



Early Recovery of Social Services and Peacebuilding in Donetsk and Luhansk Oblasts



FINAL PROJECT REPORT
January 2015 – April 2016

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I. PROJECT OVERVIEW

The armed conflict in the Eastern Ukraine has had a detrimental effect on the general welfare of the local population, putting the highest pressure on the vulnerable groups. Numerous social infrastructure facilities were damaged during the fights and shelling, further deteriorating the situation for those in need.

In order to support the Government of Ukraine in addressing these issues, UNDP has developed an **“Early Recovery of Social Services and Peacebuilding in Donetsk and Luhansk oblasts”** project. Funded by the Government of Japan with \$5,104,000 and signed in November 2014, this project was implemented in cooperation with UNICEF.

As part of the UNDP “Recovery and Peacebuilding Programme”, the Project is aimed to restore critical social services for the most vulnerable residents of the affected region. To achieve this goal, two main objectives are to be fulfilled: Restoration of the Critical Social Infrastructure and Services for the Most Vulnerable (Output 1) and Strengthening the Capacity of Local Authorities to Plan and Manage the Critical Social Services (Output 2).

During the assessment stage of the Project, the idea of restoration evolved into several different approaches. Obviously, one of them implied restoration of the facilities that were physically damaged during the fights. The second approach was focused on easing of the burden that internal displacement has put on the social facilities in the hosting communities. Finally, the third approach was focused on the facilities that have been evacuated from the Non-Government-Controlled Areas (NGCA), since some of them are unique for the region and have to be deployed at new locations as soon as possible.

Keeping these approaches in mind, UNDP experts have visited more than 100 social infrastructure facilities in both oblasts. Finally, the Project has selected 19 facilities in 14 municipalities in the Government-controlled areas of the Donetsk and Luhansk oblasts through a consultative process with local authorities, NGOs and communities. These facilities include seven healthcare institutions, nine social centers of various profiles (e.g. rehabilitation centers for people with disabilities, centers for family and youth, organizations for rehabilitation of ex-addicts and ex-prisoners), two educational facilities, and one center for the emergency placement of orphans. In turn, UNICEF has identified 10 schools and kindergartens in need of emergency rehabilitation.

The technical evaluation and developing of engineering design for recovery works started in March 2015, and were followed by the tendering process. It was planned initially to finish the reconstruction by the end of 2015, however, abnormal market conditions and exchange rate fluctuations contributed to changes in the Project implementation plan. The Project Board decided to ensure a no-cost extension of the Project till the end of April 2016. Selected recovery works were continued in the first quarter of 2016, but finished in full by April. Some minor arrangements and **rehabilitated sites’** handover ceremonies were held in April.

At the same time, the Capacity Building Component of the Project aimed on improving the capacity of local authorities and social service providers to provide better social services to the target groups. Local social care professionals participated in a series of trainings and workshops on needs assessment and new methodologies of social services management. One of the key results of this activity includes two targeted programs for regional social services development strategies which were drafted by local professionals under the guidance of UNDP consultants and then presented to the local authorities.

In addition, social service providers from 11 targeted facilities were trained in current standards of social services relevant to their areas of activity. It includes, but not limited to rehabilitation of people with disabilities, inclusive education, rehabilitation of drug addicts, services for elderly people, etc. In order to give the trainees more hands-on experience with new concepts and approaches, they were invited on a study tour to a similar social care institution in Western Ukraine. This also complemented UNDP’s reconciliation efforts. Last but not least, selected facilities rehabilitated by the Project received specialized equipment, so the staff can now implement their new skills in practice.

With the expansion of the UNDP Ukraine “Recovery and Peacebuilding Programme”, the Project’s best practices, partnership gains and experience will be applied to ensure further rehabilitation of social sphere in targeted regions. It is planned that the recovery of social services, alongside with support to local economy and restoration of governance in Donbas, will bring more benefits to the local communities and the peacebuilding process.

