

IRIN/HPG CRISIS BRIEF

# UNCOMMON BEDFELLOWS

*Local response to the crisis in Ukraine*

*IRIN/HPG Crisis Briefs combine field reporting with research to address critical issues in the world's most urgent crises. This Brief looks at how a Ukrainian oligarch, local organisations and Russian aid are providing a lifeline in eastern Ukraine.*

## KEY MESSAGES

- Access restrictions on both sides of the conflict make it extremely difficult for formal aid organisations to provide much-needed humanitarian assistance in eastern Ukraine.
- Significant amounts of aid are coming from unlikely sources – including from Ukraine's wealthiest oligarch – as well as from Russia. Some of that aid is reaching civilians, but it may also be fuelling tensions among parties to the conflict and between them and aid providers.
- Local organisations, including Red Cross chapters and NGOs, are organising and delivering their own aid – in most cases to good effect.
- Relief operations in Ukraine demonstrate that working with and through local organisations in crisis situations is an effective – and sometimes the only – option for reaching those most in need. However, equal care needs to be taken to distinguish, and ensure distinction, between aid destined for civilians and aid provided for political and military gain.

## The contours of the crisis

Local organisations have played a critical role in the humanitarian response in Ukraine since the crisis there began in April 2014.<sup>1</sup> Following Russia's annexation of Crimea in March, separatists took control of parts of the eastern regions of Donetsk and Luhansk and set up the self-proclaimed 'Donetsk People's Republic (DPR)' and 'Luhansk People's Republic (LPR)', prompting a military offensive against the separatists by the Ukrainian government. Kiev and NATO say the separatists are backed by Moscow, which Russia denies. Despite fragile ceasefires in September 2014 and February 2015, by

July 2015 more than 6,700 people had been killed in the conflict, 17,000 injured and 1.4 million displaced.<sup>2</sup>

While international assistance has focused on people who have fled eastern areas for Kiev and other government-controlled parts of the country, needs are significantly higher in and around the front lines in Donetsk and Luhansk. The Assessment Capacities Project (ACAPS) estimates that 1.2m people in rebel-held areas are in need of food, water, shelter and health care, compared to 430,000 in government-held areas.<sup>3</sup> People are trapped by the fighting, living in buildings under constant bombardment. In Donetsk, makeshift bunkers

<sup>1</sup> IRIN conducted fieldwork for this Crisis Brief in March/April 2015.

<sup>2</sup> OCHA Situation Update No. 4, 12 June 2015.

<sup>3</sup> *The Conflict in Eastern Ukraine*, ACAPS briefing report, 10 March 2015.

in the basements of bombed-out buildings are damp and unheated, causing high levels of respiratory illness last winter; electricity, water and telephone connections are disrupted and people have little food. Those that have remained are mostly the elderly, the sick and women and children, who are not easily evacuated or who have elected to stay to keep their families intact. In Luhansk basic supplies are running out, and shortages are acute.<sup>4</sup> In mid-June, workers at a soup kitchen in the city told monitors from the Organisation for Security and Cooperation in Europe (OSCE) that they were facing closure due to lack of food supplies; health officials who have remained in rebel-held areas report a general shortage of medicine, vaccines and medical staff, most of whom have left for government-controlled areas.<sup>5</sup>

The situation in the east has been exacerbated by an economic blockade of separatist-controlled areas

imposed by the Ukrainian government. Last November Kiev withdrew support for all state services in rebel-controlled areas, including hospitals, schools and banks. Teachers and doctors were cut off from state salaries, cash machines at banks were shut down and state benefits, such as pensions, were blocked. It is illegal for schools, hospitals and trauma centres to operate and for doctors to treat patients. As many are not able or willing to cross front lines and travel to government-controlled areas to pick up their pensions, these restrictions mean that civilians have no access to cash to pay the high prices for what little food and medical supplies are left ([see Kristina Jovanovski's first-hand account of the humanitarian situation in eastern areas](#)).

