Funded by:

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eGA
e-governance academy

Prepared by
Center for Innovations Development
2025

A study of the readiness for the digitalisation

of local services for demobilised war veterans in communities of Zhytomyr and Vinnytsia regions

2025

The study was conducted as part of the project 'Development of digital municipal services for demobilised veterans in Ukraine'. The project is funded by the Estonian Centre for International Development (ESTDEV) and implemented by the e-Governance Academy (Estonia). The approaches and conclusions set out in this document are those of the authors and do not necessarily reflect the official position of the project's implementor or the donor.

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Photo: AdobeStock
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Published by:
©e-Governance Academy
Ahtri 6, 10151, Tallinn, Estonia
ega.ee

ANALYTICAL NOTE

The state of local services provided to demobilised war veterans by territorial communities in Zhytomyr and Vinnytsia regions: survey results and level of readiness for digitalisation

2025

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INTRO

The study was conducted as part of the project «Development of Digital Municipal Services for Demobilised Veterans in Ukraine,» implemented by the non-governmental organisation e-Governance Academy with financial support from the Estonian Centre for International Development. The aim is to conduct a comprehensive analysis of the state of local services provided to demobilised war veterans by local communities in the Zhytomyr and Vinnytsia regions, to assess the institutional, technical, and procedural capacity of communities, and to determine the level of readiness for the digitisation of such services.

Geographical coverage and structure of the study

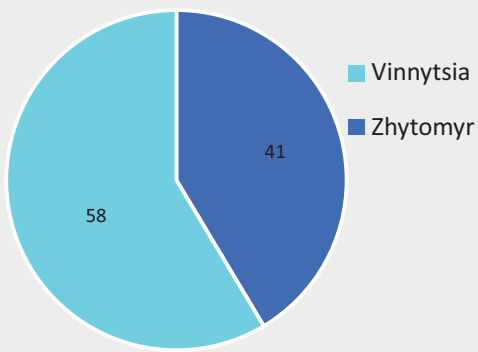
The study covered 99 local communities across two regions: 25 urban, 34 settlement, and 40 rural. This distribution reflects the actual structure of local self-government. It enables an analysis of the specifics of service provision, accounting for typological differences among communities in terms of size, resource capacity, and levels of technical infrastructure.

Research methodology: mixed approach

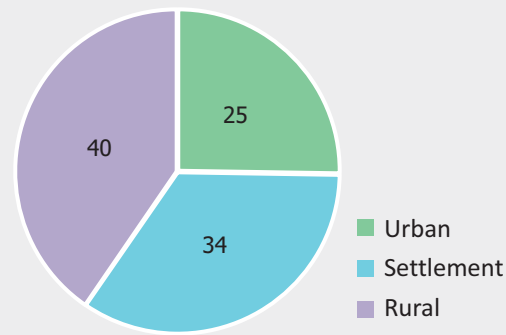
The study uses a mixed-methods approach, combining quantitative and qualitative methods for data collection and analysis. The methodological framework includes four main components: a structured online survey of local self-government bodies, an online survey of veterans and veterans' organisations and their families, in-depth semi-structured interviews, and an analysis of regulatory acts and business processes for service delivery.

The survey of local governments was conducted among all 99 communities. The respondents were representatives of executive bodies directly involved in providing services to veterans: heads and specialists from social protection departments, veteran policy departments, administrative service

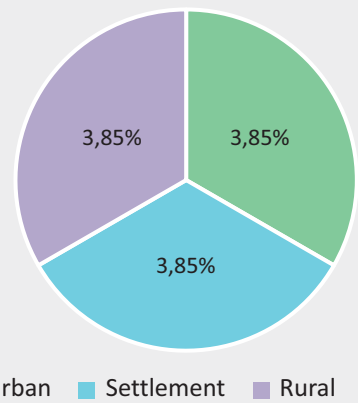
Distribution of communities by region



Distribution of communities by type



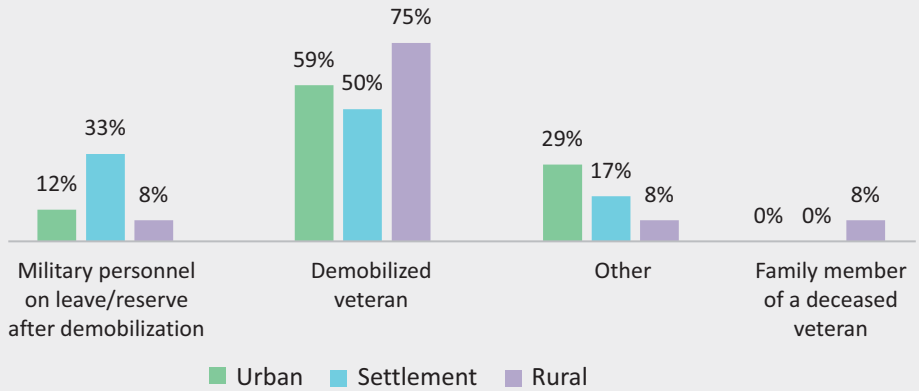
Percentage of veterans in the population



centres, and those responsible for digital development. The questionnaire covered seven thematic areas: basic characteristics of the community and the number of veterans, a detailed list of local services with statistics on their provision, the regulatory and legal framework and organizational structure for working with veterans, digital infrastructure and technical equipment, web presence and electronic services, institutional capacity and human resources, barriers to digitalization, and priority needs of communities.

The survey **covered 35 respondents, including** demobilised veterans, their family members, and representatives of veterans' organisations in the Zhytomyr and Vinnytsia regions. The questionnaire focused on the experience of applying for local services over the past 12 months, assessing service quality across several parameters, identifying procedural and informational barriers, assessing levels of digital literacy and readiness to use online services, and gathering suggestions for improving the service system..

Distribution of respondents by status to community type



To supplement the quantitative data with a contextual understanding of the processes, **25 in-depth semi-structured interviews were conducted** with local government officials and demobilised veterans. The selection of respondents ensured coverage of different types of communities in terms of size and of veterans in terms of status and experience with applying for services. The interviews were conducted in a semi-structured format lasting 45-60 minutes, mainly remotely, with recording and subsequent transcription for systematic analysis.

Analysis of regulatory acts and business processes

An important part of the methodology was studying the regulatory framework for local service delivery. As part of the study, local regulations governing the provision of services to veterans were collected and analysed for each community: local council decisions, community head orders, executive committee decisions, social protection programs for veterans, and procedures for providing material assistance. Communities provided hyperlinks to publicly available documents or uploaded scanned copies of acts via a questionnaire.

The collected regulations were analysed for differences across communities in their approaches to service provision, compliance with current legislation, the presence of provisions for electronic service provision, and the need for changes to implement digital solutions. The analysis identified best practices in regulatory regulation within individual communities and served as the basis for developing recommendations for unifying regulatory approaches.

At the same time, an analysis of service delivery business processes was carried out using the AS-IS methodology. For key services, a detailed description of the actual procedure was compiled, from the moment a veteran submits an application to the final result. The description includes all stages: points of contact, required documents, internal steps taken by the community, structural units and officials involved, information systems used, and processing times at each stage. The processes were

visualised in BPMN diagrams, enabling clear identification of procedural barriers, step duplication, and bottlenecks in the current service delivery system.

The AS-IS analysis revealed significant differences in processes between communities: different decision-making bodies, different sets of required documents, and different numbers of visits by veterans to institutions. The systematisation of these differences formed the basis for classifying communities by their level of process maturity and for identifying opportunities for standardisation.

Based on the current-state analysis, target process models were developed using the TO-BE methodology. For the selected services, procedures were reengineered with a focus on simplification and minimisation of the administrative burden on veterans. The target models provide for the maximum use of electronic interaction: submission of electronic applications without paper documents, automatic data verification through integration with state registries, electronic approval of decisions by officials, notification of results through digital channels, and electronic storage of results in the recipient's personal account.

Research stages and data processing

The research was carried out in four consecutive stages. The preparatory stage included developing tools, pilot-testing questionnaires, establishing communication with communities, and conducting an introductory methodological seminar. The field research stage involved completing online questionnaires, conducting interviews, and collecting regulatory documents. The data processing stage included verifying information through community feedback, transcribing interviews, systematising quantitative data, and consolidating the list of services. The analytical stage involved descriptive statistical analysis, comparative analysis by community type, thematic analysis of qualitative data, and modelling of AS-IS and TO-BE business processes.

The initial service data set consisted of 410 records from 99 communities. Due to the heterogeneity of formulations, duplication, and varying levels of detail, a unification procedure was carried out, yielding 57 standardised service categories. This systematisation ensured accurate comparisons across communities and enabled the identification of typical models of support provision.

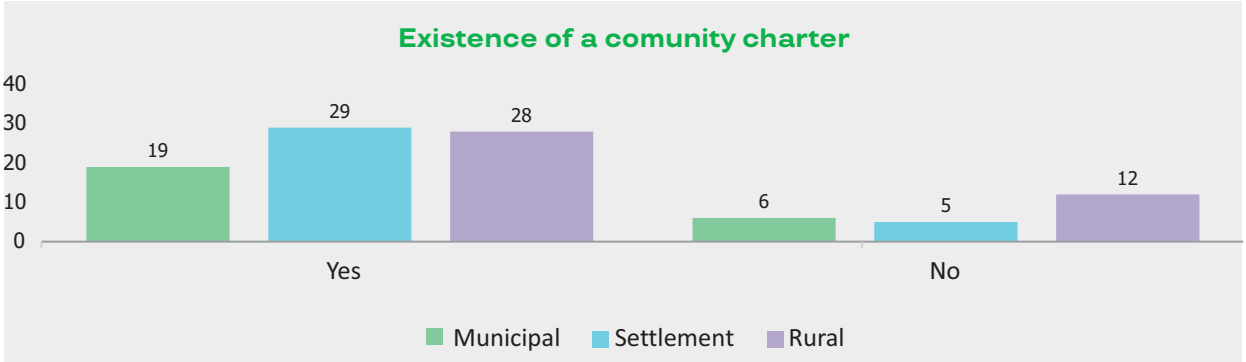
Limitations of the study

The interpretation of the results requires consideration of the context of the ongoing full-scale war, which significantly affects communities' resource capacity and budget allocation priorities. The institution of veteran policy at the local level is relatively new, and the municipal support system is being formed in conditions of limited resources and a lack of established practices. The digital transformation of local self-government is at an early stage, with significant heterogeneity in community digital maturity. The study is based on self-reported data from respondents and is representative of the two selected regions. The analysis focuses exclusively on municipal services that are financed from local budgets and provided within the scope of the communities' own powers.

Section 1. Institutional capacity and strategic planning: results of community surveys

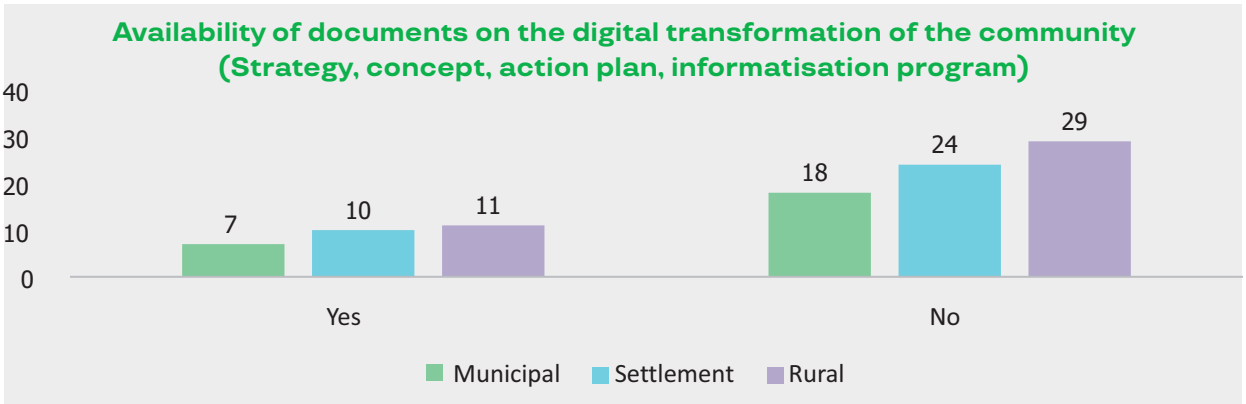
1.1. Regulatory and organisational support for digital transformation in local communities

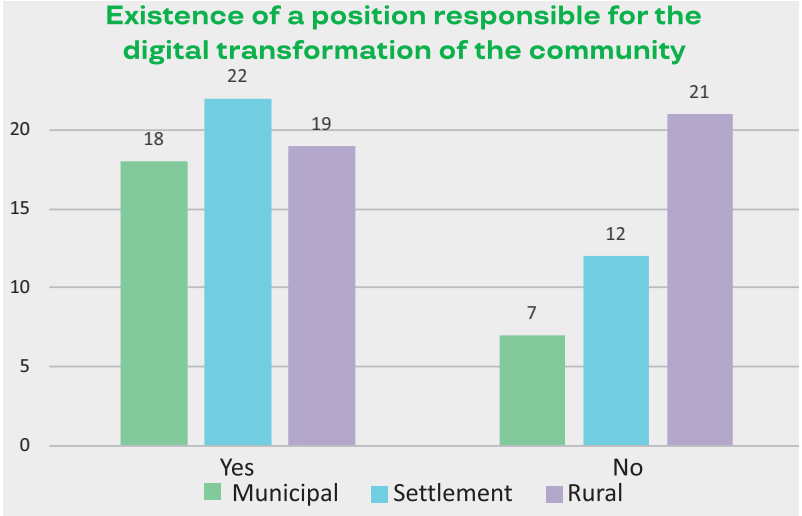
Assessing communities' readiness for digitalisation should begin with their founding and strategic documents. The community charter remains the basic regulatory act that defines the powers and principles of local self-government. Most communities **(76 out of 99) in the Zhytomyr and Vinnytsia regions have approved charters**. Among all types of communities, the highest proportion of approved charters is observed **in settlement communities – 85%, while in urban communities it is 76%, and in rural communities it is 70%.**



Issues of digital development are practically absent from the founding documents of communities. Among the 76 communities that have approved statutes, **only 10 (about 13%) reported having provisions related to digital transformation**. This indicator is equally low across all types of communities, indicating limited use of statutes as tools for setting directions for digital development and for forming appropriate management frameworks.

The next level of formalisation of digital development beyond statutes is **strategic documents that define long-term approaches and goals for the community's digital transformation**. These include **digital transformation strategies, informatisation concepts, and digital service development plans**. The existence of such documents indicates the communities' desire to formalise their digital development goals and ensure consistency in future decisions. According to the survey results, **only 28 out of 99 communities (28%) have such documents, while 71% have not defined strategic directions for digitalisation at the regulatory level**. The distribution of such documents among community types is almost equal. Strategies or concepts for digital transformation are held by 28% of urban, 29% of settlement, and 28% of rural communities. This uniformity indicates that the existence of strategic documents does not depend on the size or resources of the community, but overall demonstrates a low level of formalisation of digital policy.

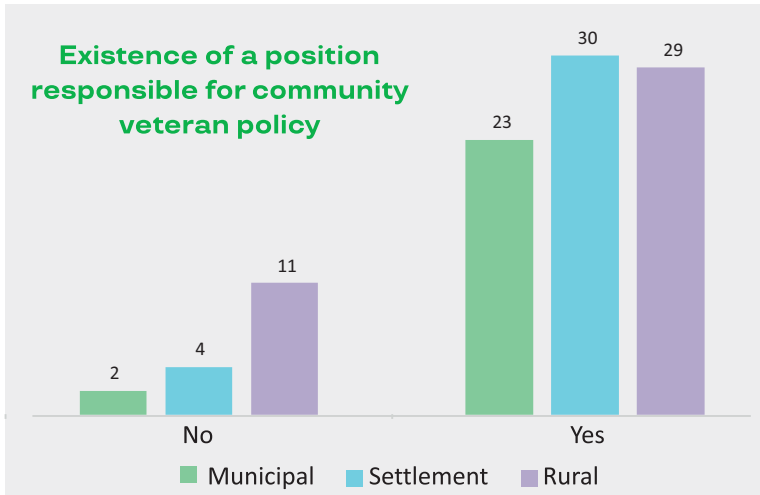




Although not all communities have strategic documents, **it is more common practice to appoint a person responsible for digital transformation or a digital leader. Fifty-nine communities, or 60% of those surveyed, have a digital leader position**. This indicates an awareness of the need for organisational support for digital change, even where strategic documents are lacking. Such positions exist in 72% of urban, 65% of settlement, and 48% of rural communities.

The data presented demonstrates the fragmented nature of digital development in communities. The emphasis is mainly on personnel decisions, while strategic and regulatory documents are used much less frequently. In this situation, digital processes develop without a coordinated framework or clear guidelines, and some communities lack a dedicated digital leader to coordinate this area. This creates a predominantly operational rather than strategic approach and indicates a lack of structure in local digital policy.

