

LIMINAL LIVES: GENDER AND DIVERSITY ASSESSMENT OF REFUGEES FROM UKRAINE IN MOLDOVA AFTER ONE YEAR OF FORCED DISPLACEMENT





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ACRONYMS

- ABA Area-based Assessment
- **CSOs** Civil Society Organizations
- **FGD** Focus Group Discussions
- **GBV** Gender-based Violence
- **GTF** Gender Task Force
- KIIs Key Informant Interviews
- **LGBTQIA+** Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, and Asexual people collectively
 - LPAs Local Public Authorities
 - MHPSS Mental Health and Psychosocial Support
 - NFIs Non-Food Items
 - NGOs Non-Governmental Organisations
 - **NRC** Norwegian Refugee Council
 - **OSCE** Organization for Security and Co-operation in Europe
 - **PSEA** Protection from Sexual Exploitation and Abuse
 - SADD Sex and Age-Disaggregated Data
 - SEA Sexual Exploitation and Abuse
 - **SRH** Sexual and Reproductive Health
 - TCN Third Country Nationals
 - **RACs** Refugee Accommodation Centers
- **UN Women** United Nations Women's Organization
 - **UNHCR** United Nations High Commissioner for Refugees
 - **UNICEF** United Nations Children's Fund
 - WASH Water, Sanitation and Hygiene

EXECUTIVE SUMMARY

The majority of refugees from Ukraine have been living in Moldova for over 12 months hoping for an end to the war in Ukraine, so they can safely return home. However, as the significant escalation of hostilities following Russia's invasion of Ukraine in February 2022 shows no sign of abating, attention is turning to how to better strengthen the social and economic integration and resilience of the refugee population in Moldova.

The specific demographics of refugees from Ukraine include a high percentage of women, children and older persons, a fact shaped by Ukrainian legislation which restricts men eligible for military conscription from leaving the country. This demographic composition has had an impact on traditional gender roles and division of labour in refugee households. Furthermore, refugees from Ukraine are not a homogeneous group but have distinct needs, priorities and capacities based on their gender, age and other diversity factors. While all refugees face risks during conflict and displacement, particular at-risk groups may face intersecting forms of discrimination, marginalisation, and increased protection risks. These include older persons (age 65+), people with disabilities, Roma individuals, single women, children, LGBTQIA+ persons, and single women-headed households with many children who are rendered more vulnerable because of family separation and limited financial and material resources.

In order to better understand these differences and their implications for programming, UN Women commissioned a gender assessment to examine the distinct needs, priorities and capacities of diverse groups of refugee women, men, girls and boys from Ukraine living in Moldova, one year after the start of the crisis, and to identify gender and diversityspecific considerations for planning sector and intersectoral responses.

Key Findings

 Traditional gender roles have been impacted by displacement and the demographic composition of the refugee population, with refugee women shouldering greater caregiving responsibilities, single women with children taking on nontraditional responsibilities of head of household and primary income earner, and adult male refugees losing their traditional male role of provider and protector. Traditional age-specific roles have also been affected with older people losing their independence, adolescent boys attempting to help their mothers by taking on male head of household roles, and adolescent girls stepping in to support mothers' additional caregiving burdens.

- A large majority of refugees reported feeling safe in Moldova and believe that in general relations are positive between them and host communities. That said, most refugees intend to return to Ukraine permanently as soon as it is safe to do so, with more older persons and Roma individuals planning to return in the coming year than other groups. Several refugee respondents, including those with young children said that both safety and basic infrastructure were important for them to be able to return to Ukraine and rebuild their lives.
- The uncertainty about the length of the war in Ukraine combined with the hope of return has contributed to a state of liminality, making it difficult for families to plan long-term. This has impacted livelihood, education, and social integration indicators.
- As the international armed conflict moves into its second year, refugees are under increased pressure to secure more sustainable income and employment in Moldova. Single women-headed households with many care responsibilities, Roma women, older persons, and people with disabilities face distinct barriers to employment including lack of flexible work, lack of chil dcare, language barriers, lack of job opportunities, a mismatch between skills and available jobs and lack of information about employment options.
- Given the large proportion of women and children, humanitarian programmes have specifically targeted women and girls. Refugee men have, however, inadvertently been marginalised from some assistance programmes, in particular livelihood opportunities and MHPSS.
- Roma refugees may face discrimination because of their ethnicity, linked to the discrimination they faced in both Ukraine and Moldova prior to the crisis. Roma refugee women face compounded discrimination by virtue of their gender and ethnicity. This has implications including for access to housing and livelihoods.
- Sexual exploitation and abuse (SEA) remain a concern, as refugees stay longer in Moldova and risk increased vulnerability, as their resources dwindle, and as medium-term housing and livelihood solutions must be found. Those most at risk include single refugee women with children who have limited resources and are more dependent on RACs or host families for shelter.

- Despite signs of psychosocial distress and the need for MHPSS support, very few refugees reached out for relevant mental health services during the first months of the crisis. In recent months, this is starting to change with more refugees seeking counselling. There is a risk of excluding men and boys in such programmes, given the targeted focus on women and girls and the lack of gender parity among MHPSS.
- The extent to which refugees and host communities participate and/or are consulted in humanitarian planning and monitoring varies. Underrepresented groups include Roma people, people with disabilities, older people, LGBTQIA+ persons, people living in rural areas, and host communities, who tend to be less visible in general assessments and reports, limiting an understanding of their needs and priorities.

Key Recommendations

Cross-Cutting:

- Prioritise gender-specific needs, and address gender biases in access to humanitarian services. Consult equally with women, girls, men and boys, and the most vulnerable and marginalised groups, across all ages and diversities, including during assessments and monitoring. Develop gender and diversity mainstreamed and targeted programmes (including for men and boys, Roma people, people with disabilities, older persons and LGBTQIA+ persons), addressing barriers to access and participation, and promoting inclusion.
- Recognize women's agency and leadership. Ensure the meaningful participation of female and male refugees (both Roma and non-Roma), as well as refugees from other underrepresented groups in humanitarian decisionmaking. Capitalise on diverse women's and men capacities, and promote their equal participation, without discrimination, in the refugee response.
- Invest in localization of the response to reach the most vulnerable including in rural areas and across all regions. Continue to enable and foster meaningful participation of local government and local CSOs in assistance (including those representing women, Roma, people with disabilities, older persons, youth, LGBTQIA+ and other under-represented groups), to ensure better reach and coverage.
- Regularly and systematically collect, analyze and use sex, age and diversity disaggregated data to inform, monitor, and adjust humanitarian programmes as needed. Address demographic and programme information gaps including on

numbers, needs and priorities of single female headed households, Roma people, people with disabilities, LGBTQIA+, older persons, among others, through targeted assessments. Build the capacity of humanitarian staff to apply a gender and diversity lens in context of their work and ensure gender-balanced teams where relevant.

Sector-Specific:

- Support diverse refugee women and men in generating more sustainable sources of income through job readiness, job creation, entrepreneurship, and livelihood programmes including targeted programmes for women, men, Roma, and older persons. Address the low rates of participation in current livelihood programmes in consultation with the refugee community. Promote opportunities for women with caregiving responsibilities to secure sustainable employment including by creating opportunities for part time, remote and flexible work, internship and training opportunities, providing vouchers and/or investing in care services for children, older persons, and persons with disabilities.
- Continue to implement and expand comprehensive GBV, Protection and PSEA programmes around the country, including by raising awareness about prevention and support services among refugee communities and front-line workers, and ensuring information is accessible to diverse groups.
- Address discrimination against marginalised communities including refugees more generally, Roma refugees, and refugees with disabilities, through the formulation and/or enforcement of equality and equity policies and legislation, public awareness campaigns, and inclusive programming.
- Ensure MHPSS services are available and accessible to all and include targeted MHPSS programmes in particular for children and male refugees; promote gender equity among MHPSS service providers, including by hiring more male professional staff; address any additional barriers to accessing MHPSS including awareness raising targeting under-served communities and creating more mechanisms to establish safety and trust.
- Introduce outreach programmes that address cultural barriers to participation and enable Roma women to have a voice. Enhance participation of diverse refugees in all stages of humanitarian response – ensure traditionally marginalised groups are engaged and represented.

I. INTRODUCTION

Since the Russian invasion of Ukraine on 24th February, 2022 over 8,163,000 individuals living in Ukraine were forced to flee their homes seeking safety, protection, and assistance across Europe¹. The Republic of Moldova (Moldova) which shares a land border with Ukraine, became one of the main transit and refugee-hosting countries for the Ukrainian refugee crisis². As of 4 April 2023, over 714,900 forcibly displaced individuals have crossed into Moldova from Ukraine, out of which over an estimated 106,580 remain in the country.3

The Moldovan government has demonstrated openness and generosity to refugees from Ukraine, despite the difficult economic condition and the risk to the safety of the country. Along with the authorities and civil society, the Moldovan people also welcomed refugees and opened their homes to them, despite the challenging economic environment facing families, following the covid pandemic and against the context of historically lower development rates than Ukraine, leading the international community to describe Moldova as "a small country with a big heart." This generosity has continued in the face of the global economic impact of the war in Ukraine, including soaring inflation, a severe energy crisis, and growing food and fuel insecurity.

3 UNHCR, Republic of Moldova: Daily Population Trends, data as of 4 April 2023

Initially, the priority of those fleeing the violence was to cross the border safely, secure accommodation, food and medicine and keep in touch with loved ones left behind. The hope was that the hostilities would end quickly, and they could return home to Ukraine. Over one year after the escalation of the crisis, which shows no sign of abating, the focus of humanitarian actors — and of refugees themselves — has turned to investing in the social and economic inclusion of refugees in Moldova, as well as to supporting vulnerable Moldovan families who are hosting refugees.

Ukrainian legislation which restricted men eligible for military conscription from leaving the country has shaped the demographics of the refugee population, with refugee women and children accounting for over 80 percent and older persons (age 65+) accounting for 21 percent of forcibly displaced persons from Ukraine in Moldova⁴. While all refugees face risks in conflict and displacement, particular at-risk groups may face intersecting forms of discrimination, marginalisation, and increased protection risks. These include older persons (age 65+), people with disabilities including women and girls, Roma communities, LGBTQIA+, and single women-headed households with many children who are rendered more vulnerable because of family separation and limited financial and material resources.

As refugees are not a homogenous group, it is critical to ensure that planning and programme efforts are evidence-based and respond to the distinct needs, priorities and capacities of diverse women, girls, men, and boys in all their diversity. This requires a nuanced understanding of those needs, priorities, and capacities of the affected population, particularly one year on to the crisis.

⁴ Ibid., as of 4 April 2023



Refugee women from Odessa in discussion with UN Women Photo: Stela Donțu/UN Women

¹ UNHCR, Refugees from Ukraine recorded across Europe, data as of 4 April 2023

² Among Ukraine's neighbouring European countries, Moldova has the largest border segment, reaching 1,222 km.

II. OBJECTIVES AND METHODOLOGY

UN Women commissioned a gender assessment in late 2022 to examine the gender dimensions of the Ukrainian crisis in Moldova, one year on. The specific objectives of the assessment were to analyze:

- the gender differentiated impacts, needs, priorities and capacities of different groups of the affected population in all their diversity, and;
- the gender and diversity-specific considerations for planning sector and inter-sectoral responses.

