supporting women and children. Professionals with respective experience, familiar with local conditions will provide counselling in specialized counseling stations and through visits to affected populations. Both refugees and vulnerable host communities will be targeted to avoid tension between the two. The recommendations of these experts after project completion can be used by caregivers-parents/relatives, local social services and health authorities (speech-therapeutic care services for children) to further work. The project will pay for the work of the specialists, and for the supplies and equipment, required for their work. Premises for their work will be provided for free by



local church social services. Two full-time specialists (or more part-time specialists) will be hired in each of the project regions. They will be supported by Church volunteers with respective professional psychological/speech therapy qualification.

3.2) Training seminars for children psychosocial specialists. Capacity building for psychosocial assistance to children

Different trainings of various duration are planned. These are diversified according to the level of professionalism of the trainees, training subjects and the target groups to be reached. The training subjects will include e.g. identification of children's post-traumatic stress disorder and trauma levels, understanding how to address these needs and where to refer the beneficiaries, etc. The trainees will be able to share their experience of organizing work in the current situation of conflict, to discuss best practices, receive the necessary methodical literature, scientific and methodical contacts.

After trainings, all these trainees will continue their work in the region and will use the acquired knowledge in their daily work with children. This will allow children in need of assistance to obtain adequate professional psychosocial support on a long-term basis. It is important that the seminars will contribute to the capacity of the affected communities and sustainability of the work, supported by this ACT appeal. Target beneficiaries will have access to upgraded professional psychosocial assistance also after the project terminates.

Seminars will be organized for those professionals who are engaged in work with children:

- for professionals (from the education and health sectors),
- volunteers with respective professional qualification (from secular NGOs and FBOs).

Each seminar will be attended by about 25 persons. The trainers will be specialists with the necessary experience and qualifications. The seminar duration will be 3 to 7 days. The rooms for the seminars will be provided for free by local church social services.

The preliminary topics of the seminars were identified in early 2017 on the basis of applications from local church experts, schools, hospitals, as well as practicing secular doctors and teachers. They are available in the ROC/DECR/RRT office.

3.3) Support of psychosocial and palliative work of local social NGOs in the NGCA

The response aims to strengthen the local communities for their involvement in emergency psychosocial response. It will also support the development of local NGOs specializing in psychosocial assistance and care in NGCA. This will ensure long-term access to the psychosocial assistance and palliative care for vulnerable children, women, elderly and disabled in the conflict area.

Within this project it is planned to support the work of four NGOs in the NGCA. They have been working in the social and charitable sphere for many years. Currently, they are actively assisting the most disadvantaged war affected and vulnerable civilians (primarily children). They all have experience, necessary qualifications, contacts, specialists and volunteers and have the support of local church social services. It is important that support for the work of these NGOs will contribute to the capacity of the affected communities and sustainability of the work, supported by ROC/DECR project: target beneficiaries will have access to upgraded professional psychosocial assistance also after the project closure.

Prior to the start of funding, a contract will be signed with each organization with a detailed work plan, implementation mechanisms and detailed budget. The budget will take into account the time of the arrival of funds and their amount. Progress reports will be regularly presented to ROC/DECR, to local



education and health authorities, social services and public. Project staff will regularly monitor the project work.

ROC/DECR relations will work with the following NGOs to achieve this area of work:

1. NGO "Alchevsk spiritual clinic", Alchevsk (Luhansk region), whose goal is "comprehensive assistance to disabled children and youth with mental disability".

With the support of the project, the clinic will expand its work and will provide assistance to children that became mentally ill or disabled during the armed conflict. New patients of 3 to 15 years, up to 480 persons a year, will receive individual comprehensive developmental assistance with the required time interval, regulated by medical recommendations. After some children complete the rehabilitation course, others will be taken in their place.