III. IMPLEMENTATION STRATEGY

Alongside with general principles of political neutrality, conflict sensitivity and accountability, UNDP has applied a number of specific approaches to ensure the effectiveness of the recovery and peacebuilding activities.

Inclusive and Participatory Approach

The Project experts established strong partnerships with local communities, NGOs, social service providers, and the authorities to help them in evaluating and prioritizing the **region’s** recovery needs. The Project construction and social service specialists have taken about one hundred site visits and provided numerous consultations. When a preliminary list of sites to be rehabilitated was developed, it was presented at the public hearings in both targeted regions.

Building Back Better

The damages caused by the armed conflict have added up to the general unsatisfactory condition of social infrastructure, since most of the premises were old and badly maintained over the past decades. At the same time, the overload of the facilities caused by the IDPs influx further decreased the quality of services. Hence, the social infrastructure had to be not only recovered, but upgraded as well.



The “Building Back Better”

principal has been applied both in terms of physical restoration and service provision. The key aim of the Project team was not only to help in restoring specific social services, but to make them more accessible for people, as well as more up-to-date.

Universal Design

All technical and engineering design projects underwent a specialized expertise of the National Assembly of People with Disabilities. Each technical drawing has been carefully reviewed and corrected by the trained experts of the Assembly before it went to the tender for construction works.

Energy Saving

The Project has done its best to apply the energy saving technologies where it was possible given the budget and technical condition of the facilities. As an example – the Project installed LED lightings and ventilation systems with heat recuperation in those facilities where people spend many hours per day (e.g. hospital wards and educational institutions).

Gender Empowerment

A substantial share of IDPs staying in the Donetsk and Luhansk oblasts is represented by women with children, while their fathers choose to stay in the NGCAs or move to other regions searching for jobs. Therefore, provision of pre-school education and other educational services became a highly critical issue. Lacking the access to daycare facilities, both IDP and local women are unable to find a job or actively participate in social life of the communities they live in.

The Project restored six daycare facilities expanding their capacity. They provide different types of services, namely the **rehabilitation centers for children with disabilities**, a **“Family Support Center”** providing recreational activities for children, a kindergarten and a school with groups for preschoolers with special needs.

Sustainability

Sustainability shall be achieved by ensuring the inclusion in local and regional budgets the projects to cover recurring costs following the handover. Specifically, the Project has reached an agreement that the local authorities shall budget the wages for social care specialists employed by the entities recovered by the UNDP.

IV. PROJECT RESULTS

Though the **“Early Recovery of Social Services and Peacebuilding”** project was aimed at one major outcome – improvement of the social services for the most vulnerable – its activities were clearly divided into two groups: physical restoration and capacity development. The first one delivered quick and visible results, while the latter one set ground for long-term changes in the quality of the services.

IV.I. Output 1: Strengthening the capacity of local authorities to provide integrated, targeted and community-based social care services

During the needs assessment missions in February-April 2015 (3 trips) to Donetsk and Luhansk oblasts the Project Specialist on Social Services met with 13 regional and municipal authorities and visited 87 social care institutions (hospitals, schools, kindergartens, social centers, etc.). On this basis, the following needs were identified and actions completed:

1. The need for provision of assistance to the local authorities in the area of strategic planning of development of the social services on the regional level was identified. After the consultations with local authorities and inside UNDP the initial idea of developing 5 plans on the municipal level was declined in favor of development of a plan for each targeted oblast. It resulted in developing two drafts for Targeted Social Services Development Programmes for Donetsk and Luhansk oblasts respectively.
2. Approximately 30 social care institutions were identified as potential facilities for restoration. The Project identified that personnel of 10 social institutions require the training support and 11 social institutions require the rehabilitative equipment for servicing people with disabilities.

UNDP hired 6 highly qualified consultants in 5 professional areas to help the local authorities in developing the following services:

- for children with disabilities (2 consultants)
- for elderly people (1 consultant);
- for people who were in conflict with law (1 consultant);
- for vulnerable children and families (1 consultant);
- establishment of institutions for multifunctional integrated social services for different groups of clients (1 consultant).

