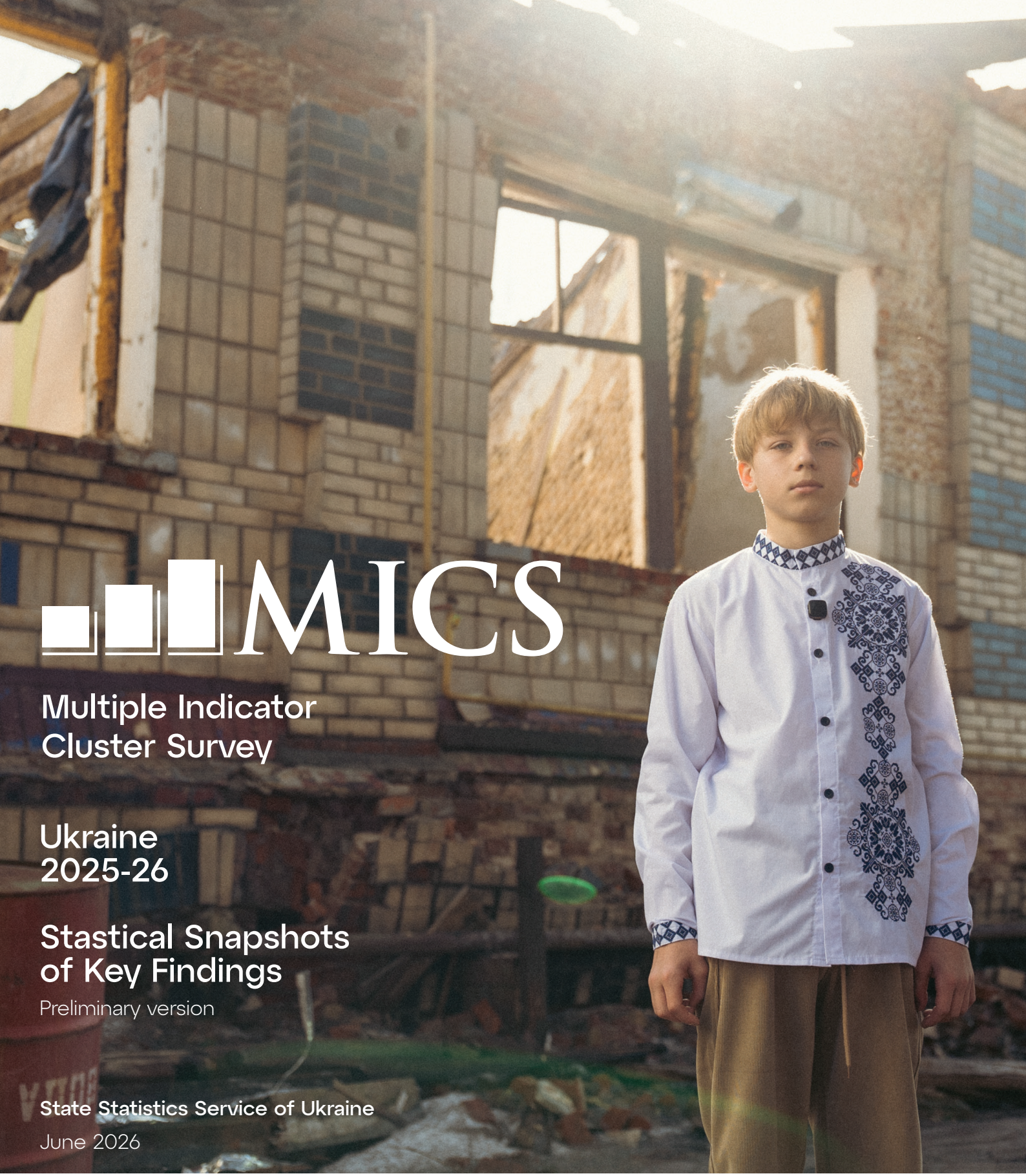

MICS

Multiple Indicator Cluster Survey

Ukraine 2025-26

Stastical Snapshots of Key Findings

Preliminary version

State Statistics Service of Ukraine

June 2026

Ukrstat

UCSR

співпраця з німеччиною
DEUTSCHE ZUSAMMENARBEIT

KFW

unicef
for every child

Publication status:
This package of statistical snapshots is a preliminary version of the public presentation of selected key findings from MICS Ukraine 2025–26. The snapshots have been prepared before the publication of the full Survey Findings Report and the broader final publication package. The indicators presented in the snapshots correspond to the tables that will be included in the Survey Findings Report. Following publication of the full report and anonymized dataset, users will be able to conduct more detailed analysis of MICS results. For more information on the Global MICS Programme, please go to: **mics.unicef.org**

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Cover photo:

12 March 2026, Lebedyn, Sumy region, Ukraine. 13-year-old Roman Borysenko stands next to a ruined administrative building in the town center of Lebedyn, where the MICS survey was also conducted.

The shelling happened in June 2025. It damaged civilian and critical infrastructure, including private homes, apartment buildings, schools, and the town council building.

The Sumy region is a frontline area that is frequently shelled. Currently, part of the region is not under the control of the Ukrainian government.

Roman loves his hometown deeply. He and his family have remained there since the start of the full-scale invasion. Writing poetry helps him cope, though he hopes to pursue a career in a technical field in the future.

Despite the town's location in a frontline region, which subjects it to periodic shelling, Roman continues to attend school and participate in dance and sports.

MICS Ukraine 2025–26. Statistical Snapshots of Key Findings

The Multiple Indicator Cluster Survey (MICS) in Ukraine 2025–2026 was conducted as a national survey by the State Statistics Service of Ukraine within the framework of the global MICS programme. The MICS survey is included in the Plan of State Statistical Observations for 2026, approved by Cabinet of Ministers of Ukraine Order No. 1488-r dated 24 December 2025. Practical implementation of the survey and fieldwork were carried out by the NGO Ukrainian Center for Social Reforms, with technical support from UNICEF and financial support from UNICEF and the Government of Germany through KfW.

MICS is an international household survey programme developed and supported by UNICEF that provides standardized and comparable data on the situation of children, women and households. Over 31 years of the programme, 427 surveys have been conducted in 125 countries; in 2025–26, MICS covers 48 countries. MICS data are used to support evidence-based policymaking, monitor child well-being, assess inequalities, and track progress against key national and global indicators, including Sustainable Development Goal indicators (SDGs).

MICS 2025–2026 is the first such survey in Ukraine since 2012. Its implementation is of particular importance in the context of the full-scale war, population displacement, changes in access to services, and the need for updated nationally representative data on children and households.

The survey sample was designed as a probability-based, stratified, multi-stage household sample. Given the absence of a recent population census and significant demographic changes, the sampling frame was developed as a multi-source population estimation model combining demographic, administrative and geospatial sources with reference dates in 2024–2025, and was further disaggregated to the level of settlements and polling stations for the formation of clusters. In selected clusters, mapping and household listing were conducted before the main survey; households for interview were then selected based on these lists. The survey covered non-institutional households and the persons living in them in the territory under the control of the Government of Ukraine, taking into account defined coverage limitations related to the security situation and the impossibility of conducting fieldwork in certain areas.

Within MICS, interviews were conducted with households, women aged 15–49 years, mothers or primary caregivers of children under 5 years of age, and children aged 5–17 years. In addition to questionnaires, the survey included direct measurement components: anthropometric measurements of children and drinking water quality testing. Anthropometric measurements make it possible to estimate child nutritional status indicators that cannot be obtained from administrative sources, including stunting, wasting, underweight and overweight. Drinking water testing included field testing for E. coli in a subsample of households; for some households, laboratory testing of additional water quality parameters was also envisaged in cooperation with the network of regional Centers for Disease Control and Prevention.

Preparatory work, including mapping and household listing, was conducted from July to November 2025. The main fieldwork training took place in August 2025, and the survey fieldwork was conducted from October 2025 to March 2026.

The purpose of this package of statistical snapshots is to publicly present a limited set of preliminary key findings from MICS 2025–2026 in Ukraine. The statistical snapshots are the first public form of dissemination of survey results before the preparation and publication of the full Survey Findings Report and the broader final publication package.

The indicators presented in the snapshots correspond to the tables that will be included in the Survey Findings Report. Following publication of the full report and anonymized dataset, users will be able to conduct more detailed analysis of MICS results.

Technical Notes for Reading the Statistical Snapshots

Results in the statistical snapshots are presented for Ukraine as a whole and, depending on the topic, by selected characteristics such as sex, age, type of residence, macroregion, and others.

Macroregions

For comparability with MICS 2012, regional results are presented by five macroregions:

- **North**: Kyiv city, Kyivska, Zhytomyrska, Sumska and Chernihivska oblasts;
- **Centre**: Cherkaska, Poltavska, Kirovohradska and Vinnytska oblasts;
- **East**: Dnipropetrovska, Donetska, Zaporizka, Luhanska and Kharkivska oblasts;
- **South**: Autonomous Republic of Crimea, Sevastopol city, Odeska, Mykolaivska and Khersonska oblasts;
- **West**: Ivano-Frankivska, Khmelnytska, Chernivetska, Lvivska, Rivnenska, Ternopilska, Volynska and Zakarpatska oblasts.

When interpreting the results, users should take into account that territories not under the control of the Government of Ukraine, as well as all frontline communities and communities bordering the Russian Federation, were excluded from the survey population, except for Kherson city. In Khersonska oblast, fieldwork was conducted only in Kherson city.

Wealth Index

The wealth index is used to analyse socio-economic differences between population groups. It is calculated based on household characteristics, including housing conditions, access to services and ownership of selected durable goods. Each household member is assigned the wealth index value of their household, after which the population is divided into five groups of equal size — quintiles — from the lowest to the highest level of material well-being. In the statistical snapshots, these quintiles are used to analyse differences among people or households, depending on the indicator. Wealth index quintiles are not a direct measure of income or expenditure; rather, they reflect relative socio-economic position within the surveyed population.

Sample Estimates, Weights and Small Subgroups

MICS is a sample survey, and the values presented in the statistical snapshots are estimates for the relevant populations. Statistical weights are applied in the calculation of indicators to align the results with the structure of the target population. Due to weighting and rounding, sums across categories may not always add up exactly to the total.

Tables and charts should be interpreted with attention to limitations related to small numbers of unweighted observations. If an indicator is based on 25–49 unweighted observations, the value is shown in parentheses and should be interpreted with caution. If the number of unweighted observations is below 25, the value is suppressed and marked with an asterisk (*). Such estimates should not be used for reliable conclusions about the corresponding subgroups.

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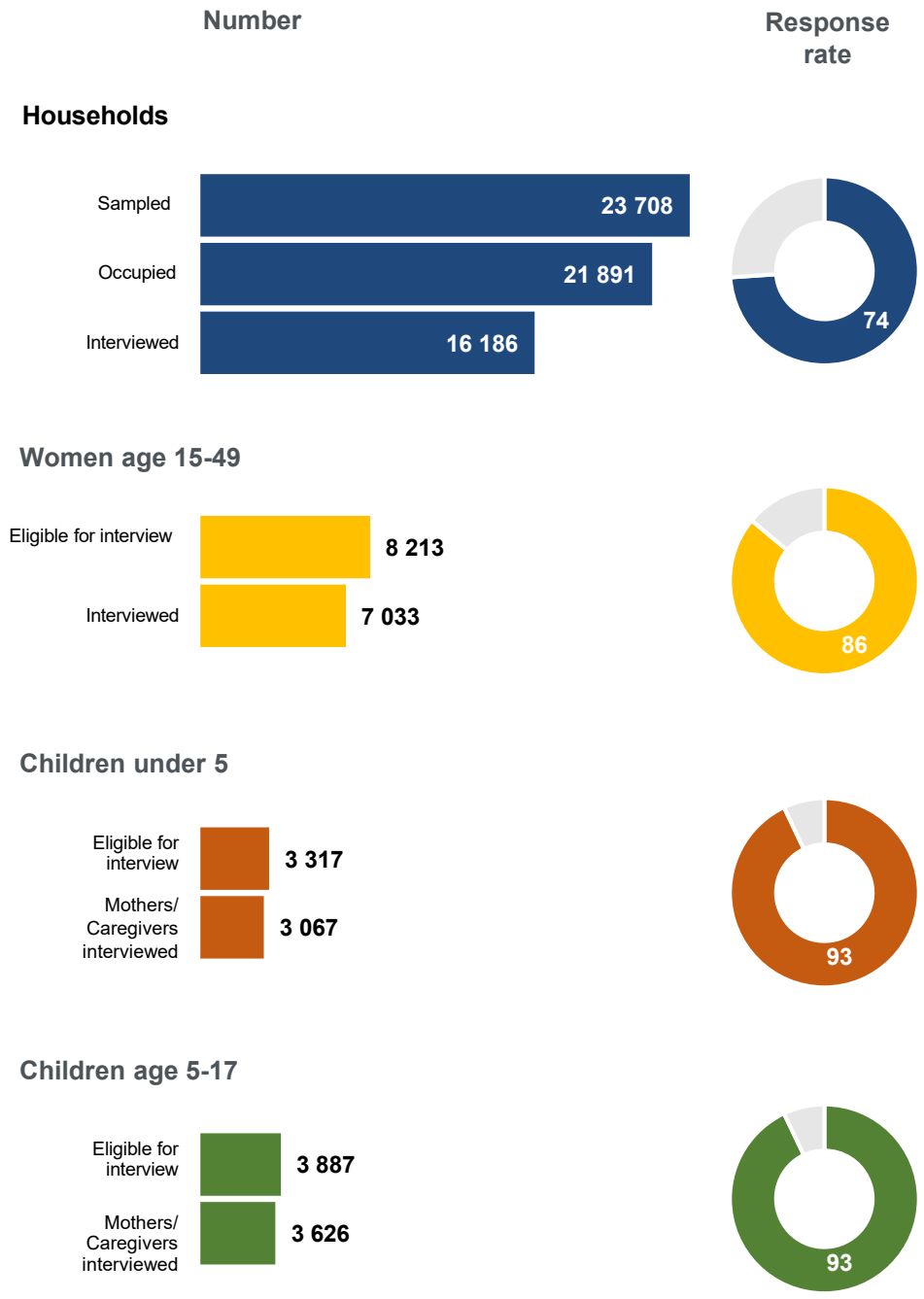
Ukraine 2025-26

Sample & Survey Characteristics

Multiple Indicator Cluster Surveys

Ukrstat unicef

Sample Size & Response Rates



Survey Implementation

National ownership:
State Statistics Service of Ukraine

Practial implementation:
NGO "Ukrainian Center for Social Reforms"

Sample frame:
A multi-source population estimation model built using the most up-to-date demographic, administrative, and geospatial data available at the time of sample design for 2024–2025, with subsequent disaggregation to the level of settlements and polling stations.

Mapping and household listing:
July–November 2025

Main fieldwork training:
August 2025

Fieldwork:
October 2025–March 2026

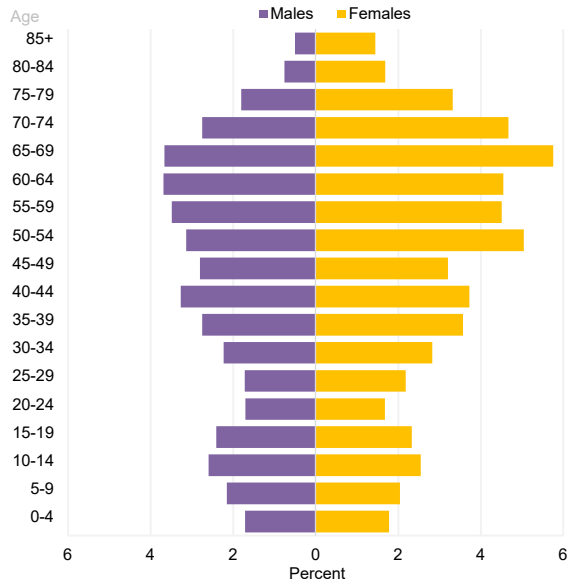
Questionnaires:
Household
Women age 15-49
Children under 5
Children age 5-17

Forms:
Water quality testing*
Water quality lab testing*
Anthropometry age 0-4 and 5-9*

**A subsample was formed in accordance with the standard methodology. For more detailed information, see the survey findings report*

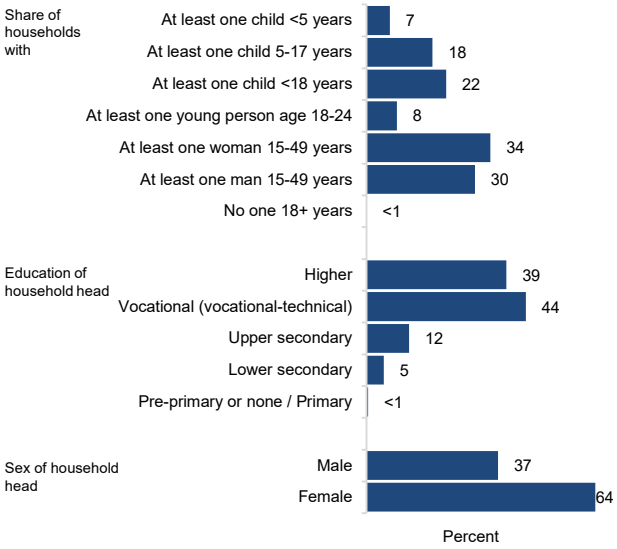
Population Characteristics

Household Population Age & Sex Distribution



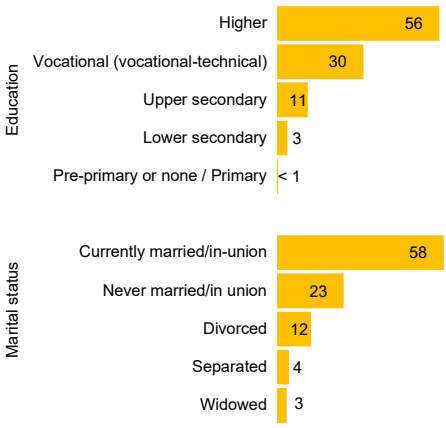
Percent distribution of household population by age group and sex

Household Composition & Characteristics of Head of Household



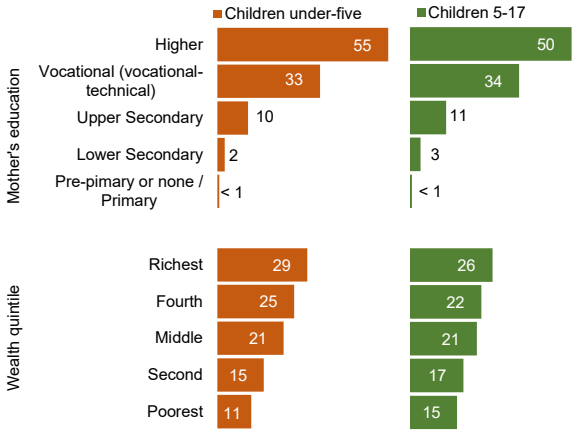
Percent of households by selected characteristics and characteristics of head of household

Women Profile



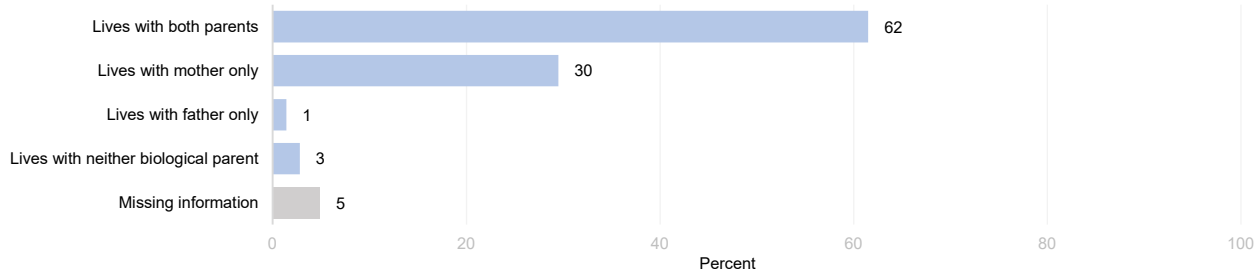
Percent of women age 15-49 by background characteristics

Children's Profile



Percent of children age 5-17 and under-five by background characteristics

Children's Living Arrangements



Percent distribution of children age 0-17 years according to living arrangements

Regional Distribution of Population, %

Macroregion	Households	Women 15-49	Children under 5	Children 5-17
Ukraine	100	100	100	100
North	27	28	22	22
West	26	29	40	35
Center	16	13	13	13
East	21	19	14	19
South	10	11	12	12

Key Messages

- A total of 23,708 households were selected for MICS 2025–26, of which 21,891 were occupied and 16,186 were interviewed.
- The household completion rate was 68% among selected households and 74% response rate among occupied households.
- A total of 7,033 women aged 15–49 were interviewed, making 86% of eligible women.
- Mothers or primary caregivers of 3,067 children under age 5 and 3,626 children aged 5–17 were interviewed.
- The distribution of the population across macro-regions differs by population group; for example, among children under age 5, the largest share is in the West — 40%.

The Ukraine Multiple Indicator Cluster Survey (MICS) was carried out in 2025–2026 under the national ownership and coordination of the State Statistics Service of Ukraine as part of the global MICS programme. The practical implementation and fieldwork were conducted by the Ukrainian Center for Social Reforms, with technical support from UNICEF and financial support from UNICEF and the Government of Germany through KfW Bank.

The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Survey and Sample Characteristics. Data from this snapshot can be found in tables SR.1.1, SR.3.1, SR.3.2, SR.4.1, SR.5.1W, SR.5.2, SR.5.3 та SR.9.1 in the Survey Findings Report.

Further statistical snapshots and the Survey Findings Report for this and other surveys will be available on mics.unicef.org/surveys.