During acute violence in the summer of 2014 and again in early 2015, heavy fighting and indiscriminate shelling by Ukrainian and rebel forces – as well as the



4 *Ibid.*

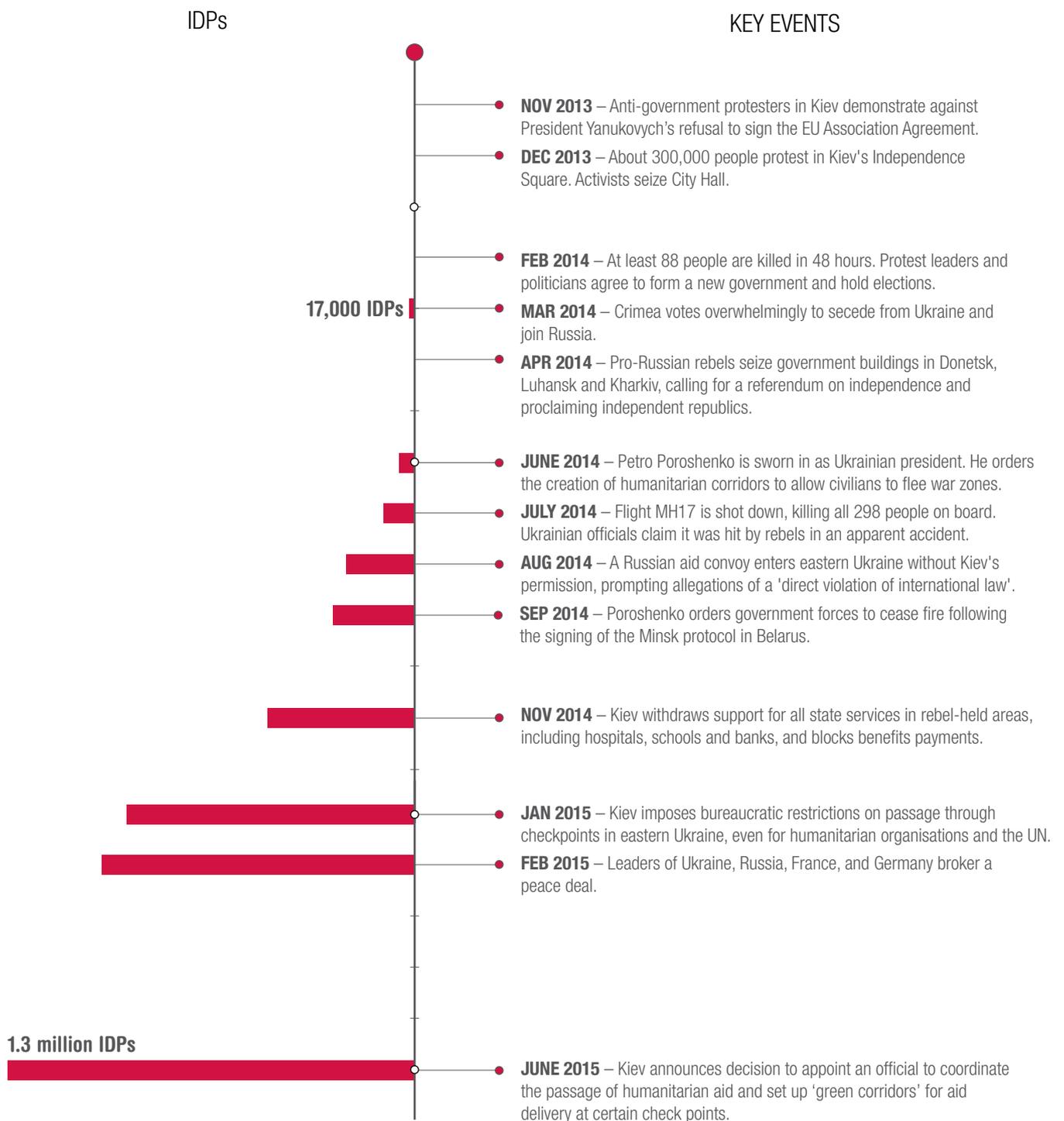
5 OSCE Special Monitoring Mission in Ukraine Update, 22 June 2015.

use of outdated and imprecise weaponry – made it both difficult and dangerous for international aid agencies to deliver assistance in eastern areas. ‘When you have ten to 14 huge trucks being checked, sometimes for several hours, they have to wait at the checkpoints, you expose your team to danger’, said Daniel Bunnskog, head of the International Committee of the Red Cross (ICRC)’s office in Luhansk, referring to the daily shelling in and

around the area. The ICRC has been working across the front lines, distributing food and household supplies in Donetsk and Luhansk, but withdrew temporarily from rebel-held areas when one of its staff was killed by a shell that landed near its offices in Donetsk.