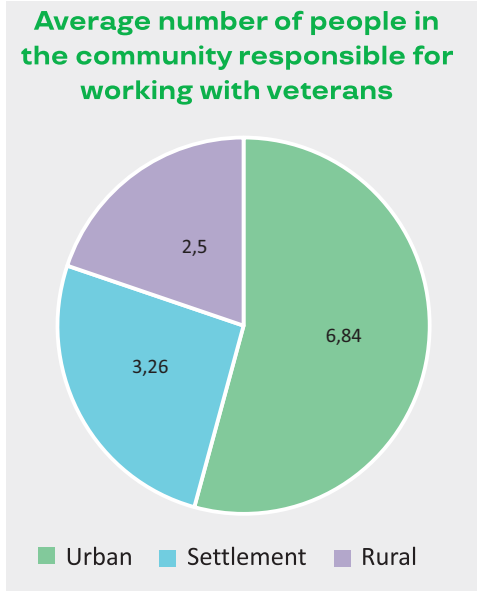
1.2. Organising work with veterans: institutional architecture



The development of a support system for veterans requires institutional capacity from communities, in particular, the presence of responsible persons. The survey results show that 82 out of 99 communities, or **83%, have appointed an official responsible for implementing veteran policy**. This indicates a high level of organisational readiness among communities to work with the needs of veterans. The absence of responsible persons was recorded in 17% of communities, most of which are rural. **In urban communities, 92% have a person responsible for veteran policy; in towns, 88%; and in villages, 73%**.

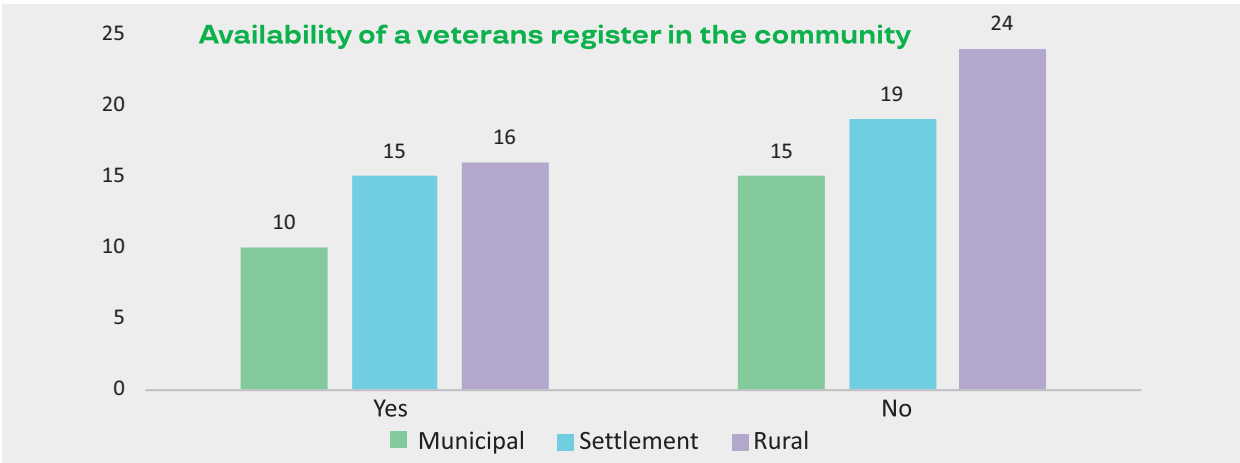
The presence of a responsible person is a basic element of organising work with veterans, but the effectiveness of this area largely depends on available resources. **On average, communities have 4 employees who handle veterans' issues**, but this figure varies significantly by community type. **Urban communities have the largest teams, averaging 7 employees**. This is due to their larger population, and therefore larger number of veterans, and more developed administrative units. Larger teams enable the creation of specialised groups and the distribution of functions among employees. **In small towns and rural communities, human resources are more limited, with an average of three employees.** Under these conditions, working with veterans is only one of the many functions of social workers, who are also responsible for other population groups. This makes it difficult to develop narrow specialisations and an individualised approach to veterans' needs.

Maintaining a separate register of veterans is an important element of institutional capacity in communities, as it enables planning service volumes, targeted communication, and monitoring the needs of this population group. The survey results show that **41% of communities have created such registers, while 59% do not keep systematic records of veterans**. The distribution among community types is relatively even, which is due to the low technical complexity of creating a basic register and manageable data volumes. At the same time, the lack of a register in most communities complicates the analysis of veterans' needs, prevents the development of a strategic support plan, and makes interaction predominantly reactive, limiting the ability to plan services based on complete, structured data.



The analysis shows significant differences in communities' institutional capacity to work with veterans. Urban communities have broader human resources and more opportunities for specialisation. In contrast, in towns and rural communities, teams are much smaller, which reduces the potential for individual work and complicates the distribution of functions. An additional limitation is the lack of systematic registration of veterans in most communities. The absence of a registry reduces the ability to plan services, analyse needs, and ensure consistency in working with this population.

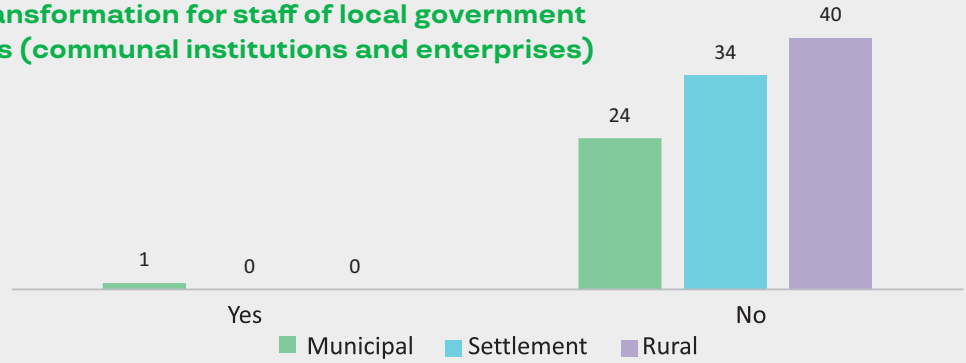
These institutional and organisational disparities also affect the digitisation of services. For small teams, digital tools can partially compensate for staff shortages, but their implementation requires time and organisational effort. Under these conditions, developing human resources and implementing solutions to structure data and optimise processes become key prerequisites for improving the quality of support for veterans.



1.3. Professional development of staff: plans for improving qualifications

The competence of local government employees is an important factor in implementing digital transformation and veteran policy. The survey results show that **a systematic approach to staff training has only been partially developed.** In the field of digital transformation, **only 1 out of 99 communities, or 1%, has a training plan**. The absence of plans was recorded in 99% of communities. The situation is the same across all types of communities: only one urban community has a plan, while settlement and rural communities have not developed such documents. Under these conditions, even in communities where digital leaders have been appointed (60%) or strategic documents have been created (28%), this does not ensure the development of digital skills among their staff. The lack of training limits the effective use of technical solutions and affects the quality of digital services..

Available plan for professional development in the field of digital transformation for staff of local government departments (communal institutions and enterprises)



Common reasons for the lack of plans include a focus on one-off external training, insufficient administrative resources, and a lack of tools to assess digital competence levels. Many communities lack a clear vision of which skills need to be developed and how to design systematic training programs.

In the field of veteran policy, training approaches are more common but remain insufficiently widespread. Only 16 out of 99 communities, or **16%, have plans for professional development**. In 84% of communities, such documents are absent. Settlement communities have the highest share of professional development plans at 21% (7 out of 34). In urban communities, this figure is 20% (5 out of 25), and in rural communities, 10% (4 out of 40).

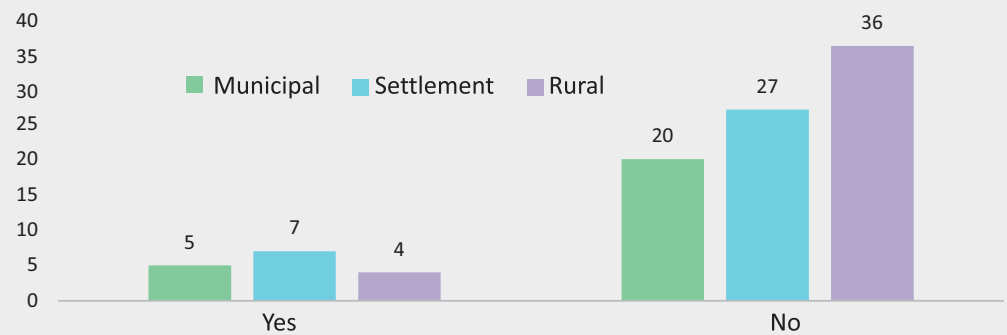
Despite 82% of communities having appointed persons responsible for veteran policy and, on average, 3 to 7 employees performing specific tasks in this area, 84% of communities lack systematic professional development plans. This means that the appointment of responsible persons is not accompanied by the formation of functionally capable personnel departments and the development of professional competencies. As a result, there is a gap between the volume of work and employees' training levels, which affects the consistency and quality of services provided to veterans.

Conclusions

An analysis of staff training shows that communities lack established mechanisms for systematic professional development in digital transformation and veteran policy. The main factors contributing to this situation are as follows.

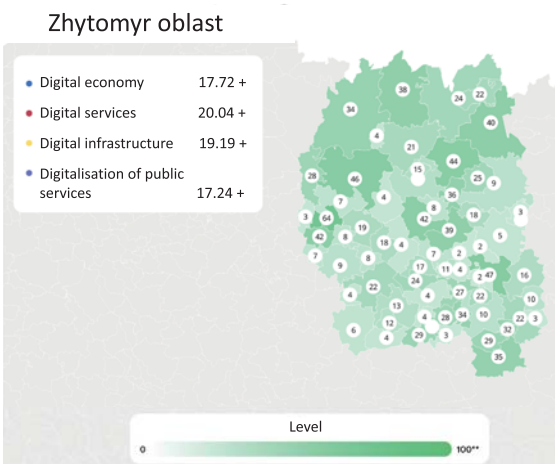
First, communities mostly rely on one-off external training, which does not form a long-term approach to competence development. **Second, training planning is seen as an additional administrative burden**, which hinders the creation of their own staff training programs. **Third**, many communities l**ack an understanding of which skills are a priority**, making it difficult to assess training levels and identify training needs. **Fourth**, this creates **a gap between the scope of functional tasks and employees' professional capacity**, reducing the effectiveness of digital solutions and affecting the quality of services provided to veterans.

Available plan for professional development in the field of veterans' policy for staff of local government departments (communal institutions and enterprises)



Section 2. Digital infrastructure and technical readiness of communities

The Digital Transformation Index of Ukrainian Communities[1] measures the level of digital development across key areas: the digital economy, digital skills, digital infrastructure, and the digitisation of public services. This tool allows us to assess the extent to which communities can implement modern digital solutions and which segments require priority attention.

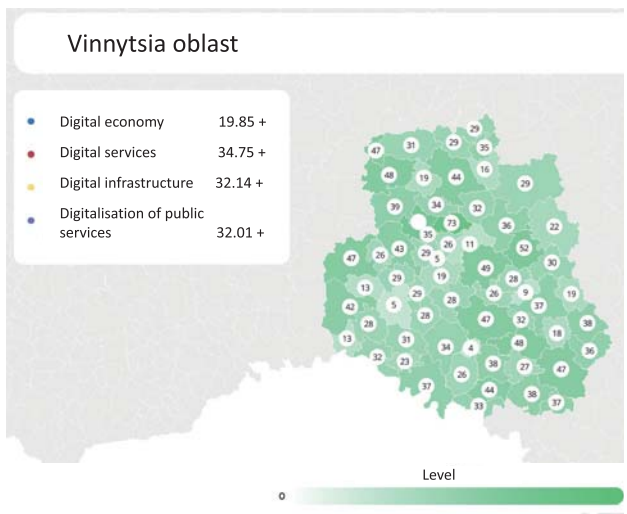


The Zhytomyr region generally demonstrates low levels of digital development. According to the basic areas of the index, the region has the following indicators: digital economy – 17.72, digital skills – 20.04, digital infrastructure – 19.19, digitisation of public services – 17.24

More detailed sub-indicators also show significant gaps. For example, the development of digital literacy among the population is 31.88, and the development of ICT talent is only 5.57. In the infrastructure sector, the stability of digital systems is rated at 37.02, but IT infrastructure is only 22.67, and cybersecurity is 7.01. The digitalisation indicators for the public services sector also remain low: institutional capacity – 13.03, open data – 6.46.

According to the index, **the Vinnytsia region** demonstrates a significantly higher level of digital development. Its results are as follows: digital economy – 19.85; digital skills – 34.75; digital infrastructure – 32.14; digitalisation of public services – 32.01. The sub-indicators show more balanced development: digital literacy — 53.24, ICT talent development — 12.14, digital infrastructure resilience — 58.77, cybersecurity — 14.52. Higher values are also recorded in the area of public services: institutional capacity – 34.66, web accessibility – 20.76, and open data – 19.42.

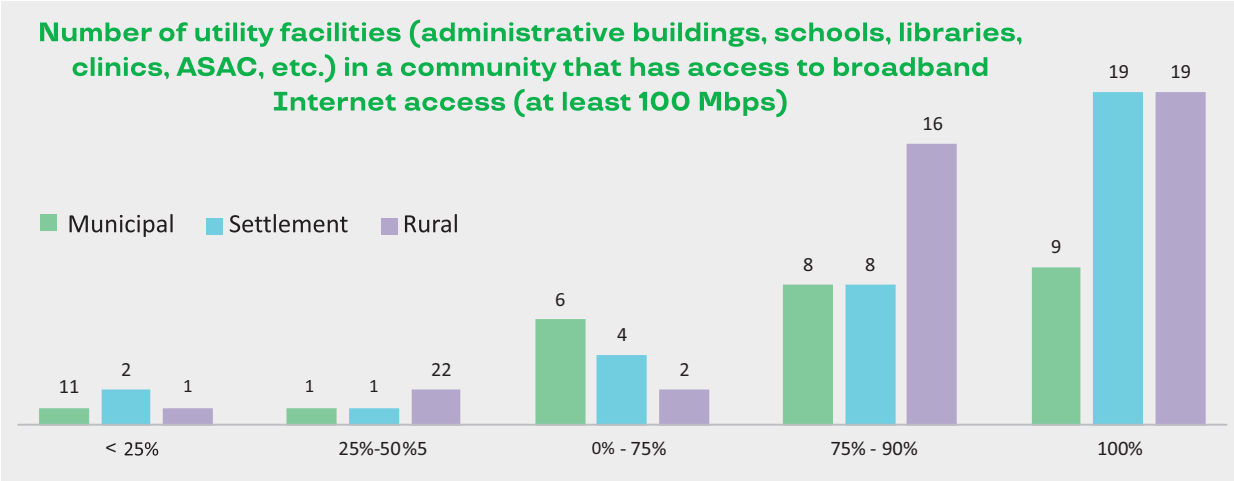
Overall, the index highlights that both areas have significant potential for digital transformation but require targeted strengthening in human resources, cybersecurity, local IT ecosystem development, and open data practices. This provides an important context for further analysis of the digital capacity of communities in this study.



[1] Index of digital transformation of territorial communities of Ukraine https://hromada.gov.ua/index

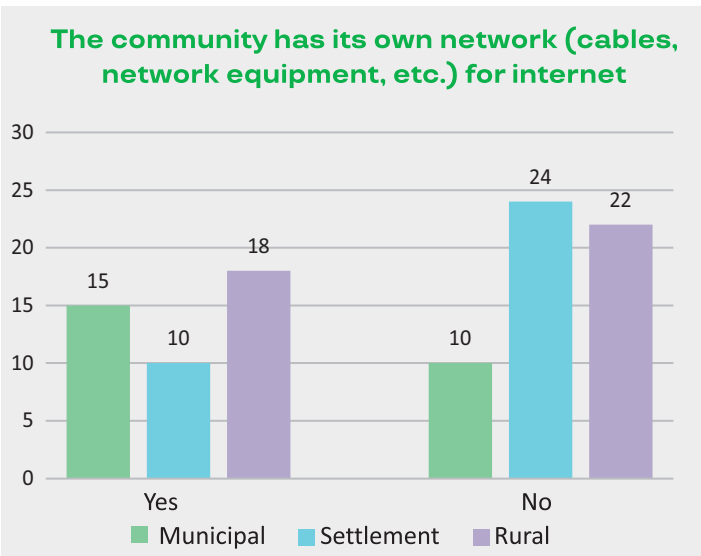
2.1. Broadband internet access, network and server infrastructure

Stable internet access forms the basis of communities' technical readiness for digitalisation, as the quality of the connection determines the smooth operation of electronic services, the ability to exchange data, and the availability of online services to the population.