Methodology

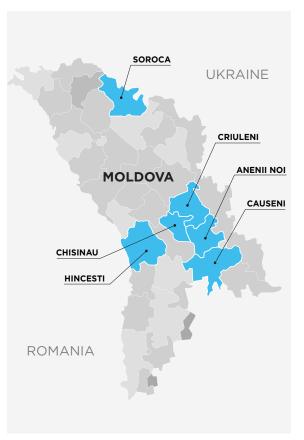
A review of secondary source data was conducted of reports published between May 2022 — March 2023, including surveys, analysis, sectoral and intersectoral needs assessments. Primary data was gathered through focus group discussions (FGDs) and key informant interviews (KIIs) from the period October to December 2022 including:

- 6 focus group discussions (FGDs) with 64 individuals (78 percent female/22 percent male), were held in 6 localities across Moldova: Chişinău, Hînceşti, Criuleni, Soroca, Căuşeni and Anenii Noi. The FGD participants included 44 refugees (77 percent females/23 percent males), 15 NGO representatives (23 percent) and 5 local authorities (8 percent).⁵
- Key informant interviews (KIIs) with 13 individuals including representatives of Refugee Accommodation Centers (RACs), women-rights organisations, civil society organisations (CSOs), national authorities, and UN actors, as well as refugees from Ukraine.⁶

Additional primary source data was drawn on for this report which was collected through a separate CSO Mapping exercise commissioned by UN Women and UNHCR, which involved 5 FGDs with 48 individuals (40 women, 8 men) from 1 to 24 March 2023.⁷

7 UN Women and UNHCR, Mapping of Local CSOs Providing Refugee Response services in Moldova, prepared by S.C. Magenta Consulting S.R.L., draft report March 2023 Limitations of the research include the rapidly changing context, the challenge of accessing updated sex-, age- and diversity-disaggregated secondary data, the heterogeneous composition of participants in each of the initial 6 FGDs, as well as the limited sample size for primary data collection. The researchers attempted to overcome these limitations by triangulating different data sources, drawing on additional primary source data, and highlighting the qualitative dimensions of the findings.

Sites of Primary Data Collection



⁵ Out the total 64 FGD participants (50 female/14 male), 44 were refugees (34 females/10 males) out of which: 3 were adolescents under18 years, 4 were over 65 years, 2 were Roma); 1 was from the host community; 5 were representatives of local authorities; and 15 were representatives of Moldovan NGOs. FGDs were held in Russian in mixed sex, age and nationality groups of between 8-13 persons each.

⁶ Including 7 KIIs with UN agencies, government agencies and CSOs; and 6 KIIs with refugees including 5 women, 1 man (3 older persons, 1 young woman and 2 women with children).

III. DEMOGRAPHIC PROFILE

As of April 2023, over 106,580 persons fleeing Ukraine (100,200 Ukrainians and 6,380 third country nationals (TCNs)) have settled in Moldova.⁸ The majority arrived between 24 February to April 2022, and at the time of primary data for this report, had been in Moldova on average 8-10 months.⁹

Based on available data, 81 percent of refugees from Ukraine are women and children.¹⁰ Particularly vulnerable groups include female-headed households with many children, older persons, Roma people,¹¹ LGBTQIA+ and people with disabilities who risk facing multiple forms of discrimination, marinalisation, and increased protection risks.¹² The vast majority of refugees (97 percent) live amongst the host population in rented apartments or with host families.

A REACH Area-Based Assessment (January 2023) reported that among its respondents, the average non-Roma refugee household size was 2.8 members for families renting apartments (or an average of 3 members for those accommodated by Moldovan families), out of which 25 percent were femaleheaded, and 51 percent had children. On average

- 8 UNHCR, Republic of Moldova: Daily Population Trends, data as of 4 April 2023
- 9 According to a UNHCR Participatory Assessment, the top three reasons that refugees from Ukraine chose Moldova as a host country was due to: the geographical proximity to Ukraine (they can easily move back and forth across the border to visit their homes and families), their strong family and friendship ties in Moldova, and a shared language and similar culture, (UNHCR, 2022 Participatory Assessment, February 2023, p.13). A Norwegian Refugee Council (NRC) assessment reported similar results for non-Roma refugees and added that for the majority of Roma refugee respondents, the top reason cited for choosing to stay in Moldova was the ease of getting there from Ukraine, (Norwegian Refugee Council (NRC), Hidden Hardship, February 2023, p.16).
- 10 UNHCR, Republic of Moldova: Daily Population Trends, data as of 4 April 2023.
- 11 The exact number of Roma refugees from Ukraine residing in Moldova is not available as demographic information is not disaggregated by ethnicity. According to an Oxfam report: "Reliable data on Roma people is minimal, and Roma people have often been undercounted, however estimates suggest that between 200,000 and 400,000 Roma people were living in Ukraine before the war began, with the most numerous Roma communities in the Zakarpattia, Odessa and Kharkiv regions.... It has been estimated that as many as 100,000 Roma people may have been forced to flee Ukraine since the escalation of the war." Oxfam, Seeking Safety Roma Refugees in Moldova, October 2022, p.8.
- 12 UN Women and CARE International, Rapid Gender Analysis of Ukraine, May 2022.

there were 1.5 minors per household.¹³ An Oxfam briefing paper on Roma refugees in Moldova (October 2022) reported that among its respondents, the size of Roma refugee households was between 4-15 persons (including 1-7 children per family) — an average of three to four times the size of non-Roma families.¹⁴ The stark difference in average household size between non-Roma and Roma refugee families, along with cultural, socio-economic and other differences shape their distinct needs and has implications for the way interventions are planned.

Demographic Profile:

- Over 714,900 refugees fled Ukraine into Moldova since 24 F ebruary 2022
- Over 106,500 refugees from Ukraine have chosen to remain in Moldova including:
 - ♦ 36% Women
 - ♦ 19% Men
 - 45% Children
 (22% girls and 23% boys)
 - ♦ 22% Elderly persons (aged 65+)
 - ♦ 90% Ukrainians (59% female)
 - 10% Third Country Nationals (TNCs) from over 40 countries (37% female).
- In addition to age and gender, refugees are diverse and include ethnic Roma, people with disabilities and LGBTQIA+ persons.
- 97% of the population lives with host families or rent apartments.
- 3% of refugees (2,500) live in 66 Refugee Accommodation Centers (RACs) across Moldova.
- Non-Roma refugee families average 2.9 persons per households; 25% are female headed, and 51% have minors (averaged 1.5 children per household).
- Roma refugee families are comprised of between 4-17 persons per house-hold and have between 1-7 children.

(Source: Operational Data Portal – Republic of Moldova: Daily Population Trends)

13 Stefan Voda, January 2023, p.19

14 Oxfam, Seeking Safety, October 2022, p.13.

IV. FINDINGS AND ANALYSIS

I. Gender Roles and Responsibilities, Division of Labour and Control over Resources

Among the over 106,580 refugees from Ukraine in Moldova, adult women (including single womenheads of households) make up almost double the number of adult men (39 percent as compared to 19 percent), and there are a significantly high number of children and older persons (45 percent and 22 percent respectively).¹⁵ This demographic composition has had an impact on traditional gender roles and the division of labour in refugee households. Refugee women are shouldering increased traditional unpaid caregiving responsibilities including caring for children, overseeing children's education, caring for older relatives travelling with them, and in some cases bearing responsibility for the care of relatives left behind in Ukraine. Single women with children have also had to take on non-traditional responsibilities of being the head of household and primary income earner, which adds to the stress of their additional caregiving responsibilities, displacement, family separation, trauma, and loss.

Adolescent boys (aged 15-17) living in singlewomen-headed households, may feel pressured to symbolically play the father role and take on increased responsibilities as the de facto eldest male in the household, putting increased stress on them and possibly impacting their education completion or relationships with peers.¹⁶ Adolescent girls in households with many or younger children may step in to help with caregiving responsibilities, putting them under increased stress. Older persons may have lost their independence in displacement and those travelling with relatives may feel like a burden on the household. As one FGD participant noted:

Older refugees need opportunities to socialise outside individual families so as not to create inconvenience, (Refugee Woman, 37 years old, Criuleni).

Adult male refugees who have lost their homes and livelihoods, and who are not working in Moldova, may feel frustrated with not being able to play the traditional male role of provider and protector. This may lead to negative coping mechanisms, such as drinking and acting out aggression. In light of Ukraine's introduction of martial law and the mandatory conscription of fighting-aged men in Ukraine, male refugees in Moldova between 18-60 years of age may face discrimination and judgement for not having stayed behind to fight, even if they had permission to leave Ukraine (due to health or other factors). They may suffer guilt and shame as a result. In FGDs, front line workers described incidents of discrimination and judgement faced by male refugees from Ukraine:

Many men who left Ukraine and came to Moldova were met with judgemental attitudes for not staying behind [in Ukraine to join fighting men] at the front line. For example, when men applied for some aid, some faced judgement, driven mostly by misunderstanding or misinformation. There are men who came [to Moldova] for different reasons, there are men who due to health problems were legally released from Ukraine [and allowed] to cross the border. This gender-based discrimination was also felt when men applied for state assistance, (CSO Representative, Male, Chisinau).

As many interventions for Ukrainian refugees specifically target women and girls, refugee men and boys have been inadvertently excluded from programmes and services including those focused on employment and psychosocial support. One FGD participated noted:

I think the different needs of women, men, boys and girls were addressed equally, but not equitably. More focus was put on women and girls in terms of information, empowerment and support, and less on men. There are adolescent boys who arrived in Moldova at the age of 17, now they are 18 and have become adults, but they also need support. This is somehow being overlooked, as more focus is being placed on women and girls. There are also older men, which I believe are more vulnerable and less assisted than other groups of refugees, (CSO Representative, Female, Southern Region).

Further information is needed to understand whether there are changes in the dynamics of decision making in refugee households including among women with husbands or partners in Ukraine, persons dependent on remittances, refugees living with host families, and older persons including those living with children. Further information is also needed to understand whether there are negative coping mechanisms, or transformative change, as a result of the shifting gender and age roles outlined above.

¹⁵ UNHCR, Republic of Moldova: Daily Population Trends, data as of 4 April 2023

¹⁶ See education section below.

2. Capacity and Coping Mechanisms

2.1 Displacement Journey

After over a year of conflict, the protracted crisis combined with the loss of family members, the separation from friends and loved ones, the loss of homes and jobs, and the extended state of liminality are taking their toll on refugees from Ukraine, with distinct social, economic, and mental health consequences. As one FGD participant noted:

Life has changed radically.... [the crisis has] led to the loss of jobs, deterioration of health, separation of families, anguish for family and friends and [the interruption of] ordinary life. Life has also changed from a cultural point of view – [the crisis has] impacted the possibility to plan the future and to have a sense of stability. Basic subsistence, food stuff and essential services cost much more than they did in Ukraine. [The crisis has] conditioned people to adapt to new realities and step out of their comfort zone, (Refugee Man, 41 years old, Hincersti/Carpeneni,)¹⁷.

According to UNHCR's Participatory Assessment (February 2023), most refugees indicated their intention to return to Ukraine once it is safe to do so.¹⁸ As one older FGD participant noted:

We hope to return to Kiev, where the situation remains under control, although we will feel anxious, (Refugee Woman, 67 years old, Soroca).

Some refugees, mostly men, indicated the intention to migrate to Western Europe in search of work¹⁹. Several respondents, including those with young children and older persons said that both safety and basic infrastructure were important for them to be able to return to Ukraine and rebuild their lives.²⁰ In some cases, refugees who fled from newly occupied areas in Ukraine felt more hopeless. As one refugee woman noted:

We have nowhere to return. Territories such as Luhansk are occupied and will likely not be returned to in the near future... we have to find another life, (Refugee Women, 38 years old, Soroca). A Norwegian Refugee Council report (February 2023) found that according to age-disaggregated data, more people aged 65 and above are planning to return to Ukraine permanently than people from other age brackets (47 and 20 percent respectively)²¹. The report found that both Roma and non-Roma refugees said safety in Ukraine was a main pull factor for them to return. In terms of timing of return, 62 percent of Roma respondents said they plan to return permanently to Ukraine in the coming year, citing the lack of ability to support themselves and their family abroad as a key factor²². Non-Roma respondents planning to return cited the desire to reunite with family and friends back home as a top pull factor²³.