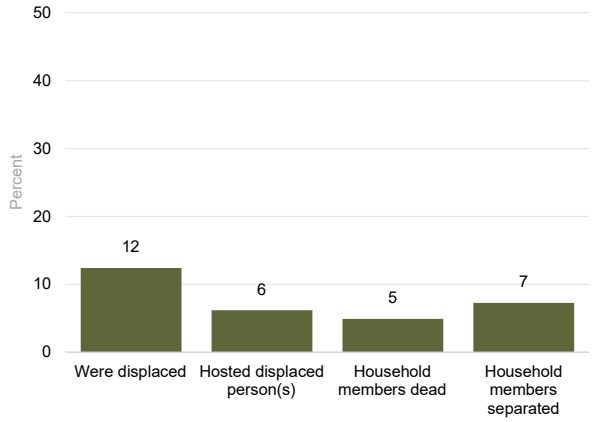
Ukraine
2025-26
Post-Emergency

MICS
Multiple Indicator Cluster Surveys

Households directly affected by the full-scale invasion

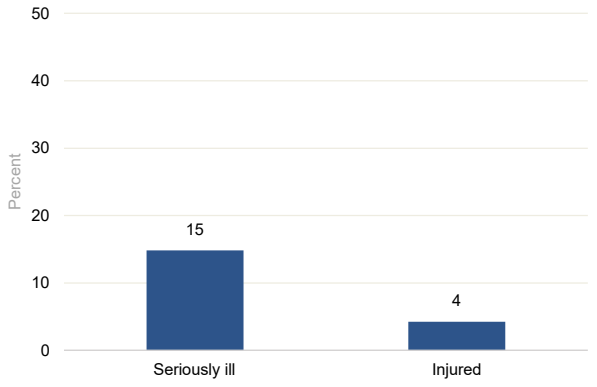
Ukrstat unicef

Demographic changes



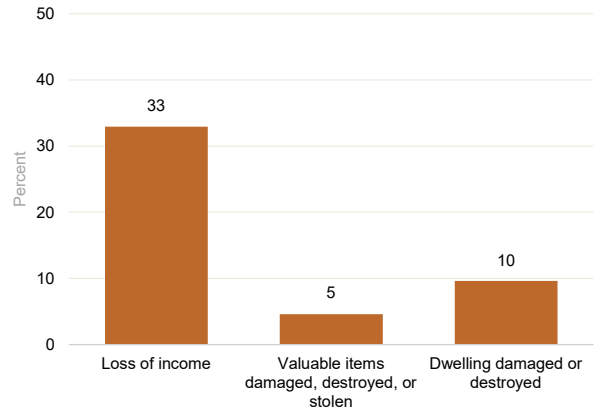
Proportion of households that were displaced as a result of the full-scale invasion; that hosted internally displaced persons during the full-scale invasion; in which one or more members died as a result of the full-scale invasion; and in which one or more members were separated from the household as a result of the full-scale invasion.

Impact on health



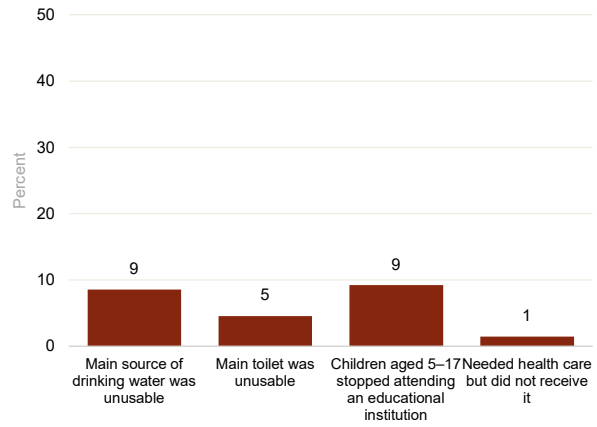
Proportion of households in which one or more members became seriously ill or were injured as a result of the full-scale invasion.

Economic shocks



Proportion of households that experienced loss of income, damage to or loss of valuable property, or damage to their dwelling as a result of the full-scale invasion.

Loss of access to basic services



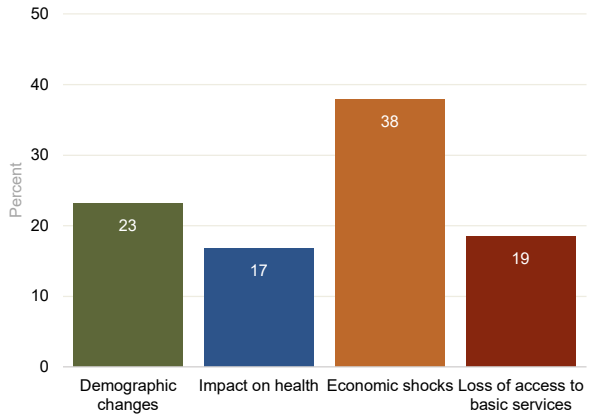
Proportion of households that lost access to water supply, sanitation, education, and health care services as a result of the full-scale invasion.

About the indicators in the Post-Emergency module

Indicators in this module show whether the household experienced selected effects of the **full-scale invasion** at any point from 24 February 2022 to the date of the interview. They do not necessarily describe the household's current situation at the time of the interview. As the full-scale invasion is ongoing, these indicators cover effects that may have occurred earlier during this period, as well as effects that may have persisted or occurred closer to the time of the interview. These effects include, among others, displacement or hosting people in the household, damage or destruction of the dwelling, death, serious illness or injury among household members, separation of household members, temporary interruption of school attendance among children, the household's main drinking water source or toilet facility becoming unusable, changes in income, and damage, destruction or theft of valuable items.

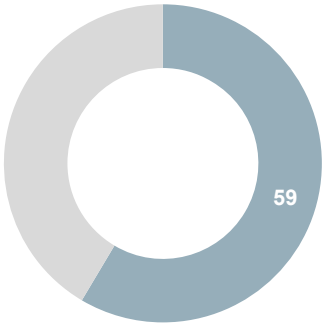
The indicators are **based on respondents' answers** and do not measure the duration, current presence, or full extent of each effect.

Impact of the full-scale invasion



Proportion of households affected by demographic changes, health consequences of the full-scale invasion, economic shocks or loss of livelihoods, or loss of access to basic services.

Proportion of households reporting that they were directly affected by the full-scale invasion



The overall figure shows the proportion of households reporting at least one direct impact across any of the four domains (Demographic changes, Impact on Health, Economic shocks, Loss of access to basic services). Since households may report impacts in multiple domains, the overall aggregate is not the sum of the domain-level percentages.

Impact of the full-scale invasion by macro-region

Macro-region	Proportion of households that were directly affected, %	Demographic changes	Impact on health	Economic shocks	Loss of access to basic services
Ukraine	**59**	**23**	**17**	**38**	**19**
North	68	35	26	36	22
West	41	13	13	27	10
Center	47	8	10	35	11
East	70	31	16	46	24
South	74	26	15	61	36

Key messages

- 59% of households were directly affected by the full-scale invasion.
- The most common type of impact was economic shock, reported by 38% of households.
- 23% of households experienced demographic changes, including displacement, hosting displaced persons, death, or separation of household members.
- 17% of households reported health-related consequences associated with the full-scale invasion.
- Regional differences are substantial: the highest levels of impact were recorded in the South and East — 74% and 70%, respectively — and the lowest in the West — 41%.

The Ukraine Multiple Indicator Cluster Survey (MICS) was carried out in 2025–2026 under the national ownership and coordination of the State Statistics Service of Ukraine as part of the global MICS programme. The practical implementation and fieldwork were conducted by the Ukrainian Center for Social Reforms, with technical support from UNICEF and financial support from UNICEF and the Government of Germany through KfW Bank.

The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Post-emergency. Data from this snapshot can be found in tables PE.1, PE.2, PE.3, PE.5 and PE.6 in the Survey Findings Report.

Further statistical snapshots and the Survey Findings Report for this and other surveys will be available on mics.unicef.org/surveys.

Ukraine 2025-26

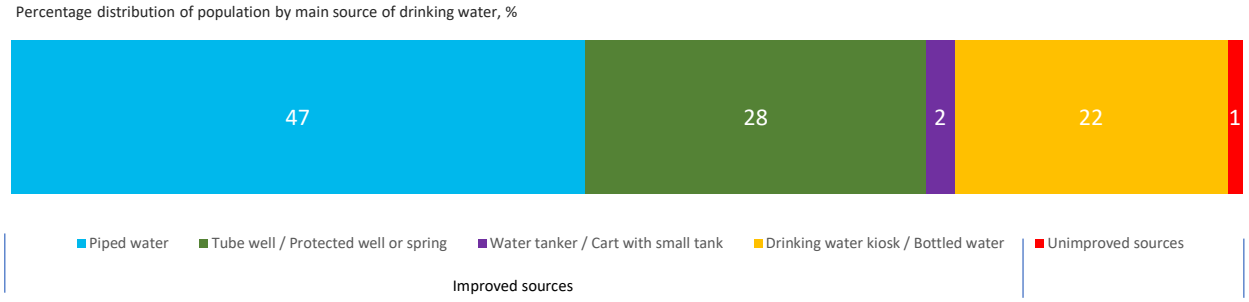
Drinking Water, Sanitation & Hygiene (WASH)

MICS Multiple Indicator Cluster Surveys

Ukrstat unicef

Access to drinking water

Main source of drinking water used by household members



Piped water includes water piped into the dwelling, into the yard/plot, to a neighbour, or public tap/standpipe water supply. **Unimproved sources** include an unprotected well or spring.

Main source of drinking water by macro-region

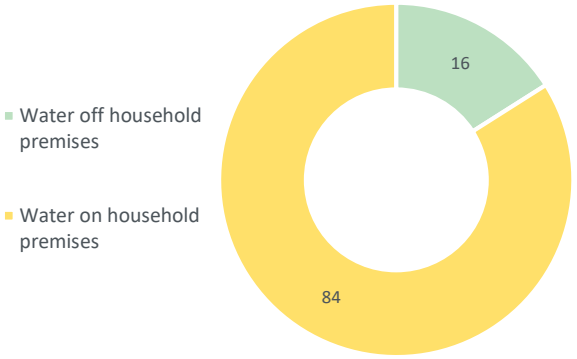
Macro-region	Improved sources				Unimproved sources
	Piped water	Tube well / Protected well or spring	Water tanker / Cart with small tank	Drinking water kiosk / Bottled water	
Ukraine	**47**	**28**	**2**	**22**	**1**
North	43	22	<1	34	<1
West	47	40	<1	12	1
Center	49	35	1	15	<1
East	45	14	8	32	<1
South	56	20	4	13	6

Percentage distribution of population by main source of drinking water, by macro-region, %

Key messages

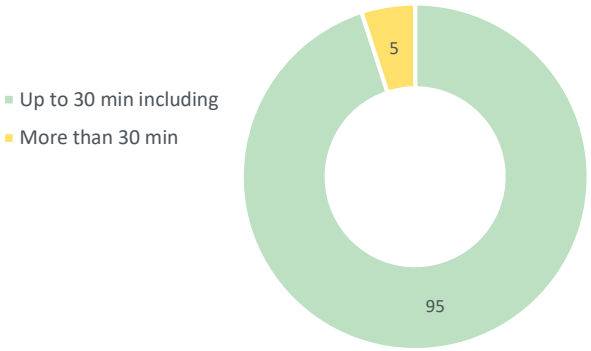
- Almost half of the population uses piped water as the main source of drinking water — 47%, while another 28% use a borehole, protected well, or protected spring.
- For 22% of the population, the main source of drinking water is a water kiosk or bottled water, indicating the significant role of alternative water sources.
- 84% of the population has drinking water on the premises; among those without water on the premises, the vast majority spend up to 30 minutes collecting water.
- Availability of drinking water when needed over the past year varies substantially: on average, it is 86% nationally, but only 59% in the South, compared with 92% in the West.
- Drinking water quality remains a distinct challenge: E. coli was detected in drinking water in 24% of households and in source water in 19%.
- In addition to bacterial contamination, some households have water that does not meet standards for selected parameters: nitrates — 19%, turbidity — 14%, and iron — 13%.
- 45% of the population treats drinking water before consumption; this varies substantially by macro-region, from 35% in the West to 64% in the South.
- 94% of the population uses at least basic sanitation services, and 85% has basic hygiene facilities; 78% of the population has simultaneous access to basic drinking water, sanitation and hygiene services.
- Among users of improved on-site sanitation facilities, in 6% of cases excreta reached the surface environment due to adverse events such as overflow, flooding, or damage to the system.
- 85% of the population has access to a handwashing facility with water and soap; however, in 14% of cases households did not grant permission for observation, so the hygiene indicator should be interpreted with caution.

Time to source of drinking water



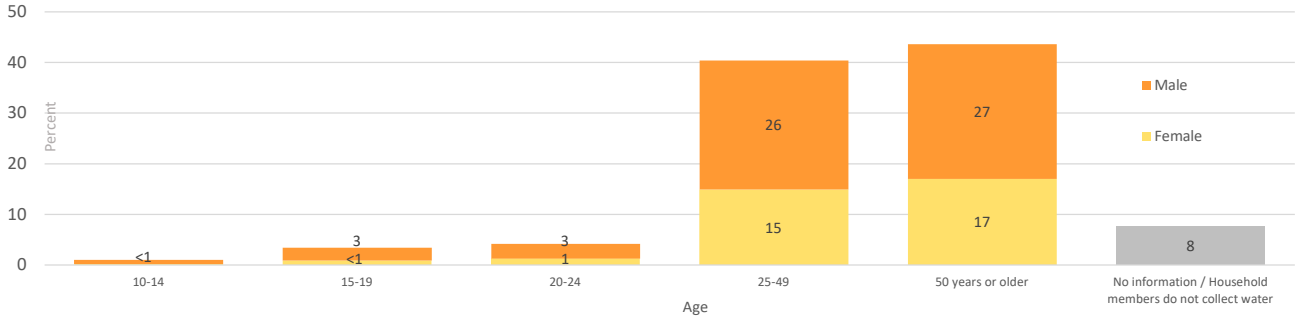
Population distribution by time needed to reach the source of drinking water, collect water, and return, %

Average time spent collecting water per trip



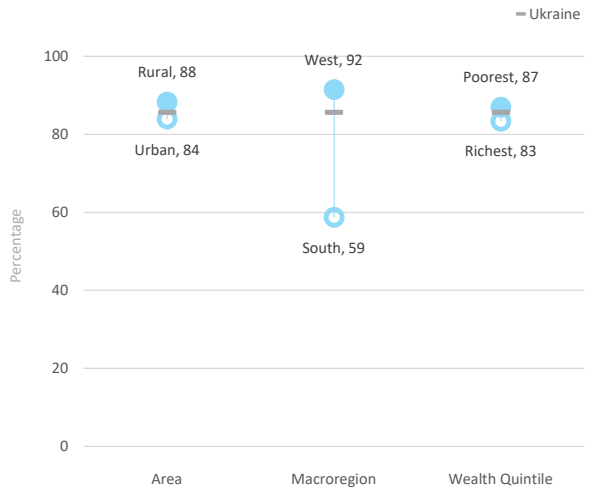
Distribution of average time spent collecting water in the last seven days among household members without drinking water on household premises, %

Household member who usually collects drinking water



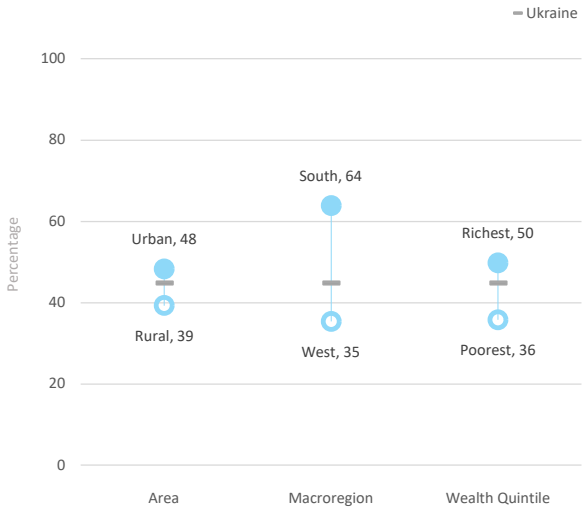
Population distribution in households without access to drinking water on household premises, by sex and age of the person usually responsible for collecting drinking water, %

Availability of drinking water when needed



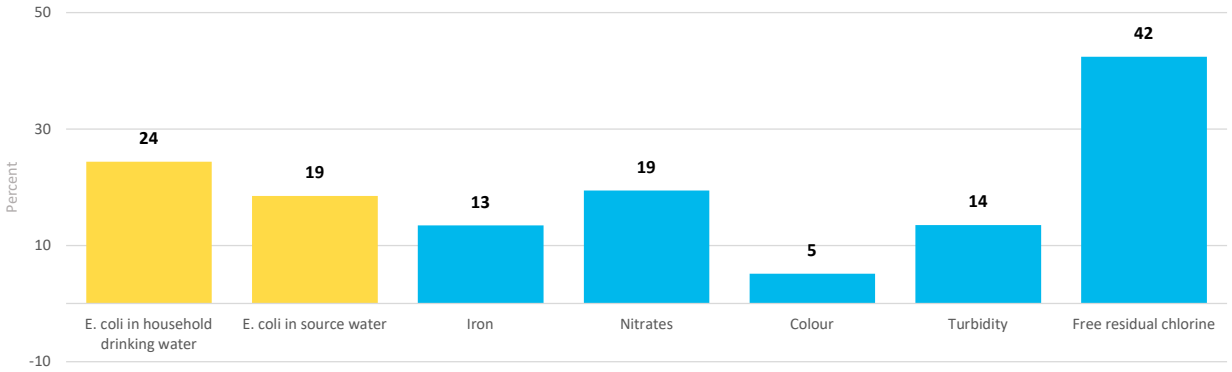
Proportion of the population using drinking water sources where drinking water was available in sufficient quantities during the last 12 months.

Drinking water treatment



Proportion of the population that treated water before drinking. Water treatment methods include boiling, adding bleach/chlorine, straining through a cloth, using a water filter, solar disinfection, settling, and other methods.

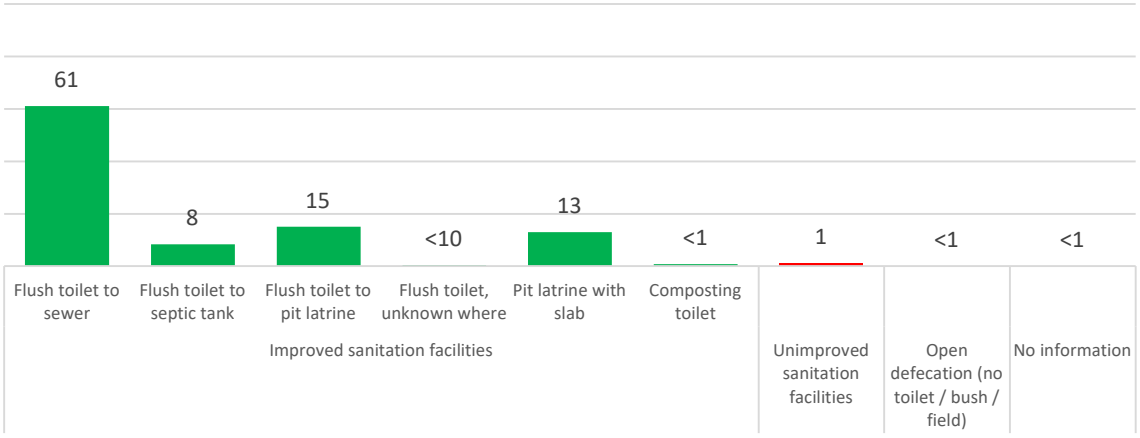
Drinking water quality



Proportion of the population whose drinking water source contains E. coli, whose household drinking water contains E. coli, and whose drinking water does not meet the standard for selected parameters. Drinking water testing was conducted in five randomly selected households in each cluster. Among the selected households, the proportion in which drinking water quality and drinking water source testing for E. coli was conducted was 51% and 47%, respectively. The proportion of selected households in which laboratory testing of water for selected parameters was conducted was 17%.

Safe disposal of waste/excreta: SDG 6.2.1

Types of sanitation facilities



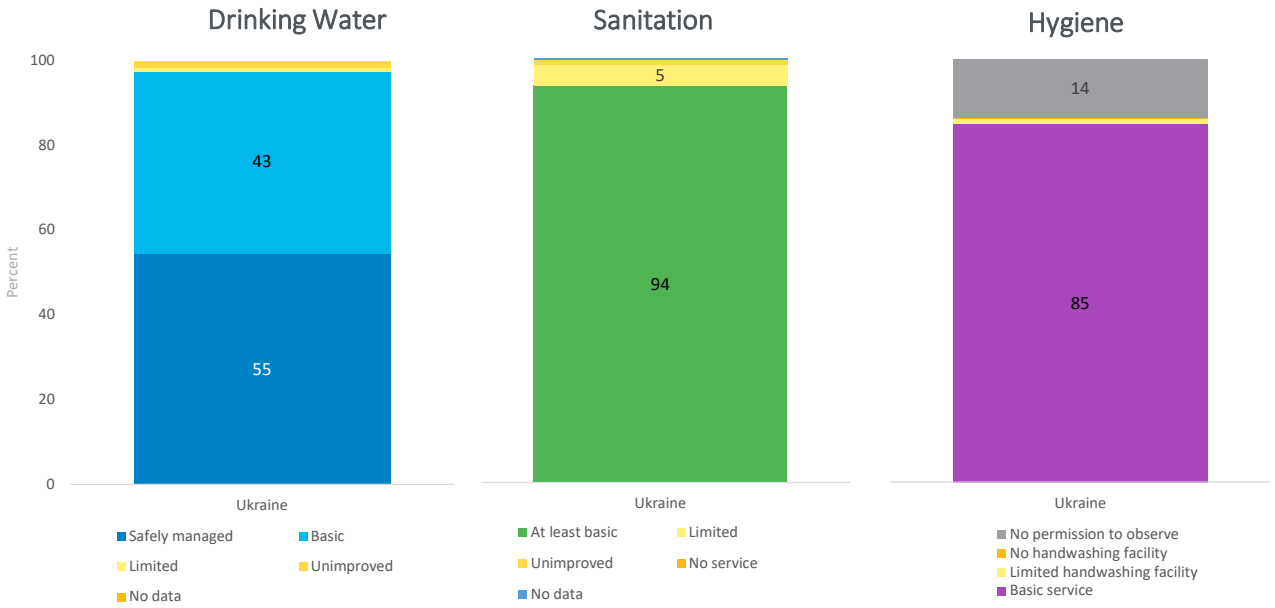
Proportion of the population by type of sanitation facility, grouped by type of disposal.