2. Sisterhood of St Olga Monastery, Luhansk

The NGO works in the following areas:

- Palliative care and psychosocial assistance for bedridden patients,
- Home care for cancer patients,
- Psychosocial help and palliative care for children,
- Organization of medical, rehabilitation, psychological and pedagogical assistance to children, suffering from pre-existing and new mental health conditions.

The project will support the psychosocial assistance and palliative care that specialists of this NGO will provide to people affected by the war. Total number of beneficiaries per year: 430 persons.

3. Family center "Otrada", Donetsk

<u>The goal of Otrada is "Establishing a system of family support in all life situations, including in crisis; protection of family, mother and child".</u> It works with expecting mothers, preschool children, families, medical personnel, counselors, teachers, psychologists, social workers among others.

This ACT Alliance appeal will support the psychosocial and palliative assistance that specialists of this NGO will provide to people affected by the war. Total number of beneficiaries per year: 2.390 persons.

4.Center for Emergency Social Assistance to People in Crisis, Donetsk

The goal of this NGO is "Emergency assistance and rehabilitation for people in crisis caused by the war". It provides the following assistance: humanitarian, social rehabilitation, medical, psychological, pastoral. Recipients: the most needy victims of war: children, homeless people because of loss of housing through bombing and shelling, refugees, lonely old people, people with disabilities, HIV-positive, single mothers, large families.

This appeal will support the psychosocial and palliative assistance that specialists of this NGO will provide to people affected by the war. Total number of beneficiaries per year: 3.008 persons.

3.2 Log frame – RUSSIAN ORTHODOX CHURCH / DECR

Indicators	Means of Verification (MoV)	Assumptions		
		 Funds from ACT Alliance 		
By the end of project at least 95% of beneficiaries stated that they were able to maintain their personal hygiene	Satisfactory and perception survey at household level	 will be provided and timely arrive, War crisis will not drastically escalate, Accessibility of the areas of mass concentration of target beneficiaries is manageable, Security situation in NGCA 		
By the end of project at least 95% of beneficiaries stated that they were secured with adequate household bedding		 does not prevent the project implementation, Communities provide full support, Local government bodies 		
By the end of the project at least 80% of targeted people have access to psychosocial assistance that reduces posttraumatic and mental health problems	_	provide the required support, Local and central Church structures will support the operation, Proper monitoring and		
# of beneficiaries	Distribution lists nieturos	regular follow up mechanism will be in place and implemented.		
	By the end of project at least 95% of beneficiaries stated that they were able to maintain their personal hygiene By the end of project at least 95% of beneficiaries stated that they were secured with adequate household bedding By the end of the project at least 80% of targeted people have access to psychosocial assistance that reduces posttraumatic and mental health problems	By the end of project at least 95% of beneficiaries stated that they were able to maintain their personal hygiene Satisfactory and perception survey at household level By the end of project at least 95% of beneficiaries stated that they were secured with adequate household bedding By the end of the project at least 80% of targeted people have access to psychosocial assistance that reduces posttraumatic and mental health problems # of beneficiaries (MoV) Attendance list, Progress report from psychosocial specialists, monitoring and evaluation reports		

1.2. 390 women hygiene/dignity kits distributed, 1.3. 330 baby hygiene/dignity kits distributed,	# of women hygiene/dignity kits distributed # of baby hygiene/dignity kits distributed	progress and monitoring reports, Final Report	
2.1. 1,620 unisex bedding kits distributed,	# of unisex bedding kits distributed	·	
 3.1 Provision of urgent psychosocial support to 1,700 target beneficiaries: women, men and children, 3.2. Professional development and capacity upgrade of 150 local specialists in children psychology, 	# of men, women and children received urgent psychosocial support, # trainees	Anonymous records Satisfaction and perception survey, lists of participants, pictures, anonymous records	
 3.3. Long-term improvement of quality of psychological assistance, received by 8,000 children, with whom specialists – trainings participants - work, 3.4. Regular professional psychological help and 	# children that received a better psychosocial support of local specialists, # of men, women and children received	Progress report from psychosocial specialists, anonymous records, satisfaction and perception survey, pictures	
palliative care for 6,308 clients of local social NGOs in NGCA	psychosocial support and palliative care of local social NGOs		
 Activities Hiring of project staff, Establishing work of the offices, Orientation & capacity building sessions with project staff and volunteers, Orientation meetings with church institutions, local authorities and communities, Assessment, collection of data, validation and finalization of beneficiary list, 	List of Key inputs Human resources, Agreed criteria of providers selection, Agreements with providers and psychosocial Logistical process of deliveries in place, PME system defined, Agreements with communities and authoritie Agreements with relevant authorities from edin NGCA	es,	



