Challenges for civilians crossing the ‘contact line’

Since the Government put in place a ‘pass system’ for people to cross the frontline on 21 January 2015, humanitarian partners continue to advocate for a simplification of the procedures for people to cross the ‘contact line’, in an attempt to minimise undue hardships for civilians. Once the documentation is obtained, people then have to wait many hours without protection from the elements in order to cross the ‘contact line’.

In November 2015, official statistics indicate that some 550,000 people crossed the ‘contact line’ through five operational official checkpoints. The number of crossings in December has increased by 28 per cent to nearly 700,000 people. While the Government has made some improvements, including setting up an electronic system to obtain the passes in September 2015, increased a number of staff and expanded some of the crossing points, the situation remains of serious concern. The residents of the so-called ‘grey areas’, including those living in the ‘no man’s land’ or close to the ‘contact line’ in Government controlled areas (GCAs), are also subject to the same restrictions.

On 22-24 December, an inter-agency team led by OCHA, with the participation of UNHCR, OHCHR, WHO, UNICEF and Danish Demining Group (DDG), visited “Hnutove”, “Mariinka”, “Novotroitske” and “Zaytseve” checkpoints (see map) in Donetska oblast and confirmed that the majority of people crossing the ‘contact line’ into GCAs are elderly, many with restricted mobility, single women, families with children and a few single men. People have to stand in long queues for many hours in the cold, with no access to services, in areas contaminated with landmines and often insecure. Most of them travel to GCAs in order to receive their social payments, pensions, access their savings, buy food and other goods which are much more expensive and of poorer quality in non-government controlled areas (NGCAs). Some people have to spend the night in order to cross the ‘contact line’. Facilities are very limited at all the checkpoints assessed, and this makes people’s crossing experience in the harsh winter months almost unbearable. In June 2015, the Government issued an order prohibiting movement of commercial goods and public transport across the ‘contact line’. As a consequence, many people are forced to walk long distances to go through the checkpoints.

Even though there are heating points at all crossing points in GCAs, some of them are too far from the actual checkpoints and have limited capacity, usually no more than five beds (with a possibility to expand though), with only basic facilities. Some of them have no lavatories, and those that have them are not suited for people with disabilities or are situated far from the heating or crossing point. No heating points are present in ‘no man’s land’ where the majority of the people are queuing.

According to the assessment, medical services are limited and too far to be reached on foot, making it impossible to get urgent medical assistance at or near checkpoints, with the exception of Zaytseve-Mayorsk where the NGO Médecins Sans Frontières (MSF) is operating. The State Border Guard Service reported on 17 December, that one elderly woman died, waiting for her turn to cross the checkpoint “Hnutove.” The ambulance came only sometime after the death, which the doctor on the scene said was caused by physical and emotional exhaustion. Limited access to medical services and drugs, common in areas beyond government control, coupled with undue difficulties in crossing the frontline,
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exacerbates the risks for elderly, people with chronic diseases and the many vulnerable waiting in lines for hours.

As the checkpoints are located in insecure areas, the Government has set up some bomb shelters. However, these are insufficient to cater for the average number of civilians passing through on a daily basis. Mine contamination is another challenge as existing warning signs are not in accordance with International Mine Action Standards (IMAS), and those located in the fields are not visible from the road or are too far apart.

The inter-agency mission recommendations include the immediate increase of the number of crossing points, especially in Luhanska oblast, a significant simplification of procedures to obtain the passes and to go through checkpoints, increase of staffing at checkpoints to minimize the queues. Opening hours of checkpoints should also be increased as should the public awareness on functioning of checkpoints and complaint mechanisms. Clear responsibility for security of civilians at check points would go a long way to address some protection concerns as the trenches do not offer enough protection to civilians in case of shelling, and the available bunkers are insufficient. Restrictions of the weight and amount of goods transported should be waived, and commercial and public transport traffic restored. No requirements should be put in place for civilians residing in grey areas. Local authorities should ensure the provision of water, basic medical and sanitary services at checkpoints. To handle mine risks, MRE, demarcation and removal of mines are needed urgently not only near the logistics centres and the checkpoints, but also along the way where people wait in lines and often step out of the tarmac for sanitary purposes. Guarantees for full and unimpeded access for humanitarian organisations through the checkpoint into no-man’s land, including, in case of shelling or insecurity, to ensure some basic services to people queuing, are also warranted.
Advocacy for access continues

Impediments imposed by the *de facto* authorities in Donetsk and Luhansk severely curtailed the ability for organisations to operate in areas beyond Government control since July 2015. The ICRC and the UN are the only ones officially authorised to operate in Luhansk while ICRC and the NGO PIN can officially work in Donetsk. Other partners are exploring all available alternatives to ensure that civilians can access humanitarian aid, something which is particularly crucial as the winter has set in with temperatures well below zero degrees Celsius.

Meanwhile, despite some positive steps, government-imposed bureaucratic impediments continue to affect the ability of the humanitarian community to operate, including the recent decision to de-register local NGOs that operate in NGCAs. These unnecessary barriers are likely to stall humanitarian work of some national organisations, creating additional challenges to the delivery of much needed help to people in the conflict zone.

Advocacy to guarantee free and unimpeded access for all humanitarian organisations and to minimize bureaucratic impediments continues at international and local levels. Together with the urgency to address the plight of the many victims of this conflict, a call for unfettered access for humanitarian partners has been the message of the Emergency Relief Coordinator, Stephen O’Brien, during his mission in Ukraine on 2-4 November. The same message has been further echoed on several occasions, including at the highest level of the Minsk negotiations and during the visit of the OCHA Director of Operations, John Ging, on 9-11 December. In eastern Ukraine, John Ging met with *de facto* authorities in Luhansk and discussed the need for increased access to deliver humanitarian assistance and protection to civilians. Issues around the need to facilitate freedom of movement and access to basic services, and water in particular, were discussed with the Government.