Release of excreta into the surface environment as a result of adverse events

Distribution of the population using improved and unimproved on-site sanitation facilities, by distribution of facilities where waste was contained or not contained as a result of various events during the last year, %

Adverse events include overflows, flooding, damage to containment systems, or any other events that resulted in the release of excreta onto the surface and into the environment.

Drinking Water, Sanitation & Hygiene Services



Percent of population by drinking water, sanitation, and hygiene service coverage

Drinking water ladder: **Safely managed** drinking water services (SDG 6.1.1) refer to an improved source accessible on premises, available when needed, and free from contamination. **At least basic** drinking water services (SDG 1.4.1) refer to an improved source, provided collection time is not more than 30 minutes for a roundtrip including queuing. Improved drinking water sources are those that have the potential to deliver safe water by nature of their design and construction, and include: piped water, boreholes or tubewells, protected dug wells, protected springs, rainwater, and packaged or delivered water. **Limited** refers to an improved source more than 30 minutes roundtrip. **Unimproved** sources include unprotected dug wells and unprotected springs. **No service** refers to the direct collection of water from surface waters such as rivers, lakes or irrigation channels.

Sanitation ladder: **At least basic** sanitation services (SDG 1.4.1) refer to the use of improved facilities which are not shared with other households. Improved sanitation facilities are those designed to hygienically separate excreta from human contact and include: flush/pour flush to piped sewer system, septic tanks or pit latrines; ventilated improved pit latrines, composting toilets or pit latrines with slabs. **Limited** sanitation service refers to an improved facility shared with other households. **Unimproved** sanitation facilities include flush/pour flush to an open drain, pit latrines without a slab, hanging latrines, and bucket latrines. **No service** refers to the practice of open defecation. **Note: Safely managed** sanitation services (SDG 6.2.1.a) refer to an improved facility not shared with other households and where excreta are safely disposed of in situ or transported and treated offsite. The MICS surveys collects information on the management of excreta from onsite facilities. For households where excreta are transported offsite (sewer connection, removal for treatment), further information is needed on the transport and treatment of excreta to calculate the proportion that are safely managed.

Hygiene ladder: **Basic** hygiene services (SDG 1.4.1 & SDG 6.2.1.b) refer to the availability of a handwashing facility on premises with soap and water. Handwashing facilities may be fixed or mobile and include a sink with tap water, buckets with taps, tippy-taps, and jugs or basins designated for handwashing. Soap includes bar soap, liquid soap, powder detergent, and soapy water but does not include ash, soil, sand or other handwashing agents. **Limited** hygiene service refers to a facility lacking water and/or soap. **No facility** means there is no handwashing facility on the household's premises.

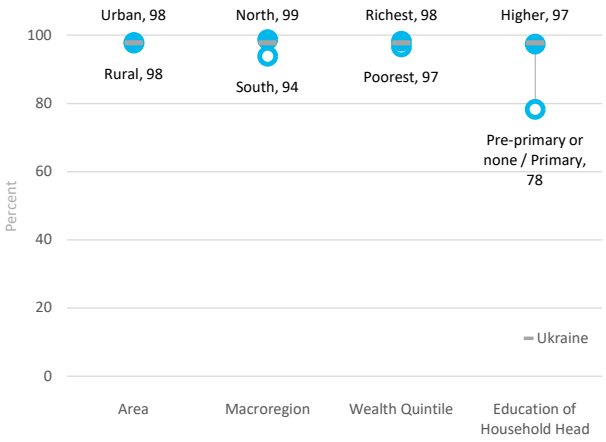
Basic services disaggregated by macro-region

Macro-region	Basic services			
	Drinking water	Sanitation	Hygiene	WASH
Ukraine	**98**	**94**	**85**	**78**
North	99	93	85	77
West	99	95	89	83
Center	97	94	78	72
East	98	95	82	76
South	94	93	86	75

Population distribution by coverage with drinking water, sanitation, and handwashing services, by macro-region, %

WASH: Inequalities in Basic Services

Basic Drinking Water

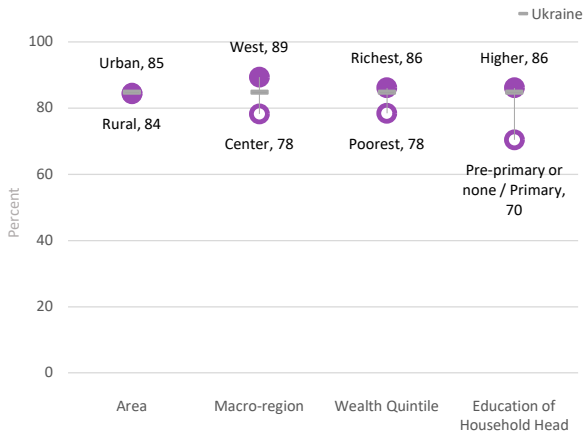


Percent of population using basic drinking water services by background characteristics

Basic Sanitation

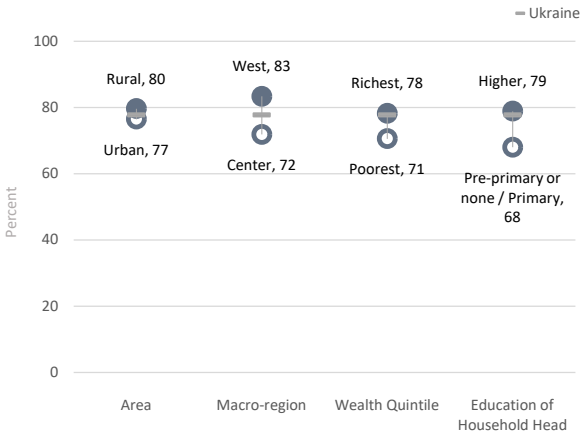
Percent of population using basic sanitation services by background characteristics

Basic Hygiene



Percent of population using basic hygiene services by background characteristics

Basic Drinking Water, Sanitation, and Hygiene



Percent of population using basic drinking water, sanitation, and hygiene services by background characteristics

The Ukraine Multiple Indicator Cluster Survey (MICS) was carried out in 2025–2026 under the national ownership and coordination of the State Statistics Service of Ukraine as part of the global MICS programme. The practical implementation and fieldwork were conducted by the Ukrainian Center for Social Reforms, with technical support from UNICEF and financial support from UNICEF and the Government of Germany through KfW Bank.

The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Drinking Water, Sanitation & Hygiene (WASH). Data from this snapshot can be found in tables WS.1.1 to WS.4.3 in the Survey Findings Report.

Further statistical snapshots and the Survey Findings Report for this and other surveys are available on mics.unicef.org/surveys.

For further information on the WHO/UNICEF Joint Monitoring Programme (JMP) for Water Supply, Sanitation and Hygiene indicator definitions and methods please visit washdata.org.

Ukraine 2025-26

Information & Communication Technology (ICT)

Multiple Indicator Cluster Surveys

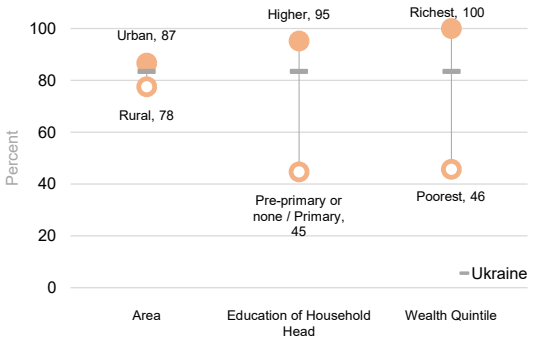
Household Ownership of ICT Equipment, Internet Access at Home & Use of Mobile Banking

Ukrstat unicef

Macro-region	Radio	TV	Fixed line telephone	Mobile phone	Smartphone	Computer	Internet access	Mobile banking
Ukraine	**16**	**93**	**2**	**97**	**83**	**50**	**84**	**76**
North	15	93	2	99	86	54	86	84
West	15	94	2	97	82	50	82	73
Center	17	93	1	91	72	43	76	65
East	16	94	< 1	97	87	45	89	75
South	18	92	1	98	90	63	90	84

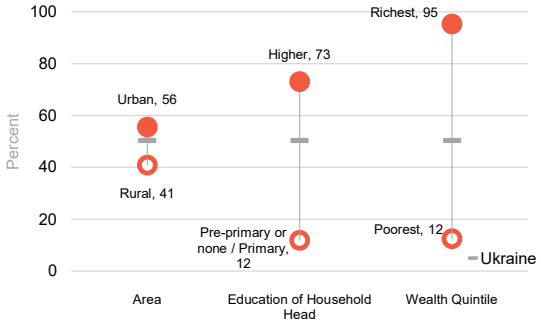
Proportion of households that have a radio, television, fixed telephone, mobile phone, smartphone, and computer; that have Internet access at home; and in which at least one household member uses a mobile phone to conduct financial transactions.

Household Ownership of a Smartphone



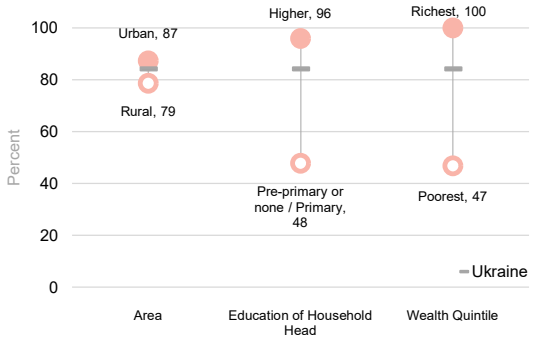
Percentage of households with a smartphone at home

Households Ownership of a Computer



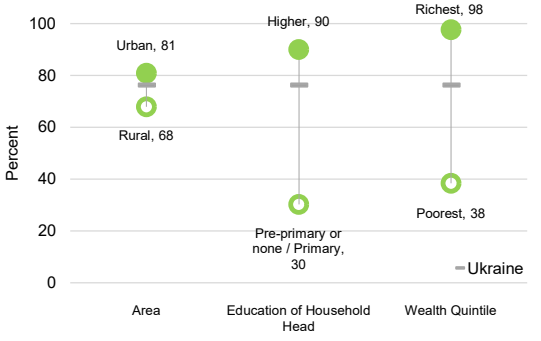
Percentage of households with a computer at home

Household Access to Internet at Home



Percentage of households with access to internet at home

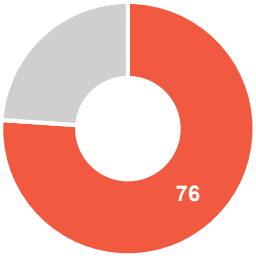
Household Use of Mobile Banking



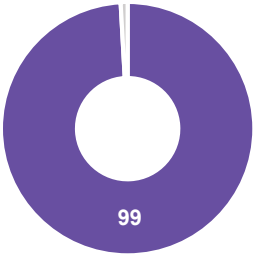
Percentage of households with at least one member using mobile banking

Use of ICT (women 15-49)

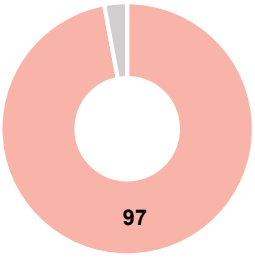
Computer Use



Mobile Phone Use



Internet Use: SDG17.8.1



Percentage of women age 15-49 years who during the last 3 months used a computer, used a mobile phone and used the internet

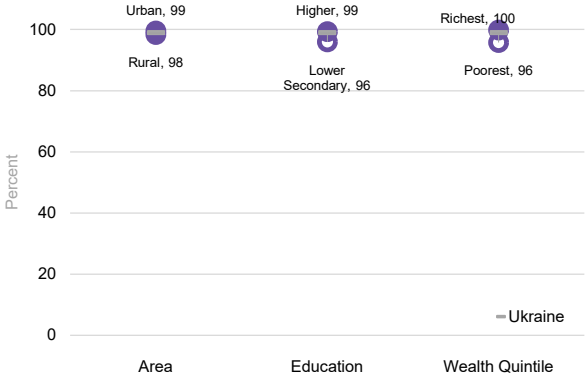
Disparities in Use of ICT (women 15-49)

Disparities in Computer Use

Proportion of women aged 15–49 years who used a computer during the last 3 months.

Note: Values for lower levels of education are not shown because the indicator is calculated based on fewer than 25 unweighted observations.

Disparities in Mobile Phone Use



Proportion of women aged 15–49 years who used a mobile phone during the last 3 months.

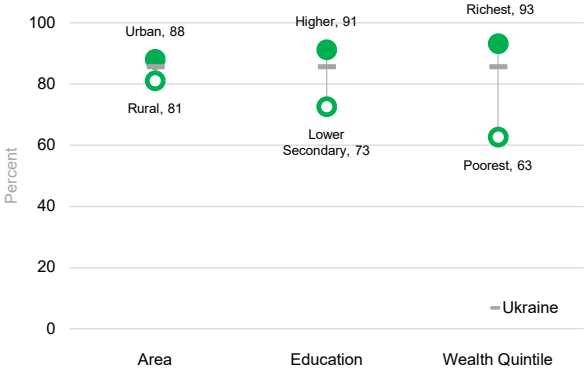
Note: Values for lower levels of education are not shown because the indicator is calculated based on fewer than 25 unweighted observations.

Disparities in Internet Use: SDG17.8.1

Proportion of women aged 15–49 years who used the Internet during the last 3 months.

Note: Values for lower levels of education are not shown because the indicator is calculated based on fewer than 25 unweighted observations.

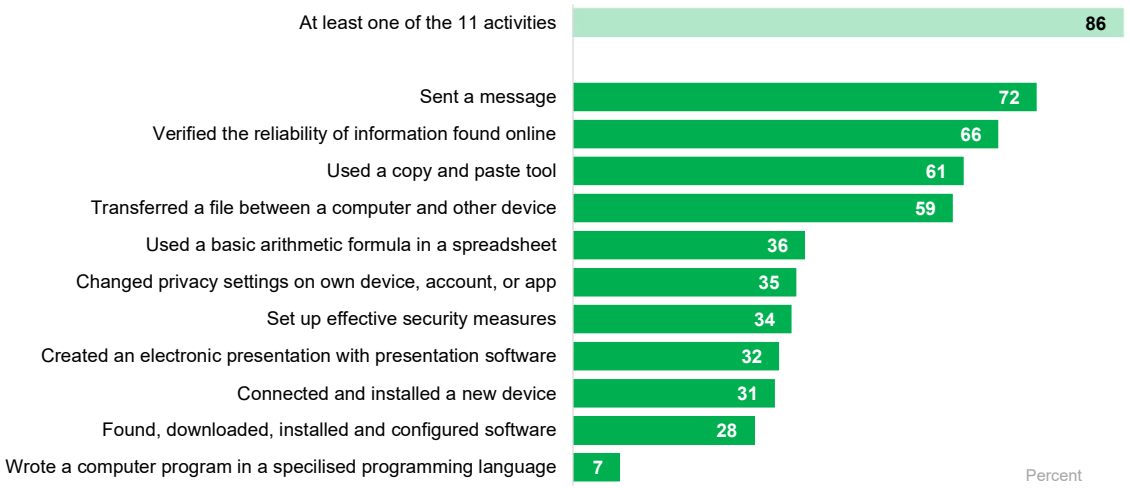
Computer skills disparities



Proportion of women who performed at least one of 11 computer-related activities.

Note: Values for lower levels of education are not shown because the indicator is calculated based on fewer than 25 unweighted observations.

Specific Computer Skills (women 15-49)



Percentage of women age 15-49 years who in the last 3 months have carried out specific computer related activities and the percentage who have carried out at least one of these activities

Regional Data on ICT Use & Skills among women age 15-49 years

Macro-region	Computer Use	Mobile Phone Use	Internet Use	Performed at least 1 computer-related activity
Ukraine	**76**	**99**	**97**	**86**
North	80	100	99	93
West	79	99	97	86
Center	76	96	98	83
East	65	100	95	75
South	75	99	96	88

Proportion of women aged 15–49 years who used a computer, mobile phone, and the Internet during the last 3 months, and proportion of those who performed at least one of 11 computer-related activities.

Key messages

- Household access to mobile phones is almost universal — 97%, while 93% of households have a television.
- 84% of households have internet access at home, but only half of households have a computer — 50%.
- Use of mobile phones for financial transactions is widespread: at least one household member uses a mobile phone for this purpose in 76% of households.
- 86% of women aged 15–49 performed at least one of the 11 computer-related activities, but programming remains the least common skill — 7%.

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The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to ICT. Data from this snapshot can be found in tables LN.6.1, LN.6.2W_SS and LN.6.3W_SS in the Survey Findings Report.

Further statistical snapshots and the Survey Findings Report for this and other surveys will be available on mics.unicef.org/surveys.

Ukraine 2025-26

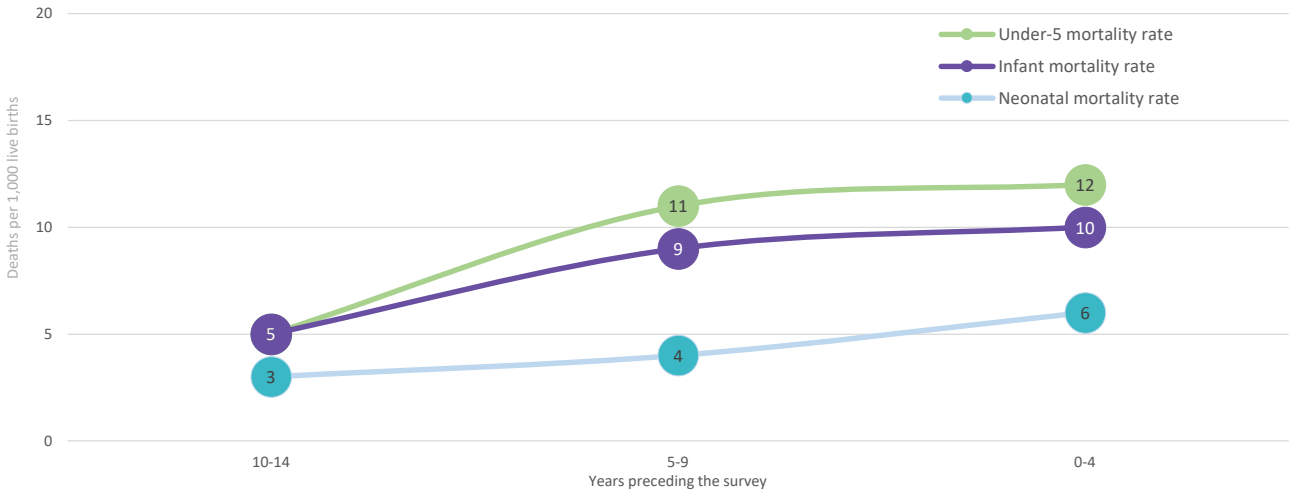
Child Mortality

MICS

Multiple Indicator Cluster Surveys

Ukrstat unicef

Mortality Rates among Children Under-5



Years preceding the survey	Neonatal mortality rate: SDG 3.2.2	Post-neonatal mortality rate	Infant mortality rate	Child mortality rate	Under-5 mortality rate: SDG 3.2.1
0-4	6	4	10	3	12
5-9	4	6	9	2	11
10-14	3	1	5	0	5

Neonatal mortality (NN): probability of dying within the first month of life
Post-neonatal mortality: calculated as the difference between infant and neonatal mortality rates
Infant mortality ($_1q_0$): probability of dying between birth and first birthday
Child mortality ($_4q_1$): probability of dying between the first and fifth birthday
Under-5 mortality ($_5q_0$): probability of dying between birth and fifth birthday

MICS uses a **direct method for estimation of child mortality**. This involves collecting **full birth histories** whereby women age 15-49 are asked for the date of birth of each child born alive, whether the child is still alive and, if not, the age at death.

Key messages

- For the five-year period before the survey, the under-five mortality rate was 12 deaths per 1,000 live births. The infant mortality rate was 10 deaths per 1,000 live births, and the neonatal mortality rate was 6 per 1,000 live births.
- Compared with the period 10–14 years before the survey, the estimated under-five mortality rate is now higher: 12 versus 5 deaths per 1,000 live births.
- Most under-five mortality occurs during the first year of life.
- The largest differences in under-five mortality are associated with birth order: the rate ranges from 8 for first birth to 26 for 4-6 births deaths per 1,000 live births.

Differentials in Child Mortality

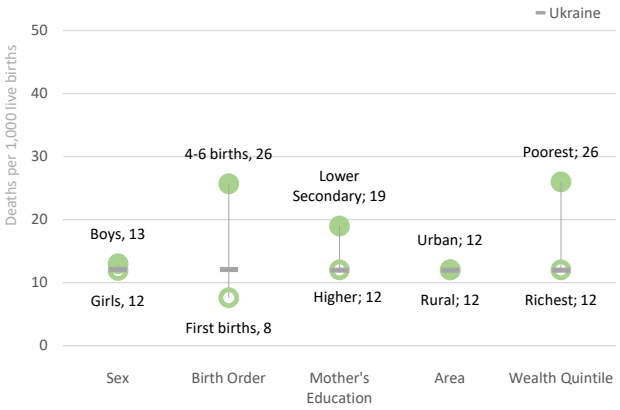
Trends in under-5 mortality rates

The data sources used in the chart below are taken from the MICS 2025–26 final reports. Data from the 2001 population census, MICS 2012, and vital registration statistics provided to WHO in 2025 are published on the web portal of the United Nations Inter-agency Group for Child Mortality Estimation (UN IGME).