The provision of assistance to selected social care service institutions has been fulfilled by the end of 2015 through the following approach:

- in July-August, the Consultants along with the Project Specialist performed three needs assessment visits to the selected social care institutions aiming to conduct interviews with the staff;
- in September-November, the Consultants conducted 9 educational events (trainings and study visits) for personnel of 10 selected institutions in order to improve their skills and knowledge in modern methods of social service delivery;
- UNDP provided a grant to the National Assembly of People with Disabilities to purchase the rehabilitative equipment, which was delivered to 11 institutions in November-December.

IV.II. Output 2: Restoration of the key social care institutions

Since most of the facilities targeted by the Project were constructed in Soviet times, their technological design was outdated and did not meet the current standards. Therefore, UNDP has developed new construction designs for most of the facilities. These designs were audited by an expert from the **“National Assembly of People with Disabilities”** to ensure the compliance with national and international standards of universal accessibility. As for the healthcare facilities, additional medical audit was conducted to guarantee that the designs meet the requirements of the current healthcare standards.

The actual reconstruction works were performed by local companies, since they were able to offer the lowest prices and win the tenders. For instance, one of the key subcontractors was a company displaced from Donetsk, which employed IDPs to perform the recovery works.

1. Sloviansk Central Rayon Clinic - Mykolayivka

This medical facility serves the population of the Sloviansk rayon and Mykolayivka town (52,000 inhabitants). The roof of the hospital was damaged because of the poor maintenance and partially because of the shelling. Two of three operating rooms and X-ray department could not function properly.

Work Done: The roof of the surgery was repaired, as well as the X-ray department (including also the premises). The admission department was re-arranged and repaired, while the universal accessibility of the entrance was ensured.



2. Rubizhne Central City Hospital – Rubizhne

The infectious department and laboratory of this hospital serve the population of the city (50,000) and IDPs (approx. 5,000). The infectious wards provide services for at least 300 patients a year, the laboratory conducts 60-80 tests a day. The premises were heavily damaged because of the long utilization and could not operate in accordance with the medical standards.

Work Done: The roof was repaired, windows and doors were replaced, and the entrance was reconstructed for universal accessibility.



3. Lysychansk City Hospital named after Titov

This hospital serves the population of Lysychansk city (approx. 110,000 people) and IDPs (approx. 7,000). The roof and the top floor were damaged during the armed conflict. Roof leakage caused the fungus contamination of the premises. The entrance did not suit the needs of people with limited mobility.

Work Done: Wards, corridors and roofs were repaired, air ventilation was installed, and the entrance was reconstructed for universal accessibility.



4. Luhansk Oblast Clinical Hospital (surgery) - Severodonetsk

The oblast hospital has remained at the territory which is not controlled by the Ukrainian Government. Thus, oblast residents lost access to the third level of medical care. 10 specialized surgical services can be provided to patients in the building of the former local clinic in Severodonetsk. The repair and an opening of an oblast hospital will allow to provide better medical care to 2.3 thousand patients annually and will restore the public access to the specialized medical care.

Work Done: Facades and the roof were repaired; windows and entrance doors were replaced.



5. Kreminna Rayon Hospital - Kreminna

This hospital serves the population of Kreminna rayon (approx. 42,000 people) and IDPs (approx. 7,000). The premises were damaged and because of the leaking roofs could not function properly. The repair of the roofs and redecoration of rooms was needed. Because of this, the most vulnerable groups suffered the most: children and terminally ill people in respective departments of the hospital.

Work Done: The premises and the roof were repaired; the heating system was replaced.



6. City Hospital No. 2 - Druzhkivka

Druzhkivka City Hospital No.2 is the only hospital that provides assistance to residents of the town (70,000) and surrounding villages (15,000 – 20,000 people). Windows and doors in the hospice and children departments were badly damaged and did not retain heat; minor repairs and sealing did not help. The condition and quality of the indoor premises was unsatisfactory.