According to UNHCR, there have been 438,800 cumulative departures of Ukrainians from Moldova to Ukraine in the period 11 March 2022 to 4 April 2023.²⁴ Informal discussions with refugees and RAC managers revealed that many refugees returned to Ukraine several months after the start of the conflict (presumably once they realised the conflict would be protracted). These include women wanting to reunite with their husbands/partners, and older persons desiring to return home. There are also informal reports of refugees regularly moving back and forth across the border between Moldova and Ukraine to tend to their homes and care for relatives left behind, among other reasons. Some host populations expressed concerns that refugees are benefitting from humanitarian aid but are not permanently based in Moldova. In March 2023, Moldova launched a new Temporary Protection Directive designed to increase protection and

¹⁷ The conflict interrupted supply chains and led to an energy and economic crisis in Moldova, resulting in higher inflation – over 30 percent in the last quarter of 2022 – and increases in gas and electricity prices.

¹⁸ UNHCR, Moldova 2022 Participatory Assessment, February 2023, p.13.

¹⁹ Ibid., p.13.

²⁰ Ibid., p.14.

²¹ In addition, the NRC assessment found that the largest share of respondents (over 40 percent) don't know whether they want to return to Ukraine in the next year, and of those who do plan to return in the next 12 months, 39 percent were unsure about when exactly, while 32 percent reported plans to return within the next 3-6 months, NRC, Hidden Hardship, February 2023, p. 41.

²² NRC, Hidden Hardship, February 2023, pp. 41, 44, 19.

²³ Ibid., p.18.: An NRC assessment found that less than half of refugee respondents have one or more family members who stayed behind in Ukraine (42 percent of non-Roma as compared to 27 percent Roma respondents). Reasons for staying behind include to stay with the property or home (51 percent Roma, 31 percent non-Roma), and lack of financial resources to move outside of the country (23 percent non-Roma, 13 percent Roma). No sex or age disaggregated data was available about those who stayed behind.

²⁴ Ibid., p.18.: An NRC assessment found that less than half of refugee respondents have one or more family members who stayed behind in Ukraine (42 percent of non-Roma as compared to 27 percent Roma respondents). Reasons for staying behind include to stay with the property or home (51 percent Roma, 31 percent non-Roma), and lack of financial resources to move outside of the country (23 percent non-Roma, 13 percent Roma). No sex or age disaggregated data was available about those who stayed behind.

access to services for refugees. Refugees who apply and are granted Temporary Protection must not leave Moldova for more than 45 accumulative days until March 2024 or they risk losing their status. Some refugees view this 45-day period as too short, given their obligations in Ukraine, which may serve as a deterrent for them to apply.

2.2 Livelihoods

Sources of Income

According to assessments carried out by UNHCR (2022), NRC (2023) and REACH (2023), the majority of refugee respondents rely on unsustainable sources of income, mainly savings and humanitarian cash assistance.25 The NRC assessment found that while sources of income are similar for both men and women, women on average receive remittances more often than men (23 versus 10 percent).²⁶ The same assessment found that there were different sources of income between Roma and non-Roma refugees in Moldova. Aside from humanitarian assistance, non-Roma respondents reported relying more on savings, work, and remittances (47, 30 and 26 percent respectively),²⁷ while nearly all Roma respondents reported humanitarian assistance as their main source of income, followed by host government support (97 and 57 percent respectively). Femaleheaded households faced similar situations relying on humanitarian cash support from NGOs, government or savings (46, 23 and 42 percent respectively), and only 19 percent of refugees reported employment as a source of income (12 percent female, 7 percent male).²⁸ According to UNHCR's participatory assessment, some refugees continued to receive social assistance from Ukraine (e.g. older persons, people with disabilities).²⁹

The NRC assessment reports that 94 percent of Roma respondents reported an inability to afford costs to cover basic needs (such as food, water, clothing, shelter, sanitation, education and healthcare) as compared to 22 percent of non-Roma respondents³⁰. This inability to meet basic needs showed no significant distinction along gender and age lines, however, mothers and older persons experienced difficulties finding work to cover basic needs, in light of childcare responsibilities³¹. Roma communities were also found to be particularly vulnerable, as they rely heavily on humanitarian support, suggesting that relief assistance alone is "not enough to address underlying issues of poverty and inequality."³²

Cash Assistance

According to UNHCR, as of Dec 2022, 60,408 refugeesfrom Ukraine were enrolled in the cash assistance programme in Moldova (68 percent are women and children and 21 percent are older people.)³³ The cash assistance programme is valued by both refugees and humanitarian workers as a more efficient way for refugees to purchase essential goods, while providing them with an element of choice. Cash assistance is also provided to vulnerable Moldovan families. Some vulnerable groups, such as single mothers, people with mobility challenges, or people with limited resources, may face access barriers to registering for cash assistance including due to distance and cost of travel. As one FGD respondent noted:

Single parents and those with many children face difficulties commuting to other localities in order to register for cash, which is conditioned by identification. Those who live in Soroca need to commute to Balti or Dondușeni for enrolment in the cash programme. Sometimes, when children are sick, mothers are unable to commute, and without a physical presence, they are not able to access these financial resources. Sometimes there are discrepancies between the information obtained from the hotline and the one obtained directly from the social office, (Refugee Woman, 40 years old, Soroca).

Establishing mobile cash enrolment sites or establishing more sites in new and/or more remote locations may help reduce excessive costs for commuting and remove other barriers to access. All refugees receive similar amounts of cash assis-tance, however issues of equity are not currently factored in. This in particular affects persons with disabilities and chronic diseases who have much higher needs than other refugees due to increased costs of medications and assistive equipment. Options to

²⁵ NRC, Hidden Hardship, February 2023, p.24.; Similar results were found in UNHCR's 2022 participatory assessment, as of September 2022 with the main source of income for most refugee respondents was financial assistance, (UNHCR, 2022 Participatory Assessment, February 2023, p.17).

²⁶ NRC, Hidden Hardship, February 2023, p.24.

²⁷ Ibid, p.24.

²⁸ A higher proportion of refugee households with children relied on savings (55 percent) followed by cash support (43 percent) and government cash support (31 percent) as the main source of income. REACH, Moldova Area-based Assessment, January 2023, p.32.

²⁹ UNHCR, 2022 Participatory Assessment, February 2023, p.20.

³⁰ NRC, Hidden Hardship, February 2023, p.27.

³¹ Ibid., p.27.

³² Ibid., p.28.

³³ UNHCR, Cash Working Group meeting, 1 December 2022.

adjust cash transfer amounts to individuals with greater needs, or introducing targeted cash vouchers to cover medicines or assistive technologies should be explored.

Employment

As the conflict moves into its second year, refugees are under increased pressure to secure more sustainable income and employment in Moldova. Some refugees were able to maintain their employment in Ukraine, by working remotely. As noted by one refugee woman:

Some of us are able to work online with our jobs in Ukraine. In Soroca, many refugees work as translators, teach online or find other types of online jobs, (Refugee Woman, 38 years old, Soroca).

According to the official figures of the Moldovan National Employment Agency (ANOFM), there are 1,035 refugees from Ukraine officially employed in Moldova, including 749 women and 286 men³⁴. According to a UNHCR report, most heads of households reported not working while in Moldova (71 percent), reflecting a 59 percent increase from the time period before the crisis³⁵. No sex, age or diversity — is aggregated data was available about unemployment figures. The actual numbers of those employed differed across reports. REACH's Area-based Assessment (January 2023) found that 23 percent of respondents reported having formal income-generating activities, employment or business³⁶. UNHCR's 2022 Participatory Assessment found that 5 percent of respondents said they were able to secure some kind of employment, while a few othyrs said they worked unofficially³⁷. The same report notes that the uncertainty of the length of the hostilities, and their insecure legal status makes it difficult for refugees to plan long-term, including accessing employment.³⁸ Employers may

34 ANOFM, National Employment Agency of Moldova: <u>https://</u> www.anofm.md/ro/node/20103

- 35 REACH and UNHCR, Multi-Sector Needs Assessment Moldova, Key Preliminary Findings, PPT presentation, 7 July 2022.
- 36 The REACH Area Based Assessment (January 2023) has similar findings: the majority of refugee households living among host communities rely on long-term unsustainable sources of income such as savings (52 percent), humanitarian cash assistance (67 percent), REACH Area-based Assessment, January 2023, p.31.

37 UNHCR, 2022 Participatory Assessment, February 2023, p.17.

38 Before the crisis, most heads of households reported to be working in the education (15 percent) or public services sector (15 percent). According to a UNDP report, finding a job while in Moldova does not seem to be a priority for most of the interviewees – only 13 percent were actively looking for employment. Uncertainty and the feeling they might need to move forward to other countries or back home any day is making the decision to settle more difficult." UNDP, How is Life, September 2022. p.14. also be hesitant to hire refugees who they see as temporarily in Moldova. There are hopes that the new Temporary Protection Directive may help refugees secure more sustainable livelihoods.

The REACH assessment reported that 27 percent of refugee family members were looking for work, however barriers to employment included lack of childcare, lack of job opportunities, lack of skills, language barriers and lack of programmes dedicated to facilitating employment for refugees.³⁹ A key informant reported that:

In assessments, refugees mention that they do want to find employment, they do want to join the labour market, but usually they face barriers, including language barriers, documentation barriers, lack of knowledge by the employers willing to employ refugees, (UN Representative, male, Chisinau).

In many cases, there is a mismatch between the higher education and professional skills level of Ukrainian refugees and the low skilled jobs available in Moldova:

The majority of Ukrainian refugee women have a high [level of] education and are ready to support the Moldovan economy. Many women are willing to join the labour market and reduce their dependence on assistance, but there are issues. They are not able to access positions that correspond to their professional level. They are offered lower pay jobs, such as cleaners, bartenders, cook assistants, with extended or inflexible working hours, (Refugee Women Leader, 37 years old, Ungheni).⁴⁰

In some FGDs, respondents reported that refugees do not have enough information about employment and labour laws:

[Some people] turn to seasonal or day jobs (picking grapes, cleaning, etc.), because they do not have enough information about the employment possibilities, or they receive information that the employer will hire them for a very short period. Guidance in finding a job is lacking, (Refugee Woman, 46 years old, Anenii Noi).

Single women-headed households with young or school-aged children reported facing barriers to employment due to their caregiving responsibilities, lack of flexible and/or part-time work, and the lack of available assistance (e.g. family members, babysitters, kindergartens):

REACH, Area-Based Assessment, January 2023, pp. 33-34.Gender Task Force, Meeting Minutes, 24 March 2023.

The pressure of responsibilities on single mothers with children has increased and we rely on the support of the host state... We can only look for part-time jobs because we have to take care of small children or monitor their schooling, (Refugee Woman, 35 years old, Soroca).

For Roma refugee women with children, securing employment is even more complicated due to lack of childcare combined with the fact that their children generally do not attend schools or kindergartens, and they themselves have low literacy rates⁴¹. UNHCR reports that some Roma women were able to find seasonal work, but that this is more difficult during winter.⁴²

Women with disabilities or women who have children with disabilities may face additional barriers to securing work. For single women travelling with older persons, or other adult household family members, who can share in childcare responsibilities, finding employment may be easier.

Men who fled Ukraine report being marginalised from assistance programmes including livelihood opportunities, as many specifically target refugee women and girls.⁴³

Unfortunately, men are somehow left out of the process including employment. ... I think it would be good to make services equally accessible – if we have a package for women, there should also be a package for men, (CSO Representative, female, Northern Region).

Refugee men between the ages of 18-60 years have at times faced judgement and discrimination when applying for employment:

[We] encountered the problem of discrimination against men and refusal of all services. Many said that they were denied certain services, including employment. They were ready to take on any type of work, but they were refused and asked why they were staying [in Moldova] when they should be at the front line. Their feeling of guilt grows, which may lead to unpleasant consequences, (CSO Representative, female, Chisinau).