Data sources on child mortality are published on the web portal www.childmortality.org, which is maintained by the United Nations Inter-agency Group for Child Mortality Estimation (UN IGME). UN IGME data may differ from published estimates from surveys, censuses, or civil registration systems because UN IGME recalculates estimates using shorter intervals, a longer reference period, and/or calendar years where data are available.

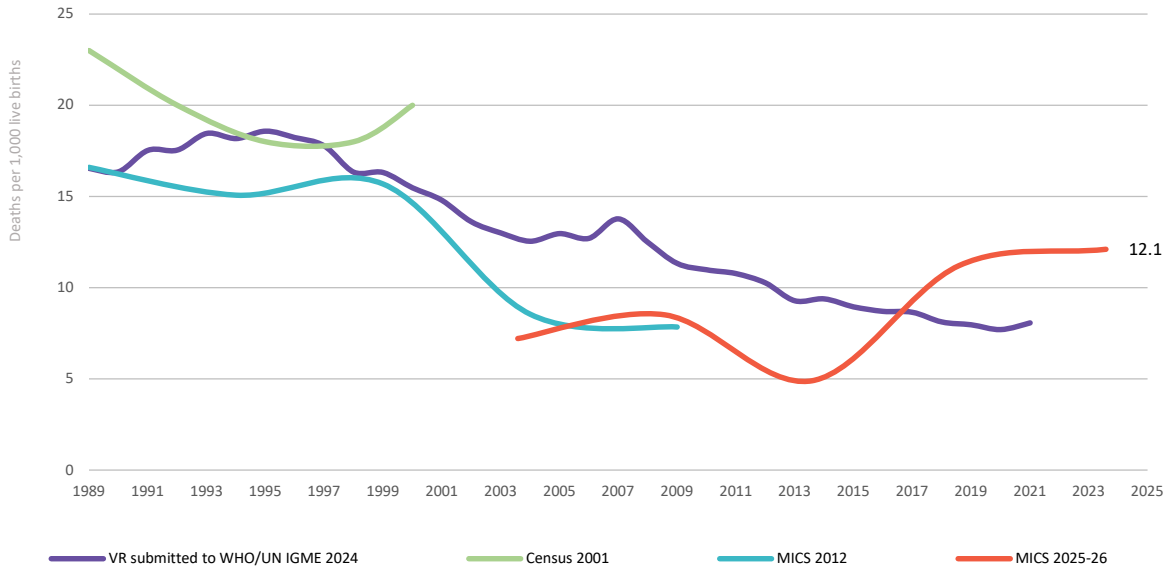
Published UN IGME estimates are not included in this chart because new estimates will be calculated based on the MICS 2025–26 results.

Under-5 mortality rate by demographic factors and maternal fertility related conditions



Under-five mortality rates for the five-year period preceding the survey, by socio-economic characteristics, area, and demographic factors and maternal fertility related conditions

Values for lower levels of education are not shown because the indicator is calculated based on fewer than 25 unweighted observations.



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The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Child Mortality. Data from this snapshot can be found in tables CS.1, CS.2, and CS.3 in the Survey Findings Report.

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Ukraine 2025-26

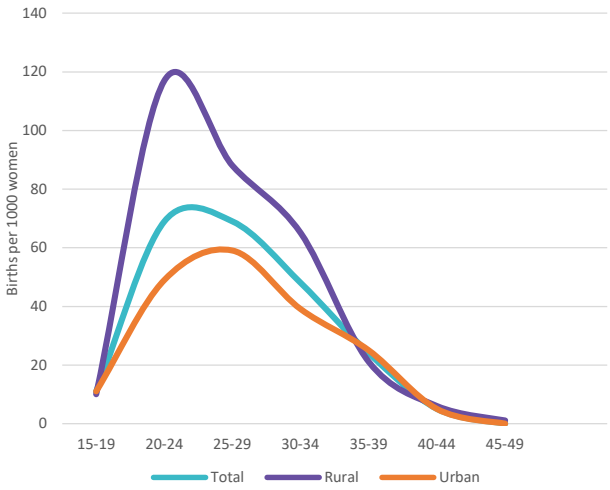
Fertility & Family Planning

Multiple Indicator Cluster Surveys

Ukrstat unicef

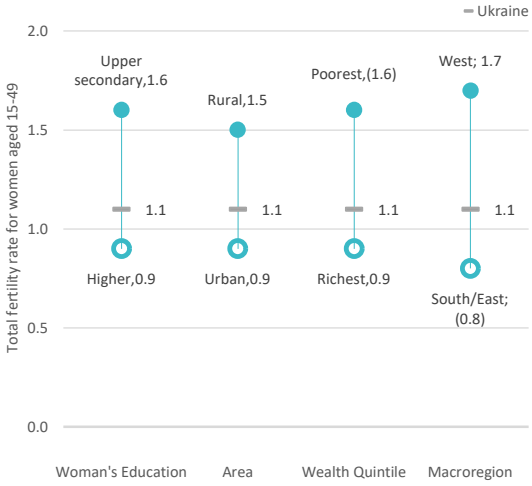
Fertility

Age Specific Fertility Rates



Age-specific fertility rates (ASFR) are the number of live births in the last 3 years, divided by the average number of women in that age group during the same period, expressed per 1,000 women

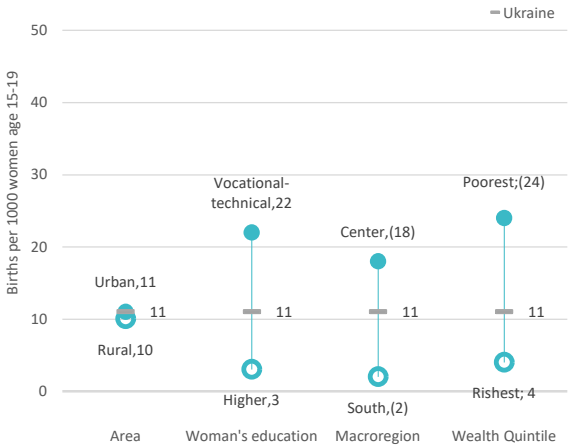
Total Fertility Rate



The total fertility rate (TFR) is calculated by summing the age-specific fertility rates (ASFRs) calculated for each of the five-year age groups of women, from age 15 through to age 49

( ): A rate in parenthesis is based on 125 to 249 unweighted woman-years of exposure. The indicator for lower education levels is not given because the indicator is calculated on fewer than 25 unweighted woman-years of exposure.

Adolescent Birth Rate: SDG indicator 3.7.2



Age-specific fertility rate for girls age 15-19 years for the three-year period preceding the survey

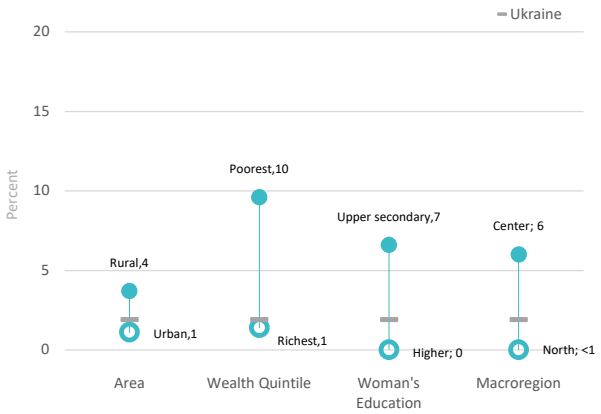
( ): A rate in parenthesis is based on 125 to 249 unweighted woman-years of exposure.

The indicators for lower education levels are not given because they are calculated on fewer than 125 unweighted woman-years of exposure.

Adolescent Birth rate SDG 3.7.2 indicator is under target 3.7: By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes.

Reducing adolescent fertility and addressing the multiple factors underlying it are essential for improving sexual and reproductive health and the social and economic well-being of adolescents. Preventing births very early in a woman's life is an important measure to improve maternal health and reduce infant mortality.

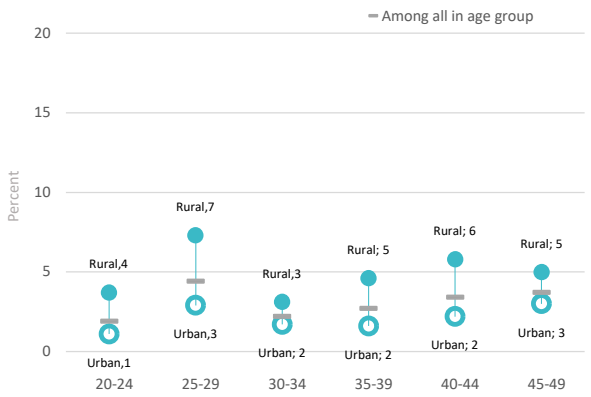
Early Childbearing - by Age 18



Percentage of women age 20-24 years who have had a live birth before age 18, by background characteristics.

The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

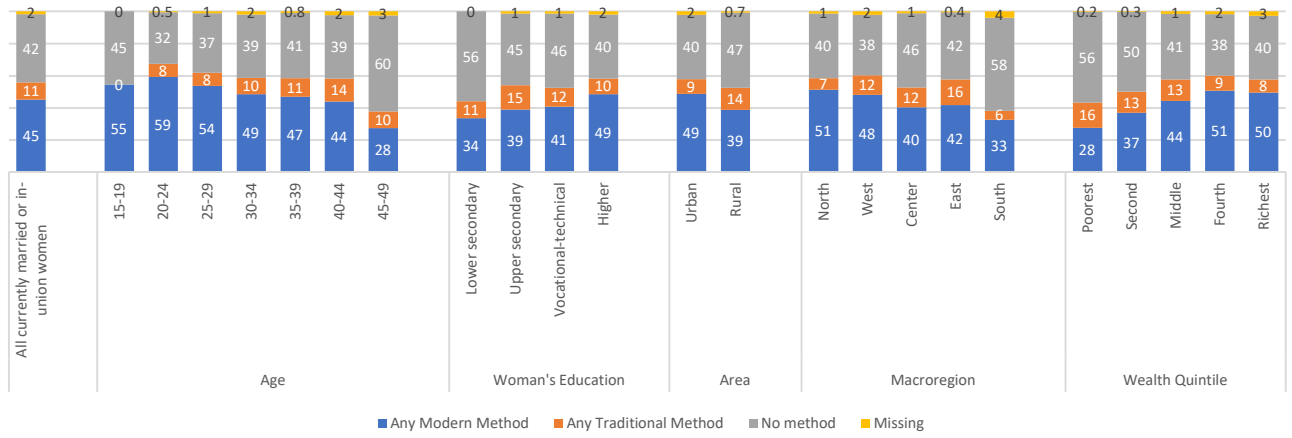
Trends in Early Childbearing - by Age 18



Percentage of women age 20-49 years who have had a live birth before age 18, by area and age group

Family Planning

Method of Family Planning by Various Characteristics



Percentage of women age 15-49 years currently married or in union who are using (or whose partner is using) a contraceptive method.

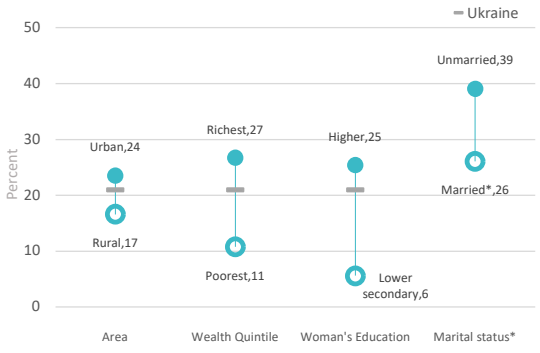
Modern Methods include female sterilisation, male sterilisation, IUD, injectables, implants, pills, male condom, female condom, diaphragm, foam, jelly and contraceptive patch **Traditional methods** refer to periodic abstinence and withdrawal.

() Data for indicator are based on 25-49 unweighted cases.

The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Met Need for Family Planning

Met Need for Family Planning - Spacing

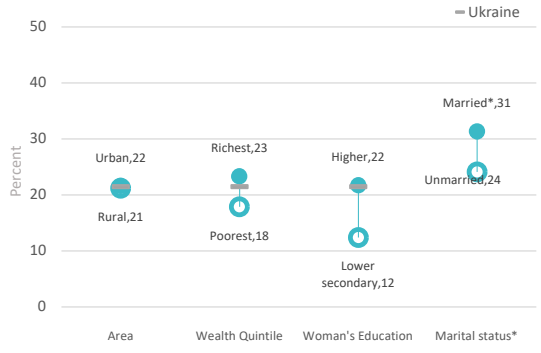


Percentage of women age 15-49 years with met need for family planning for spacing, by background characteristics

*Married refers to women who are currently married or in union, whereas Unmarried refers to sexually active women among those currently unmarried/not in union.

The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Met Need for Family Planning – Limiting



Percentage of women age 15-49 years with met need for family planning for limiting, by background characteristics

*Married refers to women who are currently married or in union, whereas Unmarried refers to sexually active women among those currently unmarried/not in union.

The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Percentage of Demand for Family Planning Satisfied with Modern Methods - SDG indicator 3.7.1

Percentage of women age 15-49 years with demand for family planning satisfied with modern methods, by background characteristics – among all women with demand for family planning

*Married refers to women who are currently married or in union, whereas Unmarried refers to sexually active women among those currently unmarried/not in union.

The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

The proportion of demand for family planning satisfied with modern methods (SDG indicator 3.7.1) is useful in assessing overall levels of coverage for family planning programmes and services. Access to and use of an effective means to prevent pregnancy helps enable women and their partners to exercise their rights to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so. Meeting demand for family planning with modern methods also contributes to maternal and child health by preventing unintended pregnancies and closely spaced pregnancies, which are at higher risk for poor obstetrical outcomes.

Regional Data on Fertility & Family Planning

Macro-region	Adolescent Birth Rate (age 15-19)	Total Fertility Rate	Childbearing before 18*	Contraception Use of modern method among married / in-union women	Contraception Use of any method among married / in-union women	Demand for family planning satisfied with modern methods
Ukraine	**11**	**1.1**	**2**	**45**	**58**	**65**
North	15	0.9	<1	51	60	73
West	7	1.7	3	48	62	62
Center	(18)	(1.2)	6	40	54	61
East	(13)	(0.8)	1	42	58	66
South	(2)	(0.8)	(1)	33	42	53

*Percentage of women age 20-24 years who have had a live birth before age 18

( ): A rate in parenthesis is based on 125 to 249 unweighted woman-years of exposure.

Key Messages

- The total fertility rate is 1.1 children per woman.
- The adolescent birth rate among girls aged 15–19 is 11 births per 1,000 girls in this age group.
- 2% of women aged 20–24 had a live birth before age 18.
- Among women aged 15–49 who are married or in union, 45% use modern contraceptive methods and 58% use any method.
- Demand for family planning satisfied with modern methods is 65% among all women; regionally, this indicator ranges from 53% in the South to 73% in the North.

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The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Fertility and Family Planning. Data from this snapshot can be found in tables TM.1.1, TM.2.1, TM.2.2W, TM.2.3W, TM.3.1, TM.4.1, TM.4.2 and TM.4.3 in the Survey Findings Report.

Further statistical snapshots and the Survey Findings Report for this and other surveys will be available on mics.unicef.org/surveys.

Ukraine 2025-26

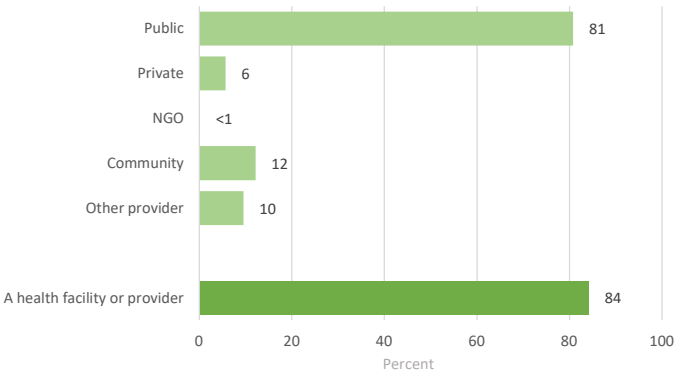
Child Health & Care of Illness

Multiple Indicator Cluster Surveys

Symptoms of Acute Respiratory Infection (ARI)

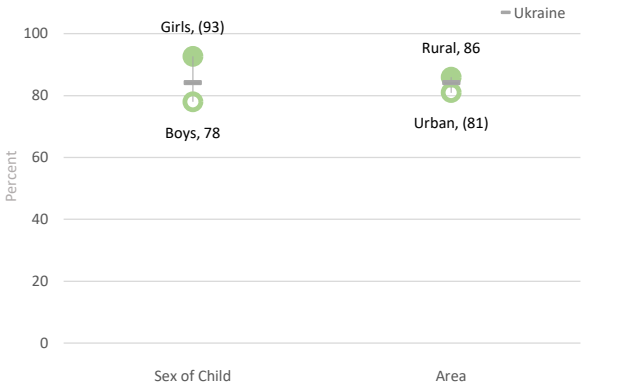
Ukrstat unicef

Care-seeking for Symptoms of ARI



Percentage of children age 0-59 months with symptoms of ARI in the last two weeks for whom advice or treatment was sought, by source of advice or treatment

Disparities in Care-seeking for Symptoms of ARI



Percentage of children age 0-59 months with symptoms of ARI in the last two weeks for whom advice or treatment was sought at a health facility or provider

( ) The indicator is calculated based on 25–49 unweighted observations (value is shown in parentheses and should be interpreted with caution).

Key Messages

- Among children under age 5 with symptoms of acute respiratory infection, 84% sought advice or treatment from a health facility or health provider.
- Care for symptoms of acute respiratory infection was most often received from a public health facility — 81%.
- Care-seeking differs between rural and urban areas by 5 percentage points
- Care seeking from health facility or provider differs by sex of the child: the gap between girls and boys is 24 percentage points.

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The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Child Health & Care of Illness. Data from this snapshot can be found in table TC.5.1 in the Survey Findings Report.

Further statistical snapshots and the Survey Findings Report for this and other surveys will be available on mics.unicef.org/surveys

Ukraine 2025-26

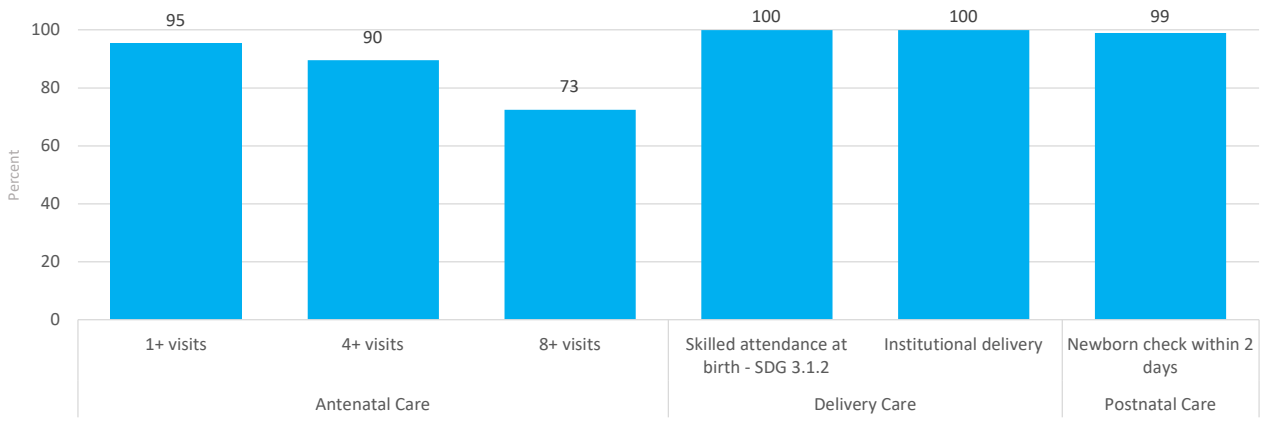
Maternal & Newborn Health

MICS Multiple Indicator Cluster Surveys

Key Elements of Maternal & Newborn Health

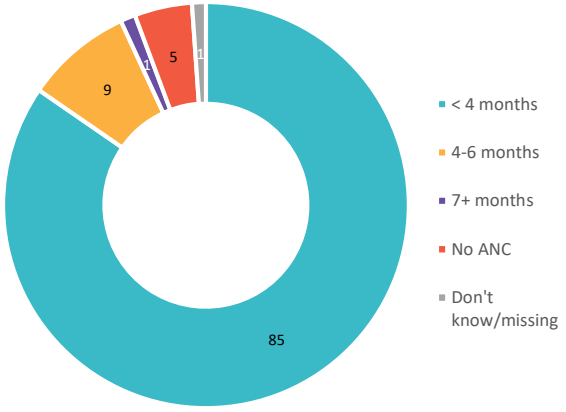
Ukrstat unicef

Maternal & Newborn Health Cascade by Area



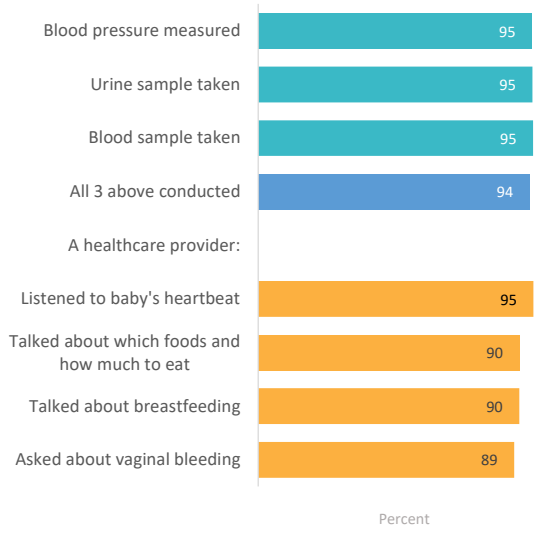
Percentage of women age 15-49 years with a live birth in the last 2 years who were attended during their last pregnancy that led to a live birth at least once by skilled health personnel or at least four times or eight times by any provider, who were attended by skilled health personnel during their most recent live birth (SDG 3.1.2), whose most recent live birth was delivered in a health facility, and percentage of last live births in the last 2 years who received a health check while in facility or at home following delivery, or a post-natal care visit within 2 days after delivery