 Setting up of warehouse for relief items, 	
 Preparation of distribution plan with target 	
communities and authorities,	
 Procurement of items, 	
 Delivery and distribution of items, 	
 Organising psychosocial support. 	
 Consolidation of distribution data, 	
 Finalization of reports, 	
Audit	



3.3 Implementation methodology: RUSSIAN ORTHODOX CHURCH / DECR

3.3.1. Implementation arrangements

ROC/DECR will implement this emergency project, using its qualified and experienced staff and infrastructure, supported by its dioceses, parishes and church organizations in the project areas (Russia and NGCA).

ROC/DECR will be responsible for overall project implementation, management, coordination, monitoring and reporting.

3.3.2. Partnerships with target populations

The refugees and IDPs are ROC/DECR partners in the preparation and implementation of the project. Information obtained from them and their suggestions were taken into account in the preparation of project proposals. ROC/DECR will maintain regular contact with them in the course of the project implementation; their representatives will participate in the preparation of the final lists of recipients. Their opinion will also be important in the course of monitoring and evaluation. Also, wherever possible, they will be involved as volunteers or employees of the project. Ownership of the project results will be automatically transferred to the local communities and to assisted beneficiaries.

3.3.3. Cross-cutting issues. Principles and standards

The project will be implemented in conformity with the ACT rules and regulations, Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief, Sphere standards, Core Humanitarian Standards, as well as the ACT Code of Conduct – Prevention of sexual exploitation and abuse, fraud and corruption and abuse of power.

Participation of women will be ensured in all stages of the project implementation. Women and children specific hygiene/dignity and psychosocial needs will be identified and addressed.

3.3.4. Coordination

To avoid any duplication the project implementation will be coordinated with other organizations and NGOs providing aid to the refugees in Russia and war affected civilians in NGCA and with local authorities and social protection institutions, as well as all the church structures involved.

3.3.5. Communications and visibility

Communities, local authorities, press and public will be informed in advance about the time and place of the distributions. ROC/DECR will hold meetings with beneficiaries to inform them about the plans and tasks of project. In addition, special information sheets and ACT logo will be posted at distribution points to keep the public informed about the response and the aims of the distributions and components. Project staff will provide photographs while ROC/DECR representatives will be responsible for reports, articles, stories and public relations in addition to their other duties.

3.3.6. Advocacy

The main purpose of the project is to facilitate survival and improve the health, hygiene and bedding situation of the refugees and war affected civilians. At the same time, the high authority of the Russian Orthodox Church with the local authorities and the public allows to assist displaced and war affected persons advocating for their rights, obtaining documents, including papers required for refugee status, accommodation, jobs or benefits. For example, in the Rostov and Belgorod regions advocacy efforts of the local clergy allowed providing the necessary treatment to several refugees suffering from HIV/AIDS. ROC/DECR will fully support this work throughout the project implementation.



3.3.7. Sustainability and linkage to recovery – prioritization

The emergency improvement of the health, hygiene and bedding situation of the refugees and war affected civilians will not only contribute to solving relevant problems, but will be a visible and important sign of solidarity with the affected population. In the course of project implementation and evaluation, ROC/DECR will pay attention to the preparation of the next steps in the recovery and rehabilitation.