Work Done: The premises were repaired, the windows were replaced and the ventilation system with heat recuperation was installed.



7. Kramatorsk Blood Transfusion Station

The Station processes blood and its components and produces medicinal products for specialized treatment like trauma, injury, etc. Up to 11,000 blood donors use this station to donate their blood for the needs of Donetsk **Oblast's** residents. In order to preserve the building and improve the operating conditions, the facility needed the roof and interior repairs.

Work Done: The roof and premises were repaired, the building was reinforced, the facade was insulated, modern windows and doors were installed.



8. Donbas Interregional Center for Vocational Rehabilitation of People with Disabilities - Kramatorsk

The Center provides vocational education and social rehabilitation, social care and accommodation for people with disabilities. Due to the influx of IDPs, the Center needed repair of the 4th and 5th floors of the building and installation of elevators. Up to 250 people with disabilities are able to get improved access to services after the reconstruction.

Work Done: Repair of the 4th and 5th floors was conducted; two new elevators (passenger and technical) were installed. In addition, specialized equipment was procured.



9. Luhansk Oblast Boarding Home for the Elderly and Disabled People - Svatove

This institution provides accommodation and nursing services for the elderly people of Luhansk oblast. 82 people are currently accommodated in the institution, including 36 persons who have limited mobility or musculoskeletal disorders and IDPs evacuated from Popasna town.

Work Done: The building was insulated; the entrance and toilets were reconstructed to ensure universal accessibility. Moreover, the staff was trained in the provision of quality social services and special rehabilitation equipment was procured.



10. Kreminna Rayon Rehabilitation Center for Children with Disabilities – Kreminna

The Center provides rehabilitation care aimed at development and correction of disorders of the children with disabilities and their integration into society. The building is too small to cover all the needs and its condition was very poor. The only way to provide services of better quality was to demolish the old premise and build a new one. The completion of this project allows to increase the number of children covered by the services to up to 150 children per year.

Work Done: The premise was demolished and built from scratch in accordance with current standards, the staff was trained, and special rehabilitation equipment was procured.



11. Artemivsk City Center of Social Services for Families, Children and Youth – Bakhmut (Artemivsk)

The facility was not adopted for use by children with disabilities. The general condition was poor due to bad maintenance over decades. A day-care center for children with disabilities was created in the Center. The clients – 40 children on a daily basis and 87 families with disabled children overall - are receiving informational services there.

Work Done: The roof and the premises were repaired; electrical wiring, windows and doors were replaced; façade was insulated, and the entrance was reconstructed for universal accessibility (including special arrangements for people with impaired vision). The staff was trained and special rehabilitation equipment was procured.



12. Territorial Center for Social Services – Bakhmut (Artemivsk)

Work Done: The Center provides social services to the elderly and disabled people and social and medical rehabilitation to people with disabilities. In addition, the local programs of social protection are delivered through this Center. Currently, the Center serves over 2,500 people a year. In order to improve the quality of social services, the facility needed significant rehabilitation.

The premises were repaired; windows and doors were replaced; façade was insulated, and the entrance was reconstructed for universal accessibility. The staff was trained and special rehabilitation equipment was procured.



13. Center for Social Rehabilitation and Adaptation for Ex-prisoners and Ex-addicts (NGO "Tviy Shans") – Dobropillya

The Center serves the ex-prisoners, ex-addicts and others people who have problems with social adaptation. The Center ensures prevention of drug addiction, alcoholism, and adaptation to the society. The building has a second floor, which was not suitable for use due to its very poor condition. The repair of the second floor enabled provision of services to 30 more people and arranging of the workshop on a first floor.

Work Done: The premises, roof and facades were repaired; the exhaust ventilation with heat recuperation was installed. The staff was trained and rehabilitation equipment was procured.



14. Eastern Center of Vocational Rehabilitation for People with Disabilities – Druzhkivka

The Center owns specialized training equipment for the disabled and has a room to install it (1st floor of a residential building). However, the room was in an unacceptable condition and was not accessible for people with disabilities. The rehabilitation allowed about 500 disabled people to use the Center and the equipment.