Timing of First Antenatal Care Visit



Percentage of women age 15-49 years with a live birth in the last 2 years who were attended during their last pregnancy that led to a live birth at least once by skilled health personnel, by the timing of first ANC visit

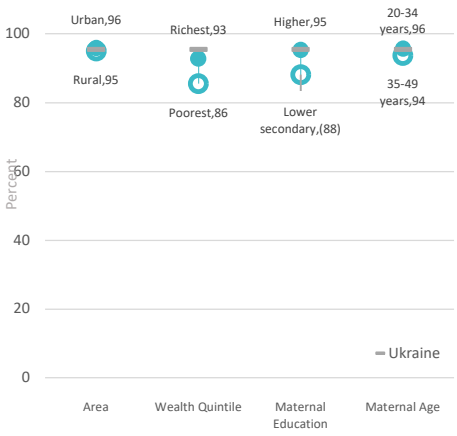
Content & Coverage of Antenatal Care Services



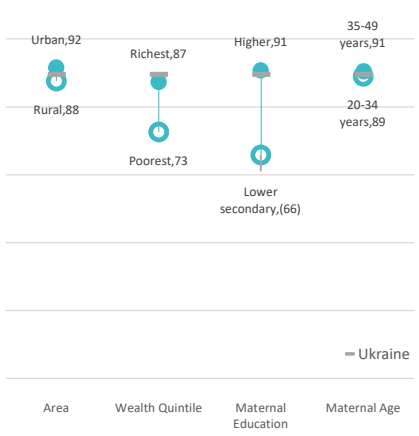
Percentage of women age 15-49 years with a live birth in the last 2 years who had their blood pressure measured and gave urine and blood samples, for whom a healthcare provider listened to the baby's heartbeat, talked about which foods and how much to eat, about breastfeeding, and about vaginal bleeding, during the last pregnancy that led to a live birth

Coverage of Antenatal Care by Various Characteristics

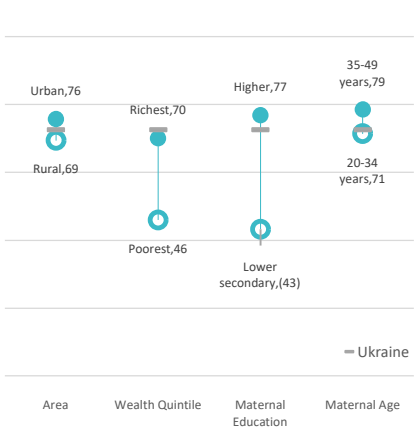
1+ ANC visit – any skilled provider



4+ ANC visits – any provider



8+ ANC visits – any provider

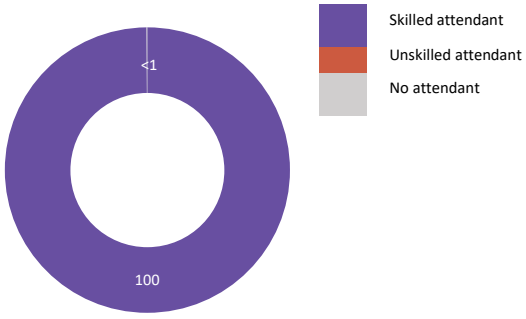


Percentage of women age 15-49 years with a live birth in the last 2 years who were attended during their last pregnancy that led to a live birth at least once by skilled health personnel or at least four times or eight times by any provider

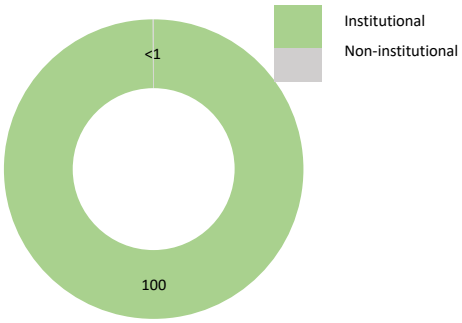
() Data for indicator are based on 25-49 unweighted cases.
The indicators for lower education levels and younger age group are not given because they are calculated on fewer than 25 unweighted observations.

Coverage of Skilled Attendance at Birth & Institutional Delivery

Skilled Attendance at Birth

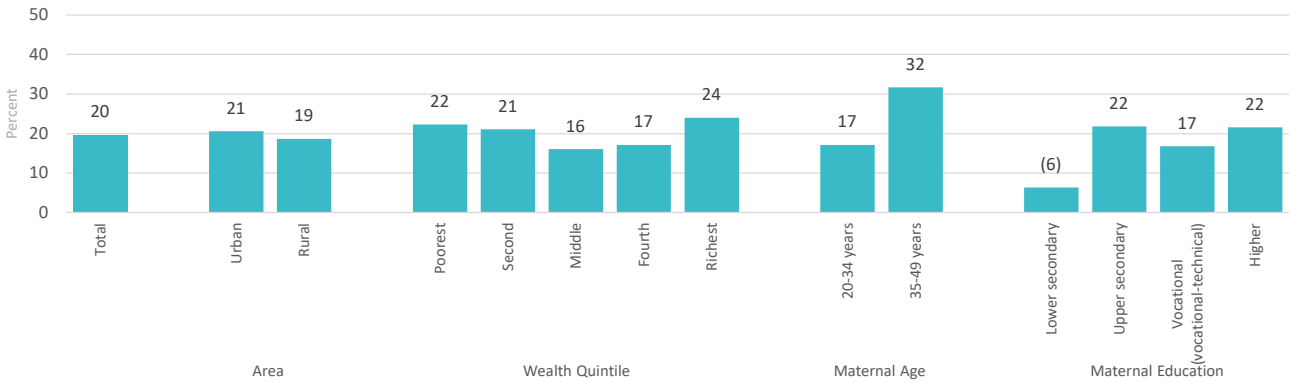


Institutional Delivery



Percentage of women age 15-49 years with a live birth in the last 2 years who were attended by skilled health personnel during their most recent live birth and percentage whose most recent live birth was delivered in a health facility (institutional delivery)

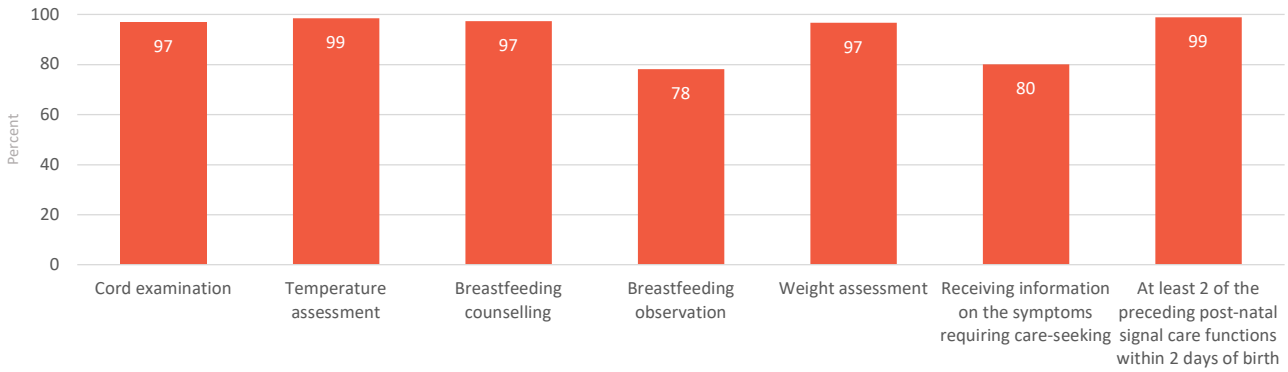
Caesarian Section by Various Characteristics



Percentage of women age 15-49 years with a live birth in the last 2 years whose most recent live birth was delivered by caesarean section by various characteristics

() Data for indicator are based on 25-49 unweighted cases.
The indicators for lower education levels and younger age group are not given because they are calculated on fewer than 25 unweighted observations.

Coverage of Newborn Care



Among the last live-birth in the last 2 years, percentage of newborns who received selected post-natal care function, and percentage where the newborn received at least 2 postnatal signal care functions within 2 days after birth*

* At least 2 of i) umbilical cord examination, ii) temperature assessment, iii) breastfeeding counselling or observation, iv) weight assessment, and v) counselling on danger signs for newborns

Regional Data on Maternal and Newborn Cascade

Macro-region	ANC: At least 1 visit (skilled provider)	ANC: Visits (any provider)		Skilled Attendance at Birth	Institutional Delivery	Postnatal Care for Newborn <2 days
		At least 4	At least 8			
Ukraine	**95**	**90**	**73**	**100**	**100**	**99**
North	86	83	67	100	100	94
West	97	92	67	100	100	100
Center	99	86	81	100	100	100
East	99	93	92	100	100	100
South	(98)	(93)	(82)	(100)	(100)	(100)

For indicator definitions, see earlier charts

() Data for indicator are based on 25-49 unweighted cases.

Key Messages

- Coverage of antenatal care is high: 95% of women had at least one antenatal care visit with a skilled health provider, and 90% had four or more visits.
- 73% of women had eight or more antenatal care visits, indicating lower coverage of the more intensive standard of antenatal care.
- Almost 100% births took place in a health facility and were attended by skilled health personnel.
- 99% of newborns received at least two signal functions of postnatal care within two days after birth.
- Most key components of newborn care have coverage above 95%, but observation of breastfeeding and counselling on danger signs requiring care-seeking are less common — 78% and 80%, respectively.

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The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Maternal & Newborn Health. Data from this snapshot can be found in tables TM.5.1, TM.5.2, TM.5.3, TM.6.1, TM.6.2, and TM.8.6 in the Survey Findings Report.

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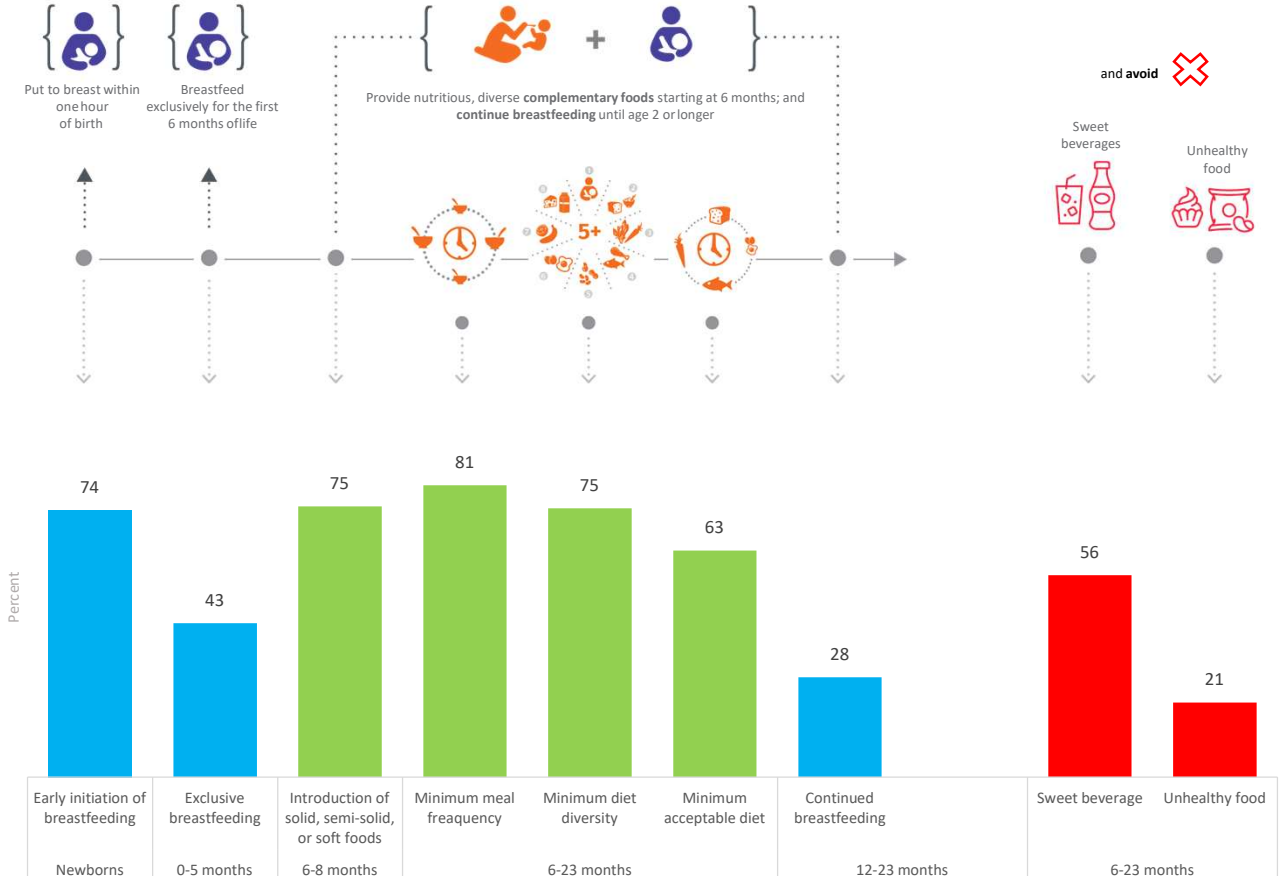
Ukraine 2025-26

Infant & Young Child Feeding (IYCF)

Multiple Indicator Cluster Surveys

Ukrstat unicef

Infant & Young Child Feeding



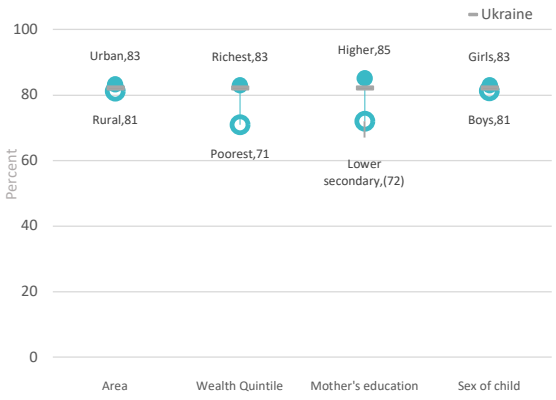
Early initiation: percentage of newborns put to breast within 1 hour of birth; **Exclusive breastfeeding:** percentage of infants aged 0-5months receiving only breastmilk; **Introduction to solids**: percentage of infants aged 6-8 months receiving solid or semi-solid food; **Minimum diet diversity:** percentage of children aged 6-23 months receiving 5 of the 8 recommended food groups; **Minimum meal frequency:** percentage of children aged 6-23 months receiving the recommended minimum number of solid/milk feeds as per the age of child; **Minimum acceptable diet:** percentage of children aged 6-23 months receiving the minimum diversity of foods and minimum number of feeds; **Continued breastfeeding :** percentage of children aged 12-23 months receiving breastmilk. **Sweet beverage:** percentage of children aged 6-23 months receiving sweet beverages. **Unhealthy food :** percentage of children aged 6-23 months receiving selected sentinel unhealthy foods.

Key Messages

- 74% of newborns were put to the breast within the first hour after birth, but exclusive breastfeeding among children aged 0–5 months is 43%.
- Among children aged 6–23 months, 75% receive a minimum dietary diversity, but only 63% have a minimum acceptable diet.
- Consumption of sweet beverages is widespread: 56% of children aged 6–23 months received them; 21% of children in this age group received unhealthy foods.

Infant & Young Child Feeding: Disaggregation by background characteristics

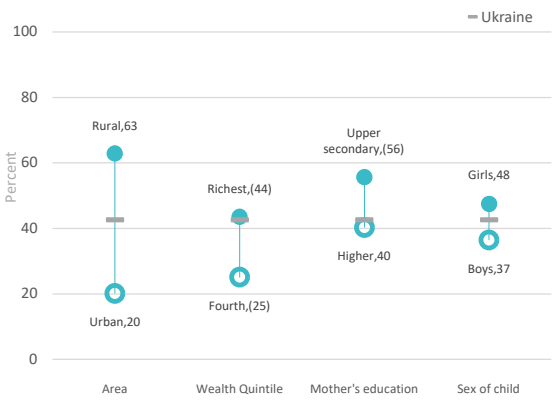
Early initiation of breastfeeding



Percentage of newborns put to breast within 1 hour of birth, by background characteristics

() Data for indicator are based on 25-49 unweighted cases.
The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

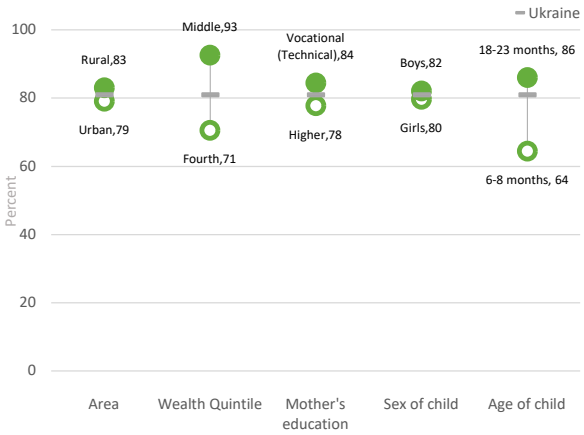
Exclusive breastfeeding



Percentage of infants aged 0-5 months receiving only breastmilk, by background characteristics

() Data for indicator are based on 25-49 unweighted cases.
The indicators for lower education levels and wealth quintiles are not given because they are calculated on fewer than 25 unweighted observations.

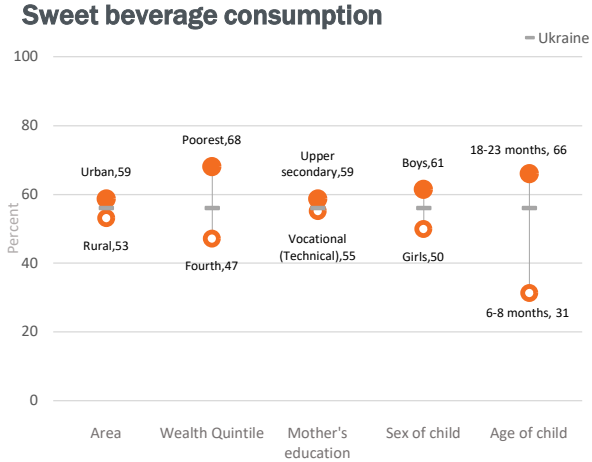
Minimum meal frequency



Percentage of children aged 6-23 months receiving the recommended minimum number of solid/milk feeds as per the age of child, by background characteristics

The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

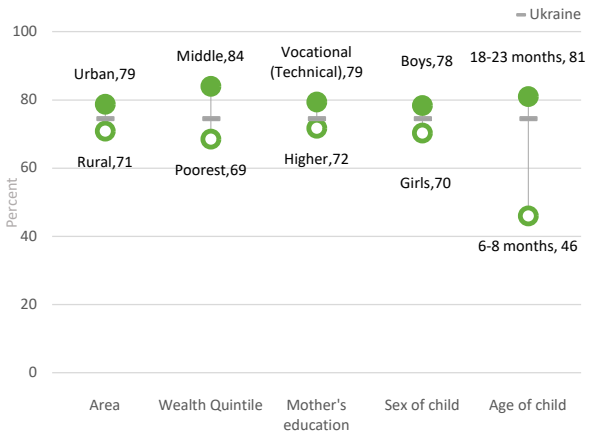
Sweet beverage consumption



Percentage of children aged 6-23 months that were fed a sweet beverage, by background characteristics

The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

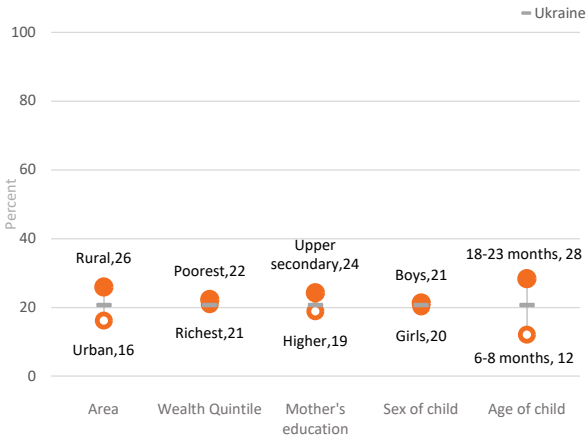
Minimum Dietary Diversity: SDG 2.2.4



Percentage of children aged 6-23 months that were fed food from at least 5 out of 8 food groups, by background characteristics

The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Unhealthy food consumption

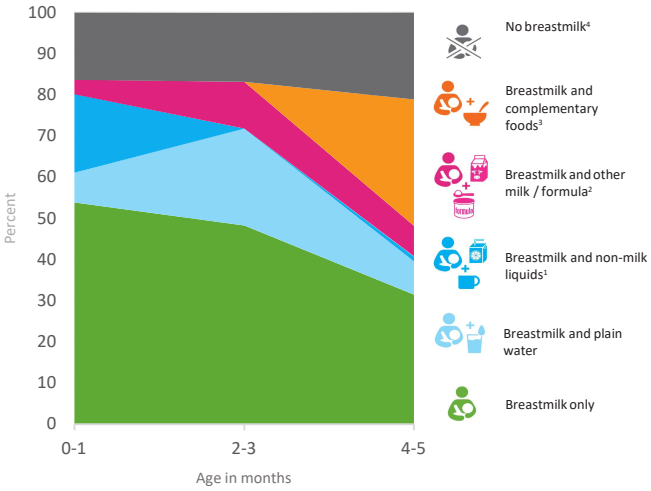


Percentage of children aged 6-23 months receiving selected sentinel unhealthy foods, by background characteristics

The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Infant & Young Child Feeding

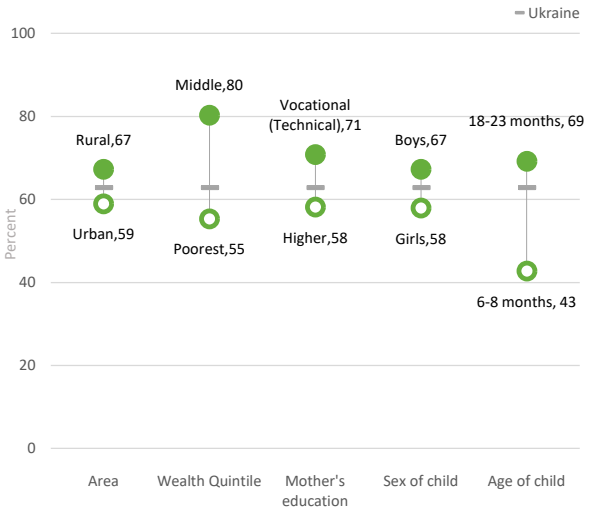
Feeding patterns of infants 0-5 months old



Percentage of infants age 0-5 months receiving breastmilk only, breastmilk and plain water, breastmilk and non-milk liquids, breastmilk and other milk/formula, breastmilk and complementary foods, and no breastmilk

Notes: 1) may also have been fed plain water; 2) may also have been fed plain water and/or non-milk liquids; 3) may also have been fed plain water, non-milk liquids and/or other milk/formula; 4) may have been fed plain water, non-milk liquids, other milk/infant formula and/or solid, semi-solid, and soft foods.