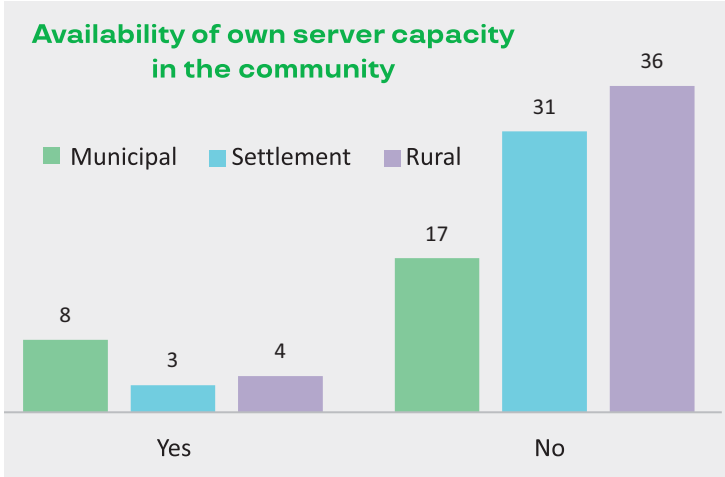
The survey results show that **47% of communities have access to high-speed internet at all major public facilities, with speeds of at least 100 Mbit/s**. Another 32% of communities have access to 75% to 90% of facilities, indicating almost complete coverage and sufficient prerequisites for the functioning of digital services. In total, about 80% of communities have the technical capabilities to implement most digital solutions. At the same time, **12% of communities have internet access in fewer than half of their facilities**, creating local areas of insufficient connectivity and limiting the scaling of digital services.

An analysis by community type shows different patterns of internet accessibility. Town and rural communities have the highest rates of full coverage: **56% of towns and 48% of rural communities have internet access at all public facilities. In urban communities, 36% of communities have full coverage.** This difference may seem unexpected, but it is explained by the significantly larger number of facilities in cities, including schools in remote neighbourhoods and numerous clinics and libraries, which makes it difficult to provide the same level of connectivity.



An important component of technical autonomy **is the availability of proprietary networks. 43% of communities** have them, **allowing** them to control connection quality and optimise costs. The distribution among community types is uneven. **In urban communities, proprietary networks operate in 60%** of cases, reflecting their greater technical capacity. **In rural communities, this figure is 45%**, which is partly due to access to state infrastructure development programs. **The lowest figures are in settlement communities, where only 29% have their own infrastructure**, indicating their greater dependence on commercial providers.

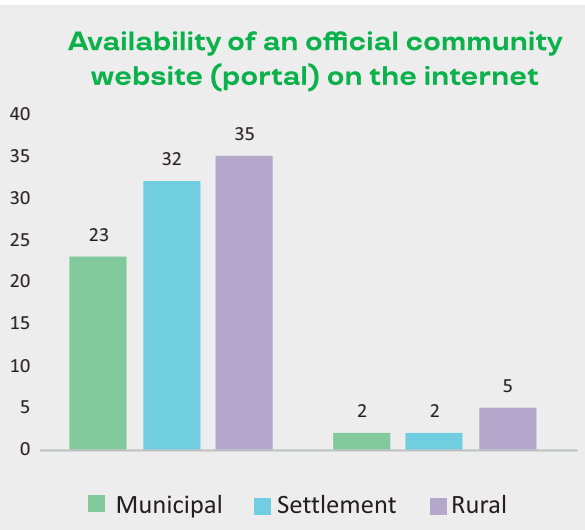
The availability of its own server capacity determines the level of technical autonomy of a community, its ability to control data storage, ensure the security of information systems, and maintain the operation of digital services without complete dependence on external providers. According to the survey results, only 15 out of 99 communities, or 15%, have their own servers. The vast majority, namely 84 communities or 85%, do not have such infrastructure and probably rely on cloud services or centralised solutions provided by higher levels of government or commercial providers.



The distribution by community type reflects the expected dependence on size and resources. **Urban communities demonstrate the highest level of server provision: 8 out of 25 (32%) have their own servers**. This is quite logical, since large communities accumulate more data, have more complex information systems, and can afford to invest in both the equipment itself and its maintenance, which requires specialised personnel. **In contrast, small towns show very low results — only 3 out of 34, or just 9%, have their own servers**, while 31 communities do without them. Rural communities have 4 communities with servers out of 40, or 10%, which is only slightly higher than the rate for small towns.

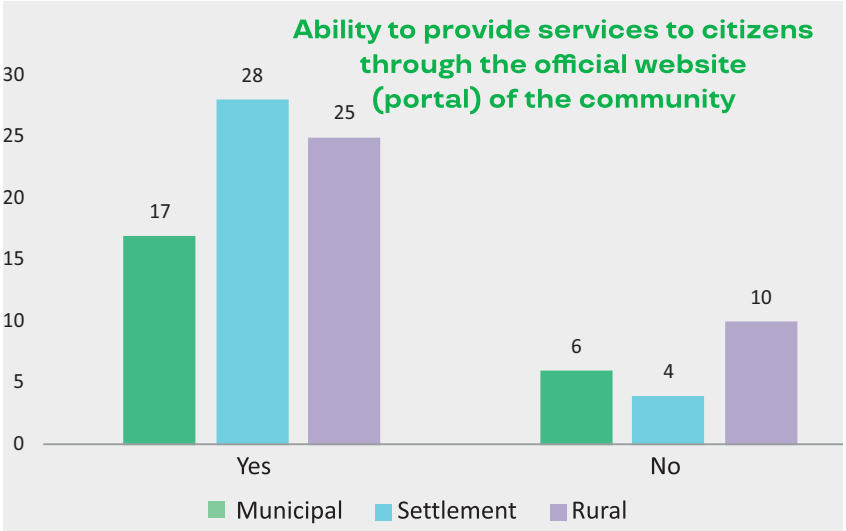
Among communities that have their own server capacity, there is considerable variation in how it is used. Urban communities demonstrate the greatest diversity. **Servers are used to operate geographic information systems, maintain urban planning and land cadastres, organise electronic queues at administrative service centres, and manage internal document flow and corporate communications.** Some communities use servers to **store video recordings of meetings, operate electronic voting systems, run internal portals, or ensure the functioning of legal and administrative systems**. In addition, servers are used in urban communities for local databases and document management systems. Rural communities use them mainly for basic data storage needs, official correspondence, interaction with the treasury, and ensuring the operation of ASCs.

A summary of the responses shows that communities with their own servers demonstrate a more comprehensive approach to digital processes. Still, there are not many such communities, and the range of uses varies significantly by resource availability and community type.



2.2. Community web presence and e-services

Digital interaction between the community and residents largely depends on the development of web resources and on local authorities' ability to work with data. The accessibility of official websites, the availability of interactive services, and the existence of systematic registries determine the extent to which communities are ready to ensure transparency, prompt communication, and quality services. The analysis shows significant differences in how communities use digital tools and demonstrates the need to move from basic information provision to comprehensive digital interaction.



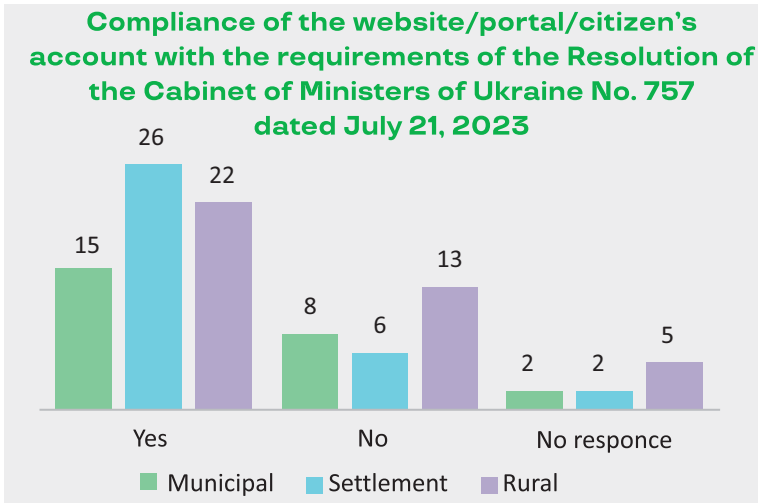
The official community website remains a key channel of communication with residents and a tool for providing electronic services. The survey shows a high level of web presence, as **91% of communities have their own websites**. Only 9 communities have not yet created a web resource, creating communication gaps and limiting residents' access to information. The distribution among community types shows similar results. In urban communities, 92% have websites; in settlements, 94%; and in rural areas, 88%. Such high availability is explained by a combination of state support for website creation and growing awareness of the need for digital communication.

However, having a website does not guarantee its functionality. **Only 22% of communities provide services through a web portal, while 78% use the site primarily as an information resource**. This means that most online platforms do not move from providing information to fully supporting services for the population.

An analysis of the services provided through websites shows significant variation in approaches. Some urban communities are implementing comprehensive platforms that cover electronic appeals, consultations, petitions, and online appointments with healthcare facilities and ASCs. Other communities integrate their web portals with state systems, providing access to registration, legal, and administrative services. This approach transforms the website into a single interface for interacting with a wide range of state and local services.

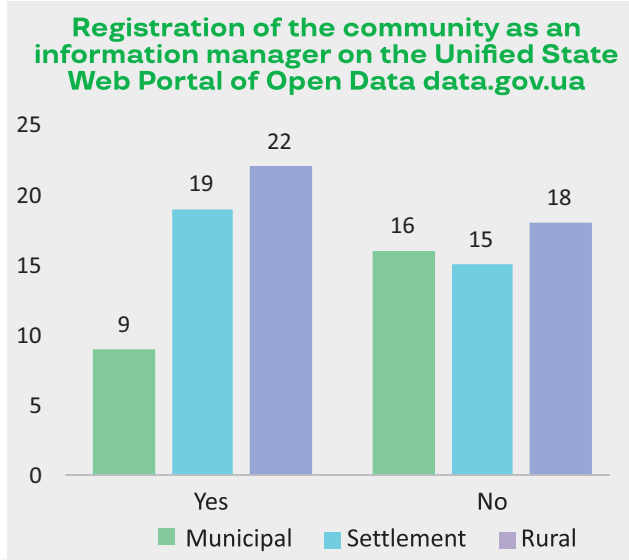
2.3. Digital standards and platforms for interagency interaction between local communities

The level of digital interaction among communities is determined not only by the availability of web resources but also by compliance with standards, participation in national digital platforms, the development of internal administrative systems, and the ability to integrate with state registries. Together, these elements form the actual degree of community inclusion in the national digital ecosystem.



OThe survey shows that among the 90 communities that have websites, 63 communities, or 70%, confirmed that their portals comply with the requirements of Cabinet of Ministers Resolution No. 757 regarding accessibility, usability, and functionality. At the same time, 27 communities (30%) reported non-compliance or the need for updates. A particularly high level of compliance is observed in settlement

communities, while some urban and rural portals are outdated or lack sufficiently structured information.

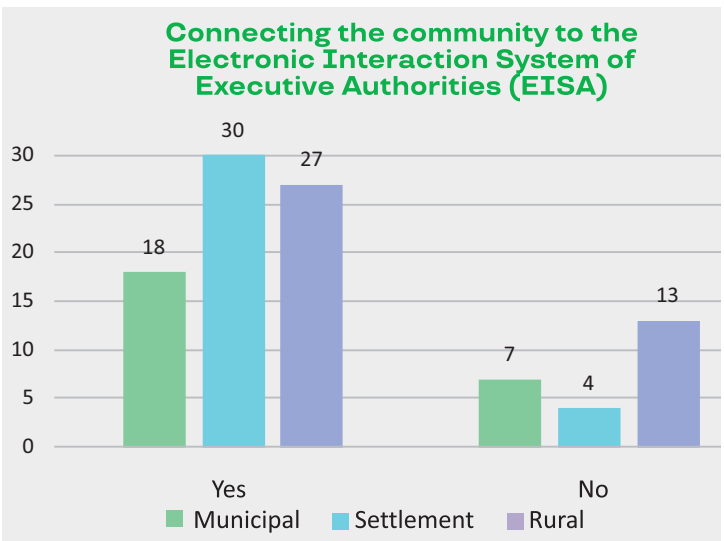


Assessing the compliance of web resources is only one component of the digital integration of communities. Another important indicator is participation in national digital platforms, which reflects the ability of communities to work with open data, ensure transparency of activities, and integrate into nationwide information processes. The publication of structured data is mandatory under Resolution No. 835 of the Cabinet of Ministers of Ukraine dated October 21, 2015[2], which obliges information managers to publish and update open data sets.

Further analysis shows that community participation in this system remains uneven. **49 of 99 communities (49%) are registered on the data.gov.ua portal, while 50 (51%) are not.** Urban communities show the highest level of participation: 16 out of 25 communities (64%) are registered as information managers, while 9 communities do not publish open data. Among settlement communities, 15 out of 34, or 44%, are registered, and among rural communities, 18 out of 40, or 45%, are registered. In these two groups, most communities do not publish structured data sets.

Such differences may be related to both an uneven understanding of the value of open data and varying levels of administrative and technical capacity. The preparation and regular updating of structured datasets require certain skills in working with information resources and well-established internal processes, which are not always available in communities with limited human resources.

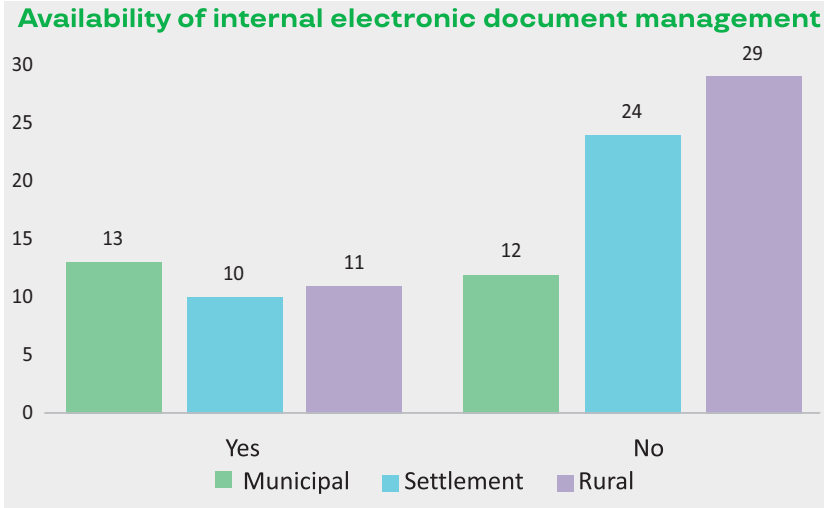
The connection of communities to the **Electronic Interaction System of Executive Authorities (EISA) is high. Seventy-five out of 99 communities, or 76%, have joined the system**. The most active are settlement communities: 30 out of 34 (88%) have connected. In urban communities, this figure is 18 out of 25, or 72%, and in rural communities, 27 out of 40, or 68%. SEV OVV provides electronic document exchange between authorities, thereby reducing the volume of paper procedures and speeding up administrative processes.



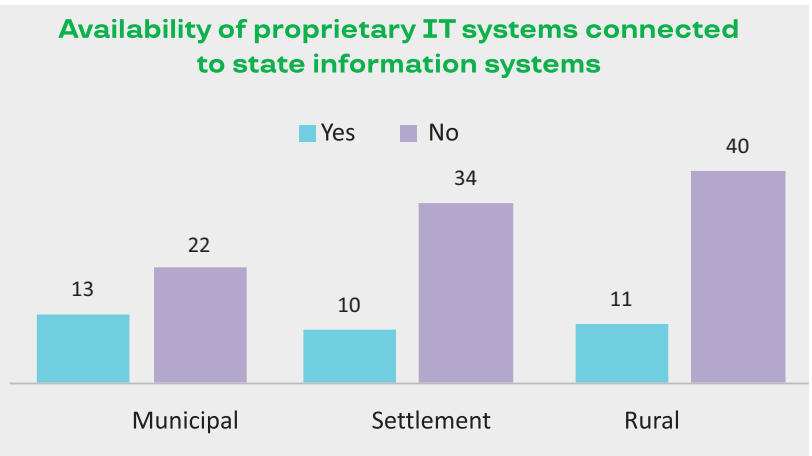
Compared to these results, the implementation of electronic document management remains insufficient. **Only 34 communities, or 34%, have implemented systematic electronic document management (EDM), while 65 communities, or 66%, continue to work primarily with paper documents** or partial electronic solutions. This creates organisational constraints, as key digital services for citizen interaction are not supported by effective internal processes..

[2] Resolution of the Cabinet of Ministers of Ukraine No. 835 of October 21, 2015, «On Approval of the Regulations on Data Sets Subject to Disclosure in the Form of Open Data» - https://surl.lu/couvkc

The implementation of internal electronic document management (EDM) is a core component of digital transformation, enabling the elimination of paper documents in government bodies' internal operations, accelerating decision coordination, and ensuring transparency and process control.