Finding employment is also a challenge faced by Moldovans as the labour market is limited and job opportunities are few. A REACH cost-of-living survey (January 2023) found that the economic crisis in Moldova appears to have had an impact on unemployment rates in the assessed districts, affecting both refugees and host communities. For example, three guarters of respondents mostly in the Nisporeni and Singerei districts stated they were not working due to: lack of employment opportunities, lack of childcare, disability, or language barriers.⁴⁴ Overall unemployment rates in Moldova have increased as a result of the economic and fuel crisis, which makes finding work that much more difficult, especially in more remote/ rural regions of Moldova. Prior to the conflict, Ukraine was more developed than Moldova, with higher standards of living and more employment opportunities. This adds to the difficulties that Ukrainians may face securing work and adapting to life in Moldova, including the lower salaries and weaker social protection mechanisms.

The REACH survey found that gender differences in livelihood strategies differed among host and refugee communities: Moldovan respondents reported that men went abroad for work while women stayed home to care for children. While childcare was seen as a barrier for women to access the job market for both Moldovan and refugee women, there was a perception that refugee women were more eager to work. Gender divisions of labour were reported across both groups: with men more likely to work in construction, agriculture or manufacturing sectors, while women were mostly employed in retail, education or beauty industry.⁴⁵

Coping Mechanisms

The NRC assessment found that the most common coping strategies reported by refugees to manage high costs of living included eating less nutritious food (32 percent), moving to substandard housing, and borrowing money (Roma were more likely to choose that latter, at 62 percent).⁴⁶ The REACH cost of living survey had similar findings, reporting that the compounded energy and economic crises impacted the consumption patterns of both hosts and refugees living among host communities, with a corresponding reduction in the purchase of food products (dairy and meat) and of heating. This may disproportionately impact groups with specific dietary needs, including young children and pregnant lactating mothers, as well as people with medical conditions who become more vulnerable to reduced food intake.

⁴¹ UNHCR, 2022 Participatory Assessment, February 2023, p.35.

⁴² Ibid., p.35.

⁴³ Ibid., p.21.

⁴⁴ REACH, Brief: The impact of cost-of-living changes on Moldovan and refugee populations, January 2023, p.3.

⁴⁵ Ibid., p.4, p.6.

⁴⁶ NRC, Hidden Hardship, February 2023, p.33.

3. Safety and Protection

3.1 Vulnerable and/or Marginalised Groups

While all refugees are exposed to risk, there are particular groups that face compounded risks by virtue of their intersecting vulnerabilities. As such, their specific needs, priorities, and capacities should be better understood and integrated into the design and implementation of programmes. These include:

- Single women-headed refugee households, particularly those with many and/or young children, who face distinct vulnerabilities due to their multiple roles as caregiver, single head of household and main (or sole) income earner. Limited or no options for childcare restricts their opportunity to secure work, participate in job readiness programmes, or access mental health and psychosocial support. They are also more exposed to protection and safety risks in transit and upon arrival in Moldova (including sexual exploitation and abuse (SEA)) than accompanied women.
- Older women and men over age 65, including single older people, and older couples may lack the support network and/or resources to live independently and thus face distinct risks. According to HelpAge International, depending on their accommodation, older people may find it difficult to climb stairs, to access bathroom facilities which are not adjusted to specific needs and to use crowded communal kitchens. Many older respondents mentioned the lack of financial resources to cover rent.⁴⁷ A front line worker reported that older people may often be overlooked:

Older persons are perhaps less involved, maybe even sometimes forgotten, they are shyer. Some of them come and ask for help, but there are many other older people who don't ask for help, they stay at home. If we know about them, we go [to them], but there are many people who are more conservative [and harder to reach], (CSO Representative, female, Central Region).

 Roma women and men may face discrimination because of their ethnicity, linked to the discrimination they faced in both Ukraine and Moldova prior to the crisis.⁴⁸ Oxfam reports that Roma may face differential treatment due to prejudice, as well as due to "specific needs related to their language, socio-cultural systems, beliefs and traditions".49 Roma refugee women face compounded discrimination by virtue of their gender and ethnicity. In the face of family separation and loss of breadwinners, Roma single women-heads-of-households may face distinct protection risks. As girls' education is often not encouraged among Roma communities, a large percentage of Roma women and girls cannot read or write. This lack of literacy reduces Roma women's ability to apply for humanitarian support, and creates additional barriers for them to access health, education, and civil status documentation.50 Specific traditions and relations among Roma families often means that during community consultations, women and girls seldom express their views without the agreement of older, usually male, family members.

• **People with disabilities** may face discrimination and may be dependent on their caregivers for their wellbeing. A needs assessment by Keystone Moldova reported that over 60 percent of women and men with disabilities are older persons, over 53 percent live with host families, and 28 percent stay in RACs.⁵¹ During several focus group discussions, participants reported that people with disabilities face difficulties in obtaining official recognition of the degree of their disability, as there is no memorandum of understanding between Moldova and Ukraine on this issue.⁵²

50 UN Women and CARE International, Rapid Gender Analysis of Ukraine, May 2022.

52 Raised in FGDs in Causeni, Hincest and Soroca: "A problem to which attention was drawn during the discussions by the APL concerns the divergence between the standards of the Republic of Moldova and the AU regarding the recognition of the degree of disability and invalidity. Many of the refugees who present such documents from the AU, face difficult recognition procedure on the territory of the Republic of Moldova." This point was further clarified by a disability expert: "All persons with a disability degree established in Ukraine that have proof documents are recognized in Moldova. The issue is with the mechanism for establishing the disability degree of refugees from Ukraine in Moldova that do not have proof documents (for example, a person with disability that turned 18 years old shall pass once again the mechanism for establishing a disability degree. He needs to go for that in Ukraine). There is no memorandum of understanding between the Ukrainian and Moldovan governments for that. In this context the disability degree established in Moldova will not be recognized in Ukraine." (Representative, Keystone Moldova, 11 April 2023).

⁴⁷ Help Age International, Moldova: Needs Assessment of Older Ukrainian Refugees, 14 September 2022.

⁴⁸ GBV AoR Helpdesk, "Ukraine: Gender-based violence: Secondary Data Review", 27 April 2022.

⁴⁹ Oxfam, Seeking Safety, October 2022, p.9.

⁵¹ Keystone Moldova, Needs assessment and support for refugees with disabilities, PPT Presentation.

- LGBTQIA+ persons may face discrimination by virtue of their sexual identity and sexual orientation. This was seen early on during the crisis with LGBTQIA+ attempted to cross the border. One year on, it seems services particularly targeting LGBTQIA+ remain concentrated in specific areas or are limited if at all.⁵³
- Children and adolescents may face heightened levels of psychosocial distress due to conflict, displacement, lack of in person education or separation from family members. They may be at risk of violence, abuse and exploitation. Adolescent girls may face heightened risks of gender-based violence, sexual exploitation and abuse, or trafficking. Older children living in single parent headed households, may take on caregiving or head of household responsibilities which may interfere with their schooling or psychosocial development. Roma children, unaccompanied children, children with disabilities, may face heightened risks due to compounded vulnerabilities.

3.2 Gender-Based Violence (GBV)

Since the start of the escalation of hostilities and the subsequent regional refugee crisis, gender-based violence (GBV) has been a major concern. Conflict-affected persons, particularly women and children, are vulnerable to a wide range of GBV risks during conflict, displacement, or after arrival to a third country. The risk of GBV, including trafficking and sexual exploitation and abuse (SEA), may increase during transportation from the border to transit facilities or onward to other countries, especially in private transportation, as well as for those living in informal shelters, reception, and transit facilities. Prior to the conflict, GBV was widespread and on the rise in both Ukraine and Moldova. A 2019 survey carried out by the Organization for Security and Co-operation in Europe (OSCE) found that 70 ercent of Ukrainian women reported experiencing some form of violence since age 15 and that one in three had experienced physical or sexual violence.54 Similar rates of violence have been recorded in

54 OSCE, Well-being and safety of women, Ukraine results report, OSCE-led survey on violence against women, 2019, p.1v.

Moldova.55

Despite the risks of GBV, very few cases were reported by refugees from Ukraine upon their arrival in Moldova,56 possibly due to fear, lack of trust, or lack of awareness of available GBV response services.⁵⁷ A GBV Safety Audit Report (August 2022) carried out by UNHCR, UNFPA and UNICEF found that there was limited awareness among refugees of the specialised GBV services available in Moldova. Adolescent girls particularly lacked GBV awareness and knowledge of services, including basic humanitarian services and assistance, as this type of information was provided mainly to their parents/caregivers.58 As a consequence, materials with GBV referral pathways have been produced and distributed, safe spaces were established, support to NGO service providers was offered to expand their GBV prevention and response services, and mobile teams have been operating to increase outreach. Updated information about whether awareness and GBV reporting has increased in the last six months was not available.

Single women, women with one or more children, and girls and boys, have reported facing situations which impact their feeling of safety such as verbal harassment, sexual harassment, discrimination, and inappropriate presence of men in their households or in their rooms at collective sites. According to the GBV Safety Audit Report (August 2022),⁵⁹ refugee women and girls reported incidents of verbal harassment and discrimination when walking in the street and in playgrounds, as well as by some service providers including when seeking medical support.

- 56 UNHCR, UNFPA and UNICEF, GBV Safety Audit Report, August 2022
- 57 Front line workers reported a limited number of GBV disclosures in the context of intake exercises or trainings and in most cases, incidents of violence had happened in Ukraine: "During the training organised by us, some confessions were made in safer spaces, but the violence as committed in Ukraine". (CSO Representative, female, Key Informant Interview, Chisinau).
- 58 UNHCR, UNFPA and UNICEF, GBV Safety Audit Report, August 2022.

⁵³ The GBV Safety Audit Report (August 2022), concludes that the risk of discrimination in access to protection and humanitarian assistance for the LGBTQIA+ refugees is high. Particularly at risk are transgender women and men as they face difficulties in crossing the border and receiving humanitarian assistance, UNHCR, UNFPA and UNICEF, GBV Safety Audit Report, Ukraine Refugee Response, Republic of Moldova, August 2022, p.16.

⁵⁵ According to a Moldova Country Gender Profile (2021): "The situation of domestic violence in the Republic of Moldova is more serious than in the EU: three out of four women, or 73 percent, have experienced some form of partner abuse. Three out of four women, or 71 percent, are victims of psychological abuse, while the EU average is 43 percent. A third of women in Moldova have experienced physical violence, the average in the EU is 20.9 percent of women in the Republic of Moldova are victims of sexual violence, and the average in the EU is 7 percent," (NIRAS, Country Gender Profile: Republic of Moldova, 2021, p.35).

⁵⁹ Ibid.

Sexual exploitation and abuse (SEA) remain a concern, particularly as refugees stay longer in Moldova and risk becoming increasingly vulnerable over time as their resources dwindle, and as medium-term housing and livelihood solutions need to be found. In response, efforts to raise awareness about protection from sexual exploitation and abuse (PSEA) and related reporting mechanisms among refugees, host communities and front-line workers have increased, as have follow up actions to respond to SEA allegations.

3.3 Safety and Security

Upon arrival in Moldova, refugees initially felt a sense of relief at escaping the conflict and felt safe:

Overall, there is a feeling of safety in Moldova as bombs do not explode and alarms are not blaring. Having crossed the border, we received emergency assistance and had access to a wide range of services that contributed to the feeling of entering a safe space. The most vulnerable people were offered accommodation in [Refugee Accommodation Centers] RACs or host communities, followed by different humanitarian assistance programmes, (Refugee Woman, 72 years old, Carpineni).