2,500 MT of UN aid dispatched to NGCAs in November-December

Despite the existing difficulties, in November-December, the UN distributed around 2,500 MT of humanitarian aid to NGCAs of Luhansk (2,200 MT) and Donetsk, sufficient to provide over 100,000 people with food and vouchers, and many others with heating fuel, shelter materials and medicines.

Since the beginning of 2015, the general amount of humanitarian assistance received by vulnerable population in the conflict area reached approximately 3,100 MT, with more than 2,655 MT of relief items remaining in the pipeline for urgent delivery in the winter season.

People in NGCAs spend 80% of income on food

A recently released WFP food security assessment confirmed that the financial situation of the majority of population in NGCAs and IDPs in GCAs remains difficult. Some 29.5 per cent of households in NGCAs do not have enough money for basic needs, 50.5 per cent have barely enough to buy food, and only 19 per cent have enough to eat but have depleted their savings. Food accounts for the main share of household expenditure (52 per cent in GCA and 80 per cent in NGCA) and is one of the highest in the world.

Graph 1. Cost of Food Basket by Oblast and Area of Control (Source: WFP)
Food prices remain around 22 per cent higher in NGCAs compared to national levels due to severe restrictions to market access in NGCAs (See Graph 1). This situation could be further aggravated due to additional financial pressure specific for the winter season such as heating, renting and other utilities.

‘Contact line’ farming communities at risk

A FAO needs assessment of 660,000 people living along the ‘contact line’ indicates that the rural farming population is vulnerable as their income has reduced significantly. The study indicates an immediate need for seeds, tools, fertilisers and animal feed to help these households generate income and meet their food requirements.

Landmines have rendered the local pastures inaccessible and fodder collection dangerous. Limited access to markets and goods resulted in livestock de-stocking, declining livelihoods and diminishing resilience among the farming communities, particularly in NGCAs.

In 2015, FAO assisted nearly 36,000 people (12,000 households) with seeds, fertilisers, animal feed, etc. Distribution of animal feed to Luhansk NGCA is being finalised. However, the needs of 12,300 households for winter animal feed in NGCAs remain unmet due to funding constraints.

Round 2 of the Polio campaign: 75% reached

The Ministry of Health (MOH) extended the second round of polio immunisation (30 Nov-18 Dec), targeting children aged 2 months to 6 years, for one week due to low coverage. As a result, as of 24 December, 1.68 million children, or 75 per cent of the targeted group, were vaccinated during this round against 1.47 million, or 64.7 per cent of Round 1. The third round is planned to start on 25 January for all children aged 2 months to 10 years. All vaccines for Round 3 are already in-country.

WHO and UNICEF External Assessment found that the “polio outbreak response in Ukraine has been insufficient to meet internationally agreed requirements” and that “without major and rapid movements, closing the outbreak within 6 months will be difficult.” In NGCAs, the second round of vaccination started on 24 December 2015 and will end on 4 January 2016. De facto authorities in Luhansk reported 96.7 per cent vaccination coverage for the first round (53,511 children). The vaccines for all rounds were reportedly procured from the Russian Federation.

Ceasefire violations continue to be recorded

The ‘ceasefire within the ceasefire’ agreed upon in Minsk on 26 August 2015 led to a considerable decrease in hostilities in September and October. This trend has, however, somewhat reversed since November despite an agreement for a total cessation of hostilities during the New Year and Christmas holidays agreed in Minsk on 23 December.

The United Nations Human Rights Monitoring Mission in Ukraine (HRMMU) reports that the conflict continues to significantly affect people residing in the conflict area and their human rights. The HRMMU counted 178 civilian casualties between 16 August and 15 November (47 deaths and 131 injured). In general, almost 30,000 casualties (9,100 killed) are recorded since the beginning of the conflict.
Women make about 85 per cent of GBV cases

Many people in the conflict-affected areas have witnessed, experienced or taken part in violence, including sexual and gender-based violence (GBV), and are traumatised as a result. If left untreated, traumatic experiences can have long-term impact on individual lives and threaten entire generations and communities.

Since November, UNFPA has deployed 21 mobile teams to provide psychosocial support to populations in the five oblasts most affected by the conflict. Each team consists of two psychologists and one social worker, all trained on crucial elements of psychosocial support in conflict contexts and sensitised on the need to reach out to the most vulnerable communities.

In their first months of operation, the mobile teams assisted over 1,400 survivors of gender-based violence, of which over 84 per cent are women, most between 25 and 36 years old. Their cases reconfirm that gender-based violence stays vastly under-reported as two thirds of women hadn’t previously come forward. Mobile teams provide psychological counselling and create safety plans with relevant service providers or take other actions to ensure the safety of people exposed to GBV.

Humanitarian Response Plan 2015: 53% funded

By the end of 2015, donors disbursed and pledged about US$167 million, an increase of $8 million since the end of November 2015. The total amount of funding and pledges is equivalent to 53 per cent of the $316 million required. This includes about $158 million (50 per cent) disbursed and another $9.2 million pledged (3 per cent). The shortfall is $148.6 million.

The Government of the Russian Federation dispatched two convoys to NGCAs during December with more than 2,100 MT of relief supplies, according to the Russian Emergency Ministry (EMERCOM).