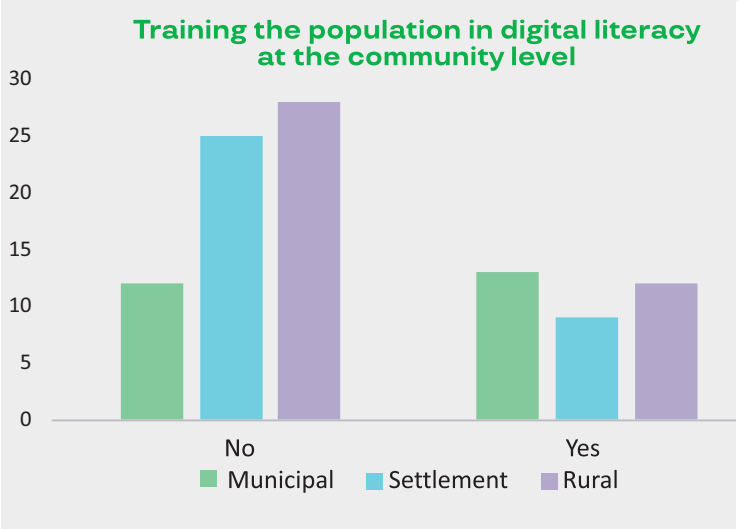
The biggest infrastructure problem is the lack of integration of local information systems with state registries. Only 3% of communities reported having such integrations, and all are urban. Without such integration, a community cannot automatically verify a veteran's status in the Unified State Register of War Veterans, obtain real estate ownership data from the relevant register, verify a person's identity in the demographic register, etc. Each such verification requires either a manual request or shifting the responsibility to the citizen, who is forced to collect numerous certificates and documents. Thus, even if a community creates an online form for submitting an application for a service, the processing of this application will remain predominantly manual and slow, negating a significant part of the benefits of digitalisation.



The analysis shows that the digital development of communities is uneven and has significant structural gaps. First, 70% of websites meet standards, but a third need updating. Second, only 49% of communities work with open data, reflecting varying levels of technical capacity. Third, 76% are connected to the SEV OVV, but not all communities use its electronic document exchange capabilities. Fourth, only 34% have implemented electronic document management, which slows down internal processes. Fifth, only 3% are integrated with state registries, so most procedures remain manual. In general, external digital services are better developed than internal systems, which limits the quality and speed of service delivery..

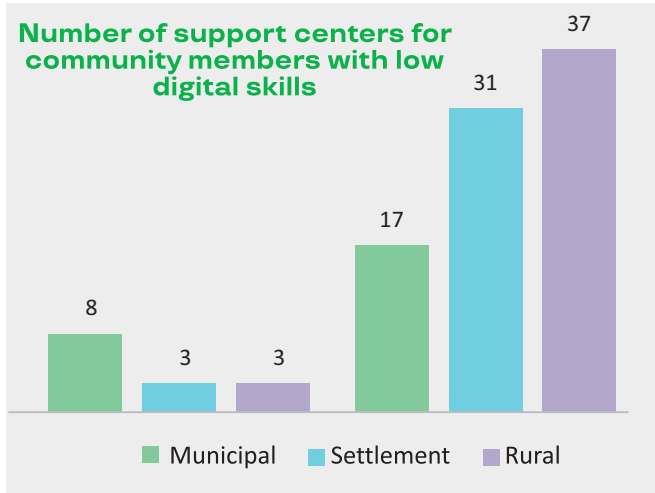
2.4. Digital literacy of the population: coverage and institutional support

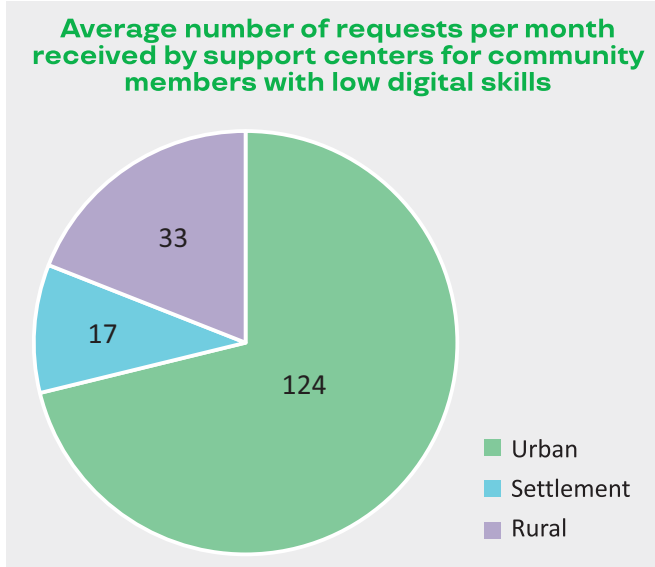
The readiness of communities for digitalisation depends not only on technical infrastructure, but also on the digital skills of the population, as these determine the ability to use online services. The survey results show that **only 34 of 99 communities (34%) organise digital literacy training for residents**. This indicates limited attention to developing digital competencies among the population as a prerequisite for effective interaction with electronic services. The distribution by community type is as expected. Urban communities show the highest activity: 13 out of 25 communities provide training. In settlements, this figure is 9 out of 34, and in rural areas, 12 out of 40. At the same time, even among communities that train the population, coverage varies significantly.



To ensure continuous support for citizens with low digital skills, some communities are setting up specialised offline centres where people can get help with e-services, receive advice, and receive training in basic operations, etc. The results show that only 14 out of 99 communities, or about 14%, have such support centres. The vast majority have not created institutionalised help points for digitally insecure citizens. The distribution by community type reveals the expected dominance of urban communities — 8 out of 25 (32%) have support centres, the highest indicator. Town and rural communities show equally low results — 3 communities of each type, or 9% and 8%, respectively, have such centres.

The number of requests to the centres also varies significantly. **In municipal-level communities where the centres operate, the average monthly number of requests is 124**. This demonstrates a high need for digital support and active use of the tools created. **Settlement communities have an average of 17 visits, while rural communities have an average of 33**. The relatively high rate in rural communities may indicate an acute demand for individual assistance, despite the absence or limited institutional infrastructure..





Taken together, these data show that digital literacy remains one of the least developed areas of digital transformation in communities. Training is provided in one-third of communities, coverage is uneven, and institutional support in the form of permanent centres has been established only in isolated cases. Under these conditions, a significant part of the population risks being left out of digital services, creating persistent digital inequality and limiting communities' ability to effectively digitise services.

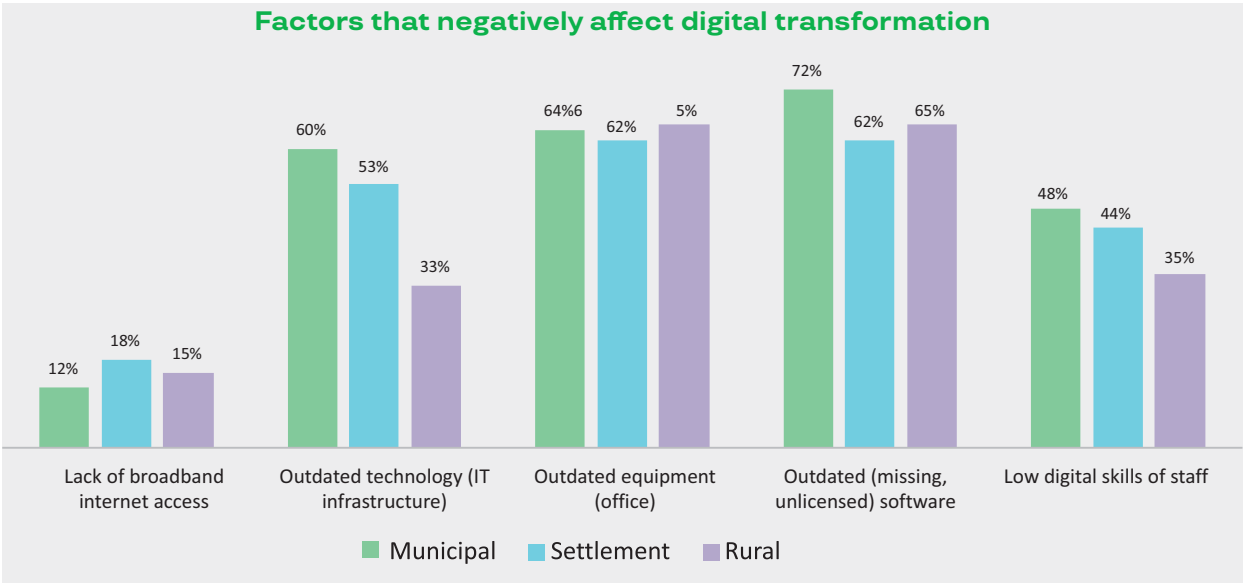
2.5. Barriers to digital transformation: community perceptions

The survey shows that communities face a complex set of technical and human resource barriers that slow down digital development. Analysis of quantitative indicators allows us to clearly identify the key barriers and the corresponding needs that communities consider priorities for further transformation.

1. **Internet access**. 12% of municipal, 18% of settlement, and 15% of rural communities lack high-quality broadband Internet access.

   The internet is a basic requirement for any digital service to work. Technical limitations, such as insufficient speed or lack of connection to certain facilities (schools, clinics, village councils), make it impossible to use online services.

   Strengthening network infrastructure is a priority for communities: 68% of settlement areas, 48% of rural, and 80% of municipal areas identify upgrading digital infrastructure as a necessary resource



2. **Outdated IT infrastructure**. Problems with the condition of computers, servers, and network equipment are experienced by **60% of municipal, 53% of settlement, and 33% of rural communities.**

   Worn-out equipment does not support modern systems, slows work, and limits the introduction of new services. Urban communities have the largest technical systems, so they feel this barrier most acutely.

   Updating digital infrastructure is considered critically important by **80% of urban, 68% of settlement, and 48% of rural communities.** This includes replacing computers, servers, and network equipmentя.

3. **Outdated office equipment**. Office equipment creates difficulties for 64% of urban, 62% of settlement, and 65% of rural communities.

   A lack of printers, scanners, and copiers, as well as outdated or underpowered computers and laptops, slows document flow and limits efficient processing of requests, especially in communities with heavy staff workloads.

   Updating office equipment is considered necessary by 76% of urban, 71% of settlement, and 73% of rural communities. This request is one of the most consistent.

4. **Outdated or unlicensed software**. The software problem is experienced by 72% of urban, 62% of settlement, and 65% of rural communities.

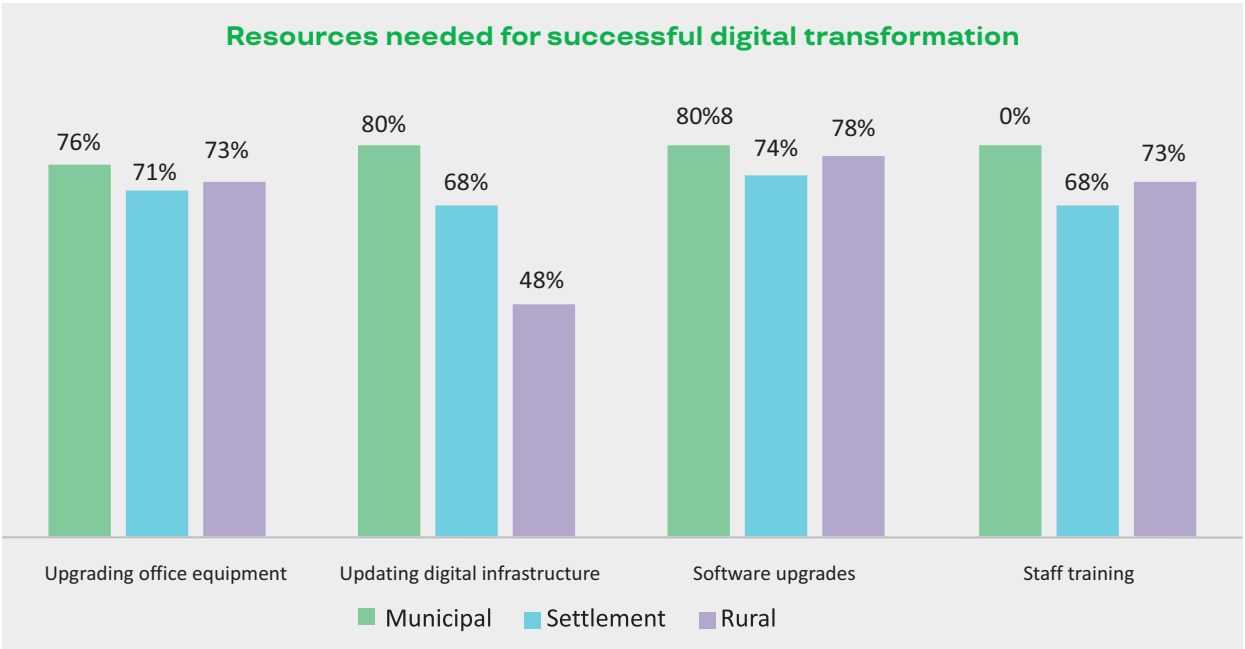
Outdated software prevents integration with state registries, limits the functionality of electronic services, and creates information security risks.

Software updates are a priority for 80% of urban, 74% of settlement, and 78% of rural communities. This confirms the scale of the problem.

5. **Low digital skills of staff**. A lack of digital skills was noted by 48% of urban, 44% of settlement, and 35% of rural communities.

   Even the best equipment and software do not work effectively if employees do not know how to use them. Low skill levels lead to errors, slow request processing, and reduced digital service efficiency.

   The need for staff training is recognised by 80% of urban, 68% of settlement, and 73% of rural communities. At the same time, only one community has a real training plan, which demonstrates a significant gap between needs and opportunities.



Conclusions

The analysis shows that technical and human resource barriers primarily hamper the digital transformation of communities. The most common barriers remain outdated IT infrastructure, insufficient office equipment and computers, software problems, and a lack of digital skills among employees. Internet access is only a problem for a few communities and no longer determines the overall level of readiness.

Priority needs clearly reflect these limitations. Communities consider equipment upgrades, infrastructure modernisation, the introduction of licensed software, and systematic staff training to be critical. This consensus shows that communities have a good understanding of their own weaknesses.

Section 3. Analysis of regulatory documents on the provision of public services to war veterans and their families

Territorial communities of the Zhytomyr region, in which an analysis of the regulatory framework for the provision of public services to war veterans and their families was carried out at the expense of local budgets of the following territorial communities: Ruzhynska, Khoroshivska, Korostenska, Chernyakhivska, Popilnianska, Andrushivska, Chudnivska, Radomyshlska, Ovruch, Korostyshiv, Berdychiv, and Malyn.

The purpose of the analysis was to determine the quality and completeness of the regulatory framework established by specific local government bodies for the provision of public services to war veterans and their families at the expense of local budgets, in particular:

- compliance of local government acts with the requirements of the law;
- completeness of legal regulation of the provision of certain public services (determination of the body and/or officials responsible for administering the service provision process, procedures/ regulations for service provision, etc.);
- preparation of recommendations for improving the legal regulation of the provision of services by local government bodies.

The following public services for war veterans and their families, funded by local budgets, were subject to analysis:

- treatment/rehabilitation of war veterans;
- payment of one-time/annual financial assistance;
- home care (social assistance);
- compensation for travel expenses.

3.1. Legislative and regulatory framework

In accordance with Part 1 of Article 91 of the Budget Code of Ukraine, local budget expenditures that may be incurred from all local budgets include, among other things, expenditures on:

social protection and social security, in particular:

- local social protection programs for certain categories of the population;
- compensation payments for preferential travel for certain categories of citizens;
- local programs for the development of housing and communal services and the improvement of settlements;

transport, road management, in particular:

- regulation of prices (tariffs) for passenger transportation by decision of the local executive authority and local self-government body in accordance with the powers granted;
- concessions on communication services, other concessions provided for by law, granted to war veterans; persons covered by the Law of Ukraine «On the Status of War Veterans, Guarantees of Their Social Protection».

It should be noted separately that paragraph 7 of Section VI «Final and Transitional Provisions» of the Budget Code of Ukraine stipulates that the Cabinet of Ministers of Ukraine, the Council of Ministers of the Autonomous Republic of Crimea, local state administrations, and executive bodies of the relevant local councils shall ensure, in accordance with the legislation of Ukraine, the provision of benefits to

certain categories of citizens through the introduction of social cards and the incurring of expenses in accordance with this Code exclusively through the use of the Unified State Automated Register of Persons Entitled to Benefits.

Thus, through the relevant provision of the Budget Code of Ukraine, the legislator has determined that any recipient of social assistance from the State Budget of Ukraine or the local budget must be included in the Unified State Automated Register of Persons Entitled to Benefits.

In accordance with paragraph 22 of part one of Article 26 of the Law of Ukraine «On Local Self-Government,» it is determined that the competence of village, settlement, and city councils includes the approval of programs for the socio-economic and cultural development of the respective administrative-territorial units, as well as targeted programs on other issues of local self-government.

Part 1 of Article 34 of the Law of Ukraine «On Local Self-Government» establishes that the executive bodies of village, settlement, and city councils have the **following powers (self-government powers)**:

- establishing, at their own expense and through charitable donations, additional guarantees for the social protection of the population, beyond those established by law (subparagraph 1 of paragraph «a»);
- resolving, in accordance with the law, issues related to the provision of assistance to persons with disabilities, war and labor veterans, families of deceased (dead or missing) military personnel, as well as military personnel discharged into the reserve (except for military personnel serving fixed-term service and military service by conscription of officers) or retired, persons with disabilities since childhood, large families in the construction of individual residential buildings, major repairs of housing, and the purchase of building materials; allocation of land plots to the above-mentioned persons on a priority basis for individual construction, gardening, and horticulture (subparagraph 1 of paragraph «a»);
- resolving issues related to the provision of funeral services at the expense of local budgets in connection with the burial of lonely citizens, war and labour veterans, as well as other categories of low-income citizens; assisting in the burial of citizens in other cases provided for by law (subparagraph 4 of paragraph «a»).