An NRC assessment (2023) reveals that a large majority of refugee respondents (84 percent) indicate feeling safe in Moldova. Amongst the 16 percent non-Roma refugees who reported feeling unsafe, (only 3 percent of Roma refugees reported feeling unsafe), most (80 percent) reported being preoccupied with traumatising events in Ukraine as the main reason, followed by being worried about their status in Moldova and their prospect of forced return (35 percent).⁶⁰ In one FGD, an older refugee woman hosted in a RAC expressed her fear of being moved out of the RACs once her emergency status expires.⁶¹

FGD respondents also reported suffering increased levels of anxiety due to news of security breaches in Moldovan airspace in late 2022:

Most of the time, we feel safe. As of 10 October 2022, after the news on the breach of Moldovan airspace by an unknown missile from the direction of Ukraine, we are anxious about the capacity of the Republic of Moldova to protect us, (Refugee Woman, 41 years old, Chisinau).

Rumours about kidnapping of Ukrainian children have also provoked anxiety:

We are concerned about the information appearing in the public space regarding the intentions to kidnap Ukrainian children, but we understand that this may be propaganda, (Refugee Woman, 41 years old, Soroca).

In one FGDs two adolescents reported suffering discriminatory treatment in Russian language schools, although according to key informants, there was no evidence to suggest this is a wide-spread phenomenon:⁶²

We decided to continue online studies with the Ukrainian teachers, as we could not integrate into schools with teaching in Russian language due to discrimination, bullying and a curriculum that differs from the one of Ukraine, (Refugee girl, 17 years old, Refugee Boy, 13 years old, Anenii Noi)

One FGD respondent raised concerns about risks of bullying and harassment that Ukrainians have faced from pro-Russian factions inside Moldova:

There are regions in Moldova which are traditionally pro-Russian [and have been following predominantly Russian media that shaped their perceptions]. This creates situations of friction towards Ukrainian refugees in communities.... We have cases where children stop going to school because of this and parents try to find online training opportunities for their children. ...There are several problems that we should not hide under the rug but talk openly about... This is happening at different levels, it is also in cities, and in villages, (CSO Representative, female, Chisinau).

A REACH area-based assessment (January 2023) confirmed the NRC findings, noting that refugees generally reported feeling safe in areas where they reside. Among the few protection concerns reported, host community households rated them more frequently than refugee households. Protection **risks** (not incidents) identified by respondents included: discrimination and verbal harassment

⁶⁰ NRC, Hidden Hardship, February 2023, p.38.

⁶¹ Focus Group Discussion: Refugee Woman, 69 years old, Annenii Noi.

^{62 &}quot;The subject [of bullying] is so sensitive that it would immediately be reported. The phenomenon of bullying exists regardless of status. If there is not a harmonious environment in the school, it exists. Now people are much more attentive, they still talk to adults. We have an institution subordinate to the Ministry, the Republican Center for psycho-pedagogical assistance, and in the district directions the psycho-pedagogical assistance service. I think they are working on aspects of discussion, counselling." (Key informant interview with, Woman Representative of the National Agency for Curricular and Evaluation under Ministry of Education).

against Roma individuals; being robbed or economic violence against older persons; verbal/sexual harassment and violence against women; verbal harassment against people with disabilities; risk of violence at home for boys under 18, and; risk of sexual abuse/violence for girls under 18.63

According to the REACH report, 90 percent of respondents said they would turn to police in the event of a protection incident including GBV, with NGO hotlines as the second most reported channel of reporting⁶⁴ followed by the government hotline.⁶⁵ Despite a high percentage of respondents noting they would turn to police, there were mixed perceptions of the trustworthiness of the police, with mistrust higher among host community households.⁶⁶

3.4 Legal Documentation and Temporary Protection

An NRC assessment found that in Moldova, 24 percent of non-Roma respondents reported facing some sort of difficulties with obtaining legal documentation, with men facing greater challenges (32 percent) as compared to women (16 percent)⁶⁷. By contrast, 92 percent of Roma refugee respondents reported facing difficulties obtaining legal documentation, primarily due to lack of identification documents and passports, with Roma women facing greater such challenges than Roma men (72 percent compared to 54 percent).⁶⁸ Lack of proper civil documentation puts Roma women at a disadvantage in accessing refugee related services and information. A relatively low number of refugees in Moldova had registered with local authorities (49 percent) due in part to that until 1 March, no registration was required to legally stay in the country.

The introduction of the Temporary Protection Directive launched in March 2023 is designed to enhance legal protection for refugees. As of 24 March 2023 relatively few refugees had registered

- 65 Ibid., p.43: 8 percent refugee households, 16 percent host community households
- 66 Ibid. p.44.
- 67 NRC, Hidden Hardship, February 2023, p.18: "Men mostly indicated lack of IDs or passports and the inability to obtain civil documentation outside of Ukraine."
- 68 Ibid., p.18: "9 percent lack IDs or passports, and another 23 percent have lost or damaged legal documents. Particularly the lack of IDs or passports is indicated by more Roma women (72 percent, n=124), compared to Roma men (54 percent, n=26)."

but numbers were expected to increase.^{69 70} Refugees with mobility challenges living in smaller cities outside of the capital, may face particular barriers to registering:

With regards to temporary protection – there is no registration office in Ungheni, the closest one being in Balti. It is difficult for many people, such as older persons, pregnant women and women with infants to travel. These travels also cost money. It would be great, if a mobile team could be put in place to assure registration of the most vulnerable groups, (Refugee Women Leader, Ungheni).⁷¹

4. Access to Services and Resources

Generally, the welfare of the refugees relies on the responsibility and accountability of the local community and local authorities/administration when it comes to living conditions in Refugee Accommodation Centers (RACs) or host families. Refugees are entitled to healthcare services, assistance programmes, including cash assistance and nutrition, employment and protection.

4.1 Accommodation

Living Amongst Host Communities

The majority (97 percent) of refugees from Ukraine in Moldova live with host families or rent apartments.⁷² An NRC assessment reported that 50 percent of refugee respondents live in rented accommodation, and 35 percent are staying with families or friends.73 The living conditions in urban and rural areas of Moldova differ with some rural areas lacking indoor plumbing for example. For refugees coming from urban areas of Ukraine, settling in rural areas of Moldova which may lack private latrine facilities and proper water and sanitation services is particularly difficult. This may be more so for women, particularly considering their traditional care responsibilities and the importance of fulfilling WASH needs for different members of the house-hold (i.e. older persons, female adolescents etc.).

69 Ibid., p19.

73 NRC, Hidden Hardship, February 2023, p.20.

⁶³ REACH, Area-Based Assessment, January 2023, pp.42-43.

⁶⁴ Ibid., p.43: 29 percent for refugee households, 12 percent for host community households

⁷⁰ Gender Task Force, Meeting Minutes, 24 March 2023.

⁷¹ Ibid.

⁷² REACH and UNHCR, RAC Monthly Needs Monitoring, 30 Jan 2023.



Roma family from Ukraine outside of their shelter house in Drochia Photo: Aurel Obreja/UN Women

It is much harder for women coming from urban areas to be accommodated in villages where sometimes they lack proper infrastructure: outside toilets, bathrooms, water supplies or sewage. Women with infants find it particularly difficult because they have to adjust to their children' needs, (CSO Representative, female, Chisinau).

According to UNHCR, living conditions for Roma families in private rented accommodation, particularly for Roma women and children, were poorer than that in RACs. Roma people faced challenges in finding accommodation due to negative stereotypes against them, and the houses they did manage to rent had little to no basic housing items, with some sleeping on the floor.⁷⁴

An NRC assessment noted a link between having a sustainable source of income and an individual's housing situation, with the majority of those living in rented housing having work, savings or remittances.⁷⁵ The current economic and fuel crisis in Moldova is affecting refugees and Moldovans alike. NRC observed a decline in the willingness to host refugees amidst resentment about rising inflation and rents, and some 40 percent of refugee respondents in Moldova considered their housing to be unaffordable.⁷⁶ During FGDs, refugees renting their own accommodation voiced their concerns about how to afford rising costs:

Prices have increased due to the energy crisis and

created budget constraints for families, especially those who have opted to rent individual spaces. The high prices for food products in Moldova compared to those in Ukraine may influence our ability to stay, (Refugee Woman, 40 years old, Soroca).

While some refugees living in host communities maintain relations with the closest RACs and can receive food and other assistance as a result, other refugees living in host communities may be invisible to central actors, particularly if they are not registered for cash assistance or other types of help, which limits the support they receive. While local authorities are aware of refugees living in their communities, central authorities and humanitarian actors initially did not have this information which impacted their ability to target aid to refugees living outside of RACs (they report they are harder to reach and identifying their needs requires additional efforts). This was corroborated by one FGD participant:

We found refuge in Moldovan host families and feel safe and sound here. The main challenges we face relate to a lack of information about employment opportunities and about our legal status in Moldova, as well as fears related to increasing energy costs and surviving the winter, (Refugee Man, 40 years old, Hârbovăț).

An NRC assessment notes that while spontaneous actions of the Moldovan public have helped secure accommodation for refugees from Ukraine, it is difficult for government services to regulate private housing initiatives and thus protect vulnerable groups, such as refugee women and children, from risks of sexual exploitation, abuse, and trafficking.⁷⁷ Protection issues for refugees living with host families were raised by one FGD participant with reference to verbal aggression:

Some people living in host families reported cases of violence in the form of verbal aggression, (Refugee Woman, 51 years old, Hincesti).

⁷⁴ UNHCR, 2022 Participatory Assessment, p.34.

⁷⁵ NRC, Hidden Hardship, February 2023, p.2.

⁷⁶ Ibid., pp. 22-23.

⁷⁷ Ibid., p.22.

Refugee Accommodation Centers (RACS)

RAC Demographics

66 RACs hosting 2800 residents including:

- 64% female
- 36% male
- 11% are 65 years or older
- 4% infants aged 0-2
- 35% children aged 2-18 years
- 91% Ukrainian nationals
- 4.8% persons with disabilities
- 0.8% persons with serious medical conditions
- 1.1% pregnant and lactating women

(Source: REACH, RAC Monthly Needs Monitoring, 27 February 2023)

The national authorities established a total of 135 accredited Refugee Accommodation Centers (RACs) across the country, of which 66 remained active as of 27 February 2023, hosting 2,800 individuals (at 70 percent capacity).⁷⁸

At the onset of the crisis priority was given to ensuring safe accommodation and to covering basic needs such as food, water, medical assistance, and hygiene. According to key informa nts, gender and diversity considerations in RACs were initially overlooked by central and local authorities, but as the situation settled, the importance of addressing these issues became more apparent:

At that time we didn't even think [about addressing gender and diversity issues]. Today we are aware of the existing capacities of the [RACs] to receive specific categories of refugees. For example, now we can accommodate persons with disabilities, (Representative of the National Agency for Social Assistance, female, Chisinau).

If at first the problem was to identify a safe shelter, now the problem lies in offering proper conditions which can meet the needs of women and their children, (CSO Representative, female, Chisinau). Upon arrival in Moldova, Roma refugees were housed in separate accommodation centers from non-Roma refugees. Reports by Human Rights Watch and the Moldovan Ombudsperson highlighted cases of a segregated response to Roma refugees, who were being directed to separate RACs with often lower standards and poorer services.⁷⁹ An NRC assessment confirms this and notes that early on many NGOs and CSOs raised concerns about the conditions in some of the RACs housing Roma refugees due to lack of privacy, inadequate winterization, lack of structured or educational activities for children, and discrimination (the latter particularly in the Northern region of Moldova).⁸⁰

The quality of services in RACs also varies depending on the location. One key informant noted that in some places, RAC managers strive to offer as much assistance as possible by applying to available funds, while in other places, local authorities have refused to cooperate and instead created conditions to close the centers:

The amount of assistance depends on how open the management is to cooperate. In a specific locality, the mayor does not want any support because he wants to close the center, (CSO Representative, female, Chisinau)

Not all RACs have the conditions or the necessary infrastructure suitable for accommodating refugees during the winter, which is made worse by the energy crisis:

The conditions in the centers are modest, and in the Roma centers inadequate. For the cold period, due to the energy constraints, the refugees ask for alternative sources of heat in their rooms, electric fireplaces, that are not available, (CSO Representative, female, Hincenti).