The local church partners and communities will assist ROC/DECR and participate in the project implementation. This will allow strengthening the support network of the local diaconal and emergency initiative of parishes to respond to emergencies through capacity building.

3.3.8. Accountability – complaints handling

During the project implementation, ROC/DECR will work with all stakeholders, including communities of refugees and war affected civilians. All possible suggestions and complaints will be carefully captured, listened to and discussed by project staff with all stakeholders, as well as in the monitoring and evaluation by ROC headquarters (HQ). Besides, complaints may be submitted to regional church structures and to the RRT and ROC HQs. Their contacts are in the information documents of the project available to the authorities, beneficiaries and all interested persons. All complaints will be considered. Constructive and friendly decisions will be taken on them.

3.4. Human resources and administration of funds

3.4.1 Distribution and Accounting

ROC/DECR will distribute aid items in places of the highest concentration of the needy target beneficiaries. Project staff in co-operation with the local civil and church authorities will carry out the distributions. Beneficiaries will sign special relief reception forms developed by ROC. To enhance transparency, local civil and church authorities will be invited to observe distributions and verify distribution documentation.

ROC HQ office in Moscow will coordinate the work. Field offices will be opened in Donetsk city (NGCA) and in one of the neighboring with Ukraine regions of Russia. Office space will be provided free by local parishes of the Church. Rooms for staff accommodation will be rented.

3.4.2 ROC/DECR staff:

- The ROC/DECR emergency expert will direct the project. He will be responsible for providing a short training for all the staff (people hired and volunteers),
- The ROC/RRT accountant will be responsible for the finance issues, accounting and preparing the documentation for the financial reporting and audit,
- The ROC/DECR translator/assistant will be responsible for translation and coordination.

The following persons will be hired:

- 2 logisticians, and 2 transport monitors (1 logistician and 1 transport monitors per project region

 Russia and NGCA), who will be in charge of the technical aspect of the work. In particular, they will: assess the situation, organize the purchasing, including looking for providers and making of the tenders, organize the transport, the work of the volunteers, help to compose the relief packages and organize their distribution. They will also cooperate with the local authorities,
- 2 drivers (1 per project region), driver and car for the travels to the project areas,
- 1 regional coordinator in NGCA. He will coordinate the entire work of the project in the NGCA with particular attention to monitoring of psychosocial support. He will also cooperate with the local authorities & relevant authorities from education and health sectors.



The ROC/UOC volunteers, parishes and church structures will support project implementation. Preference will be given to the local human resources. All the staff and volunteers will participate in a short training which will include data collection, logistics, organizing the implementation, purchase, distribution, as well as ACT policies, standards and principles, rights based approach and gender issues.

ROC accounts comply with national laws and regulations. Accountability and transparency is observed in all transactions and reporting.

3.5. Planned implementation period

The proposed timeframe for the implementation is 12 months (01 June, 2017 – 31 May, 2018).

3.6. Monitoring, reporting and evaluation

ROC/DECR will carry out monitoring of the project. An expert from ROC/DECR will be present in the project areas and direct the project. The field staff and the HQ staff of the project are in permanent phone and electronic contact for feed-back and advice.

The ROC/DECR Moscow headquarters will be responsible for reporting to the ACT secretariat. After completion of the project the reports (narrative and financial) will be prepared and sent to the ACT Secretariat within two months of closure of the appeal. The financial report will be audited (internal ROC/DECR and independent audits) and will be presented to ACT Secretariat within three months following the end of the project. An independent auditor licensed by the Russian Federation Finance Ministry, member of the Russian Auditors Union, will audit accounts and financial reports.



IV. THE TOTAL ACT RESPONSE TO THE EMERGENCY

HUNGARIAN INTERCHURCH AID

Besides implementing UKR151, UKR152 and UKR 161 Appeals (to support IDPs in several locations), HIA provided tangible assistance with its own resources for more than 52,920 IDPs (in four sectors: food security, water sanitation & hygiene, shelter & NFI, health/psychosocial assistance) in 10 regions (oblasts): Transcarpathia, Ivano-Frankivsk, Lviv, Kherson, Kyiv, Dnipropetrovsk, Donetsk, Luhansk, Kharkiv, Zaporizhia.