Work Done: The premises and the basement were repaired; the exhaust ventilation with heat recuperation was installed; windows and doors were replaced. The entrance and the toilet were reconstructed and equipped to serve the needs of the people with disabilities. The staff was trained and rehabilitation equipment was procured.



15. Social Center for Family Support – Svyatohirsk

More than 10,000 IDPs (including 3,000 children) were registered in Svyatohirsk. It creates substantial burden on the town social service infrastructure. In addition, there was no service for the provision of psychological assistance, assistance in finding accommodation or job. An abandoned building was rehabilitated and the Center was placed there to provide services to the IDPs and the local community.

Work Done: The building was overhauled with reinforcement of the bearing structures and basement; the roof was repaired; the entrance was reconstructed in accordance with the universal design standards.



16. Secondary School No.10 – Bilytske

There is a need in Bilytske to involve children with special learning needs in general education (including children with speech defects, musculoskeletal disorders and chronic nonspecific respiratory diseases). The reconstruction of the school helped to involve 37 children in learning activities.

Work Done: The basement and bearing systems were reinforced; the roof, classes and corridors were repaired; windows, heating and electrical systems were replaced.



17. Kindergarten “Rosynka” – Bilozerske

The construction and repair works were aimed to restore the functionality and ensure universal accessibility to the building of the kindergarten. This helped to provide equal access to quality preschool education and solve the problem of the lack of places in kindergartens.

Work Done: The water supply, ventilation and electrical systems were replaced. The roof and classes were repaired; windows were replaced, and the façade was insulated. The entrance was reconstructed according to the universal design standards. The staff was trained in providing inclusive education for children with special needs and specialized equipment was procured.



18. Ordzhonikidze Rayon Center of Social Services for Families, Children and Youth – Mariupol

The Center provides combined social services: a family center for 8,000 recipients per year and a humanitarian center that serves up to 15,000 people per year (most of them are IDPs). While being such a popular facility, the Center itself was not even a whole functioning building: only first floor was open, equipped and operational. The second floor was abandoned because of the ruined windows and heating system. The premises needed reconstruction to provide more space for social workers, improve functionality and energy efficiency of the building.

Work Done: The second floor was rehabilitated through roof repair, replacement of the heating systems and windows. Moreover, the first floor was overhauled as well as the entrance to ensure universal accessibility. The façade of the building was insulated for energy saving reasons.



19. **Children's Aid Center "Otchiy Dom" – Pokrovsk (Krasnoarmiysk)**

This Center is the initiative of a charity organization for children and adolescents aged from 3 to 18, who find themselves in difficult life circumstances (up to 60 children per year). The Center creates enabling environment, like home, for education of children and preparation of them to the independent life.

Work Done: The roof was repaired and attic was transformed into two classrooms. The heating and electrical systems were replaced, as well as windows and doors. The staff was trained and rehabilitation equipment was procured.



V. COMMUNICATION AND VISIBILITY

Communication has been a crucial component of the Project's implementation for two reasons. Firstly, the local communities in Donetsk and Luhansk oblasts still feel aftermath of the psychological trauma they went through. Reminders of the support that is coming for Donbass from international organizations and overseas partners are yet another way to mitigate the feeling of insecurity and promote reconciliation in the local communities. Secondly, the Government of Japan is making generous commitments to support the people of Ukraine through providing technical assistance and loans to the Ukrainian Government. The clear visibility of the Donor helps to demonstrate the proper use of the funds and ensure general accountability.

As defined by the Communication Strategy developed for the Project, five major groups of audience were targeted: local communities and authorities, the Donor, the Ukrainian Government, wider Ukrainian audience, international partners. Accordingly, specific channels and activities were used to ensure publicity and visibility of the efforts.