One FGD respondent noted that the economic crises is also affecting food quality in the RACs:

With regards to food, there is catering provided [at the RACs] but the rise in prices led to a decrease in the quality of food, (CSO Representative, female, Chisinau).

According to a FGD respondent, the advantages of living in RACs include the proximity to resources and access to information which was systematically highlighted by refugee women staying in RACs.

⁷⁸ REACH and UNHCR, RAC Monthly Needs Monitoring, 27 February 2023; UNHCR, Operations Update, February 27, 2023.

⁷⁹ Oxfam, Seeking Safety, October 2022, p.9.

⁸⁰ NRC, Hidden Hardship, February 2023, p.23.

I recall how an online conversation led me to the [Refugee Accommodation] Center where I live today with my two children, one aged 7 and a baby. Although I was offered a house, I chose to stay in the Center because of better living conditions and because of the location, which offers nearby Russian language studies for my older child, (Refugee Woman, 45 years old, Region of Găgăuzia).

This was corroborated by older people who reported feeling safe living in RACs because they have easier access to food and information regarding healthcare and humanitarian assistance.

While refugees highlight the benefits of staying in RACs, a GBV safety audit report noted the limited capacity to control access to the RACs by external visitors was a major concern which generated a feeling of insecurity and lack of privacy, particularly among women and girls.⁸¹ The same report reported cases of male external visitors trying to enter the bathroom when women were there, as well as to enter girls' rooms and watch them when they were sleeping.⁸²

Some refugees may be afraid to complain about the conditions in the RACs for fear of retaliation or being asked to leave. Lack of alternative affordable accommodation makes some refugees, including single women and single-women heads of households, more vulnerable to sexual exploitation and abuse (SEA), especially those staying in nonregistered/unofficial sites where protective SEA reporting mechanisms may be weak or non-existent.

4.2 Food and Non-Food Items

Refugees may obtain free non-perishable food items from food distribution sites and have access to food vouchers. Participants in the FGD generally reported satisfaction with the nutrition levels of this food. High food costs remain a barrier for those purchasing food on their own.⁸³

Food distribution may not always address the requirements of those with specific dietary needs including pregnant and lactating women, newborns, older women, and those with strict diets (i.e. gluten-free, vegetarian, diabetes, etc). During FGDs and interviews, new mothers specified the need for powdered milk, baby food and baby hygiene products which are not always available. While cash assistance and vouchers partly cover these needs, it is still not enough:

Lack of food for infants or formula-fed children is a challenge. In the beginning there was food for children, but now these are no longer offered, (Representative of RAC, female, Chisinau).



Refugee receiving food products from NGO Motivatie Photo: Motivatie

Key informants recommended providing cash assistance in the form of money or vouchers which would allow mothers to buy products according to their needs and the needs of their children. This is being considered as a more practical solution to address specific household nutrition needs.

Some NGO respondents reported challenges in procuring menstrual hygiene and incontinence supplies in small batches to address individual needs and preferences. They recommended that cash assistance and/or vouchers be provided directly to refugees to enable them to choose their own hygiene products.

In an NRC assessment, 94 percent of respondents in Moldova (both Roma and non-Roma) reported receiving aid, mostly cash and food assistance. More Roma than non-Roma respondents reported received clothing, legal services, and healthcare, mostly from CSOs and NGOS and some INGOs and UN (91 percent and 31 percent respectively), while non-Roma respondents mostly relied on assistance from INGOs and UN as well as government entities (82 percent and 23 percent, respectively).⁸⁴

A REACH area-based assessment (Jan 2023) found that 92 percent of refugee respondents reported

⁸¹ UNHCR et al, GBV Safety Audit Report, August 2022.

⁸² Ibid.

⁸³ Focus Group Discussions in Soroca and Causeni.

⁸⁴ NRC, Hidden Hardship, February 2023, p.30.

receiving aid, as compared to 40 percent of Moldovan host families accommodating refugees. The most common form of aid received by the majority of refugee families renting or living with host families was cash, food, hygiene items, and vouchers (85 percent, 83 percent, 75 percent and 69 percent respectively).⁸⁵ The main providers of assistance to refugees were UN agencies, local NGOs, and INGOs (76 percent, 33 percent, and 29 percent respectively); while those providing assistance to hosting families were UN agencies and INGOs (71 percent and 29 percent respectively) with local NGOs and local authorities less involved.⁸⁶

Several key informants raised the challenge of aid distribution being based on residence rather than on vulnerability, leaving some vulnerable persons living in RACs underserved:

Currently the distribution of humanitarian assistance in Ungheni is based on residence, not on vulnerability. Refugees who live in RACs have been systemically refused assistance and vouchers for food, clothing, and hygienic kits. These are usually distributed by the mayor's office social services to refugees living in host communities. However, persons living in RACs are usually the most vulnerable – Roma, older persons, people with disabilities, women with many children and single mothers, (Refugee Women Leader, Ungheni).⁸⁷

During FGD in Causeni, participants noted the slow pace of aid distribution:

From the moment we provide information about our needs until the moment the assistance is provided, there is a lot of bureaucracy and delays. Humanitarian assistance is not fast, (Refugee Woman, 31 years old, Causeni).

4.3 Health Care Services, and MHPSS

A UNHCR participatory assessment (Feb 2023) found that urgent and primary medical services were generally viewed as good and accessible by refugees in Moldova, while access to secondary medical services was viewed as problematic, especially for those living in rural areas in regions.⁸⁸ The cost and unavailability of medicines was also raised as a concern.⁸⁹ These findings were correlated by the results of FGDs, where respondents had varied experiences with health services. FGD respondents reported being satisfied with the 112 tele-health service, which they considered efficient and professional,⁹⁰ and many reported having access to primary and urgent healthcare services. Several respondents raised concerns about the poor treatment of serious or severe illnesses, the lack of availability of appropriate medication (e.g. for insulin dependent individuals), the high cost of medicine and the related lack of compensation for medication (which makes it difficult for refugees to afford as they don't have health insurance in Moldova). As one older FGD respondent notes:

For serious pathologies, the medical system does not respond to people's needs. On the other hand, we have a family doctor who is responsible for refugees in the community, whom we can turn to. However, not all refugees are informed about the fact that they can go to the local family doctor for free, (Refugee Woman, 74 years old, Hincesti).

Conversely, one key informant pointed to the perceived favouritism of refugees' access to healthcare, as compared to Moldovans which has led resentment amongst parts of the host population:

Locals have to make an appointment [for healthcare], while refugees go much faster. The locals are unhappy. For example, in the case of insulin dependent patients, the problem of insulin deficiency in Moldova was solved very quickly for refugees because donor organisations agreed to cover the costs. In the meantime, Moldovans had to stand in line waiting for insulin. These incidents create frustrations in some places, (CSO Representative, female, Chisinau, KIIs).

Several older FGD respondents reported facing discrimination by health care workers:

We had several situations of verbal aggression and discrimination by employees of the medical system on the grounds of our nationality. Some of these incidents were reported to the hotline but were not effectively resolved. (Refugee Man, 74 years old, Hincesti).

The attitude towards refugees [in hospitals and specialist institutes] was humiliating and [made me feel] powerless, (Refugee Woman,74 years old, Hincesti).

⁸⁵ REACH, Area-based Assessment, January 2023, p.44.

⁸⁶ Ibid., p.45.

⁸⁷ Gender Task Force, Meeting Minutes, 24 March 2023.

⁸⁸ UNHCR, 2022 Participatory Assessment, February 2023, p.7.89 Ibid., p.23.

⁹⁰ Focus Group discussion, Causeni.

Further information is required on potential barriers to accessing health care by sex, age or diversity, on access to and use of sexual and reproductive health services, and on availability of specific medical (e.g. hormone) treatments for LGBTQIA+ persons.

MHPSS

While conflict and displacement may affect the mental health and psychosocial well-being of all affected populations, the specifics may vary according to gender, age and diversity. This in turn shapes individual risks and vulnerabilities, coping strategies, help-seeking behaviours, and access to support services.



Women supporting women Photo: Motivatie

In a REACH area-based assessment (Jan 2023) 17 percent of refugee families interviewed reported having at least one family member experience mental health conditions such as anxiety or depression, out of which 24 percent required MHPSS support.⁹¹ During FGDs, respondents reported that many children and adolescents display hypersensitivity to all types of sounds and alarms, as well as to news about the war and the sight of military personnel. One FGD respondent noted:

Many young people aged 14-17 years old are badly affected by all these changes [of war and displacement]. They are closed, do not communicate, and tend to go out only if accompanied by one of their parents whom they trust and feel safe with, (Refugee Woman, 35 years old, Soroca). A refugee representative stressed the importance of creating a sense of safety and stability for refugees, including children, as critical for psychosocial wellbeing.

The psychological health of children is a challenge. Refugees living in RACs [may be] transferred from one RAC to another. RACs receive support from donors to improve the living standards, refugees are accommodated there, become more comfortable and more integrated into the local community, start looking for jobs and make friends. Then RACs are closed [possibly due to low occupancy] and refugees need to settle in a new RAC, sometimes with worse conditions. Every transfer is stressful for refugees, especially children. They develop digestion disorders and stuttering. Children have already been traumatised by the war and are then forced to move again. Refugees need time to overcome their traumatic experience and for this they need a safe space to settle in and receive psychological support, (Refugee Women Leader, Cahul). 92

The same refugee representative highlighted the mental health challenges faced by some men due to gendered norms, where seeking support may be perceived as a sign of weakness, as well as due to lack of assistance tailored to men:

Retired male refugees [do not meet with] psychologists, and their mental health is very bad. They are depressed because now they struggle finding a new role and space for themselves and depend on others. They need a tailored approach in psychological assistance and social networking and communication opportunities, (Refugee Women Leader, Cahul).⁹³

Host families, as well as first responders and frontline workers supporting refugees also face increased stress. One FGD participant noted:

Employees [of local public authorities] are in a state of exhaustion. Many struggle with strong emotions or depression in the face of increased workloads and contact with refugees [leading to secondary trauma], (Representative of Division for Social Assistance, male, Soroca).

Despite signs of distress and the need for MHPSS support, very few refugees reached out for relevant mental health services during their first months in Moldova. As noted by one FGD respondent:

 ⁹² Gender Task Force, Meeting Minutes, 24 March 2023.
 93 Ibid.

⁹¹ REACH, Area-based Assessment, January 2023, pp.40-41.

There is reluctance among refugees to consult a psychologist. Often there is an explicit refusal from their side, although in dialogue with them an urgent need for psychological therapy to overcome emotional states is obvious, (Psychologist, female, District of Soroca).⁹⁴

Frontliners report that in recent months, after almost a year in Moldova, refugees are starting to seek out MHPSS support. As many psychosocial activities tend to focus on women and girls, there is a risk of excluding men and boys:

More and more, men say that they do not have the possibility to access groups, where they can participate, feel involved and develop at least at a non-formal level, (CSO Representative, female, Chisinau).

Gender imbalance among MHPSS staff may also serve as an access barrier to men and boys seeking MHPSS or other support:

We notice that men [engaging in support groups or psychosocial support activities] prefer to contact a male expert. I noticed that the only man on our team was the driver – the boys would go to him and try to contact him and so would the men. They have more confidence and open up more easily to other men. I think we should take that into account and diversify the team, (CSO Representative, female, Northern Region).