Bureaucratic restrictions imposed by Kiev in January 2015 also impede movement into and out of the conflict

## FIGURE 1: THE ESCALATION OF THE CONFLICT IN EASTERN UKRAINE



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*‘Kiev can’t give aid to people in rebel-held areas because they don’t know who would get the aid or how the aid would be used’*

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zone. According to the OSCE,<sup>6</sup> while some aid (food, medicine, personal hygiene kits, building materials) is getting through to rebel-held areas, deliveries are subject to delay. The government says that these restrictions are necessary to curtail the possibility of state funds falling into the hands of armed groups. According to Markian Lubkivskyi: ‘Kiev can’t give aid to people in rebel-held areas because they don’t know who would get the aid or how the aid would be used’. Lubkivskyi – who when he was interviewed was advisor to the head of the Ukrainian state security services – conceded that the permissions system for humanitarian assistance was ad hoc and ineffective.

In mid-June, Kiev announced the appointment of an official responsible for coordinating the passage of humanitarian aid, a ‘green corridor’ for the delivery of relief items and an ‘optimisation’ of procedures for the delivery of humanitarian goods in accordance with Ukrainian law.<sup>7</sup> These measures may help speed up the delivery of aid in rebel-held areas. However, even if they are effective the lack of a unified, central authority in rebel-held areas – particularly in Luhansk, where there has been infighting among the rebels – makes it difficult to get aid past multiple DPR and LPR checkpoints consistently and safely. Olga, who works for a local NGO operating in the rebel-held parts of Luhansk,<sup>8</sup> said that she found it difficult to work with the LPR authorities: ‘Some of them want to have humanitarian help, some of them don’t want to have humanitarian help’. ‘There’s no central command that seemed to have

the clout all the way from point A to point B. That was a challenge at the beginning’, said Ryan McDonough of the World Food Programme (WFP), which has been trying to operate in eastern areas since last August.

### **An aid coalition of the willing...**

In March/April 2015, when fieldwork for this Crisis Brief took place, only two international organisations – Médecins Sans Frontières (MSF) and the ICRC – were working across the front lines with a consistent presence in both rebel-held territories. Some of this aid has been delivered directly with and through local partners. MSF has been running mobile clinics and supporting existing health facilities in eastern Ukraine, relying on local partners during periods of heavy fighting. Last summer the agency was unable to access the conflict zone, deeming it too dangerous for its staff. The Czech organisation People in Need (PIN) has also been operating in Ukraine since November 2014. It works through individual volunteers from local charities to provide monthly supplies of food, nappies and medicine.

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*‘Although we always try to deliver assistance ourselves ... we rely on collaboration’*

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The ICRC fielded small teams to rebel-held areas last December, as well as working through the local Red Cross. ‘Although we always try to deliver assistance ourselves ... we rely on collaboration’, said Joan Audierne, head of the ICRC’s Donetsk sub-delegation at the time of interview. ‘We go to local authorities for access. If we are not able to go due to security reasons, they [the local Red Cross] come and get assistance from us.’ Bunnskog said that the local Red Cross had been ‘key’: ‘[They] lend us a hand either in identifying needs or carrying out distribution if the security situation is

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6 The OSCE Special Monitoring Mission to Ukraine (‘SMM’), established as part of the Minsk framework for the re-establishment of peace, stability and security in Ukraine, conducted a series of visits during December 2014 and January 2015 to 55 formerly state-financed institutions in areas currently not under government control within the Donbas region, focusing in particular on hospitals and residential care facilities.

7 Statement by Advisor to the Prime Minister of Ukraine Danylo Lubkivsky following a Prime Minister’s meeting with international humanitarian organisations, 23 June 2015.

8 Olga asked that we not refer to her last name or organisation.

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too tense for us’, adding that, although the ICRC had been able to deliver assistance directly since the fragile ceasefire in February, landmines and other unexploded weapons were still causing safety concerns. In turn, the aid donated by the ICRC and groups like the Australian Red Cross has been a lifeline for local LPR and DPR Red Cross chapters in the east of the country, which have been cut off from the Ukrainian Red Cross in government-held areas since the organisation split in September 2014. Following the split, the status of these eastern chapters is disputed.

### **... and uncommon bedfellows**

Restrictions on aid delivery mean that the bulk of assistance in eastern Ukraine is coming from unlikely sources. Rinat Akhmetov, Ukraine’s richest man, is probably the largest supplier of aid to the east in terms of volume. Akhmetov, who held an anti-separatist rally at the beginning of the conflict, owns a popular football club and controls more than 100 companies involved in metals and mining, power generation, banking and insurance, telecommunications, media and real estate.