Due to the above stated reasons, UNDP paid the most attention to communicating with the local public and authorities in the Donetsk and Luhansk oblasts. This was also important in terms of inclusive approach and future ownership of the outcomes.

Therefore, way before the Project actually started the recovery works, it was presented to the public at large in both regions. Moreover, local journalists were invited to a special meeting to discuss UNDP's approaches and plans, which set ground for the future cooperation. During the recovery process, press releases were disseminated for every important step (big tender opening, launch of the restoration at the major sites, etc.). A special coverage was organized during the visit of the Donor's representative, H.E. Mr. Shigeki Sumi, Ambassador Extraordinary and Plenipotentiary of Japan in Ukraine, to the Donetsk oblast. Generally, the communication efforts yielded in 246¹ tracked publications in the local media. The actual coverage is estimated at some 30% higher since UNDP was not able to track the publications in the local print and broadcast media that do not have websites.

Local communities were also the primary audience of the visibility efforts. During the reconstruction works, special signs were put on the fences of the facilities, clearly stating the purpose of the intervention, its participants, as well as emphasized the role of the Donor and the UNDP.



After the recovery works were finished, official launching ceremonies were held at the major facilities where it was possible and reasonable. The total of 14 such events were held during December 2015 – April 2016. The special visibility items – banners, branded gifts packaging – were used during these ceremonies. Special signs bearing acknowledgements to the Government of Japan and UNDP were installed by the entrances of the buildings.

¹ Here and hereinafter: only publications mentioning both UNDP and the Government of Japan were taken into account.

The extensive communication activity in the targeted region resulted in the coverage by not only local press, but also by a number of major national outlets. Special correspondents of the national TV channels as **well as stringers for informational agencies were invited to all the Project's** events and provided with special attention (exclusive commentaries, detailed informational notes, etc.). Several journalists representing popular national media were invited **to join the Project's** field missions (Radio Liberty Ukraine, Ukrainian News, Bigmir.net). **The Project's** representation in national media totals 52 publications. Occasionally, the journalists representing foreign media would also join the visits, resulting in 9 publications (Euronews, Japanese TV channels, etc.).



My first encounter with the hospital and its team took place in September 2015.

At that time, renovations at the hospital were just beginning. The work was undertaken as part of the 'Recovery and Peacebuilding Program' – a regional project of the United Nations Development Program (UNDP), supported by the Government of Japan.

Head doctor Oleksandr Bilanov shows me around facilities and recalls the horror of a time when death and destruction became a part of daily life.

To add up to the official reporting and meetings, the communication through websites of major **partnering ministries, agencies and administrations was organized to convey the Project's** progress to the representatives of the Ukrainian Government. 43 articles of this type were published during the Project implementation.

Finally, working with social media through official UNDP digital accounts allowed the Project to communicate with wider international audience. With 49 publications on Facebook and Twitter accounts as well as 10 publications at the UNDP website (each article in Ukrainian and English), UNDP managed to multiply the communication effect through viral effect of digital communication (e.g. with republications through UNDP global accounts).

VI. CHALLENGES AND RISKS

- Currency exchange issue

On November 13, 2014, the UNDP signed the Exchange of Notes with the Government of Japan for the purpose of obtaining the contribution in the amount of six hundred million Japanese Yen (600,000,000) to implement the Project “Early Recovery of Social Services and Peacebuilding in the Donetsk and Lugansk oblasts”. This amount was reflected in the Project Document in USD as the equivalent of USD 5,782,000.00. On December 4, 2014, the Finance Unit received the deposit from Japan of JPY 600,000,000. However, due to the exchange rate difference, the actual amount reflected in the Atlas was USD 5,104,211 instead of USD 5,782,000. The amount in Project Document stated as USD 5,782,000 was derived from different exchange rate from Sep 2014 ($JPY\ 600,000,000 / 5,782,000 = 103.77$) however the amount created and applied using December 2014 rate of 117.55. Therefore, the factual amount of USD available for implementation of the Project’s activities has decreased to USD 5,104,211.