RUSSIAN ORTHODOX CHURCH/ DECR

In 2015-2017, ROC/DECR operated within ACT Appeals UKR151, UKR152, UKR161 to assist the most affected refugees and IDPs in Ukraine and Russia in the sectors of hygiene and psychosocial assistance.

Besides, in 2015-2016, with the support of Samaritan's Purse and the Billy Graham Evangelistic Association, ROC/ DECR reached 68,420 vulnerable refugees from the south-east of Ukraine in Rostov and Belgorod regions of Russia with the distribution of:

- 30,000 individual hygiene kits,
- 4,000 individual children hygiene kits,
- 14,420 individual bedding kits,
- 10,000 individual food kits,
- 10,000 individual children school kits (gifts).

V. APPENDICES TO THE APPEAL DOCUMENT

Budget for each requesting member

HUNGARIAN INTERCHURCH AID (HIA)

EXPENDITURE							
	Type of	No. of	Unit Cost	Appeal Budget	Unit Cost	Appeal Budget	Appeal Budget
	Unit	Unit s	UAH	UAH	HUF	HUF	USD
DIRECT COST (LIST EXPENDITURE BY SECTOR)							
Food security							
Food packages (oil, flour, rice, pasta, sugar, canned meat, buckwheat, dry peas, tea, biscuit, condensed milk) Water, sanitation & hygiene	kit	9'000	285	2'565'000			98'013
Hygienic kits (soap, shampoo, washing powder, toothbrush, toothpaste, disinfectant, toilet paper, dishwashing liquid, sanitary napkins)	kit	9'000	180	1'620'000			61'903
Hygiene kits for babies (diapers, baby powder, baby cream, wet wipes, baby shampoo) Health/Psychosocial Support	kit	600	750	450'000			17'195



month	5	68'000	340'000			12'992				
НН	300	1'700	510'000			19'488				
Other Sector Related Direct Costs (List expenditure by sector)										
month	12	13'000	156'000			5'961				
sector	4	17'000	68'000			2'598				
month	12	10'500	126'000			4'815				
month	12	2'500	30'000			1'146				
month	12			50'000	600'000	2'151				
month	12	8'500	102'000			3'898				
month	12	6'000	72'000			2'751				
			6'039'000		600'000	232'911				
month	12 12	14'000 17'000	168'000 204'000			6'420 7'795				
IG & HAND	LING		372'000			14'215				
			6'411'000		600'000	247'126				
INISTRATIO	ON &									
month	12			175'000	2'100'000	7'527				
month	12			150'000	1'800'000	6'452				
month	12			180'000	2'160'000	7'742				
day	90			20'000	1'800'000	6'452				
month	12	3'000	36'000			1'376				
	month sector month month month month month month month month month month day	HH 300 List expenditure by sector 4 month 12 MG & HANDLING INISTRATION & month 12 month 12 month 12 day 90	HH 300 1'700 List expenditure by sector) month 12 13'000 sector 4 17'000 month 12 10'500 month 12 8'500 month 12 8'500 month 12 6'000 month 12 17'000 MG & HANDLING INISTRATION & month 12	HH 300 1'700 510'000 List expenditure by sector) month 12 13'000 156'000 sector 4 17'000 68'000 month 12 10'500 126'000 month 12 2'500 30'000 month 12 8'500 102'000 month 12 6'000 72'000 month 12 14'000 168'000 month 12 17'000 204'000 MG & HANDLING 372'000 INISTRATION & month 12	HH 300 1'700 510'000 List expenditure by sector) month 12 13'000 156'000 sector 4 17'000 68'000 month 12 10'500 126'000 month 12 2'500 30'000 month 12 8'500 102'000 month 12 6'000 72'000 month 12 14'000 168'000 month 12 17'000 204'000 MG & HANDLING 372'000 INISTRATION & month 12 175'000 month 12 180'000 day 90 20'000	HH 300 1'700 510'000 List expenditure by sector) month 12 13'000 156'000 sector 4 17'000 68'000 month 12 10'500 126'000 month 12 2'500 30'000 month 12 8'500 102'000 month 12 8'500 72'000 month 12 14'000 168'000 month 12 17'000 204'000 MG & HANDLING 372'000 INISTRATION & month 12 175'000 2'100'000 month 12 150'000 1'800'000 INISTRATION & month 12 150'000 1'800'000 INISTRATION & month 12 150'000 1'800'000 and 12 150'000 1'800'000 month 12 150'000 1'800'000 month 12 180'000 2'160'000				