In August 2014, Akhmetov used his eponymous foundation to establish a humanitarian depot in the region’s largest football stadium (which he also owns). According to the organisation’s glossy and infographic-rich 2014 annual report, the Akhmetov Foundation had organised the evacuation of about 40,000 people from the conflict zone and distributed 1.35m food packages. The report also states that the Foundation espouses traditional humanitarian principles and values: ‘Our role is to fully comply with international humanitarian assistance principles that require efficiency, transparency, independence and strict neutrality’. In 2014, the Foundation’s Rinat Akhmetov Humanitarian Center reported that it helped more than 710,000 people.

This has made the Foundation a significant and effective supplier of aid, complementing the work of international aid agencies; the ICRC’s Audierne said ‘We look to the Akhmetov Foundation to know what they are doing so we aren’t overlapping’. According to McDonough ‘We take their operations into account and we assist if they require advice’; McDonough said that WFP worked with

the Foundation to improve its targeting and the quality of its food baskets, and to advise on the workings of the international humanitarian system. ‘It’s been incredible what they’ve achieved so far’, he said. ‘We are alive thanks to Rinat Akhmetov’, said Tamara, 82, a resident of Zorynsk in rebel-held Luhansk.

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*‘There’s a lot of individual help on both sides that hasn’t been quantified’*

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In addition to the Foundation, according to the LPR and DPR much of the aid coming into the region is sourced from Russia – both from the government and from ordinary citizens. This is corroborated by OSCE monitors, relief agencies and individuals, who all report that Russian convoys carrying relief supplies are making their way across the border on a daily basis. Although Russia’s role as an aid provider is angering Ukraine and may be fuelling tensions between the two countries, anecdotal evidence suggests that at least some is reaching civilians.<sup>9</sup> Nikolay Mikhailovich, an elderly resident of Nikolaevka, a village in Luhansk, said that he had received aid from Russia, including food and antibiotics; Nikolay Suhov, a doctor at the central hospital of Pervomaisk, reported that the hospital had received regular shipments of medicine. ‘I can tell you from testimonies we have received in the field that at least some of [Russia’s] assistance is being received by local canteens and that hospitals and kindergartens are receiving food’, said Bunnskog, who added that aid was also coming from Russian individuals living in border towns, where they have acquaintances or some personal attachment. ‘There’s a lot of individual help on both sides that hasn’t been quantified’, he said. ‘We get humanitarian aid from the Red Cross, MSF and from Russian convoys, which goes to soup kitchens, hospitals and schools, and also to IDPs’, said Natalia Skyba, vice-chair of the regional council in Perevalsk in rebel-held Luhansk.

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9 The OSCE March 2015 monitoring report states: ‘Interlocutors from nearly all institutions visited by the SMM reported having received some form of humanitarian aid and donations from a range of entities, including the Government of Ukraine, the Russian Federation, the “LPR” “Ministry of Health”, the “DPR” “Ministry of Health”, Doctors without Borders, ICRC, international organizations, civil society organizations, charity foundations and also private individuals including the medical and support staff of the institutions themselves. The humanitarian aid received consisted of food, medicine, hygienic items and, in some cases, equipment (including materials for reconstruction of damaged buildings)’.

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It is difficult to track where assistance goes or verify how it is used. It is also difficult to assess the relationship between the provision of assistance and local politics. Through aid, for example, the Akhmetov Foundation is trying to protect Akhmetov's business interests and keep his workforce alive; according to [Ukrainian media reports](#), Akhmetov and the DPR have signed a tacit agreement allowing him to keep his assets, run his businesses and distribute aid in rebel-controlled areas in exchange for steady employment and wages for 'the citizens of the DPR'. Despite his anti-separatist past, others believe that Akhmetov is squarely aligned with the rebels. In December 2014 [Amnesty International](#) reported that 21 trucks carrying pasta, flour, vegetable oil, cereals and sugar from the Akhmetov Foundation destined for rebel-held areas of Donetsk were blocked by pro-Ukrainian volunteer militias over claims that the Foundation was helping the rebel cause, including by supplying fighters with vodka and cigarettes, brought in under the guise of baby products.