- Infrastructure Recovery Projects Duration:

The duration of projects aimed at the rehabilitation of critical infrastructure (both – economic and social) should be at least 18-24 month long to ensure the proper preparation of technical documentation, tendering of services and works as well as assure a defect liability period.

- Protection issues that led to abnormal market conditions:

Due to the political uncertainty in the conflict-affected areas and the local currency fluctuations, the prices for construction materials increased from 20% to 45% compared to other oblasts.

- Poor quality of proposals received:

The local companies often provided tender proposals that did not meet the UNDP procurement standards and administrative checks. Several bidders have not provided critical financial and statutory documents, including reference checks and/or compliance with the requirements of preparing bidding documents. The majority of procurement cases had to be re-tendered due to receiving fewer proposals than the minimum requirement of at least three bids as per UNDP procurement rules and regulations, the poor quality of bids received, or financial bids of proposals that significantly exceeded the planned budget and market price.

- Postponing of the rehabilitation of five social infrastructure facilities pre-selected for the recovery:

The Project Board meetings (on February 16 and March 31, 2015) approved 24 sites for rehabilitation by UNDP. Since then, five sites have not been tendered for different reasons, such as: local counterparts (the municipality and local NGOs) did not reach the agreement between themselves concerning the design of a social service to be provided on site and/or about the running and financing of the facility after the reconstruction; there was a court case against the re-designation of a selected facility from a non-functioning municipal school to the oblast center for social services; the Project received highly over-priced proposals during tendering the construction works and could not accept such bids due to the lack of funds.

- VAT reimbursement

In 2015, the Ukrainian tax authorities significantly delayed the reimbursement of VAT to the UNDP Country Office. This resulted in VAT charges to the Project’s accounts and, therefore, created a risk of incompleteness of the Project commitments towards its contractors.

- **Political instability and changes in local authorities' leadership**

The Project experienced difficulties in fulfilling its commitments to finalize the rehabilitation of one pre-selected site. It appeared that the Luhansk Oblast Administration after changes in the leadership in summer 2015 has decided to place a Surgery Department of the Luhansk Oblast Hospital under management of the military forces. However, neither UNDP nor its contractor (a construction company) was informed about such decision. Following the said decision, the Project beneficiary (Luhansk Oblast Hospital) has re-called a permission for beginning of construction works on the site, which resulted in full stop of works in February 2016.

VII. LESSONS LEARNED

- The needs assessment for both areas (rehabilitation of social infrastructure and development of social services) shall be conducted in close collaboration with the local authorities prior to the selection process. It is recommended to develop joint statements on the needs assessment results.
- The members of the local communities shall be informed accordingly, therefore conducting public presentations of pre-selected sites or public hearings on this matter is highly advised.
- The selection of sites for rehabilitation shall be elaborated in a separate document to be signed by the local authorities or beneficiaries. It will help to avoid the situation when changes in the political leadership on the regional level causes changes in the infrastructure rehabilitation priorities.
- The improvement of the social care services might require amending the respective regulatory framework (e.g. social services provided to patients with mental diseases in special care homes). It is recommended to consult with the respective ministries (the Ministry of Social Policy or the Ministry of Health) beforehand and, possibly, to pass up the activities aimed at improving the regulatory framework if it is not feasible to be done during the Project lifetime.
- The Project duration for infrastructure rehabilitation shall be at least 18 months. It will allow to ensure proper planning of preparatory works (e.g. technical evaluation and engineering design) and minimize the influence of seasonal factors on timely completion of the construction works.

VIII. RECOMMENDATIONS

The **“Early Recovery of Social Services and Peacebuilding in the Donetsk and Luhansk Oblasts”** Project has been designed as a rapid response intervention, aimed at solving critical issues at the conflict-affected territories. Therefore, it was planned that its implementation will be finished in 12 months. However, due to the numerous issues occurring during this year, the Project team recommended longer duration of the upcoming social services recovery projects. It is especially true for the settings where the humanitarian and recovery action is being deployed for the first time.