3.2. Results of the analysis of the regulatory framework for the provision of public services to war veterans and their families at the expense of local budgets

According to the documents provided for analysis, as well as independent searches for documents on the websites of local communities, the introduction of services is envisaged by the target programs of the relevant local communities, and the financing of the relevant services is carried out at the expense of funds for financing target programs for the relevant year.

Based on the results of the analysis of the acts, the following circumstances should be noted.

First, the vast majority of targeted programs expire in 2025. Local authorities provided no information on the adoption of new targeted programs to replace those expiring.

Second, most of the analysed territorial communities did not provide, or do not have, a regulatory act (Regulations, Procedures, etc.) governing the service delivery procedure.

Third, none of the Regulations/Procedures analysed that regulate the provision of services contains provisions on the possibility of submitting an application with a list of documents in electronic form.

Fourth, there is a problem with the classification of services provided. In particular, the Korostyshiv territorial community has determined that the service of providing sanatorium and resort treatment is an administrative service and, accordingly, is provided through the ASC. The situation is similar in the Popilnia territorial community, where material assistance is provided through the ASC. The Andrushivka

territorial community has determined that the service of providing one-time targeted assistance to family members, parents, or other persons who have buried members of the Armed Forces of Ukraine who were killed (died) during martial law is a social service, the provision of which is regulated by the Law of Ukraine «On Social Services.» The rest of the territorial communities do not classify the services they provide; therefore, these services can be assumed to be public services.

Fifth, some territorial communities provide services for the payment of compensation for preferential travel by motor transport to certain categories of citizens (for example, the Berdychiv Territorial Community) «automatically» without the expression of will of the recipient of the service, by compensating transport companies each year with a fixed amount of funds for the transportation of beneficiaries.

Sixth, most of the regulations of the analysed territorial communities do not contain information on the term of provision of a particular service.

To develop a proposal for harmonising the local database in accordance with the «maximum electronic service» model, it is necessary to:

- obtain information from all territorial communities on the regulatory acts that will regulate the provision of public services to war veterans and their families at the expense of local budgets in 2026, in particular, the procedure and order of their provision;
- bring the definition of a single clear social and legal status of persons receiving services into line with the terminology of the Law of Ukraine «On the Status of War Veterans and Guarantees of Their Social Status,» since the regulatory and legal acts of the territorial communities of service recipients refer to them in different ways: defenders, veterans, participants in the anti-terrorist operation, etc.;
- determine whether all categories of persons receiving the above-mentioned public services are subject to inclusion in the Unified State Automated Register of Persons Entitled to Benefits.

Section 4. Analysis of municipal services for veterans: structure, accessibility, and procedural aspects

4.1. Methodological note on calculations

In this section, a specific methodology for calculating percentage indicators is used to analyse the characteristics of services for veterans, which differs from the standard approach. **When analysing the characteristics of each service, the percentage is calculated not from the total number of all 99 communities in the sample, but from the number of communities that provide this particular service**.

For example, if one-time cash assistance is provided in 28 communities and 23 of them allow veterans registered in those communities to receive it, the indicator is 82% (23 ÷ 28 × 100%). This approach allows services with different names but the same characteristics to be categorised, and the characteristics of different categorised services to be compared, regardless of their absolute prevalence.

The initial dataset, collected from 99 communities in the Zhytomyr and Vinnytsia regions, contained **410 records on veterans' services**. However, it was impossible to use this data directly for analysis due to significant variability in service names: the same service could be registered as «one-time cash assistance,» «one-time assistance,» «targeted material assistance,» or «cash assistance.» This terminological inconsistency reflects the lack of uniform standards for documenting services at the local level, which complicates both analysis and the subsequent exchange of practices between communities.

To ensure the analytical validity of the data, a service unification procedure was carried out. Each service was analysed according to three parameters: the formal name of the service, a descriptive characteristic of the service content (based on community data), and the actual conditions of provision (target audience, procedural requirements, form of support). As a result, the services were grouped into **56 unified services**. This enabled moving from a descriptive inventory to a substantive analysis of the structure of municipal support for veterans.

4.2. General structure of services for veterans

According to the survey results, 99 local communities provided 410 services, but only 56 of them were identified as non-repetitive. **The top 13 services are**: one-time cash assistance, one-time funeral assistance, travel compensation, material assistance, one-time material assistance to families, social protection, comprehensive support, counselling, information, social adaptation, housing and utility benefits, dental or medical benefits, and meals for children.

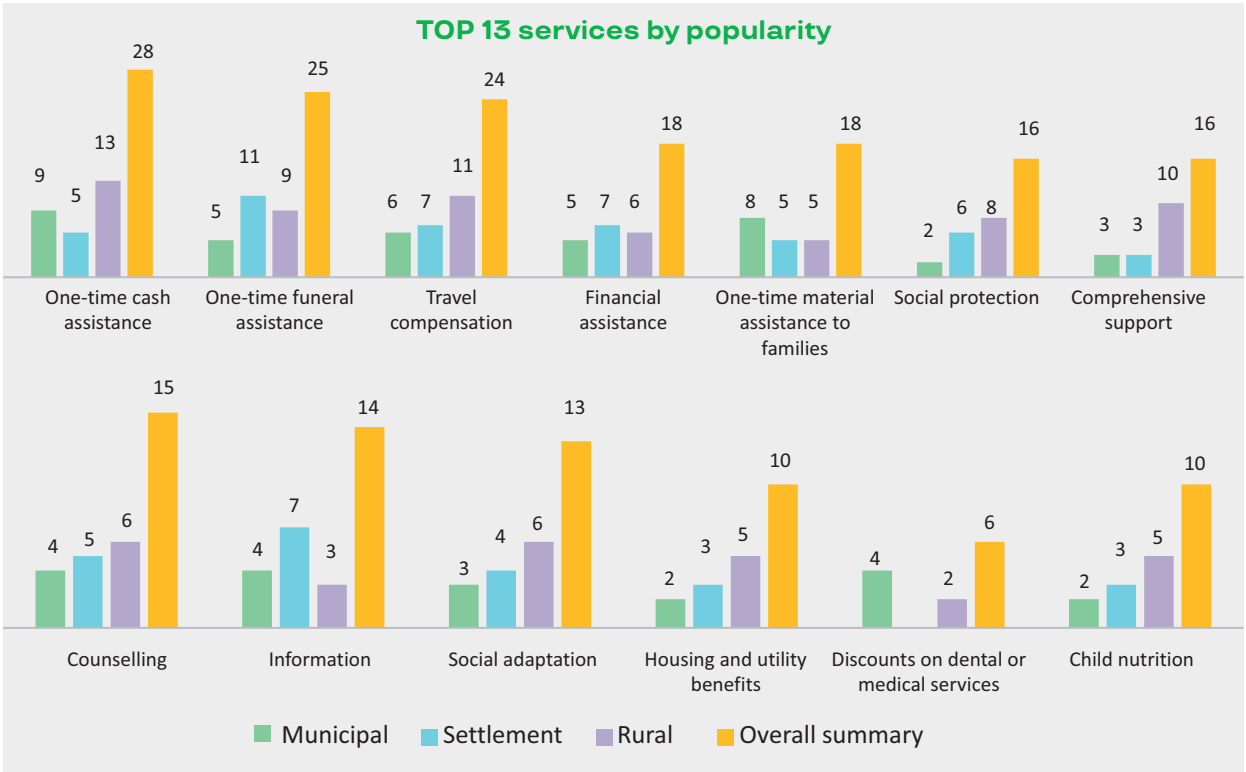
The selection of these services for in-depth analysis was based on two criteria: the number of communities providing them (prevalence) and the total volume of services provided in 2024 (massiveness). This dual approach allows us to identify both the most typical forms of support and the services with the highest actual coverage of veterans.

One-time cash assistance is the most common in terms of the number of communities providing it (28 communities: 9 urban, 6 settlement, 13 rural), but ranks only 6th in terms of volume (3,342 services provided). Rural communities show the highest activity in implementing this form of support, which may reflect its relative simplicity of administration and flexibility of application.

One-time funeral assistance ranks second in prevalence (25 communities), with a noticeable predominance among settlement communities (11 out of 25, or 44% of providers). In terms of scale, this service ranks third among 4,929 services, with 70% (3,462) serving rural communities, which aligns with the demographic structure of these territories and the higher mortality rate among the elderly population.

Travel compensation is available in 24 communities (3rd place in terms of prevalence), 11 of which are rural, accounting for 46% of providers. This logically correlates with transportation challenges in rural areas, where distances to medical facilities, social services, and administrative centres are significant, and public transportation accessibility is limited. Critically, this service is by far the most popular, with 29,323 services provided, accounting for 53% of the total volume of all top 13 services. This disproportion may reflect both methodological differences in calculations between communities (in particular, the possibility of counting each trip as a separate service) and the real critical need of veterans for transport accessibility.

Two services share fourth place in terms of prevalence, with 18 communities each. **Financial assistance** (5 urban, 7 settlement, 6 rural) is highly prevalent, with 3,882 services provided, 72% (2,806) of which are in settlement communities.



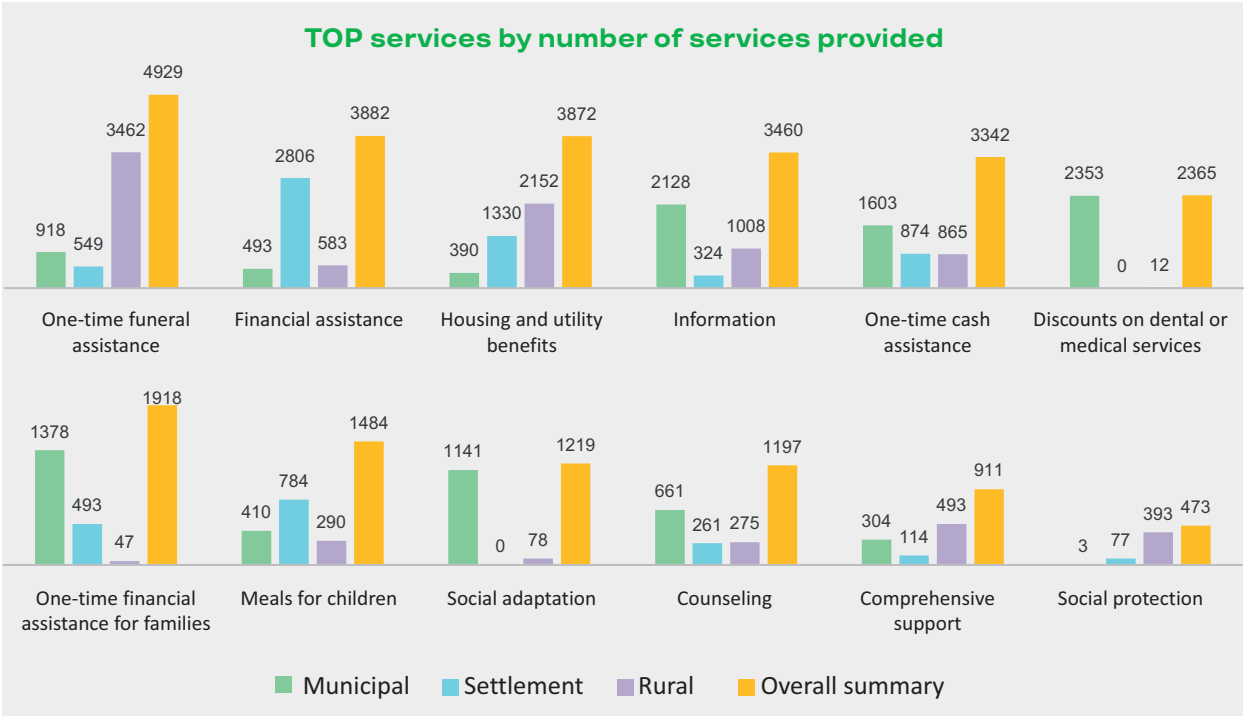
One-time material assistance to families has a slightly different profile: 8 urban, 5 settlement, and 5 rural communities, indicating greater activity by urban municipalities in supporting veterans' families. In terms of scale, this service accounts for 1,918 services provided, of which 72% (1,378) are provided by urban communities.

Social protection and comprehensive support are provided in 16 communities each, but with opposite distribution structures. Social protection is provided mainly in rural (8 communities) and settlement (6) communities, with minimal participation of urban (2) communities, but shows low massiveness, with only 473 services provided. Comprehensive support has a similar distribution across community types (10 rural, 3 settlement, 3 urban), with slightly higher coverage — 911 services provided — which may reflect dependence on donor projects that often focus on smaller communities.

Counselling is provided in 15 communities (4 urban, 5 settlement, 6 rural) with a relatively even distribution. The coverage is 1,197 services, with urban communities accounting for 55% (661 services), indicating a higher intensity of service provision.

Information is provided in 14 communities, predominantly towns (7 out of 14), but shows a high coverage of 3,460 services provided (6th place out of 13). At the same time, 61% (2,128 services provided) fall on urban communities, which may reflect the systematic communication work of large municipalities.

Social adaptation has been implemented in 13 communities (3 urban, 4 settlements, 6 rural), but shows a critical concentration in urban centres in terms of volume: 94% of 1,219 services provided (1,141 services) in urban communities. This disproportion highlights that complex rehabilitation services, which require specialised personnel and infrastructure, remain the prerogative of urban centres.



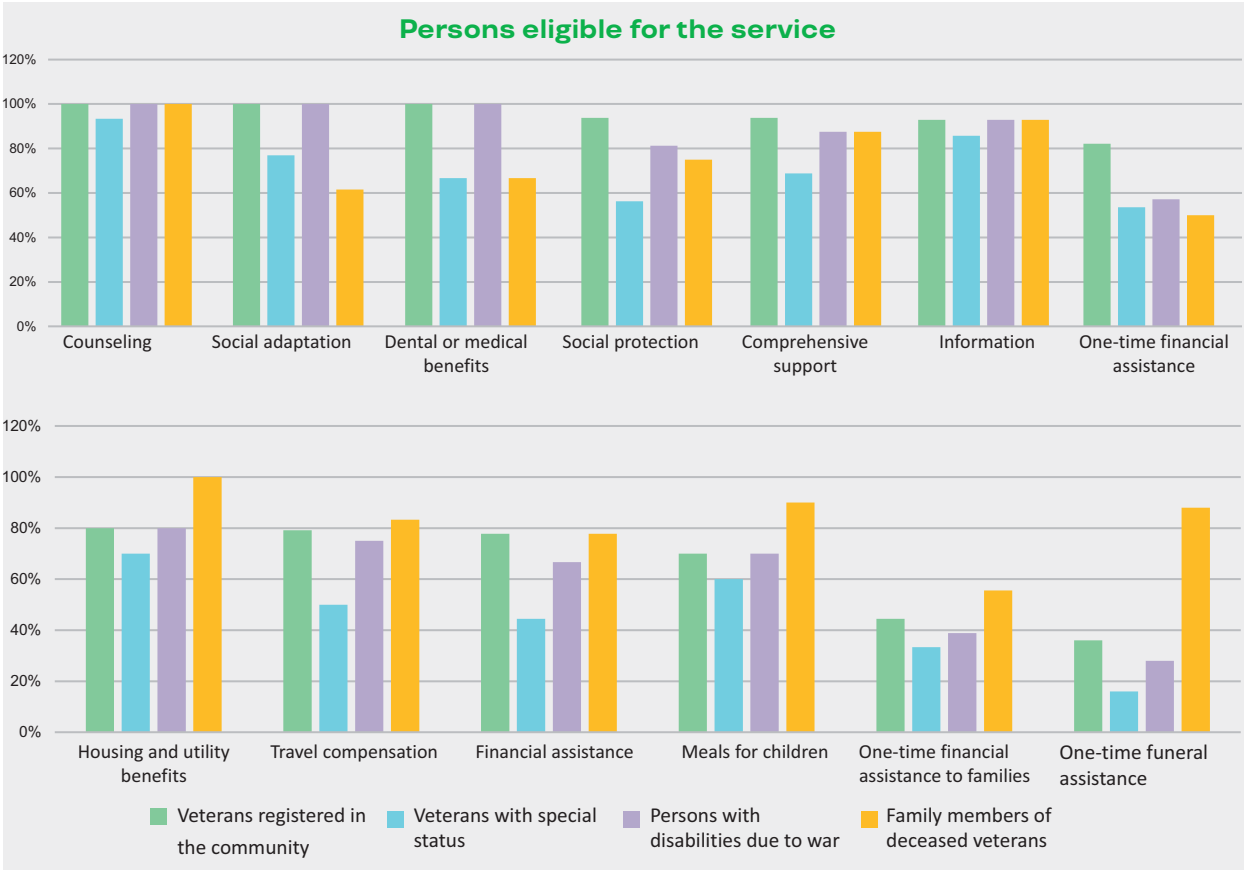
Benefits for housing, communal services, and **child nutrition** are provided in 10 communities each, but at varying coverage rates. Utilities subsidies are provided in 2 urban, 3 settlement, and 5 rural communities, demonstrating a high coverage rate of 3,872 services (5th place), with 56% (2,152) provided in rural communities. This may reflect the greater difficulty of paying for utilities in communities with lower average incomes. Child nutrition has an identical distribution across community types (2 urban, 3 settlement, 5 rural), with a total of 1,484 services provided, integrating support for veterans' children into general social assistance programs for families.