Running, repair and operational costs							
of HIA car	month	12			140'000	1'680'000	6'022
Communications							
Field office communication	month	12	2'500	30'000			1'146
Other				00000			
<u> </u>							
Bank fees	month	12	0		23'000	276'000	989
TOTAL INDIRECT COST: PERSONN	EL, ADMIN	. &					
SUPPORT				90'000		9'816'000	38'622
AUDIT, MONITORING & EVALUATION							
Audit of ACT appeal	Estimate					950'000	3'405
Monitoring & Evaluation	Estimate					500'000	1'792
TOTAL AUDIT, MONITORING & EVA	LUATION			0		1'450'000	5'197
TOTAL EXPENDITURE exclusive Int	ernational	Coordina	tion Fee	6'501'000		11'866'000	290'945
INTERNATIONAL COORDINATION							
FEE (ICF) - 3%				195'030			8'728
TOTAL EXPENDITURE inclusive Inte	ernational (Coordinat	ion Fee	6'696'030		11'866'000	299'673
DALANCE RECUESTED (minus							
BALANCE REQUESTED (minus available income)				6'696'030		11'866'000	299'673
available income)				0 090 030		11 000 000	299 013
EXCHANGE RATE: local currency to							
1 USD							
UAH rate	26.17	7					
HUF rate	279.00)					



RUSSIAN ORTHODOX CHURCH / DEPT. FOR EXTERNAL CHURCH RELATIONS (ROC/DECR)

EXP	ENDITURE	Type of Unit	No. of Units	Unit Cost RUB	Appeal Budget RUB	Appeal Budget USD
DIRE	CT COSTS					
1. 1.1	Water, Sanitation & Hygiene Hygiene/dignity individual unisex kits (2,700 kits)					
	Shampoo 300 ml., antimycotic	piece	5'400	79	428'328	7'449
	Toilet paper - 4 rolls	pack	2'700	85	228'852	3'980
	Bathing & laundry soap 90 gr.	piece	16'200	18	283'662	4'933
	Washing powder 450 gr.	piece	5'400	78	423'468	7'365
	Tooth brush	piece	2'700	59	159'246	2'769
	Tooth paste 150 gr.	piece	5'400	89	480'222	8'352
	Antibacterial cleaning gel 500 ml.	piece	2'700	78	209'466	3'643
	Antibacterial dishwashing detergent 1 I.	piece	2'700	113	305'694	5'316
1.2.	Bag for packaging the kit Hygiene/dignity individual women kits (390 kits)	piece	2'700	20	53'325	927
1.3.	Sanitary pads Hygiene/dignity individual children kits (330 kits)	pack	1'170	60	69'884	1'215
2.	Diapers Total Hygiene Shelter & Non-food items. Individual unisex bedding kits (1,620 kits)	pack	660	1'205	795'300 3'437'447	13'831 59'782
2.1.	Warm blankets	piece	1'620	1'196	1'937'520	33'696
2.2. 3.	Bed linen Total bedding Psychosocial Support	piece	1'620	972	1'574'640 3'512'160	27'385 61'081
	Psychosocial experts/psychologists	41	40	4051000		401000
3.1. 3.1.	fees & materials Training seminars Support of psychosocial work of local social NGOs in the conflict zone in	month seminar	12 6	195'000 298'500	2'340'000 1'791'000	40'696 31'148
3.3.	NGCA Total Psychosocial	organisati on	4	430'000	1'720'000 5'851'000	29'913 101'757
TOTA	AL DIRECT ASSISTANCE				12'800'607	222'619
	ER SECTOR RELATED DIRECT					