Minimum acceptable diet (children aged 6-23 months)



Percentage of children aged 6-23 months receiving the minimum diversity of foods and minimum number of feeds, by background characteristics

The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Regional Data

	Newborns	Infants 0-5 months old	Children aged 6-23 months				
Macro-region	Early initiation of breastfeeding	Exclusive breastfeeding	Minimum meal frequency	Minimum Dietary Diversity: SDG 2.2.4	Minimum acceptable diet	Sweet beverage consumption	Unhealthy food consumption
Ukraine	**82**	**43**	**81**	**75**	**63**	**56**	**21**
North	78	(*)	85	68	57	63	17
West	83	42	8	79	69	52	26
Center	84	(52)	79	90	70	68	20
East	79	(*)	74	55	45	57	8
South	(91)	(*)	(65)	(54)	(45)	(37)	(13)

For indicator definitions, see earlier charts

(*) Data for indicator are based on <25 unweighted cases and not shown in the graph/table.
() Data for indicator are based on 25-49 unweighted cases.

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The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Infant & Young Child Feeding . Data from this snapshot can be found in tables TC.7.1, TC.7.2, TC.7.3, TC.7.4, TC.7.6 and TC.7.7 in the Survey Findings Report.

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Ukraine 2025-26

Nutritional Status of Children Under 5 & Age 5-9

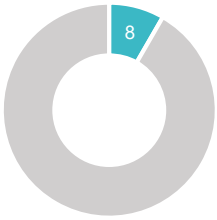
Multiple Indicator Cluster Surveys

Anthropometric Malnutrition Indicators for Children Under 5

Ukrstat unicef

Stunting: SDG 2.2.1

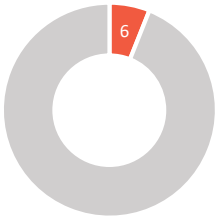
Stunting refers to a child under 5 who is too short for his or her age. Stunting is the failure to grow, is associated with cognitive impairment, and is the result of chronic or recurrent malnutrition.



Percentage of children under-5 who are stunted

Wasting: SDG 2.2.2

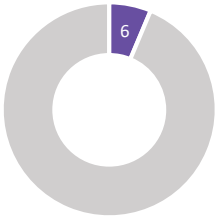
Wasting refers to a child under 5 who is too thin for his or her height. Wasting, or acute malnutrition, is the result of recent rapid weight loss or the failure to gain weight. A child who is moderately or severely wasted has an increased risk of death, but treatment is possible.



Percentage of children under-5 who are wasted

Overweight: SDG 2.2.2

Overweight refers to a child under 5 who is too heavy for his or her height. This form of malnutrition results from an imbalance between calories consumed and expended, and increases the risk of noncommunicable diseases later in life.



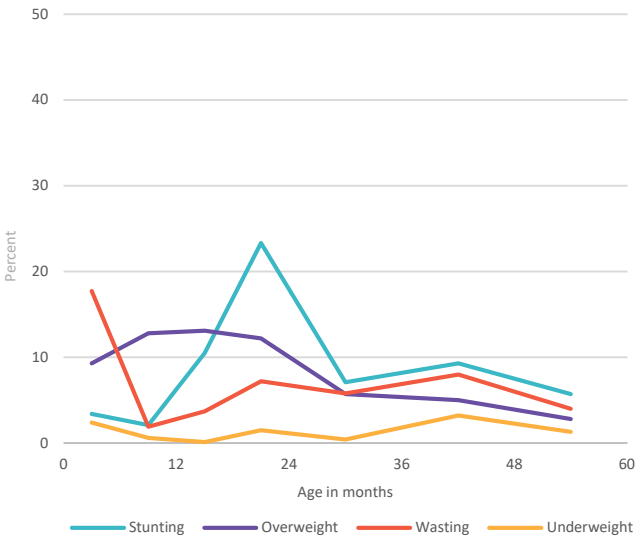
Percentage of children under-5 who are overweight

Underweight

Underweight is a composite form of undernutrition that can include elements of stunting and wasting of children under 5(i.e., an underweight child can have a reduced weight for their age due to being too short for their age and/or being too thin for their height).

Percentage of children under-5 who are underweight

Prevalence of Malnutrition by Age of Children Under 5



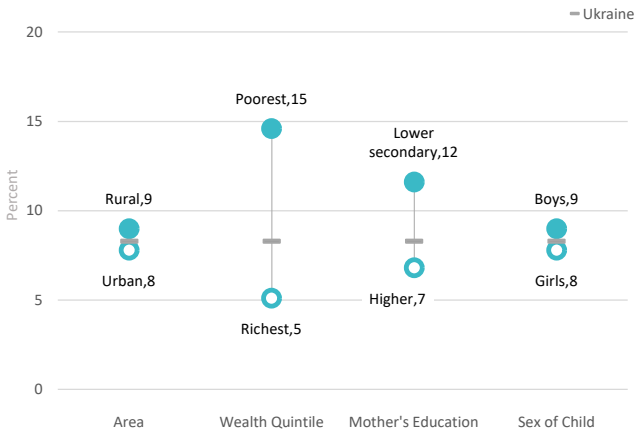
Percentage children who are underweight, stunted, wasted, and overweight, by age in months

Key Messages

- Among children under age 5, 8% are stunted, 6% are overweight, 6% are wasted, and 2% are underweight.
- The highest prevalence of stunting among children under age 5 was recorded in the South — 15%, and the lowest in the North — 4%.
- Wasting among children under age 5 is highest in the West and East — 8% in both regions.
- Among children aged 5–9, overweight is much more common than thinness: 26% versus 4%.
- The highest levels of overweight among children aged 5–9 are observed in the Centre and South — 34% and 35%, respectively.

Nutritional Status of Children Under 5: Disaggregates

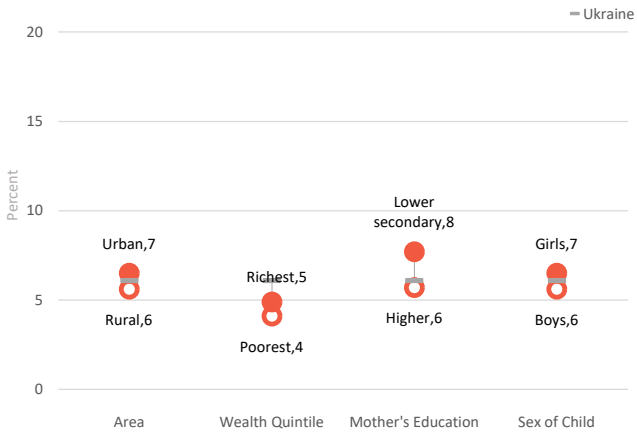
Stunting: SDG 2.2.1



Percentage of under 5 children who are stunted, by background characteristics

The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Wasting: SDG 2.2.2



Percentage of under 5 children who are wasted, by background characteristics

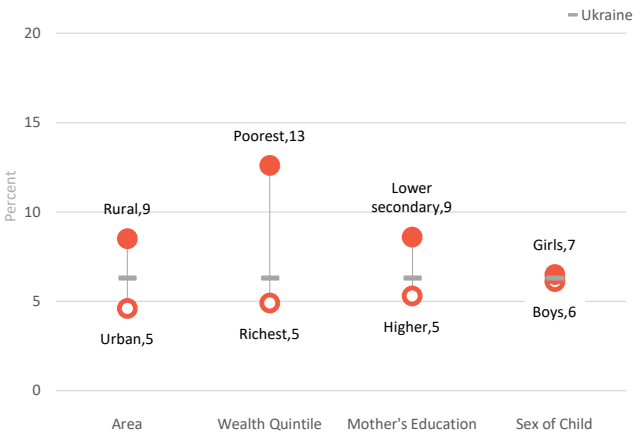
The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Underweight

Percentage of under 5 children who are underweight, by background characteristics

The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Overweight: SDG 2.2.2



Percentage of under 5 children who are overweight, by background characteristics

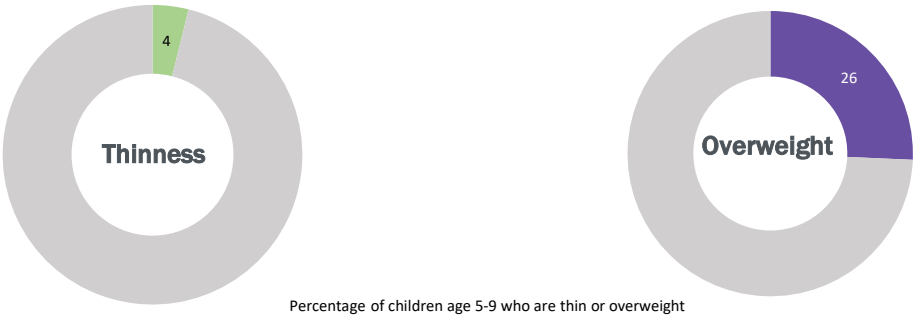
The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Regional Data on Stunting, Overweight, Wasting & Underweight of Children Under 5

	Stunting: SDG 2.2.1	Overweight: SDG 2.2.2	Wasting: SDG 2.2.2	Underweight
	% stunted (moderate and severe)	% overweight (moderate and severe)	% wasted (moderate and severe)	% underweight (moderate and severe)
Ukraine	**8**	**6**	**6**	**2**
North	4	4	3	<1
West	9	8	8	2
Center	8	8	3	1
East	6	5	8	1
South	15	3	5	<1

Percentage of under 5 children who are stunted, overweight, wasted, or underweight, by macroregion

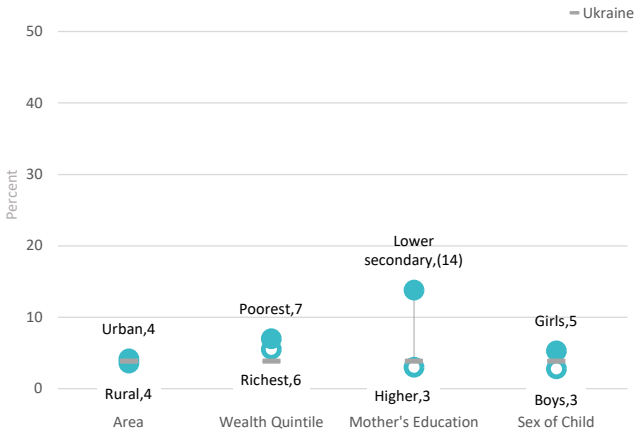
Anthropometric Malnutrition Indicators for Age 5-9



Percentage of children age 5-9 who are thin or overweight

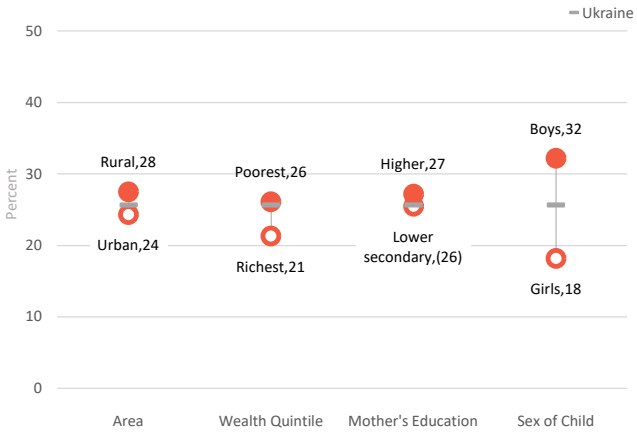
Nutritional Status of Children Age 5-9: Disaggregates

Body Mass Index for Age: Thinness



Percentage of children age 5-9 who are thin, by background characteristics

Body Mass Index for Age: Overweight



Percentage of children age 5-9 who are overweight, by background characteristics

() Data for indicator are based on 25-49 unweighted cases.
The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

	Thinness	Overweight
	% low BMI-for-age (moderate and severe)	% high BMI-for-age (moderate and severe)
Ukraine	**4**	**26**
North	3	22
West	5	23
Center	5	34
East	5	24
South	<1	35

Percentage of children age 5-9 who are thin or overweight, by macro-region

Body Mass Index (BMI) for age is used once children reach age 5 and then throughout life into adulthood.

Similar to weight-for-height for children under 5 (indicating overweight or wasting), BMI is used to assess whether children are overweight or thin for their sex, height, and age.

MICS uses the WHO Reference 2007 to compute nutritional indicators for school-age children.

The Ukraine Multiple Indicator Cluster Survey (MICS) was carried out in 2025–2026 under the national ownership and coordination of the State Statistics Service of Ukraine as part of the global MICS programme. The practical implementation and fieldwork were conducted by the Ukrainian Center for Social Reforms, with technical support from UNICEF and financial support from UNICEF and the Government of Germany through KfW Bank.

The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Nutritional Status of Children Under 5 & Age 5-9. Data from this snapshot can be found in tables TC.8.1 and TC.8.2 in the Survey Findings Report.

Further statistical snapshots and the Survey Findings Report for this and other surveys will be available on mics.unicef.org/surveys.

Ukraine 2025-26

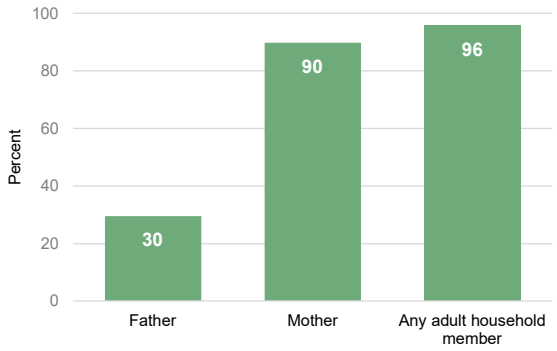
Early Childhood Development (ECD)

Multiple Indicator Cluster Surveys

Early Stimulation and Preschool Education

Ukrstat unicef

Early Stimulation & Responsive Care



Percentage of children age 2-4 years with whom the father, mother, or adult household members engaged in activities that provide early stimulation and responsive care during the last three days

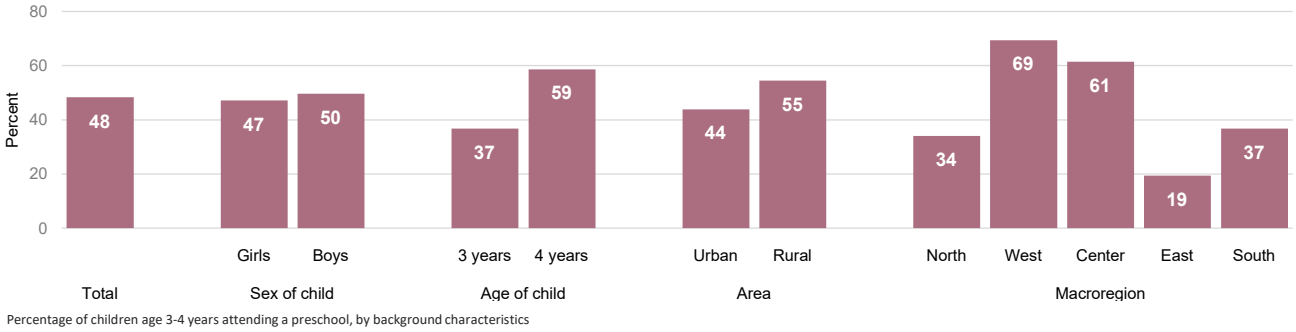
Note: Activities include reading books to or looking at picture books with the child; telling stories to the child; singing songs to or with the child; taking the child outside the home; playing with the child; and naming, counting or drawing things for or with the child.

Early childhood, which spans the period up to 8 years of age, is critical for cognitive, social, emotional, and physical development. During these years, a child's newly developing brain is highly plastic and responsive to change. Optimal early childhood development requires a stimulating and nurturing environment, access to books and learning materials, interactions with responsive and attentive caregivers, adequate nutrients, access to good quality early childhood education, and safety and protection. All these aspects of the environment contribute to developmental outcomes for children.

A broad range of factors can prevent children from reaching their full developmental potential. These risks are often interrelated and include poverty, poor health, exposure to violence and high stress levels, inadequate care, and limited learning opportunities. Timely and effective interventions can prevent these risks and address the barriers disproportionally affecting children living in the most vulnerable contexts.

Investments during the early years are one of the most cost-effective ways countries can reduce inequalities among children and promote the best start in life for all.

Attendance to preschool



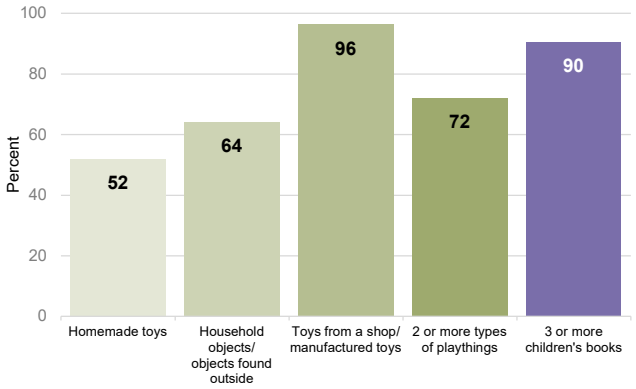
Percentage of children age 3-4 years attending a preschool, by background characteristics

Key Messages

- Almost all children aged 2–4 received early stimulation from an adult household member in the past three days — 96%.
- Mothers' involvement in early stimulation is substantially higher than fathers' involvement: 90% versus 30%.
- About half of children aged 3–4 attend early childhood education — 48%.
- 10% of children under age 5 were left with inadequate supervision.
- Most children have access to playthings and books: 96% have manufactured toys, and 90% have three or more children's books.

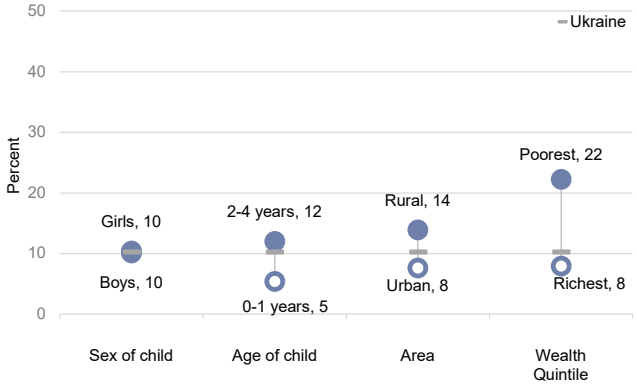
Access to Books and Playthings, and Child Supervision

Toys and children's books



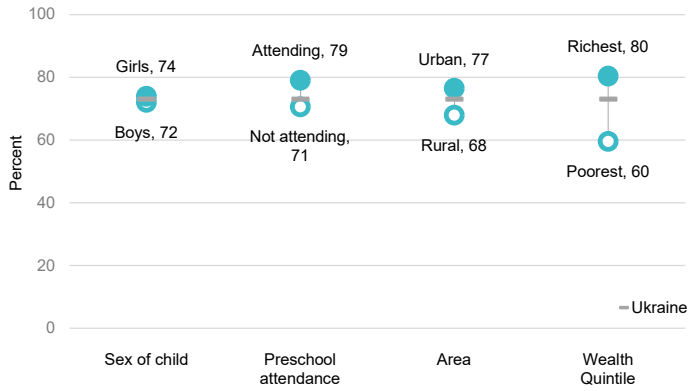
Percentage of children under age five according to the number of children's books available in their homes, and their access to different types of playthings and toys

Inadequate supervision of children



Percentage of children under age five left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once in the last week, by background characteristics

Early Childhood Development Index 2030 (ECDI2030)



Percentage of children aged 2-4 years who are developmentally on track in health, learning, and psychosocial well-being, by background characteristics

Note on preschool attendance. Children age 2 are excluded, as preschool attendance is only collected for age 3-4 years.

The ECDI2030 captures the achievement of key developmental milestones by children between the ages of 24 and 59 months.

The measure includes 20 questions about the way children behave in certain everyday situations, and the skills and knowledge they have acquired, reflecting the increasing difficulty of the skills children acquire as they grow. The 20 items are organised according to the three general domains of health, learning and psychosocial well-being.

A child is considered to be developmentally on track if they have achieved the minimum number of milestones expected for their age group.

The data generated by the ECDI2030 can be used for monitoring and reporting on SDG indicator 4.2.1, and to inform government efforts to improve developmental outcomes among young children.

The Ukraine Multiple Indicator Cluster Survey (MICS) was carried out in 2025–2026 under the national ownership and coordination of the State Statistics Service of Ukraine as part of the global MICS programme. The practical implementation and fieldwork were conducted by the Ukrainian Center for Social Reforms, with technical support from UNICEF and financial support from UNICEF and the Government of Germany through KfW Bank.

The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Early Childhood Development (ECD). Data from this snapshot can be found in tables TC.9.1, LN.1.1, TC.9.2, TC.9.3, and TC.10.1 in the Survey Findings Report.

Further statistical snapshots and the Survey Findings Report for this and other surveys will be available on mics.unicef.org/surveys.