Dental or medical benefits are the least common among the top 13, with only 6 communities (4 urban and 2 rural, none in towns) providing them. This concentration in urban communities reflects the high cost and complexity of organising specialised medical support. At the same time, this service demonstrates high mass appeal — 2,365 services provided (7th place), with 99.5% (2,353) in urban communities, indicating the presence of a powerful municipal medical support program in one or more large communities.

The structure of the top 13 services shows a predominance of financial forms of support—10 out of 13 positions —reflecting both the acute financial vulnerability of veterans and the limited tools available to communities to provide more complex forms of support. At the same time, the presence of counselling, information, and social adaptation services indicates a gradual expansion of municipal support beyond purely material assistance. The discrepancy between prevalence and mass adoption underscores the need for a differentiated approach to digitalisation: the most prevalent services are not always the most widely adopted, and vice versa.

4.3. Target groups of services: inclusiveness and differentiation of access

An analysis of the categories of persons eligible for services shows a predominantly inclusive approach by communities, with some justified exceptions. Counselling is the most universal service: 100% of communities provide it to veterans registered in the community, persons with disabilities due to war, and family members of the deceased, and 93% to veterans with special status. Social adaptation (100% for registered veterans and persons with disabilities), dental benefits (100% for registered persons and persons with disabilities), and social protection (94% for registered veterans) also show high levels of inclusiveness.



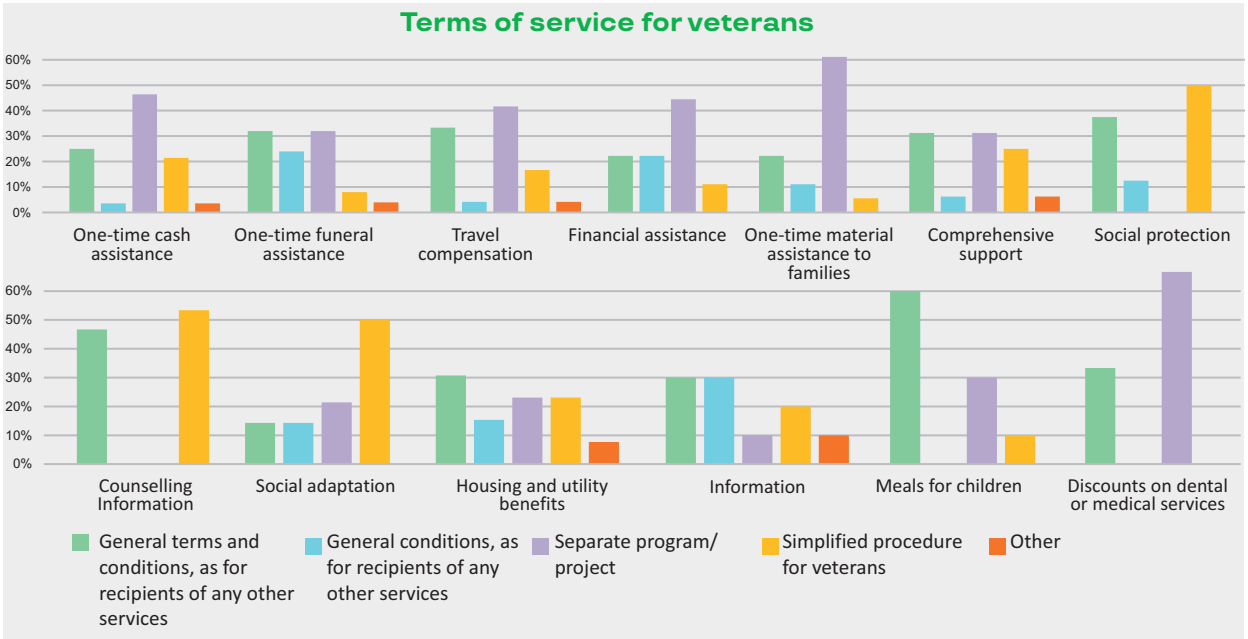
Significant differences in the criteria used for services aimed at supporting families are observed. One-time funeral assistance is targeted: 88% of communities provide it to family members of the deceased, while only 36% provide it to all registered veterans, 28% to persons with disabilities, and 16% to veterans with special status. This differentiation is logical, as the service is primarily intended to support families in organising the funerals of deceased defenders.

One-time financial assistance to families shows a similar pattern: 56% of communities provide it to family members of the deceased, but only 44% to all registered veterans, 39% to persons with disabilities, and 33% to veterans with special status. **Food assistance for children** is most accessible to families of the deceased (90% of communities) compared to other categories (60-70%), reflecting the special attention given to children who have lost their breadwinner.

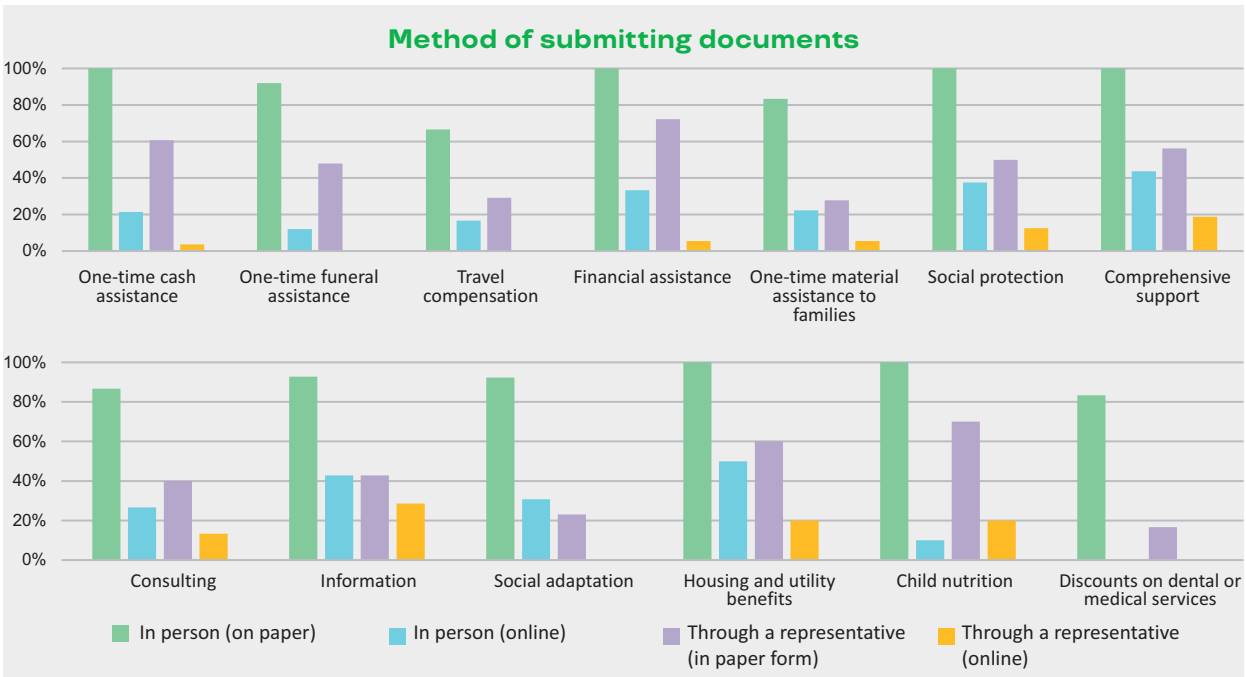
Housing and utility benefits are an exception, with 100% availability for family members of the deceased, 80% for registered veterans and persons with disabilities, and 70% for veterans with special status. This may reflect the recognition of the particular economic vulnerability of families without a primary breadwinner.

4.4. Procedural aspects: grounds, conditions, and methods of applying for services

Personal application remains the dominant basis for initiating service provision, ranging from 54% for travel compensation to 100% for one-time cash assistance, housing and utility benefits, social protection, and most other services. This model places full responsibility for initiation on the veteran, creating systemic barriers for the most vulnerable groups, who may lack information about available services or face difficulties in completing applications.



Electronic submission is available only for a limited number of services. The highest rates are demonstrated by **social protection** (38% of communities allow e-applications), **comprehensive support** (38%), **counselling** (27%), and **information** (14%). For most financial services, the electronic channel is virtually non-existent: one-time cash assistance 7%, one-time funeral assistance 4%, travel compensation 4%, material assistance, 0%..



Використання даних з реєстрів без необхідності подання заяви застосовується обмежено: 21% громад використовують цей підхід для компенсації проїзду та інформування, 13% для соціального захисту, 11% для матеріальної допомоги. Для більшості послуг цей прогресивний механізм не використовується взагалі.

The use of registry data without the need to submit an application is limited: 21% of communities use this approach for travel compensation and information, 13% for social protection, and 11% for material assistance. For most services, this progressive mechanism is not used at all.

Proactive service provision (when the community independently initiates provision without waiting for a veteran's application) is extremely rare: only counselling shows 27% implementation, information — 14%, social adaptation — 8%, and social protection — 6%. For all forms of financial support — one-time cash assistance, funeral assistance, travel compensation, material assistance, housing and utility benefits — this progressive mechanism is not used at all.

A decision by a commission or court is a mandatory component in 22% of cases of one-time material assistance to families and 17% of cases of material assistance, reflecting limited budget resources and the need for competitive selection among applicants. Counselling (20%) and information provision (14%) require formal collegial decisions much less frequently.

In terms of **conditions for provision**, services show significant variability. **Counselling** has the highest share of simplified procedures for veterans (53%), which is justified for a low-threshold service. In 67% of cases, dental benefits are provided through specialised programs for veterans. In 61% of cases, **one-time financial assistance to families** is provided through separate programs. In contrast, **meals for children** are provided on a general basis in 60% of cases, integrating veteran families into universal social support systems for families with children.

The methods of submitting documents remain predominantly traditional. All of the top 13 services retain personal submission in paper form as the primary or only channel (67-100% of It should be noted that more complex coordination services (**comprehensive support** — 44%, **social protection** — 38%, **information** — 43%) are more likely to have online options than simpler financial payments (12-22%). This may reflect the introduction of pilot e-services within donor projects, which often focus on innovative, comprehensive forms of support.

Paper-based applications through a representative are available for 17-72% of services in the top 13, most notably for material assistance (72%) and child nutrition (70%). **Online applications through a representative r**emain a rare exception — a maximum of 29% for information, 20% for housing and utility benefits, and child nutrition..

4.5. Application processing times

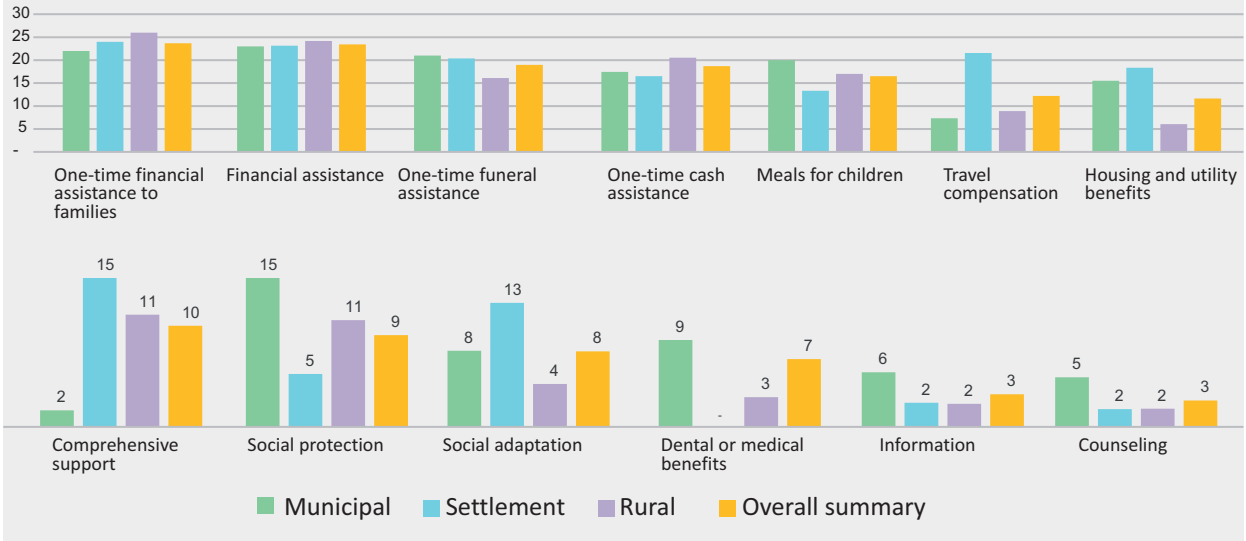
The average time to consider applications varies from 3 to 24 days. **Information** and **counselling** demonstrate the shortest deadlines — 3 days on average, reflecting their procedural simplicity and the possibility of responding without complex checks or approvals. These services show minimal variation across community types: information — 2 days in towns and villages, 6 days in cities; counselling — 2 days in towns and villages, 5 days in cities.

Comprehensive support shows significant differentiation: 2 days in urban communities, 15 days in towns, 11 days in villages. The extremely short period in cities may reflect the presence of specialised coordinators or integrated service systems. In contrast, in settlement communities, the process requires coordination among different departments in the absence of dedicated staff.

Travel compensation shows an average timeframe of 12 days, but with significant variation: 7 days in urban communities, 22 days in towns, and 9 days in rural communities. The extended timeframe in towns may indicate organisational gaps or insufficient prioritisation of this mass service. **Housing and utility subsidies** are processed faster in rural communities (6 days) than in cities (16 days) or towns (18 days), suggesting simpler approval procedures in smaller administrative structures.

The longest processing times are typical for services that require commission decisions or complex verification of circumstances: **one-time financial assistance to families** — 24 days; **financial assistance** — 23 days; **one-time funeral assistance** — 19 days; **one-time cash assistance** — 19 days. It is worth noting that even urgent funeral assistance takes an average of almost three weeks to process.

Average duration of consideration of an appeal or application until it is received by the veteran (days)



4.6. Service provision statistics

Analysis of the ratio of requests to successfully provided services is complicated by methodological differences in calculating this ratio across communities.

Discrepancies in statistics arise for several reasons: first, communities may use different accounting periods (some count from the launch of the service several years ago, others only for 2024); second, there are no uniform standards for what constitutes a «referral» (some communities count each visit separately, others only the initial application); Third, the methodology for counting «successfully provided services» also varies (some communities count each payment as a separate service, others count each case of service provision regardless of the number of transactions).

Travel compensation shows 32,372 services successfully provided in 2024, with 29,323 applications since launch, which may indicate different accounting periods or calculation methods across communities.

One-time funeral assistance has 4,991 successful provisions out of 4,929 requests, for a nearly 100% success rate. There have been only 31 refusals since the launch, or less than 1% of applications. **One-time cash assistance** has been successfully provided 3,502 times out of 3,342 applications, with only 4 refusals, indicating a high acceptance rate.

Housing and utility benefits: 3,872 grants have been awarded, with the same number of applications and zero rejections since launch, indicating clear, objectively verifiable eligibility criteria. **Child nutrition** also shows zero rejections with 1,484 successful grants.

Comprehensive support shows 1,177 successful applications out of 911 applications and 83 rejections since launch, representing a rejection rate of approximately 9%. This may reflect stricter criteria or limited community capacity to provide this complex service to all applicants.

A critical issue is the **quality of statistical data**. A significant number of communities provided conflicting figures (for example, the number of successful services for 2024 exceeds the total number

since launch) or left fields blank. Only about 60% of the data is internally consistent, which significantly limits the ability to analyse effectiveness and plan resources accurately. This highlights the need to implement standardised electronic systems for recording requests and services provided..

Conclusions

A study of 410 services for veterans in 99 communities in the Zhytomyr and Vinnytsia regions revealed a critical gap between the scale of municipal support and its digital accessibility, creating systemic barriers for the most vulnerable categories of recipients.

Structural concentration and disparities. The top 13 services account for 52% of the total volume (214 out of 410), with travel compensation showing extreme concentration: 29,323 services, or 53% of the top 13's total volume. This imbalance may reflect both methodological differences in calculations (each trip as a separate service) and a real critical need for transport accessibility. Financial forms of support dominate the structure (10 out of 13 items), while specialised services are concentrated in urban centres: 94% of social adaptation (1,141 out of 1,219 services provided) and 99.5% of medical benefits (2,353 out of 2,365) are provided by urban communities, leaving settlements and rural areas with limited access to complex rehabilitation services.