4.	Salaries & benefits for direct staff (Local hired staff)					
4.1.	Regional coordinator in NGCA (Donetsk & Luhansk) - part time 20%	month	12	100'000	240'000	4'174
4.2.	Transport monitors - 2 persons (one person per project region)	month	6	38'000	228'000	3'965
4.3.	Driver with a car - 2 persons (one person per project region)	month	6	56'000	336'000	5'843
	Fuel and travel costs of local staff (2 project regions) AL OTHER SECTOR RELATED	month	12	16'800	201'600	3'506
DIRE	CT COSTS				1'005'600	17'489
	NSPORT, WAREHOUSING & DLING					
5.	<u>Transportation of relief materials to</u> project locations					
5.1.	Transportation of relief materials to project locations - 2 project regions Warehousing	month	6	32'000	192'000	3'339
	Rental of warehouse	will be provide ROC/UOC`s			0	0
6.	Wages for Security/ Guards <u>Handling</u>	for free	Dansnes		0	0
6.1.	Logisticians - 2 persons (one person per project region) AL TRANSPORT, WAREHOUSING & HA	month	6	49'000	294'000 486'000	5'113 8'452
	TAL ASSETS	ANDLING			400 000	0 432
7.1.	Travel Notebook and utilities		1	82'000	82'000	1'426.09
7.2.	Travel Mob tel		1	27'000	27'000	469.57
TOTA	AL CAPITAL ASSETS				109'000	1'896
	TOTAL DIRECT COST				14'401'207	250'456
	RECT COSTS: PERSONNEL, INISTRATION & SUPPORT					
	Staff salaries					
	Programme director, part time 25%	month	12	100'000	300'000	5'217
	Accountant, part time 20%	month month	12 12	100'000 90'000	240'000 108'000	4'174 1'878
	Translator/assistant, part time 10% Staff travel	month	12	15'600	187'200	3'256
	Office Operations Office rent (2 field offices)	monu	.2	10 000	0	0
	Accommodation of ROC/DECR/RRT					
	HQ Representatives (2 field regions)	month	12	27'500	330'000	5'739
	Office Utilities (2 field offices)	month	12	4'400 14'300	52'800	918
	Office stationery (2 field offices) <u>Communications</u> Telephone, fax, internet, mail etc (2	month	12	14'300	171'600	2'984
1	field offices)	month	12	17'800	213'600	3'715



<u>Other</u>			
	Lump		
Bank fees	sum	16'100	280
TOTAL INDIRECT COST:	CORT	410401000	001400
PERSONNEL, ADMIN. & SUPP	ORI	1'619'300	28'162
AUDIT, MONITORING & EVALUATIO	N		
Audit of ACT appeal	Estimate	60'000	1'043
TOTAL AUDIT, MONITORING &			
EVALUATION		60'000	1'043
TOTAL EXPENDITURE exclusive Int	ernational		
Coordination Fees		16'080'507	279'661
	(10-1)(10-1)		
INTERNATIONAL COORDINATION F	EE (ICF) - 3%	482'415	01000
		462415	8'390
TOTAL EXPENDITURE inclusive Int	ornational		
Coordination Fee	emational	16'562'922	288'051
		10 002 022	200 001
BALANCE REQUESTED (minus avai	lable		
income)		16'562'922	288'051
,			
EXCHANGE RATE: local currency (F	Rub) to		
Budget rate	57.50		