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Summary of the Analytical Review

**THE SITUATION OF PEOPLE IN
INSTITUTIONS IN THE TEMPORARILY
OCCUPIED TERRITORIES OF UKRAINE**



The Situation of People in Institutions in the Temporarily Occupied Territories of Ukraine

Summary of the Analytical Review

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Context and Scope of the Study

This study analyzes the observance of the rights of institutionalized people – including people with disabilities, older persons, and people in psychoneurological institutions – who remained in such institutions under the authority of the Ministry of Social Policy during the Russian occupation. The analysis is based on open data, official reports, and interviews with key stakeholders, including directors of social institutions in the Chernihiv region and former government officials.

Key findings

1. Collapse of the institutional care system and isolation of institutions

As of June 2024, 20 residential care institutions and at least 3,000 people remained under occupation in Zaporizhzhia, Luhansk, Kherson, and Donetsk regions.

Many institutions were abandoned by staff or came under the control of the occupation authorities, depriving institutionalized people of access to food, medical care, and basic services.

2. Poor planning and failed evacuation efforts

Rapid occupation. Many institutions fell under occupation within hours, making evacuation impossible.

Lack of coordination. Directors of institutions did not receive clear instructions or orders regarding evacuation from state authorities.

Logistical failure. There was neither appropriate transport nor sufficient personnel to evacuate institutionalized people safely.

Movement risks. Many institutions were located in active combat zones, making evacuation extremely dangerous in the absence of “green corridors.”

Legal barriers. The Ukrainian government still lacks effective mechanisms to negotiate the return of institutionalized people from institutions located in the temporarily occupied territories.

3. Humanitarian catastrophe in institutions under occupation

Due to severe **shortages of food, medicines (including psychotropic drugs), and medical staff**, institutionalized people's health conditions deteriorated significantly, leading in some cases to deaths.

Reports have emerged of **forced deportations** of institutionalized people to Russia, particularly from the Luhansk and Kherson regions.

In some cases, local staff remained in the institutions, risking their own lives to care for institutionalized people despite **threats, arrests, and violence** from occupation forces.

4. Absence of a state mechanism for the return of institutionalized people

- Unlike children, for whom limited international mechanisms exist (e.g., through the Red Cross), there is no structured process for the repatriation of adults from the TOT.
- The decentralized administration of social institutions (which report to regional councils rather than directly to the state) complicates coordination.
- International organizations such as the UN and OSCE have not been systematically involved in the return process for institutionalized people.

Interviews with institution heads and experts identified the following key obstacles to the return of institutionalized people:

- Lack of attention, responsibility, and a clear state mechanism for repatriation from the TOT
- Absence of centralized accounting for people remaining in occupied territories
- Reluctance of occupation authorities to release institutionalized people
- Lack or unreliability of humanitarian corridors
- Low involvement of international organizations in the repatriation process

- Logistical challenges in organizing evacuation even from government-controlled areas.

Recommendations

To address these challenges, the study proposes the following urgent measures:

1. **Establish a centralized register of institutionalized people of social institutions in the TOT**

Create a national database tracking the location and condition of people in institutions under occupation. Use satellite imagery, intelligence data, as well as OSINT and volunteer networks to collect information.

2. **Implement a return strategy through international channels**

Launch diplomatic initiatives through the **UN, the Red Cross, and the OSCE** to organize the repatriation process. Advocate for the creation of **dedicated humanitarian corridors** for the medical evacuation of institutionalized people from the TOT.

3. **Provide immediate support to institutions still at risk**

Expand **specialized evacuation capacities**, including accessible transport for people with limited mobility. Ensure **rapid humanitarian aid delivery** to institutions that remain in contact with government-controlled territory.

4. **Prepare infrastructure for receiving evacuees**

Identify **available housing options in communities in central and western regions** to accommodate evacuees from the TOT.

Provide support services, **psychological assistance, and medical rehabilitation** for institutionalized people who have survived occupation.

5. **Legal and policy changes**

Designate a specific state authority responsible for the evacuation and repatriation of institutionalized people. Provide financial and staffing support to institutions receiving repatriated people.

Conclusion

The current situation of institutionalized people in the temporarily occupied territories is an acute humanitarian crisis requiring immediate action at both national and international levels. Without coordinated efforts, these people will remain in conditions of physical danger, forced deportation, or death. The study underscores the need for a comprehensive, cross-sectoral approach to ensure their evacuation, protection, and reintegration into Ukrainian society.