4.4 WASH

Some RACs struggle with technical and infrastructure provisions to ensure sufficient sanitation facilities, running hot and cold water, shower cabins and permanent stocks of hygiene kits. Only a few centers can offer a full range of services for women with babies, women with children with or without disabilities or persons with disabilities. While the majority of respondents reported being satisfied with the access to water, sanitation and hygiene (WASH) facilities, a few raised some concerns. These included: insufficient toilets and showers; inconvenient location of WASH facilities (in some cases outside the building); lack of proportional gender-segregated toilets (considering the actual number of females and males residing in the building); need for functional locks and doors in bathrooms, sufficient lightning; need for bathing spaces for babies; need accessible sanitation facilities for older people and people with disabilities.⁹⁵

The gendered impact of a lack of access to WASH facilities has a particularly marked effect on refugee women and girls where the lack of access to clean water affects showers, cleaning food and menstrual hygiene. The situation is particularly challenging for pregnant women, lactating women, and women who have recently given birth who face elevated threats from a low state of hygiene. Improper WASH facilities, such as latrine facilities that have no functional doors or locks, undermine refugee women's privacy and personal safety, and subject them to risks of harassment and violence.

Households hosting refugees have received assistance to improve WASH and general infrastructure including installation of sanitary containers, materials to repair and insulate homes to ensure efficient use of hot water and utilisation of energy, proper equipment to safeguard water supply, and handwashing stations.

4.5 Education

The majority of Ukrainian children continue to study online in the Ukrainian school system, especially at higher grades.⁹⁶ In an NRC assessment (2023) most non-Roma refugee respondents reported their children attended remote online learning in Ukraine (65 percent) or in person schooling at local national schools (29 percent).⁹⁷ Key informants reported that compared to kindergartens where children may easily integrate and learn the Romanian language, children in elementary and secondary school face more challenges including: the curricula differences, the language of education and the uncertainty of the future, all of which pose additional burdens on children and their families. The high cost of transportation and long distances to school (in rural

97 NRC, Hidden Hardship, February 2023, p.35.

⁹⁴ Another FGD participant had similar observations: Refugees suffer from an emotional impact as a result of the war but refuse to receive psychological assistance. They become sensitive to any discussion regarding the escalation of the situation both in Ukraine and in Moldova (CSO Representative, Chisinau).

⁹⁵ Also reported in: REACH and UNICEF, MSNA, September 2022, p.32.

⁹⁶ The result of the Multi-sector Needs Assessment on Education (July 2022) reported that of the 84 percent of children who were not enrolled in Moldovan schools, 61 percent were accessing online platforms in Ukraine. Preference for Ukrainian online learning platforms seemed to be the case for older school-aged children, whereas the younger schoolaged children were found not be enrolled in school due to personal preference of the caregiver (19 percent), preference for the Ukrainian online platforms (14 percent) and intention to move soon (13 percent). (REACH and UNICEF, MSNA Education, July 2022); The Inter-Agency Refugee Education Working Group (IREWG) on 16 December 2022 raised the concern of the lack of a systematic way to track children who attend online Ukrainian classes, a challenge identified by Moldovan authorities and UNICEF.

areas) were also cited as barriers to attendance. Some refugee children attend both online schools in Ukraine and attend in person classes in Moldova, primarily to socialise with other children:

Refugees prefer to be, and are, connected to the Ukrainian online school system. Those who wanted to enrol in [Moldovan] schools encountered [...] the problem of language – in rural community schools are taught in Romanian. Children go to school more to socialise. Some parents chose to move from a village to a city in order to send their child to a Russian-language school, (CSO Representative, female, Chisinau).

For single headed households online learning may serve as a barrier to finding work. If IT resources and equipment are lacking for online attendance, parents may have to accompany their child to a library or community center to access online school:

Mothers with children in primary education are not able to work at all, as they are not able to leave their children unattended and need to help them with homework. Mothers with children in secondary education are forced to leave them at home for online schooling without supervision, (Refugee Women Leader from Ungheni).⁹⁸



Children participating in a painting workshop Photo: INTERSOS Moldova

In an NRC assessment (2023) 64 percent of Roma refugee respondents reported that their children have not been able to go to school at all since leaving Ukraine.⁹⁹ For Roma refugee respondents with children in school, 76 percent reported that their children attend school in-person, in combination with online learning in Ukraine.¹⁰⁰ A briefing paper by Oxfam stresses that access barriers to

99 NRC, Hidden Hardship, February 2023. The same report notes that 34 per cent have not attended at all, while 18 percent have attended with interruptions. education for Roma children must be addressed, including the absence of clear communication lines between Roma parents and authorities, isolation in the RACs, poor internet access and the lack of specialised care for children with disabilities.¹⁰¹ Roma adolescent girls face specific challenges in accessing education due to their previous limited exposure to school. As one CSO representative noted:

In the Roma community, we discovered that [many children] are illiterate, especially teenage girls. ... This is not about learning the Romanian language, but about learning to write and read in general, (CSO Representative, female, Chisinau).

The opposite trend is seen among non-Roma adolescent girls and boys. A UNICEF Education Assessment (June 2022) found that at the uppersecondary level (16-18 years) gender differences in educational participation are pronounced, with almost all girls attending Ukrainian Ministry of Education online platforms while only 77 percent of boys do (12 percent of boys do not attend any educational activities, which is three times higher than the 4 percent of non-attending girls).¹⁰² Girls in this age group are also more engaged in nonformal education. This gender disparity in education at higher age groups may be linked to the fact that, in light of their fathers' absence, adolescent boys may be the de facto family's oldest male. Those with financial resources may prepare for university, while those with limited resources may try to fill the gap and help their mothers support the families instead of attending school.¹⁰³ The report calls for special attention to be paid to boys and girls outside of education to mitigate risks (e.g. boys may engage in risky behaviours and negative coping mechanism, including smuggling, substance abuse or sexual abuse; girls may be at increased risk of violence, exploitation, and trafficking).104

Disaggregated data on school attendance is limited, based on narrow sampling, which makes it difficult to track trends in education.

103 Ibid., p.15.

104 Ibid., p.15.

⁹⁸ Gender Task Force, Meeting Minutes, 24 March 2023.

¹⁰¹ Ibid., p.35.

¹⁰² The UNICEF Education Rapid Needs Assessment (June 2022) reported that approximately half of preschool aged refugee children do not attend formal educational activities, while 30 percent do participate in non-formal education (the highest NFE participation among all age groups). While the level of participation is low for both genders, more primary school girls participate in formal education than boys at the lower secondary school age, (11-15 years) the proportion of boys not attending any education is more than twice the rate of girls, and participation in non-formal education is particularly limited across both genders (UNICEF, Education Rapid Needs Assessment, June 2022, pp. 13-14.

5. Access to Information and Participation

5.1 Information

A REACH area-based assessment report (Jan 2023) found that 89 percent of refugee households reported having enough information about humanitarian services, with the main sources of information listed as social media, relatives, neighbours or friends, and community meetings (59 percent, 41 percent, and 27 percent respectively).¹⁰⁵ Other assessments found that refugees also receive information from public officials, social services, social assistants, volunteers, NGOs and international organizations (IOs). Refugees who reported not receiving enough information on humanitarian assistance, their top information needs were access to healthcare, how to get more financial support, how to register for aid, and news about Ukraine and Moldova (53 percent, 47 percent, 37 percent, and 26 percent respectively).¹⁰⁶

The REACH assessment (Jan 2023) found that 20 percent of refugee household respondents reported not knowing where and how to access basic services (healthcare, education, legal advice), with access to protection the least known (none of the household respondents knew how to access child protection, GBV and MHPSS services). Knowledge about childcare was limited, as was knowledge about access to reproductive, maternal and newborn healthcare.¹⁰⁷

Those living in rural areas far from RACs may have a harder time accessing updated information. As one key informant noted:

Often refugees find out late about the available assistance, and many do not receive this information at all. Information is usually received not from the official sources, but from other refugees. There is a big difference between Chisinau, Balti and other big cities and Ungheni on the information disseminated to refugees on available services, (Refugee Women Leader, Ungheni).¹⁰⁸

UNHCR's Participatory Assessment found that Roma women mainly access information from Roma community mediators, rather than digital sources of information, due to low literacy, lack of

105 REACH, Area-based Assessment, January 2023, p.45. 106 Ibid., p.45.

107 Ibid., pp.28-29.

108 Gender Task Force, Meeting Minutes, 24 March 2023.

devices and language barriers.¹⁰⁹ Access to information in an accessible format by people with disabilities (e.g. visually impaired) was also identified as a challenge.¹¹⁰

FGD respondents emphasised the challenges refugees face in obtaining information about their rights in Moldova, their legal status and their prospective to stay.

It is difficult to get up-to-date information. For different topics we have to turn to different structures, which is often very inconvenient. We are disoriented and confused by the regulations regarding our status and the uncertain extension periods of the state of emergency. We are confused about how we should plan our future if the state of emergency ends one day, we do not know how to proceed, (Refugee Woman, 38 years old, Soroca).

Misinformation has been a challenge contributing to anxiety and confusion for refugees in particular about their status, accommodation arrangements and employment opportunities. Regional coordination structures have been established at the local level to facilitate information sharing across the country. It is hoped that the introduction of the new Temporary Protection Directive will provide longer-term legal protection and help clarify the uncertainties about legal status.

5.2 Participation

The extent to which refugees and host communities are consulted in humanitarian planning and monitoring varies. Underrepresented groups include Roma people, people with disabilities, older people, LGBTQIA+ persons, people living in rural areas, and host communities, which tend to be less visible in general assessment documents and reports. That said, several targeted reports examining these population groups have recently been published, and are giving a greater voice to their needs, priorities, and capacities.

The extent to which refugees participate in humanitarian decision making differs according to the individual humanitarian actor and the affected population group. While most service providers said they consulted with refugees in their planning efforts, other respondents reported that refugees have more active decision-making roles. For example, one CSO worker noted:

¹⁰⁹ UNHCR, 2022 Participatory Assessment, February 2023, p.35.110 Representative, Keystone Moldova

Our organisation is founded by people with disabilities, and we have girls with disabilities who, of course, also participate in decision-making, (CSO Representative, male, Chisinau).

In January 2023, UN Women launched an initiative to actively involve women refugees from Ukraine in humanitarian decision making, and as of March 2023, three refugee women leaders have been selected as local coordinators for Cahul, Ungheni and Balti regions. They have participated in the Gender Task Force and highlighted key issues of concern in their communities. Further investment in this initiative and other efforts to involve women and other representatives of diverse groups of refugees as decision makers are needed.

5.3 Integration and Relations with Host Communities

According to a UNHCR Participatory Assessment, most refugee respondents felt that in general rela-tions were positive between refugees and Moldovans.¹¹¹ This was confirmed by the REACH area based assessment report (Jan 2023) with nearly all 91 percent refugee household respondents describing relationships as good or very good, and nearly all (93 percent) host household respondents reporting that refugees were welcomed in Moldova.¹¹² An NRC assessment concurred, reporting that in general, the majority of refugees from Ukraine reported feeling accepted in Moldova, although non-Roma people seem to feel less accepted ('accepted to some extent') than Roma respondents (30 percent as compared to 1 percent).¹¹³

Some refugee representatives reported facing negative attitudes from local community members:

Some members of the host community blame Ukrainian refugees for the worsening of the country's economic well-being and believe that everything got more expensive due to refugees. They do not understand that support for refugees comes from the international community. This creates pressure that is difficult to live with, (Refugee Women Leader, Cahul).¹¹⁴ There are also some pro-Russian people in the local community with negative attitudes towards refugees, (Refugee Women Leader, Ungheni).¹¹⁵ UNHCR's Participatory Assessment reports that Roma refugee respondents were welcomed by the network of Roma community mediators in Moldova which helped them feel safe and accepted.¹¹⁶ The Romani language spoken by Roma communities in Ukraine and Moldova is similar which facilitates communication.¹¹⁷ While strong social solidarity for Ukrainian Roma within the Moldovan Roma community has provided a source of strength and protection, they continue to be marginalised amongst the broader Moldovan society.