For its part, Russian assistance is likely intended to win the support of a beleaguered population. Rostislav Skachkov, a former rebel fighter in Pervomaisk who works for a group called Peaceful Luhansk, which claims to deliver humanitarian aid but is also connected to the LPR, said he works with volunteers from Moscow who give food – soup, cereal, some meat, pancakes – to local canteens that feed 3,000 people each day.

### **Think locally, act locally... most of the time**

The comparative advantage of local organisations in responding to disasters are widely understood and acknowledged. Local actors such as National Red Cross/Red Crescent Societies, indigenous NGOs and local companies are commonly among the first responders to sudden-onset disasters. Their local knowledge, networks and personal ties make them proactive and resourceful relief providers, and effective partners for international humanitarian organisations.

The role and importance of local organisations in conflict settings is less well understood and accepted. Local organisations are often characterised as too partial or lacking capacity or skills, and the private sector is often dismissed as being too commercially-minded and self-interested to be an effective aid provider

and worthy partner in complex and sensitive conflict settings. More significantly, international agencies may not perceive local groups involved in providing relief as abiding by humanitarian principles (for example, local organisations may be viewed as partisan because they may be providing relief to a particular segment of an affected population). As a result, local organisations are often kept at arm's length by international actors, most notably as sub-contractors working at the behest of international agencies in particularly difficult situations, or they may be bypassed entirely.<sup>10</sup>

Relief operations in Ukraine, particularly in the east, demonstrate that it does not necessarily matter to aid recipients who is providing the aid, or that relief organisations have to be card-carrying humanitarian organisations to meet their needs. Residents of Donetsk and Luhansk are happy to receive aid from a wealthy oligarch with significant political and financial interests at stake; from a local Red Cross chapter whose status is disputed; from aid organisations staffed by rebels; and from belligerent parties.

The Ukraine case also demonstrates that working with and through local organisations, whether private sector organisations or civil society groups, can be an effective – and sometimes the only – option. National and local actors often have a very diverse membership that can be used to mobilise a range of communities, networks and resources; they are often able to complement international organisations by accessing areas and undertaking activities not covered by the government or by international agencies; and they are often best placed to understand the local context, which can lead to faster and more appropriate aid delivery. People in need are often better served – or at least are able to receive assistance – where local networks and know-how allow aid to get to the right people at the right time.

This issue has also been highlighted by recent HPG research on local groups in Syria, which found that international humanitarian organisations are often reluctant to work with the Syrian diaspora and local NGOs, perceiving them to be lacking in neutrality, impartiality and independence despite the fact that they are playing a vital role in responding to needs that would otherwise go unmet. International and local organisations alike need to accept that working

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<sup>10</sup> S. Collinson and M. Duffield, *Paradoxes of Presence: Risk Management and Aid Culture in Challenging Environments* (London: Overseas Development Institute, 2013).

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together will enhance the humanitarian response, while acknowledging that, at times, they will choose to operate separately.<sup>11</sup> This is where the international community has a role to play. Humanitarian action can be improved by enabling local actors to work efficiently and effectively; by recognising their specific strengths, limitations and complementary roles; and by developing ways of working in which different responders can take on separate but linked activities.

The crisis in Ukraine is also a reminder that, while local aid should not be ignored or discounted, localising aid is not a cure-all. When working with local groups, international actors must seek to minimise or avoid the manipulation of aid among local groups and to put safeguards in place that distinguish – and ensure distinction – between aid provided impartially and aid provided for political and military gain. This will become increasingly important as aid to eastern Ukraine continues to flow from Russia across a contested border or through Akhmetov’s Foundation, and put into

the hands of local authorities and aid groups whose motivations are not entirely clear.

The crisis in Ukraine is emblematic of the wider ‘localisation’ debate among humanitarians, which have been at once overly permissive in their promotion of local action and overly restrictive, requiring prior credentials as humanitarian organisations and rigid adherence to humanitarian principles without due consideration of what is needed and who is best able to provide it. The question that should be asked in the response to the crisis in Ukraine, as in other conflict situations, is not ‘who do we need more?’ or ‘what type of actor is best?’. Rather, the focus should be on enabling both international humanitarian actors and local actors to work together to bring the full range of knowledge, skills, resources and standards to bear in a given crisis context to provide relief to those who need it most, and as far as is possible to ensure respect for humanitarian principles, while accepting the different ways in which organisations achieve them.

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11 E. Svoboda and S. Pantuliano, *International and Local/diaspora Actors in the Syria Response* (London: ODI, 2015).



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