Ukraine 2025-26

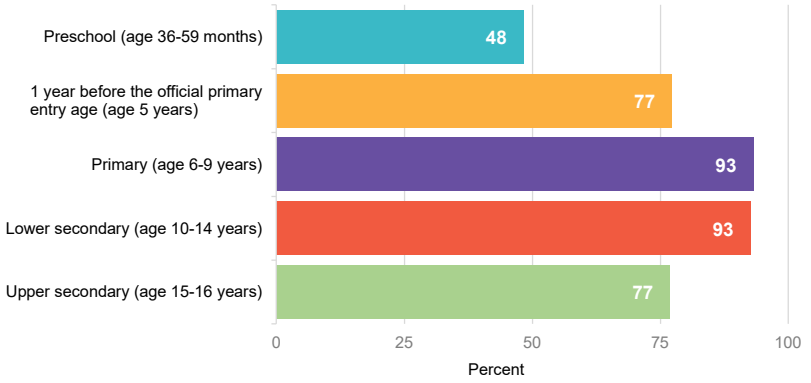
Education

Multiple Indicator Cluster Surveys

Attendance Rates & Inequalities

Ukrstat unicef

School Net Attendance Rates (adjusted)



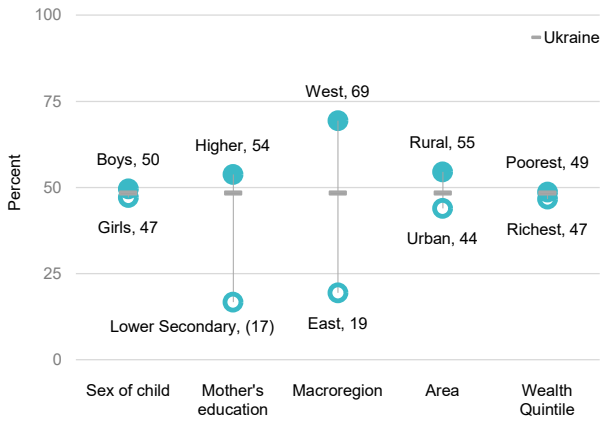
Percentage of children of intended age for level of education attending level of education for age or higher, by level of education

Net attendance rates are presented as Adjusted rates (ANAR).

While the NAR is the percentage of children of the official school-age range for a given education level who attend that level (e.g., children of primary-school age who attend primary), the ANAR also includes children who attend a higher level (e.g., children of primary-school age who attend primary or secondary), accounting for children who have started early or advanced early to a higher education level.

Inequalities in Attendance in Early Childhood Education & Participation in Organised Learning

Early Childhood Education Attendance Rate (age 3-4)

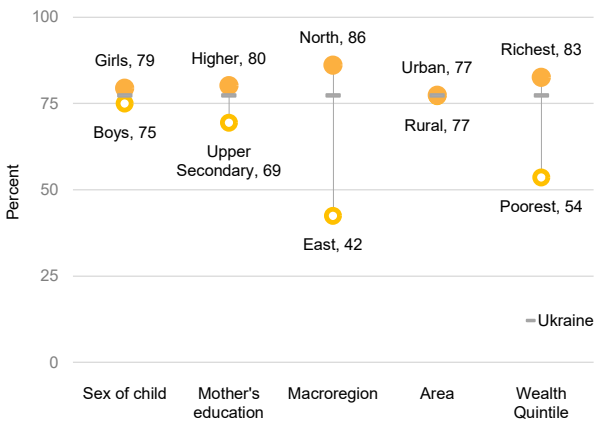


Percentage of children age 36-59 months who are currently attending early childhood education

Note:The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Note: () Data for indicator are based on 25-49 unweighted cases.

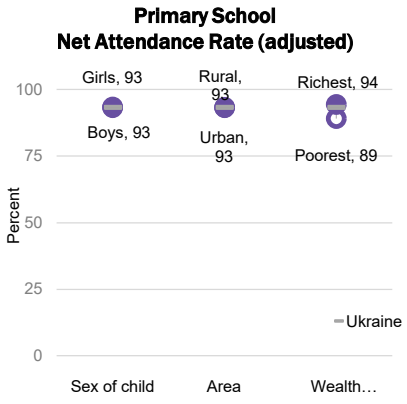
Participation Rate in Organised Learning (1 Year Before the Official Primary Entry Age): SDG 4.2.2



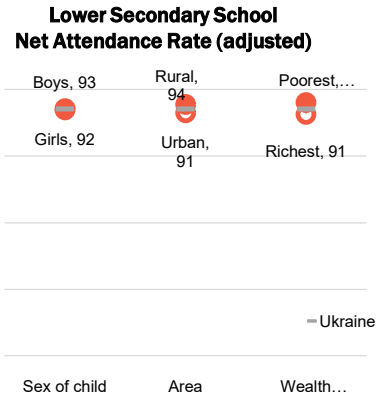
Percentage of children age one year younger than the official primary school entry age at the beginning of the school year who are attending an early childhood education programme or primary school (adjusted net attendance rate)

Note:The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

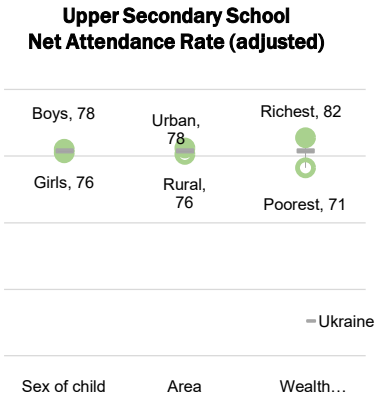
Inequalities in Attendance Rates



Percentage of children of primary school age (as of the beginning of school year) who are attending primary or lower secondary school



Percentage of children of lower secondary school age (as of the beginning of school year) who are attending lower secondary school or higher



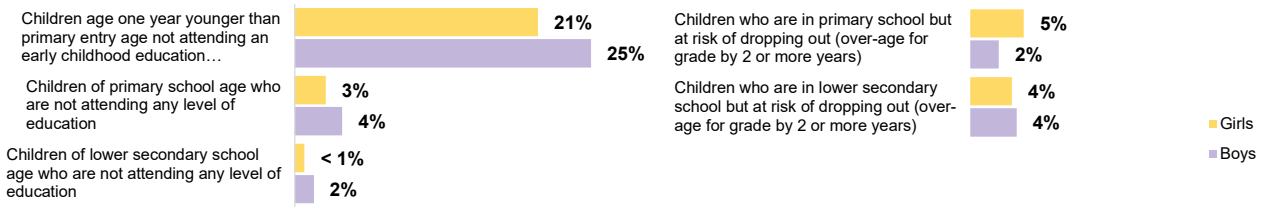
Percentage of children of upper secondary school age (as of the beginning of school year) who are attending upper secondary school or higher

Data for Net Attendance Rates (adjusted) by macroregion

Macroregion	Preschool (age 3-4 years)	Participation rate in organised learning (age 5 year)	Primary (age 6-9 years)	Lower Secondary (age 10-14 years)	Upper Secondary (age 15-16 years)
Ukraine	**48**	**77**	**93**	**93**	**77**
North	34	86	91	91	79
West	69	85	95	96	76
Center	61	81	94	93	82
East	19	42	95	89	68
South	37	(60)	88	92	83

Note: () Data for indicator are based on 25-49 unweighted cases.

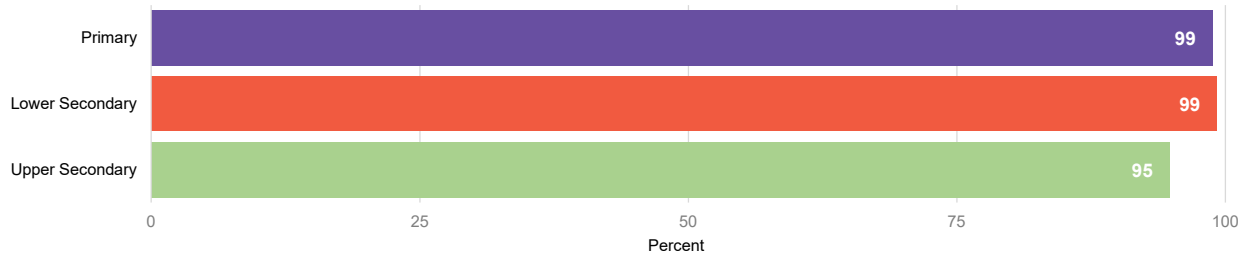
Out of School Rates



Key Messages

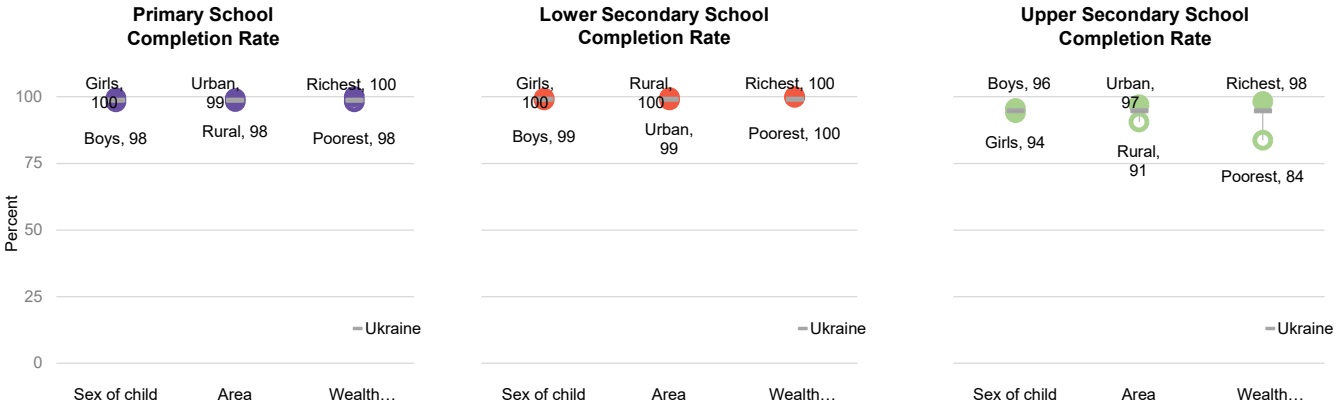
- Attendance is nearly universal at the primary and lower secondary education levels: the adjusted net attendance rate is 93%.
- The largest decline in attendance is observed at the upper secondary education level — 77%.
- The survey results show that 48% of children aged 36–59 months attend preschool

Completion Rates: SDG 4.1.2



Percentage of children age 3 to 5 years above the intended age for the last grade who have completed that grade, by level of education

Inequalities in Completion Rates



Percentage of children age 3 to 5 years above the intended age for the last grade of primary school who have completed primary education

Percentage of children age 3 to 5 years above the intended age for the last grade of lower secondary school who have completed lower secondary education

Percentage of children or youth age 3 to 5 years above the intended age for the last grade of upper secondary school who have completed upper secondary education

Data in Completion Rates by macro-region

Macro-region	Primary (age 6-9 years)	Lower Secondary (age 10-14 years)	Upper Secondary (age 15-16 years)
Ukraine	**99**	**99**	**95**
North	100	99	96
West	99	99	95
Center	98	100	90
East	98	99	96
South	99	100	94

SDG Summary for Education

SDG	MICS Indicator	Definition & Notes	Value		
			Primary	Lower Secondary	Upper Secondary
4.1.2	LN.8a,b,c	Completion rate	99%	99%	95%
4.5.1	LN.5a	Gender Parity Indices (attendance, girls/boys)	1.00	0.99	0.99
4.5.1	LN.5b	Wealth Parity Indices (attendance, poorest/richest)	0.94	1.05	0.86
4.5.1	LN.5c	Area Parity Indices (attendance, rural/urban)	1.00	0.97	1.04
			Total	Boys	Girls
4.2.2	LN.2	Participation rate in organised learning (one year before the official primary entry age)	77%	75%	79%

Key Messages

- Completion rates are high: 99% for primary and lower secondary education, and 95% for upper secondary education.
- Gender differences in attendance and completion are generally minor. Larger education gaps are associated not with the child's sex, but with area of residence, region, and household wealth.
- Despite high completion rates, progression to higher levels of education is accompanied by a gradual decline in coverage, especially at the upper secondary level.
- Preschool education remains the level with the most limited coverage, which may affect children's readiness for primary school.
- The data point to the need for greater attention to children's access to early childhood and upper secondary education, where the risks of unequal coverage are most visible.

The Ukraine Multiple Indicator Cluster Survey (MICS) was carried out in 2025–2026 under the national ownership and coordination of the State Statistics Service of Ukraine as part of the global MICS programme. The practical implementation and fieldwork were conducted by the Ukrainian Center for Social Reforms, with technical support from UNICEF and financial support from UNICEF and the Government of Germany through KfW Bank.

The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Education. Data from this snapshot can be found in tablesLN.1.1, LN.1.2, LN.2.3, LN.2.4, LN.2.5 , LN.2.6, and LN.2.7 in the Survey Findings Report.

Further statistical snapshots and the Survey Findings Report for this and other surveys will be available on mics.unicef.org/surveys.

Ukraine 2025-26

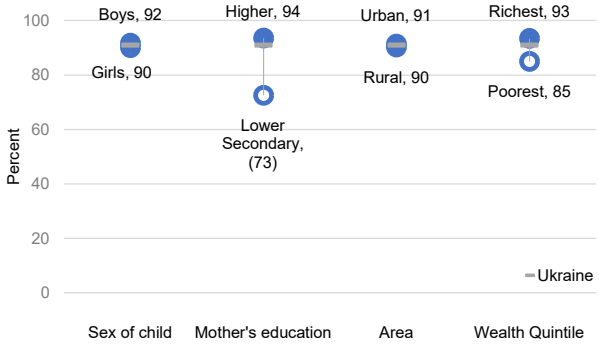
Household Involvement in Education

Multiple Indicator Cluster Surveys

Household Involvement: Learning Environment at Home

Ukrstat unicef

Children with 3 or more books to read at home

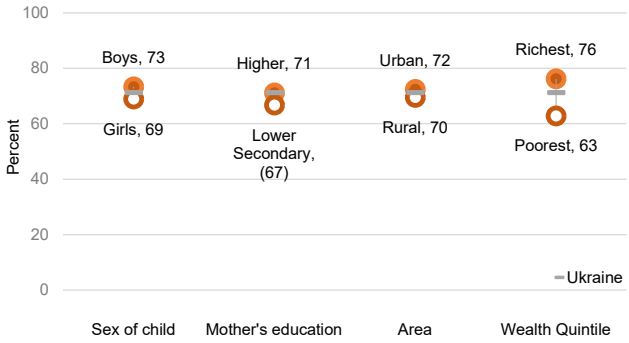


Percentage of children age 7-14 years with 3 or more books at home, by background characteristics

Note:The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Note: () Data for indicator are based on 25-49 unweighted cases.

Children who receive help with homework

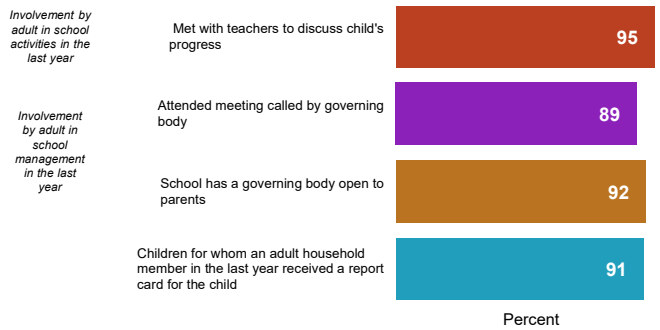


Percentage of children age 7-14 years attending school and having homework who receive help with homework, by background characteristics

Note:The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Note: () Data for indicator are based on 25-49 unweighted cases.

Household involvement in school



Percentage of children age 7-14 years attending school, by indicators of household support

Key Messages

- 91% of children aged 7–14 have three or more books for reading at home.
- 71% of children aged 7–14 who attend school and have homework receive help with it.
- Adult involvement in children's school life is high: 91% received a report card, and 95% met with teachers to discuss the child's progress.

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The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Household Involvement. Data from this snapshot can be found in tables LN.3.1, and LN.3.2 in the Survey Findings Report.

Further statistical snapshots and the Survey Findings Report for this and other surveys will be available on mics.unicef.org/surveys.

Ukraine 2025-26

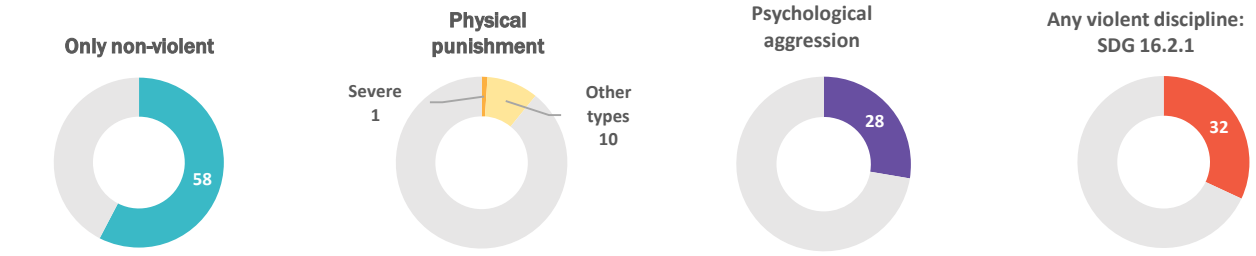
Child Discipline

Multiple Indicator Cluster Surveys

Child Discipline

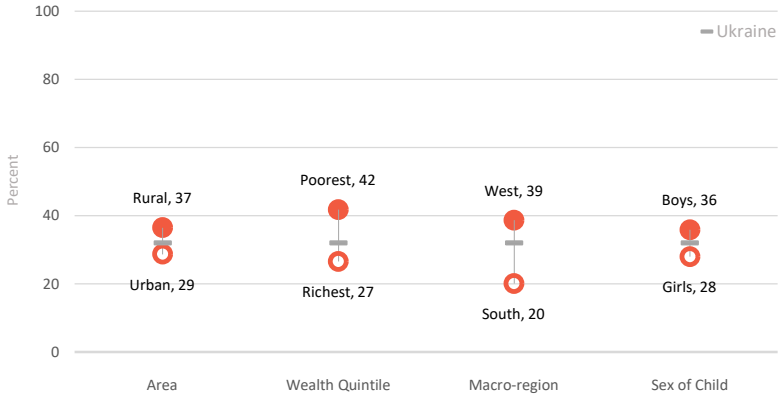
Ukrstat unicef

Types of Child Discipline



Percentage of children age 1 to 14 years who experienced any discipline in the past month, by type

Violent Discipline: Inequalities



Percentage of children aged 1 to 14 years who experienced any violent discipline in the past month, by background characteristics

Physical punishment: Shaking, hitting or slapping a child on the hand/arm/leg, hitting on the bottom or elsewhere on the body with a hard object, spanking or hitting on the bottom with a bare hand, hitting or slapping on the face, head or ears, and hitting or beating hard and repeatedly.

Severe physical punishment: Hitting or slapping a child on the face, head or ears, and hitting or beating a child hard and repeatedly.

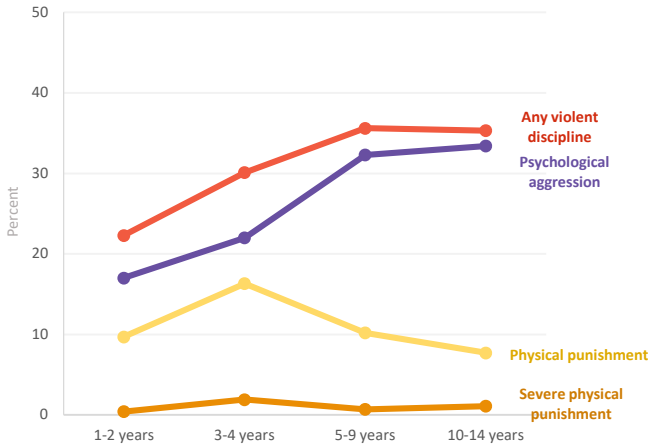
Psychological aggression: Shouting, yelling or screaming at a child, as well as calling a child offensive names such as 'dumb' or 'lazy'.

Violent discipline: Any physical punishment and/or psychological aggression.

Key Messages

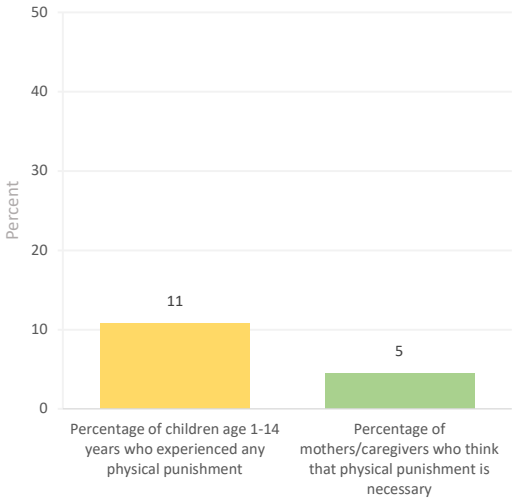
- Almost one in three children aged 1–14 experienced violent disciplinary methods during the past month — 32%.
- The most common form of violent discipline is psychological aggression: 28% of children aged 1–14 experienced it.
- Physical punishment was used against 11% of children, while severe physical punishment was used against about 1%.
- Violent disciplinary methods were more often used against children aged 5–9 and 10–14 than against the youngest children aged 1–2.
- The share of caregivers who believe that physical punishment is necessary to raise a child is much lower than the actual prevalence of physical punishment — 5% versus 11%.