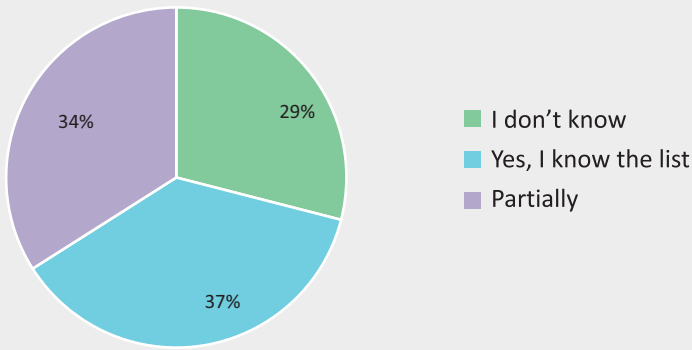
Procedural archaism. The «personal application as the sole basis» model remains dominant for 54-100% of services, placing the responsibility for initiation on the veteran. Electronic submission is virtually non-existent in financial services: one-time cash assistance: 7%; travel compensation: 4%; material assistance: 0%. Proactive provision is not applied at all for financial forms of support, with counselling (27%) and information (14%) the only forms applied. Paradoxically, even urgent burial assistance takes an average of 19 days to be considered, and material assistance to families takes 24 days.

Section 5. Analysis of survey results on the availability and quality of local services for veterans

5.1. Awareness of local services

The study reveals a critical gap in veterans' awareness of available services. Only 37% of respondents are aware of the list of local services, 34% have partial information, and 29% are completely unaware of the available services. This indicates systemic problems in the communication strategy of local authorities.

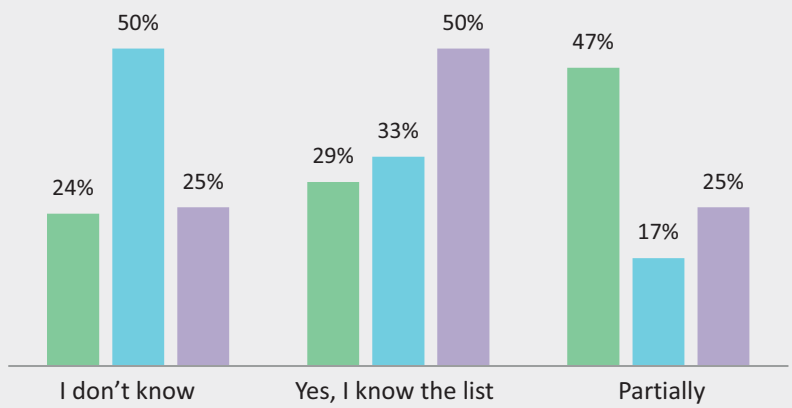
Awareness of local services for veterans in the community



Analysis by community type shows significant differences. Rural communities have the highest proportion of those who know the list of services (50%), but 25% have no information at all. Town communities show the worst results: half of the respondents (50%) are unaware of available services. Urban communities show the highest proportion of partial awareness (47%), suggesting fragmented information.

The indicators of the regularity of receiving updates confirm serious problems: 46% never receive updates about services, 26% receive them weekly, 17% monthly, and 6% quarterly and annually. Rural communities show the best results (42% receive weekly updates), while in urban communities, 65% never receive information.

Awareness of local services for veterans in the community

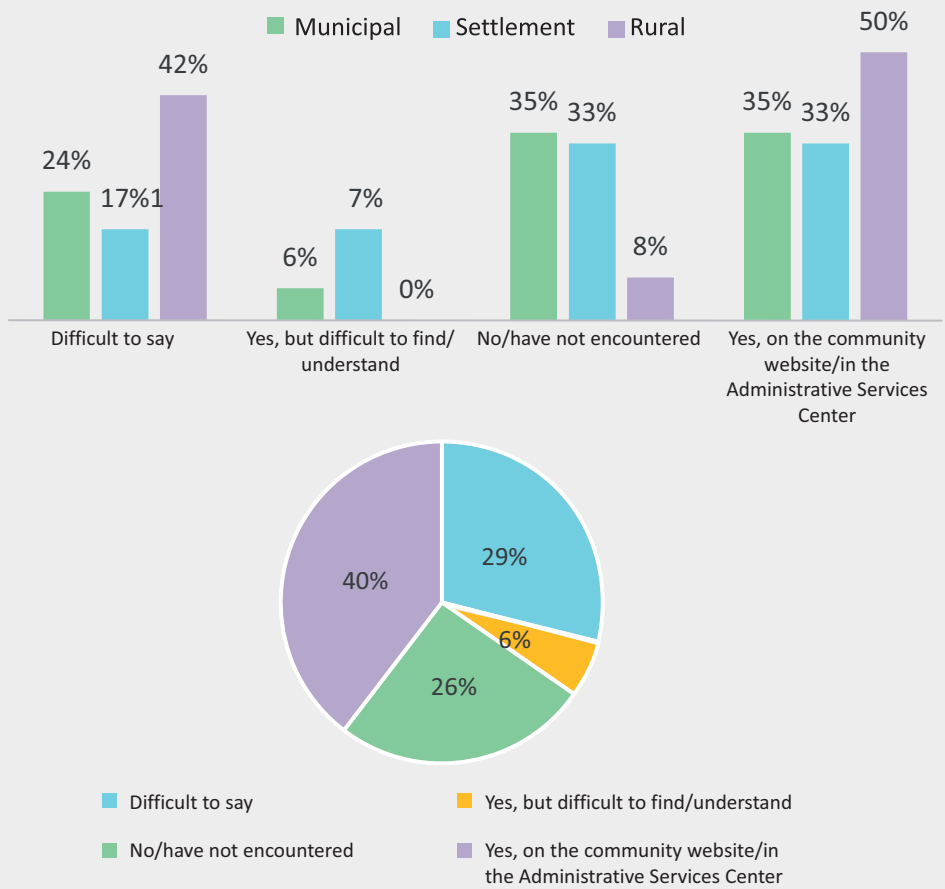


5.2. Accessibility and clarity of information

Питання доступності чітких правил для отримання послуг виявляє неоднозначну ситуацію. 40% респоThe issue of the availability of clear rules for obtaining services reveals an ambiguous situation. 40% of respondents confirm the availability of rules on the community website or at the ASC; 29% find it difficult to answer, 26% have not encountered such information; and 6% note that the information is available but difficult to find or understand. The formal availability of information does not guarantee its effective accessibility.

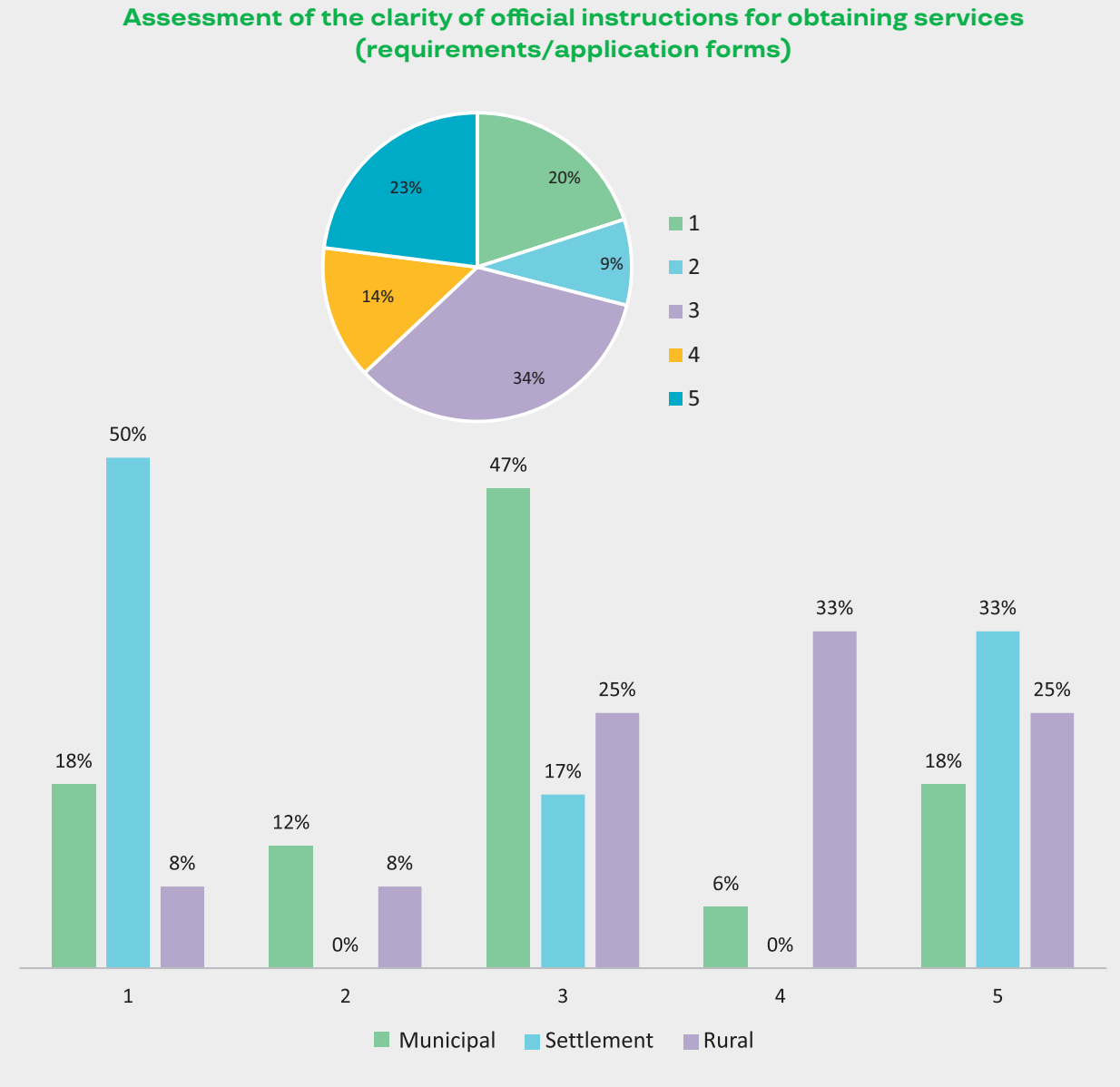
Rural communities show the highest accessibility rate (50% confirm the existence of rules), but 42% find it difficult to assess the situation. Urban and settlement communities have comparable rates (35% and 33%, respectively), but urban communities have a higher proportion of those who have not encountered the information (35%).

Openness and accessibility of rules for obtaining services in the community



Assessment of the clarity of official instructions on a five-point scale: 34% rated them as average (3 points), 23% gave the highest rating (5), 20% gave the lowest (1), and 14% and 9% gave ratings of 4 and 2, respectively. The weighted average rating of 3.1 points indicates that the instructions are moderately clear..

Rural communities received the lowest ratings: half of the respondents gave a rating of 1, indicating critical problems. Rural communities show the highest scores: 33% scored 4, 25% scored 3, and 25% scored 5. Urban communities show the greatest diversity, with the average score being the highest (47% gave a score of 3).



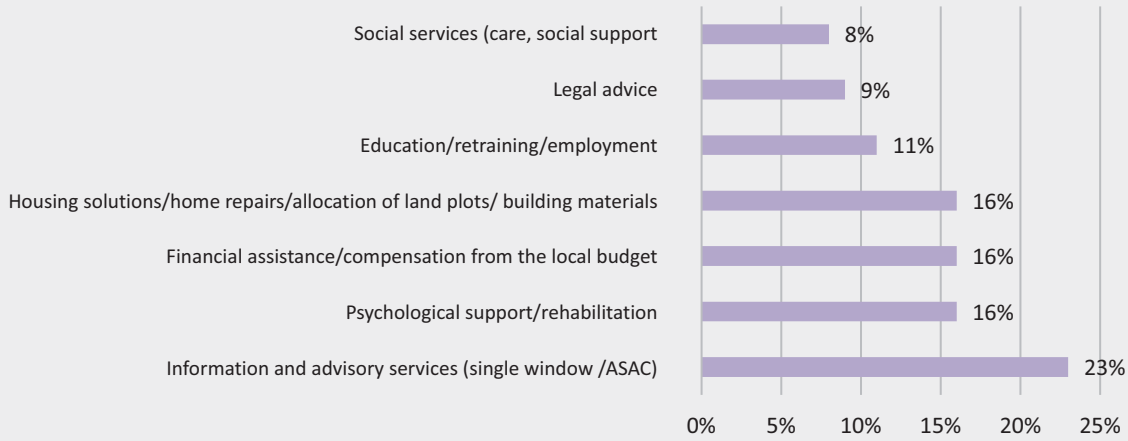
5.3. Structure of service requests

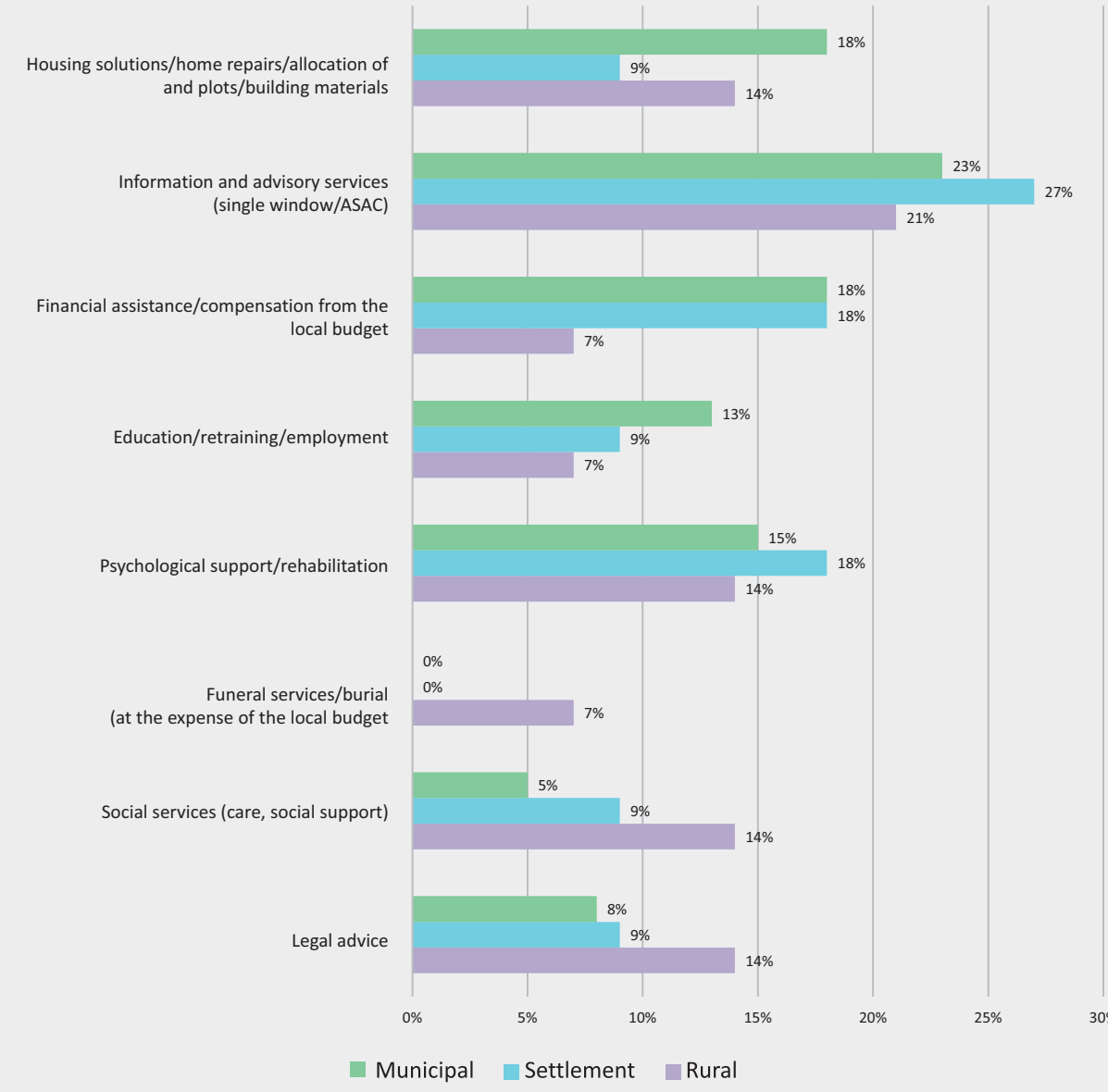
An analysis of request structure shows a differentiation in priorities. The largest share is accounted for by information and advisory services (23%), confirming the ASC's role as the main channel of interaction. Three types of services are equally popular, each accounting for 16%: housing issues, financial assistance, and psychological support. This triad reflects the key challenges of veteran reintegration.

Less popular services include education/retraining/employment (11%), legal advice (9%), social services (8%), and funeral services (2%). The relatively low demand for educational services is a concern for long-term reintegration.

Comparison between types of communities: rural communities show the highest share of requests for information services (27%) and psychological support (18%). Rural communities show increased demand for social services (14%), legal advice (14%), and housing issues (14%). Urban communities have a balanced distribution with an emphasis on information services (23%), housing (18%), and material assistance (18%).