Firstly, social services require more intricate assessment than the one provided by the local **government or general recovery assessments (e.g. “Recovery and Peacebuilding Assessment”** held in Ukraine by the EU, UN and the World Bank). While such documents focus on general approaches

to recovery, a number of field visits, as well extensive communication with local communities and authorities is required to identify and prioritize the actual restoration needs in the municipalities. The Project experts visited more than 100 facilities, each spending up to 3 weeks in the field, to set a draft list that was later amended. With longer implementation period, it would be beneficial to intensify these efforts and complement them with expert interviews, public opinion polls, etc.

Secondly, the Project faced several complications when tendering construction works in volatile economic conditions and the proximity to a “**contact line**” of the armed conflict in the east of Ukraine. Among these complications were the following: limited interest of companies to operate near the armed conflict, as well as low level of readiness to meet the UNDP qualification criteria; limited proposals of construction materials on the local market (in the Donetsk and Luhansk regions), artificial price hikes after the start of intensive recovery activities of international organizations (UNDP, UNICEF, IOM). It is recommended to make the estimations with regard to prices for construction works and materials higher for 5-7 per cent compared to the average **country’s level**.

Thirdly, seasonal factors may have critical influence on the implementation of the infrastructure rehabilitation projects. There are many types of construction works, which cannot be performed when outside temperature is lower 5° C or on rainy days. Therefore, it is recommended to complete the design and preparatory works during the late autumn and winter period, or limit the construction works to the selected core works.

IX. ANNEXES

1. Information on beneficiaries

№	Sites	Beneficiaries		
		Men	Women	Total
1	Sloviansk Central Rayon Clinic - Mykolayivka, Donetsk oblast	20545	25425	45970
2	Rubizhne Central City Hospital – Rubizhne, Luhansk oblast	4830	5670	10500
3	Lysychansk City Hospital named after Titov - Lysychansk, Luhansk oblast	2900	4100	7000
4	Kreminna Rayon Hospital - Kreminna, Luhansk oblast	1610	1890	3500
5	City Hospital No. 2 - Druzhkivka, Donetsk oblast	310	455	765
6	Kramatorsk Blood Transfusion Station - Kramatorsk, Donetsk oblast	5505	1768	7273
7	Donbas Interregional Center for Vocational Rehabilitation of People with Disabilities - Kramatorsk, Donetsk oblast	34	27	61
8	Luhansk Oblast Boarding Home for the Elderly and Disabled People - Svatove, Luhansk oblast	30	10	40
9	Kreminna Rayon Rehabilitation Center for Children with Disabilities – Kreminna, Luhansk oblast	46	54	100
10	Artemivsk City Center of Social Services for Families, Children and Youth – Bakhmut (Artemivsk), Donetsk oblast	879	1566	2445
11	Territorial Center for Social Services – Bakhmut (Artemivsk), Donetsk oblast	152	2188	2340
12	Center for Social Rehabilitation and Adaptation for Ex-prisoners and Ex-addicts (NGO “Tviy Shans”) – Dobropillya, Donetsk oblast	50	0	50
13	Eastern Center of Vocational Rehabilitation for People with Disabilities – Druzhkivka, Donetsk oblast	55	65	120
14	Social Center for Family Support – Svyatohirsk, Sloviansk district, Donetsk oblast	400	100	500
15	Secondary School No.10 – Bilytske, Dobropillya district, Donetsk oblast	132	155	287
16	Kindergarten “Rosynka” – Bilozerske, Dobropillya district, Donetsk oblast	107	87	194
17	Ordzhonikidze Rayon Center of Social Services for Families, Children and Youth – Mariupol, Donetsk oblast	96	425	521
18	Children’s Aid Center “Otchiy Dom” – Pokrovsk (Krasnoarmiysk), Donetsk oblast	18	22	40
	Total	37699	44007	81706

* Luhansk Oblast Clinical Hospital (surgery) was not included in the list since its work modality is now being changed by the local government (see Challenges and Risks)