Violent Discipline: Age Patterns

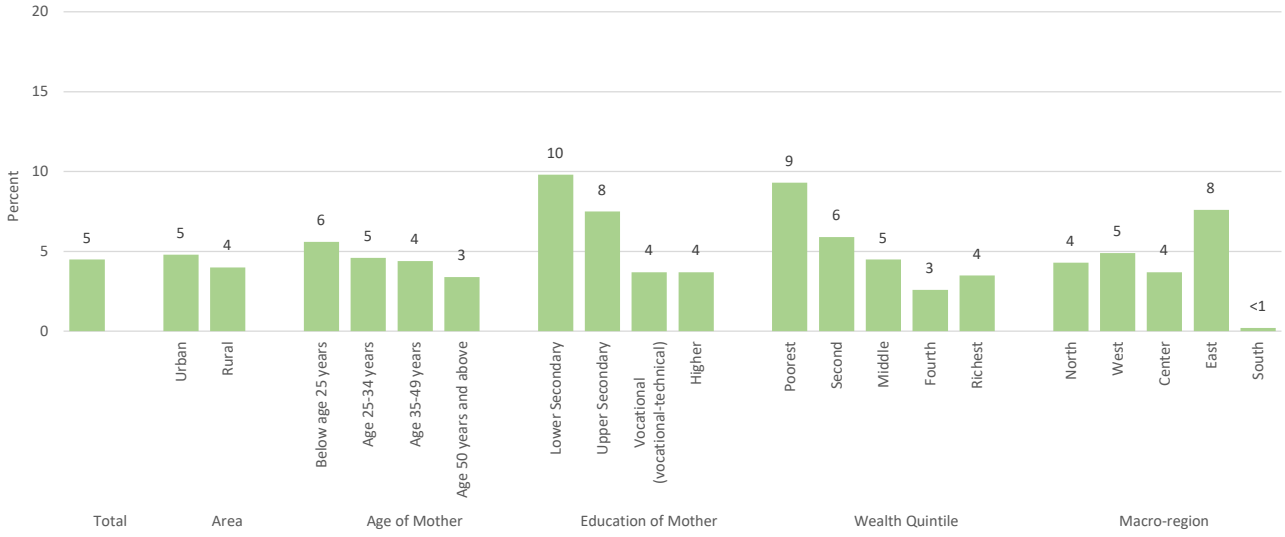


Percentage of children age 1 to 14 years who experienced any violent discipline in the past month, by type and by age

Physical Punishment: Attitudes & Experiences



Attitudes to Physical Punishment



Percentage of mothers/caregivers who think that physical punishment is necessary to raise or educate children, by their background characteristics

Value for the lowest level of education is not shown because the indicator is calculated based on 25–50 unweighted observations.

The Ukraine Multiple Indicator Cluster Survey (MICS) was carried out in 2025–2026 under the national ownership and coordination of the State Statistics Service of Ukraine as part of the global MICS programme. The practical implementation and fieldwork were conducted by the Ukrainian Center for Social Reforms, with technical support from UNICEF and financial support from UNICEF and the Government of Germany through KfW Bank.

The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Child Discipline. Data from this snapshot can be found in tables PR.2.1 and PR.2.2 in the Survey Findings Report.

Further statistical snapshots and the Survey Findings Report for this and other surveys will be available on mics.unicef.org/surveys.

Ukraine 2025-26

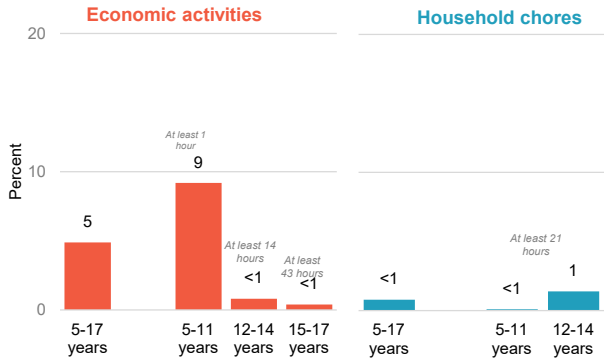
Child Labour

Multiple Indicator Cluster Surveys

Child Labour: Levels & Disaggregates

Ukrstat unicef

Types of Child Labour



Percentage of children age 5 to 17 years engaged in child labour, by type of activity and by age

Note: These data reflect the proportions of children engaged in the activities at or above the age specific thresholds outlined in the definitions box.

Definition of Child Labour

Age 5 to 11 years: At least 1 hour of economic activities or 21 hours of unpaid household services per week.

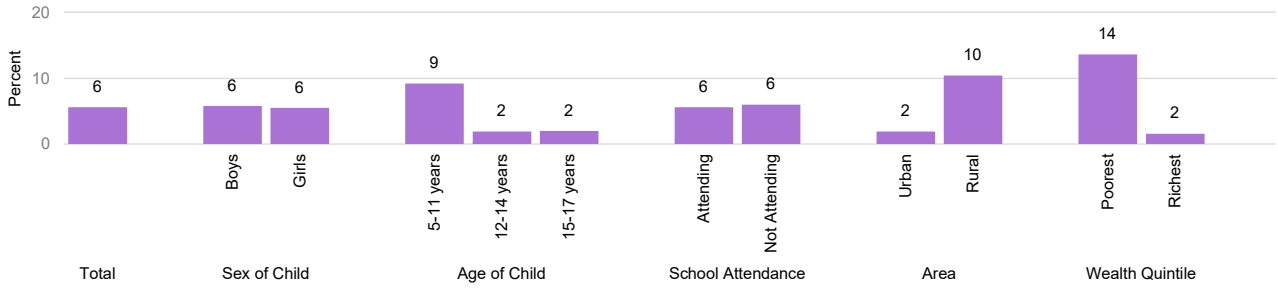
Age 12 to 14 years: At least 14 hours of economic activities or 21 hours of unpaid household services per week.

Age 15 to 17 years: At least 43 hours of economic activities. No threshold for number of hours of unpaid household services.

Economic activities include paid or unpaid work for someone who is not a member of the household, work for a family farm or business. Household chores include activities such as cooking, cleaning, or caring for children.

Note that while the overall concept of child labour includes hazardous working conditions, the definition of child labour currently used for SDG reporting does not. Further methodological work is ongoing to incorporate additional questions specifically aimed at identifying children in hazardous working conditions.

Child Labour for Age 5-17 years: SDG 8.7.1

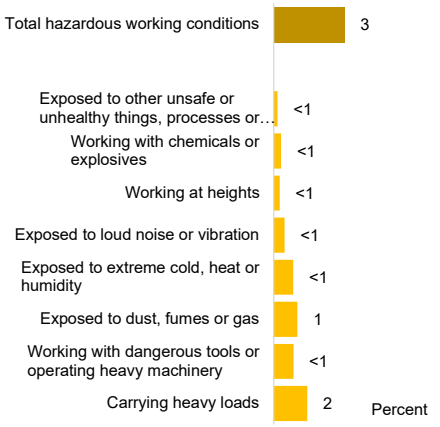


Percentage of children age 5 to 17 years engaged in child labour, by background characteristics

Key Messages

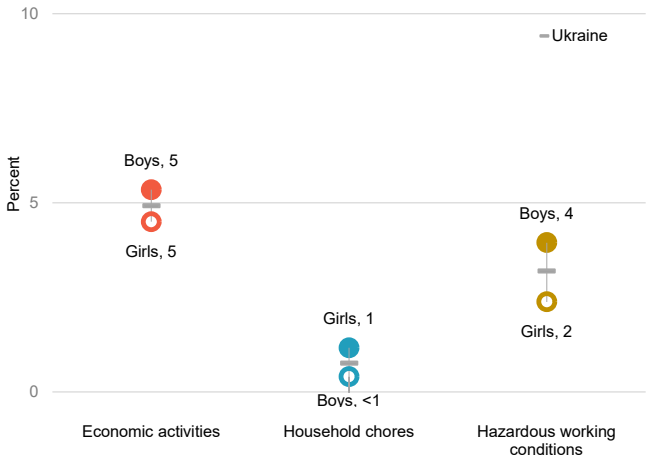
- 6% of children aged 5–17 are involved in child labour according to the SDG definition.
- The main form of child labour is economic activity above age-specific thresholds; excessive household chores are much less common.
- The highest level of child labour was recorded among children aged 5–11 — 9%.
- Regional differences are substantial: in the West, the share of children involved in child labour is 11%, while in the East it is 1%.
- 3% of children aged 5–17 performed hazardous work; most commonly, this involved carrying heavy loads and exposure to dust, fumes, or gas.

Hazardous Working Conditions



Percentage of children age 5 to 17 years working under hazardous conditions, by type of working conditions

Inequalities in Child Labour



Percentage of children age 5 to 17 years engaged in child labour, by type of activity and by sex

Regional Data on Child Labour and Hazardous Working Conditions

Macro-region	Economic Activites	Household Chores	Child Labour	Hazardous Working Conditions
Ukraine	**5**	**<1**	**6**	**3**
North	3	<1	3	2
West	10	2	11	7
Center	4	<1	5	<1
East	<1	<1	<1	2
South	3	<1	4	<1

Proportion of children aged 5–17 years engaged in economic activity for a total number of hours equal to or exceeding the established thresholds, engaged in household chores for a total number of hours equal to or exceeding the established thresholds, engaged in child labour, and proportion of children working in hazardous conditions, by macro-region.

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The objective of this snapshot is to disseminate selected findings from the Ukraine MICS 2025-26 related to Child Labour. Data from this snapshot can be found in tables PR.3.3 and PR.3.4 in the Survey Findings Report.

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Ukraine 2025-26

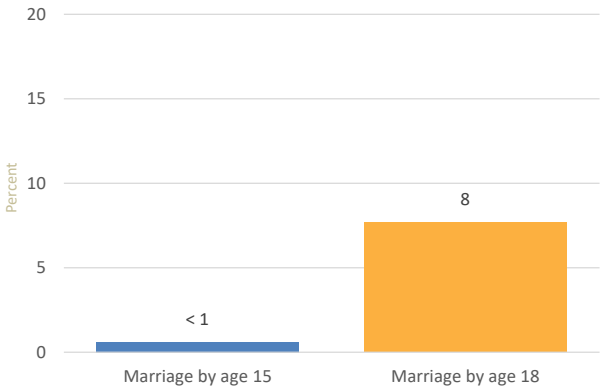
Child Marriage

Multiple Indicator Cluster Surveys

Child Marriage: Levels & Disaggregates

Ukrstat unicef

Marriage before Age 15 & Age 18: SDG 5.3.1



Percentage of women age 20-24 years who were first married or in union before age 15 and before age 18

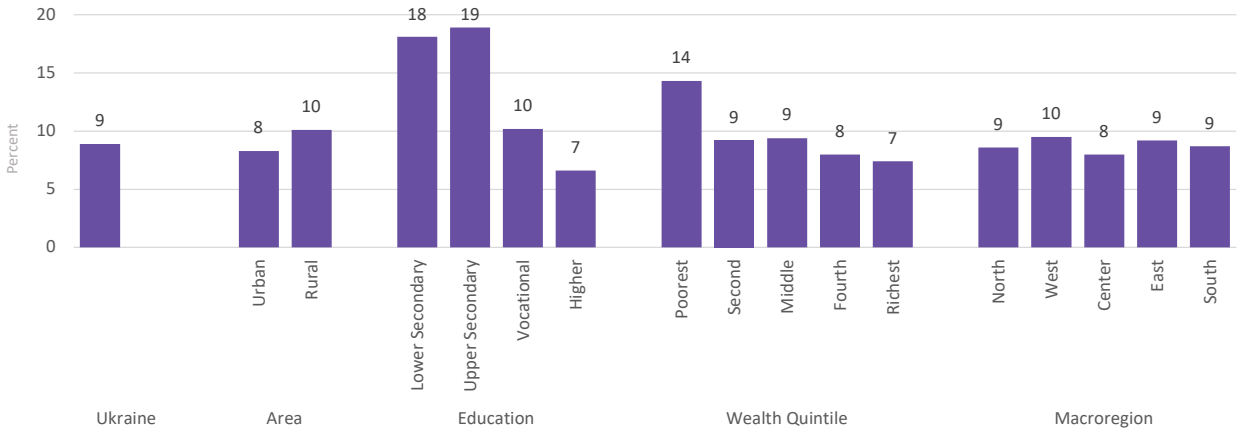
Marriage before the age of 18 is a reality for many young girls. In many parts of the world parents encourage the marriage of their daughters while they are still children in hopes that the marriage will benefit them both financially and socially, while also relieving financial burdens on the family. In actual fact, child marriage is a violation of human rights, compromising the development of girls and often resulting in early pregnancy and social isolation, with little education and poor vocational training reinforcing the gendered nature of poverty. The right to 'free and full' consent to a marriage is recognised in the Universal Declaration of Human Rights - with the recognition that consent cannot be 'free and full' when one of the parties involved is not sufficiently mature to make an informed decision about a life partner.

The above chart refers to women age 20 to 24 years to align with the standard for reporting on SDG 5.3.1. This age cohort recently completed exposure to the risk of marrying in childhood, thus giving a closer approximation of the current prevalence of child marriage. The following charts, which show disaggregation by background characteristics, refer to the full cohort of women age 18 to 49 years.

Key messages

- Among women aged 20–24, 8% were first married or in union before age 18.
- Marriage before age 15 is rare among women aged 20–24 — less than 1%.
- Among women aged 18–49, 9% were first married or in union before age 18.
- The prevalence of child marriage is relatively similar across regions, accounting for about 8% in all regions.
- The highest levels of child marriage are observed among such socio-demographic groups, as women with lower levels of education and those from less wealthy households.

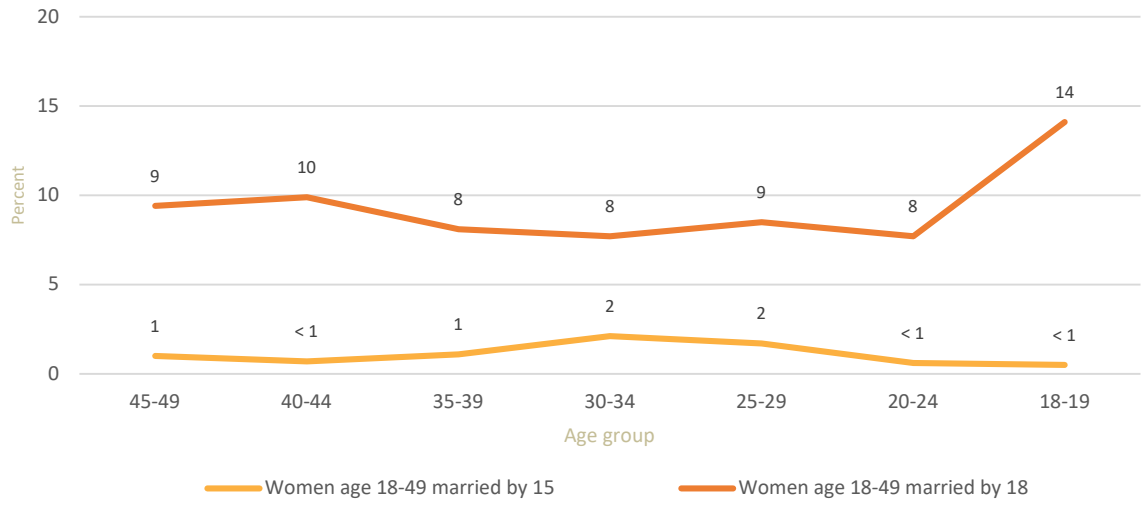
Disaggregates in Marriage Before Age 18



Percentage of women age 18-49 years who were first married or in union before age 18, by residence, education, and household wealth quintile

Note: (*) The indicators for lower education levels are not given because they are calculated on fewer than 25 unweighted observations.

Trends in Child Marriage



Percentage of women (age 18-49 years who were first married or in union before age 15 and before age 18, by age cohort

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Ukraine 2025-26

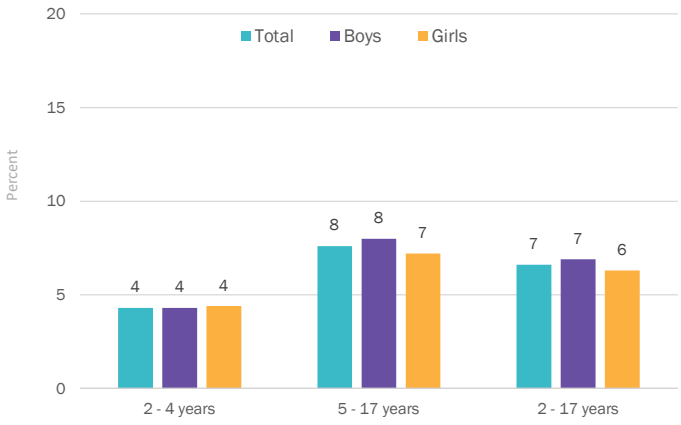
Child Functioning

Multiple Indicator Cluster Surveys

Child Functioning: Levels & Domains

Ukrstat unicef

Child Functioning Levels by Age-Group



Percentage of children age 2–17 years with functional difficulty, by age-group

Children with disabilities are among the most marginalised groups in society. Facing daily discrimination in the form of negative attitudes, and lack of adequate policies and legislation, they are often likely to be among the poorest members of the population and are less likely to attend school, access medical services, or have their voices heard in society. Discrimination against and exclusion of children with disabilities also puts them at a higher risk of physical and emotional abuse or other forms of neglect, violence and exploitation.

The Convention on the Rights of the Child (UNICEF, 1989) and the Convention on the Rights of Persons with Disabilities (UN, 2006) explicitly state the rights of children with disabilities on an equal basis with other children and call for improvements in their access to services, and in their participation in all aspects of life.

In order to achieve these goals, there is a need for cross-nationally comparable, reliable data. The Child Functioning module is designed In line with the WHO's International Classification of Functioning, Disability and Health and the UN Convention on the Rights of Persons with Disabilities, to collect information on functional difficulties that children experience in different domains including hearing, vision, communication/comprehension, learning, mobility and emotions. Children with functional difficulties may be at risk of experiencing limited participation in an unaccommodating environment and limit the fulfilment of their rights.

Child Functioning Domains

	Seeing	Hearing	Walking	Fine Motor	Communication	Learning	Playing	Controlling Behaviour	Self Care	Remembering	Concentrating	Accepting Change	Making Friends	Anxiety	Depression
2-4 years	<1	<1	<1	<1	2	1	<1	2	N/A	N/A	N/A	N/A	N/A	N/A	N/A
5-17 years	<1	<1	1	N/A	<1	2	N/A	1	<1	<1	1	2	2	3	2

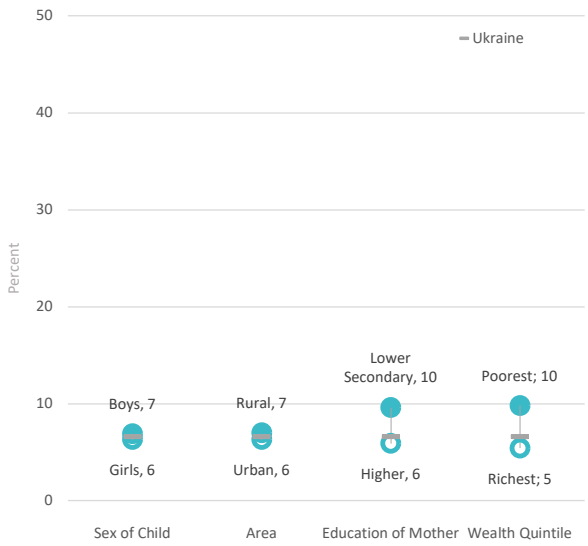
Percentage of children age 2–4 and 5-17 years with functional difficulty in at least one domain, by domain of difficulty

N/A: Not Applicable

Key Messages

- 7% of children aged 2–17 have functional difficulties in at least one domain.
- Functional difficulties are more common among children aged 5–17 than among children aged 2–4 — 8% versus 4%.
- Among children aged 5–17, the highest levels of functional difficulty are related to anxiety, learning, accepting change, depression, and making friends.
- Regional differences are notable: the highest share of children aged 2-17 with functional difficulties was recorded in the South, and the lowest in the North and Centre.
- Levels of functional difficulty are similar among boys and girls, while differences by age and region are more pronounced.

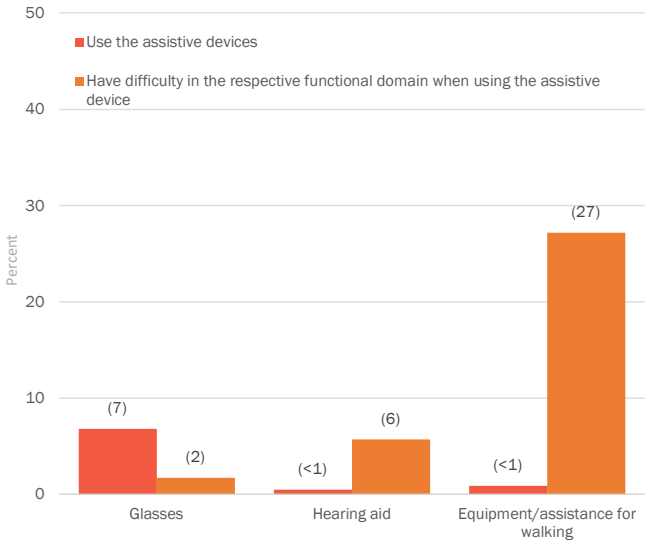
Child Functioning: Inequalities



Percentage of children age 2–17 years with functional difficulty, by background characteristics

( ) The indicator is calculated based on 25–49 unweighted observations (value is shown in parentheses and should be interpreted with caution). Значення для найнижчого рівня освіти не подається, тому що показник обрахований на 25-50 незважених спостереженнях

Children who use Assistive Devices & have Functional Difficulties



Percentage of children age 2-17 years with difficulties seeing when wearing glasses among those who wear glasses, percentage of children age 2-17 years with difficulties hearing when using a hearing aid among those who use a hearing aid, and percentage of children age 2-17 years with difficulties walking when using equipment or receiving assistance among those who use equipment or receive assistance walking

( ) The indicator is calculated based on 25–49 unweighted observations (value is shown in parentheses and should be interpreted with caution).

Regional Data on Child Functioning

Macro-region	2-4 years	5-17 years	2-17 years
Ukraine	**4**	**8**	**7**
North	3	5	5
West	6	9	8
Center	<1	5	4
East	6	8	8
South	6	11	9

Percentage of children age 2–17 years with functional difficulty in at least one domain, by region

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