List of services requested by respondents

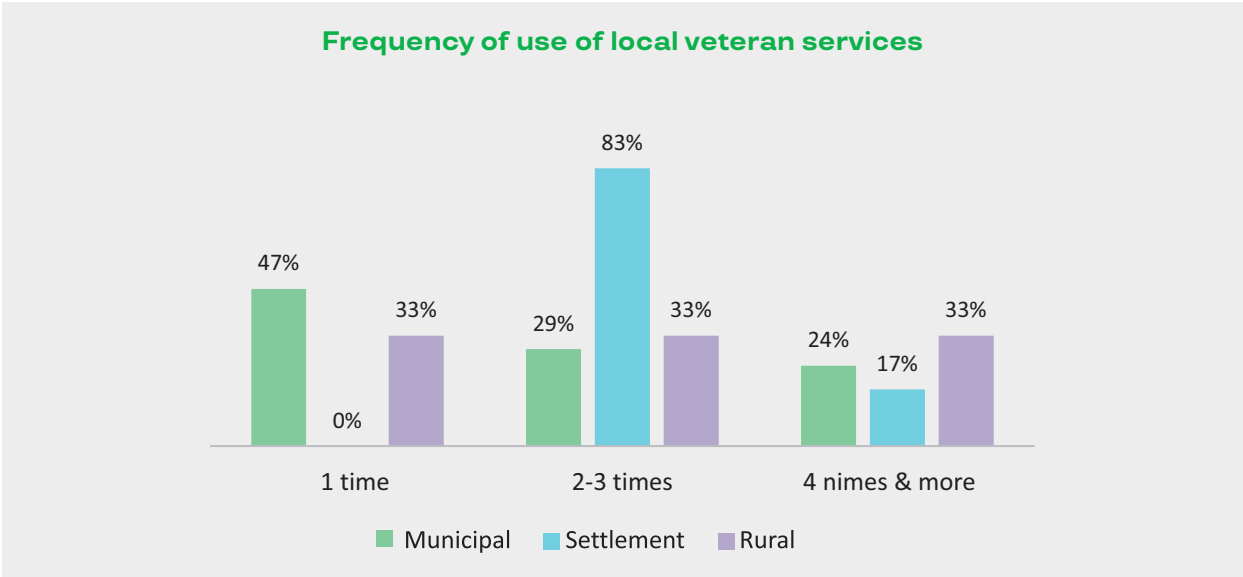




5.4. Intensity of service use

Data on the number of requests: 40% requested services 2-3 times, 34% requested services once, and 26% requested services 4 or more times. This indicates the episodic nature of interaction for most veterans. A significant proportion of one-time requests may indicate both the effectiveness of resolving issues and barriers to repeat requests.

Rural communities have the highest repeat-visit rate: 83% visited 2-3 times. Urban communities have the highest proportion of one-time requests (47%), which may indicate the effectiveness of services or low motivation for repeat interaction. Rural communities show an even distribution (33% in each category), indicating a variety of individual situations.



Conclusions

The study revealed a complex set of systemic problems in the provision of local services to veterans. The gap between service availability and awareness is critical: only 37% of veterans are fully aware of the services available, almost a third have no information, and almost half never receive updates. This points to the need to review communication strategies.

Significant differences in indicators across community types indicate uneven development of service infrastructure. Urban communities show the weakest results in terms of awareness and clarity of instructions. At the same time, rural communities provide better information to veterans, which may explain stronger social ties.

The structure of demand indicates the priority of basic needs: housing, financial support, and psychological rehabilitation. The high demand for information and advisory services confirms the role of ASCs as a key channel of interaction. The relatively low demand for educational services (11%) is a cause for concern regarding long-term reintegration.

Section 6. Results of interviews with veterans, their families, and OMS service employees

6.1. Organisation of work and principles of service provision to veterans

After demobilisation, veterans usually have several **points of contact with their communities**: ASC, social protection department, social, medical and veteran support department, local veteran space (if available), veteran associations, etc. According to Resolution No. 881 of August 2, 2024, on the Procedure for Ensuring the Activities of Specialists Supporting War Veterans and Demobilised Persons, communities have also introduced specialist positions supporting veterans. They can be located on the premises of any of the above-mentioned services, but more often, it is the ASC that operates under the single-window principle for veterans. In communities where there are already support specialists, they act as a single coordination centre for working with demobilised veterans and military families.

The active work of the support specialist enables the support specialist to **focus on the clear fulfilment of bureaucratic requirements** and the simultaneous preparation of a package of documents at the first application; further support is provided in a targeted manner, adapted to the specific needs of the person.

Veterans' impressions of their interactions with local service representatives are generally positive, while disappointment arises from **nationwide regulatory decisions** regarding opportunities to receive support. From our informants' perspective, these decisions are not **comprehensive or flexible enough** to accommodate the needs of specific individuals.

No separate **document, standard, or procedure for working with veterans** has been identified in the **aforementioned local government departments**, although there are certain developments, especially in support.

At the same time, there are **general principles** for the attentive treatment of veterans: the «Veteran» administrative service, priority access, a more convenient spatial location (first floor, first row, etc.) and/or compliance with standards to ensure inclusive space.

However, according to both representatives of the local government and the veterans themselves, there is no need for a separate standard of service quality that would apply to demobilised military personnel exclusively. Services should be provided **quickly, inclusively, with courtesy and respect for people in general, and not exclusively for veterans**.

In some communities, applications from active and demobilised military personnel are accepted and processed **remotely**. Still, the speed and success of resolving issues also depend heavily on **the professionalism and communication skills of the specialists involved**.

When responsibilities are transferred or the rules for applying for support change, **problems** may arise **due** to **a lack of explanation** or even complete **silence** from the services.

6.2. Internal interaction and coordination between departments

Interaction between departments in communities when addressing veterans' issues is largely coordinated, but this **coordination** does not arise from procedural consistency; rather, it stems from the positive action of the **human factor** — for example, departments and/or individual employees take responsibility for helping veterans compile as complete a package of documents as possible.

The background attitude towards veterans across services depends on the existence of constructive relations between departments, which can either foster a sense of support or cause moral damage or insult dignity

Today, communities take **a project-based approach to fulfilling** veterans' **requests**: the specific departments involved, the required documents, and the community's ability to provide support are determined by the nature of the request.

The main problem that significantly slows down service operations is the lack of, or imperfection in, a common database of veterans. Currently, the issue of transferring documents between different departments is resolved manually: our informants, representatives of services working with veterans, maintain their own database of documents and data on these veterans in digital, paper, or mixed formats, obviously filling and organising it at their own discretion.

6.3. Experience of interaction between services and veterans

The model of providing services with the help of support specialists, which is currently being implemented, actually reproduces the phenomenon **of mentoring** that naturally arises in such cases: when several people from a particular community change their status (in this case, from military personnel to demobilised personnel), gain certain experience first, and then help those who follow them. This was mentioned in particular by informants who had received veteran status before the introduction of the support specialist position.

Accordingly, this model is effective, but only if the support specialist is **personally involved** and highly engaged in communication with veterans.

Officials are aware of the psychological characteristics of demobilised persons, but note that veterans come in different types and generally do not deviate from normal behaviour. Nevertheless, among **the** general **distinguishing characteristics of veterans**, some detachment from communication was described ("Sometimes, like children, they need to be explained things"), a heightened sense of justice, and sharp emotional reactions to its violation.

Accordingly, when communicating with veterans, as service specialists emphasise, they (should be or already are) **somewhat more attentive** to both their own communication and the reactions of veteran clients or their families.

More often than not, communication with veterans has a positive outcome. The most important factors for a positive impression of interaction with a veteran's social services are, in fact, **the satisfaction** of his/her request, **the speed** of problem solving, and **the adequacy** of communication.

When isolated cases of problematic communication occur, they are more often resolved **through social sanctions** within the OMS community than through open expressions of dissatisfaction by veterans or members of military families.

One of our informants founded a veterans' association, where he «recruits those who have been wronged by the state.» This association provides legal and representative support in appeals against illegal decisions by the command, the Military Medical Commission, etc. The demand for such an initiative highlights the **lack of systematic ways to report problems in the provision of services to veterans**.

From the point of view of OMS employees, most of these problems relate to **the financial support** of accessible support programs, for which local budgets are insufficient.

In general, veterans express understanding of the limited capacity of communities to provide support, but would like to **see greater involvement from the central government ("the state")**.

This, of course, affects the community's customer focus. The effectiveness of meetings between local government representatives and veterans and veterans' associations still depends largely on both **the capacity of the community and the human factor**: the extent to which community leaders are willing to listen to and implement the wishes of veterans.

Although veterans' experience in applying to local authorities for services appears generally positive, they **are** typically not **inclined to express** their satisfaction or dissatisfaction with the service. It can be said that veterans do not seek to understand the legislation in depth (which is why **they consider excessive bureaucratisation of processes to be a major problem**).

If the request is satisfied, that's it; if it is not, negative impressions arise. In the event of a request being denied or a problem not being resolved, **veterans are unlikely to investigate and find out why** unless they are activists, specialists in the relevant field (lawyers), or very communicative people.

A common way to express dissatisfaction is to stop contacting representatives of a particular service.

6.4. Digitalisation and services for veterans: attitudes toward change and vision of an ideal model

Both community representatives and veterans themselves have **mixed feelings** about the idea of **digitising veteran services**, emphasising that **communication** with support specialists and service employees, which arises when it is necessary to fill out documents in person, is an important element of reintegration, maintaining social ties, and sometimes the only source of communication for veterans outside their circle of loved ones.

The level of digital literacy among veterans may be low, which means they will not be able to use digital services.

According to feedback from OMS employees, digital incompetence is not always age-related —even relatively young people sometimes do not understand how official applications work. Therefore, **specialists often also serve as «digital coaches»** when a person who wants to use a certain service personally comes to the ASC or another service and presses the buttons on their smartphone under their guidance.

On the other hand, for veterans who are more familiar with technology, **the ability to submit documents online can significantly save time and effort**, especially given that demobilised veterans have health conditions that make it difficult for them to move around.

At the same time, it is important to **avoid stigmatising** either veterans who lack digital literacy or those who are competent in using a laptop or smartphone but are unfamiliar with bureaucratic procedures.

Accordingly, **it is not worth eliminating the possibility of receiving services in person**. Instead, informants suggest **duplicating** the ways to obtain services so that it is possible to either visit a veteran support specialist and submit documents in person, or submit them online through a personal account or a veteran service in an app such as «Diia» or «Veteran-pro».

Informants among the OMS representatives express general support for the idea of digitalisation, but do not really envisage the specific mechanisms for implementing and operating such services. The conservative views on digitalisation among service employees stem from the fact that they themselves are still required to submit reports in paper format, so they understand or fear that any documents submitted online will still need to be duplicated in paper form. Today, in the communities where the study was conducted, **most document flow is still paper-based.**

There are also **technical difficulties**, as not all services can digitise documents currently in paper form.

Informants are not very clear on how to verify identity for remote document submission, since even presenting identification in the same «Diia» requires familiarity with the program and can be difficult. Informants find it most difficult to imagine **services that provide financial assistance** in digital form, as personal presence in such cases serves as a kind of guarantee against fraud. According to the informants, it would be easiest to digitise the service for obtaining a residence permit, as well as all standard procedures that require the submission of documents. Non-standard or specific requests, those that require expansion or assistance beyond the existing formats, are the most difficult to digitise.

In general, **the habit of using digital services is not widespread**. For example, when asked about the digital services currently provided by communities, an absolute minority of our informants, both veterans and representatives of OMS services, responded. At the same time, they mentioned services such as the ability to submit documents in digital form (or in digital form through the ASC), digital signing through Vchasno, and generating certificates in Diya.

It can be stated **that even in communities where certain services have already been digitised, awareness of these opportunities among the population, particularly veterans, is low**.

Conclusions and recommendations

1. Existing solutions in the field of local services for veterans, in particular the introduction of specialists to support veterans and demobilised persons, are effective, but further **increases in funding for support programs, greater flexibility, and expansion of the range of services** that communities can provide at the local level are needed. It currently seems relevant to **involve veterans in communication with local authorities** regarding decision-making, in particular, the allocation of funding for specific support programs.

2. Procedures for providing services to both veterans and active military personnel, who have limited vacation time, should **continue to be simplified and accelerated**.

3. It is recommended to deepen **the digitisation and automation of operational processes** and interaction between different services and departments of local self-government bodies. This may include (the list is not exhaustive): transitioning to digital document management, digital reporting, creating databases, automating the upload of other digitised documents to the application, etc.

4. Nevertheless, it is not advisable to completely digitise the provision of services at the level of veterans and their communication with support specialists. It is recommended to have duplicate services so that applicants can apply in person and submit documents at the digital office, etc.

5. After digitising standard services, it is advisable to develop and distribute information materials on typical and cyclical services that require renewal or submission of a standard application (obtaining travel vouchers, receiving firewood, etc.).

6. Expanding the list of digital services will require active information and training, primarily for specialists who support veterans. It is recommended to introduce a series of activities to improve the digital competence of such specialists, and in the future/if desired, the veterans themselves.

Section 7. Analysis of current business processes for providing services to demobilised veterans (as-is)

A study of the processes of providing the most common local services to veterans in territorial communities revealed a complex set of systemic barriers that critically affect the accessibility and effectiveness of services. The analysis covers three priority categories of services: travel compensation, one-time financial assistance, and medical benefits, which account for more than 60% of the total number of requests.

Systemic barriers and their impact. A critical problem is the lack of automation for basic operations in 92% of communities, leading to manual execution of most processes, significant risk of errors, and the inability to scale services. Paper-based document flow accounts for 73% of communities, causing physical delays in document transfers between departments and preventing remote service.

A multi-level approval system (ranging from 4 to 7 levels, depending on the type of service) increases application processing time by 30-50% beyond what is technologically possible. The lack of access to the Unified State Register of War Veterans in 59% of communities requires resubmitting documents with each application and complicates verifying applicants' rights.

Time parameters and territorial disparities. The actual timeframes for providing services exceed the regulatory indicators by a significant margin. Travel compensation is processed within 28-35 days in urban communities, 35-42 days in settlements, and 40-50 days in rural communities. One-time financial assistance takes 35-50 days in urban communities, 45-60 days in settlements, and 50-75 days in rural communities. Rural communities experience delays 40-60% longer than in urban communities due to limited human resources, less experienced staff, and the physical remoteness of structural units.

Digital inaccessibility. Only 6% of communities offer online application submission, and only 4% offer online tracking of application status. The lack of transparency in processes and the absence of proactive communication at intermediate stages are accompanied by low awareness among veterans of the services available—only 37% of recipients are fully informed. In comparison, 46% have not received any updates about service changes.

The digital transformation of processes, including the introduction of electronic application submission, automation of interagency interaction, and integration with state registries, has the potential to reduce service delivery times by 50-70% and reduce the administrative burden by 40-60%.

Section 8. Target model for providing services to demobilised veterans using digital tools (to-be)

The target model provides for the comprehensive digitisation of processes for providing services to veterans with maximum use of government e-services, automated interagency interaction, and multi-sharing of data through integration with the Diya portal. The model is focused on radically reducing the time required to process requests, minimising the administrative burden, and ensuring maximum accessibility of services for recipients.

Key principles of transformation. Transition from a reactive model («the veteran must know and apply») to a proactive model («the system identifies the need and offers a solution») through analysis of life events and automatic notification of available services at the moment the right to receive them arises. Maximum multisharing based on the principle of «one-time provision of information» through automated data exchange between the Unified State Register of War Veterans, the register of individuals, property registers, and tax systems, without the applicant's involvement. Automation of decision-making through the implementation of formalised algorithms for assessing compliance with criteria and generating recommendations to reduce subjectivity in processes.

Expected results for priority services. To compensate for travel expenses, it is planned to reduce the time frame from 28-50 to 10 working days by eliminating the requirement for personal presence, automating calculations, and reducing the number of approval levels from 4 to 2. Automated collection of travel data through integration with carriers' electronic ticketing systems, electronic tracking of application status, and automatic push notifications at key stages of processing.

For one-time financial assistance, the target deadline is 20 working days (compared to 35-75 days in the current situation), thanks to the automatic download of data on family composition, income, and property through multi-sharing from state registries. Digital assessment of material and living conditions via a mobile application with photo and video recording, optimised collegial decision-making through electronic voting based on the principle of a «permanent commission» without dependence on schedules of face-to-face meetings.

For medical service benefits, an integration with the eHealth system is being developed, providing automatic identification of benefit status without additional confirmation, proactive electronic referrals from primary care physicians, and cross-border access to benefits when visiting medical facilities in other communities. The target date for granting benefits is the date of the service appointment by a doctor, without additional procedures for the veteran.

Key principles of digital transformation

Maximum multisharing. Use of the «one-time provision of information» principle through automated data exchange between state registries and community information systems. Obtaining data from the USR, the register of individuals, property registries, and tax systems, without the veteran's participation.

Proactivity instead of reactivity. Transition from the «veteran must know and apply» model to the «system identifies the need and offers a solution» model through analysis of life events and automatic notification of available services when the right to receive them arises.

Automation of decision-making. Implementation of formalised algorithms for assessing compliance with criteria, automated calculations, and the generation of recommendations to reduce manual operations and subjectivity in decision-making.

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