Refugees and locals of Cruzești commune participating in a festival for peace

Photo: Aurel Obreja/UN Women

While relations between Ukrainians and Moldovans are generally good, more investment is needed to inform Moldovan communities about the humanitarian response to reduce misunderstan-dings and potential resentment and tensions (e.g. providing clarity on the source of funding for relief efforts [from external donors], the contribution of the response to infrastructure improvements, and systems building in Moldova, etc.). Furthermore, humanitarian assistance should continue to target both host and refugee communities in need, and more opportunities should be created for social integration.¹¹⁸

6. Priority Needs

An NRC assessment reports that all refugee groups identified cash-based assistance as a top priority. Following that, priority needs included food (particularly in the Northern Region), medication and accommodation (particularly in the Central Region) for non-Roma respondents, and healthcare

¹¹¹ Ibid., p.34.

¹¹² REACH, Area-based Assessment, January 2023, pp. 24, 26.113 NRC, Hidden Hardship, February 2023, p.39.

¹¹⁴ Gender Task Force, Meeting Minutes, 24 March 2023.

¹¹⁵ Ibid.

¹¹⁶ UNHCR, 2022 Participatory Assessment, February 2023, p.33. 117 Ibid., p.34.

¹¹⁸ Both social integration and focus on host communities are core elements of the 2023 Moldovan Refugee Response Plan.

and clothing for Roma respondents.¹¹⁹ The REACH assessment found similar results with refugee households in host communities reporting their most important priority needs as health (in particular dental care, medication, general medical care and MHPSS), food, and economic assistance (56 percent, 55 percent and 52 percent respectively), in particular for winter heating bills.¹²⁰

The REACH report notes only slight differences in priority needs for female-headed households and households with children. Priority needs for female-headed households included health services, economic assistance, food and employment (58 percent, 57 percent, 54 percent and 19 percent respectively). Refugee households with children cited similar needs (health, economic assistance, food) with an additional 12 percent mentioning education.¹²¹ Among people with disabilities, a Keystone report found that 64 percent of respondents listed medication among their priority health and social needs, followed by special dietary food (30 percent).¹²²

- 119 NRC, Hidden Hardship, February 2023, p.32.
- 120 REACH, Area-based Assessment, January 2023, p.28.
- 121 REACH, Area-based Assessment, January 2023, p.28
- 122 Keystone Moldova, Needs assessment and support to refugees with disabilities, 14 December 2022/

FGD and key informants corroborated this list with similar priority needs including:¹²³

- financial security (in the form of cash allowances and/or employment opportunities)
- employment including part-time jobs with a focus on women with children
- medical specialist services in particular for children (paediatricians) and for the older people
- medical vouchers (particularly for the cold season when children get sick)
- legal and psychosocial assistance
- integration of children in school
- support services for adolescents
- access to winter clothes
- Romanian language courses for those who intend to stay in Moldova
- information about the new laws and conditions and impact on refugees.

¹²³ Data compiled from FGDs in Causeni, Chisinau, and key informant interviews with women's rights organizations.

V. CONCLUSION AND RECOMMENDATIONS

For all recommendations, sustainable efforts need to be made across the humanitarian – development – peace nexus to ensure long-term and systematic barriers are addressed.

Cross-Cutting Recommendations

1.1. Continue to advocate with Government and key stakeholders to uphold the commitments to gender equality, women's empowerment, and diversity in respect to refugee communities. Design activities to align with national priorities for greater consideration of the needs of refugee women and under-represented or marginalised groups arriving in Moldova.

1.2 Prioritise gender-specific needs, and address gender biases in access to humanitarian services. This includes consulting equally with women, girls, men and boys, and the most vulnerable and marginalised groups, across all ages and diversities, including during assessments and monitoring. This also includes developing both gender and diversity mainstreamed and targeted programmes (including for men and boys, Roma people, people with disabilities, older persons and LGBTQIA+ persons), addressing barriers to access and participation, and promoting inclusion.

1.3 Recognize women's agency and leadership. Ensure the meaningful participation of female and male refugees (both Roma and non-Roma), as well as refugees from other under-represented groups in humanitarian decision-making. Capitalise on diverse women's and men capacities, and promote their equal participation, without discrimination, in the refugee response.

1.4 Invest in localization of the response to reach the most vulnerable including in rural areas and across all regions. Ensure the meaningful participation of local government and local CSOs in assistance (including those representing women, Roma, people with disabilities, older persons, youth, LGBTQIA+ and other under-represented groups), to ensure better reach and coverage.

1.5 Regularly and systematically collect, analyze and *use* sex, age and diversity disaggregated data to inform, monitor, and adjust humanitarian programmes as needed. Address demographic and programme information gaps including on numbers, needs and priorities of single femaleheaded households, Roma, people with disabilities, LGBTQIA+ persons, older persons, through targeted assessments. Build the capacity of humanitarian staff to apply a gender and diversity lens in the context of their work and ensure gender-balanced teams where relevant.

Sector-Specific Recommendations

Livelihoods and Cash

2.1 Support diverse refugee women and men in generating more sustainable sources of income through job readiness, job creation, entrepreneurship, and livelihood programmes. Analyze and address livelihood needs, expectations and barriers to employment faced by distinct groups of refugees (older persons, Roma, rural, people with disabilities, single mothers, men and boys). Carry out thorough labour market analysis and qualifications and skills assessments, design livelihood programmes accordingly, and harmonise relevant legislation. Assure decent work and promote work safety so that vulnerable groups are not exploited.

2.2. Provide continued support for refugee women's economic empowerment through ongoing livelihoods and employment programmes including language courses (Romanian and English), job readiness, internships, training, cash for work, vouchers for skills training and procurement of work equipment and job placements. Continue to invest in building skills of diverse women in sectors such as IT, STEM, and online work, that provide greater earning potential and move beyond traditional gender divisions of labour. Address low rates of participation in current livelihood programmes in consultation with the refugee community.

2.3 Promote opportunities for women with caregiving responsibilities to secure sustainable employment including by:

- Creating opportunities for part time, remote and flexible work, internship and training opportunities, so that mothers with children, or caring for persons with disabilities can more easily secure sustainable work.
- Providing cash vouchers for existing childcare services and investing in creation of new childcare services (consider hiring Ukrainians with relevant childcare backgrounds to work in childcare facilities).
- Investing in care options for older persons and persons with disabilities.

2.4 Ensure livelihood programmes are equally available for refugee women and men, in all their diversity. Ensure targeted livelihood and employment programmes for women and adolescent girls have corresponding programmes that target refugee men and adolescent boys and address any barriers to their participation. Ensure that livelihood programmes also target host communities to address their vulnerabilities and reduce risks of tensions.

2.5 Develop targeted programmes for Roma refugee women and men to access more sustainable livelihoods, including employment or entrepreneurial opportunities that consider their education levels, language, and documentation. Address discrimination against Roma seeking employment.

2.6 Ensure information about employment opportunities and related labour legislation is shared with all refugees in a timely manner. Tailor information methods and channels to ensure they reach all refugees, including those living in rural areas, people with disabilities and Roma refugees.

2.7 Identify and address barriers for diverse groups of refugees to access cash assistance, including distance and cost of travel which may make it difficult for mobility challenged refugees and those with childcare responsibilities. Consider opening new cash distribution points or mobile cash distribution units.

2.8 Introduce equitable cash distribution modalities (through needs-based cash baskets or targeted vouchers) including providing financial support for medications, assistive equipment, medical equipment, and diagnostic services for persons with disabilities, as well as for vulnerable refugees.

Protection and GBV

3.1 Strengthen and expand activities to prevent, mitigate and respond to gender-based violence including treatment, referral, and support for survivors. This can include:

- Establishing clear referral mechanisms, and case management protocols and tools.
- Carrying out periodic GBV safety audits and follow up on recommendations, including in RACs.
- Raising awareness about GBV prevention and support services among refugee communities, and ensuring information is accessible to diverse groups.
- Engaging with men and boys on preventing GBV and promoting positive and healthy masculinities.

3.2 Continue to implement and expand comprehensive PSEA programmes including: raising awareness about SEA among front line workers, refugees, and host communities; ensuring confidential reporting mechanisms are in place and accessible; and strengthening timely follow up and response. Ensure PSEA interventions effectively cover those living in private accommodation and with host families.

3.3 Develop targeted outreach and social programmes for older women and men to combat isolation, foster connectedness, inclusion, and independence; Provide opportunities for older people to be independent including socialising outside individual families.

3.4 Address discrimination against marginalised communities including Roma refugees, through formulation and/or enforcement of equality and equity policies and legislation, public awareness campaigns, and inclusive programming.

3.5 Conduct assessments of needs, capacities, and priorities of people with disabilities disaggregated by gender, age, and diversity and those of their caregivers where relevant to inform better targeted humanitarian, and socio-economic integration programmes.

3.6 Ensure diverse groups of refugees are well informed about the new temporary protection directive and address any barriers to access (e.g. lack of information for remote communities, lack of paperwork among Roma refugees for example, or distance/cost of travel to register).

Accommodation

4.1 Ensure that refugee accommodation centers (RACs) including those housing Roma and non-Roma meet minimum standards of care. This includes:

- Equipping them with adequate infrastructure and ensuring ability to provide sufficient heating, and food to all residents.
- Ensuring accessibility for people with mobility challenges including older people and people with disabilities.
- Taking forward recommendations from GBV safety audits, including ensuring there is sufficient space and privacy and monitoring the entry and exist of non-residents.
- Putting in place anonymous and accessible complaints and feedback mechanisms, encouraging candid feedback by refugees, and responding to issues raised in timely manner.

• Tailoring centers for young children including by establishing child-friendly spaces and/or early child development programmes.

4.2 Identify sustainable solutions to housing refugees (and vulnerable host families) including by addressing the rising cost of living and fuel through increased cash support, as well as by assisting families to find more sustainable livelihood solutions.

4.3 Continue to support local communities hosting refugees, including through the provision of cash/ vouchers, infrastructure support and targeted live-lihood programmes.

Food and NFIs

5.1 Ensure food and NFI distributions include targeted assistance for refugees living with host families (as well as for host families and/or vulnerable members of the local community) as well as for refugees living in rentals, in particular those with mobility challenges such as older persons and people with disabilities.

5.2 Strengthen information sharing and coordination about refugees living in host communities between local authorities and central level humanitarian actors, to promote a better understanding of needs, priorities, and capacities, and to ensure more targeted outreach and response.

5.3 Tailor food assistance to specific needs of population groups, including adequate and appropriate nutritional food for people with chronic illnesses, older people, pregnant and breastfeeding mothers, new-borns, and children under the age of 5 years.

5.4 Provide cash or vouchers to women, adolescent girls and older women and men to address distinct needs including for the purchase of hygiene items (e.g. menstrual hygiene and incontinence supplies), infant needs (e.g. diapers, baby food and milk powder), as well as clothing and footwear (especially for children); ensure vouchers also reach persons living in remote or rural areas with less access to regular NFI distribution sites.

Health Care Services and MHPSS

6.1 Include/consult refugee women and girls, women front-line health workers and NGO representatives in efforts to improve the health response, specifically in relation to sexual and reproductive health (SRH) and GBV response. Continue to support mobile health teams, including those that deliver SRH services to women and girls in rural areas. 6.2 Promote accessibility and inclusivity for all in the health system including by addressing funding gaps and inefficiencies in the broader system.

6.3 Support refugees with greater health care needs including persons with chronic medical conditions or people with disabilities to have access to and cover the costs of specialised medications, diagnostic services, and assistive devices in partnership with health authorities.

6.4 Ensure information about healthcare entitlements and services are clear and accessible to diverse groups of refugees; introduce anonymous reporting and feedback mechanisms to identify and respond to any discriminatory behaviour. Address perceived preferential treatment of refugees by healthcare services, through information campaigns targeting host communities to address misperceptions.

6.5 Ensure MHPSS services are available and accessible to all and include targeted MHPSS programmes in particular for children and male refugees; promote gender equity among MHPSS service providers, including by hiring more male professional staff; address any additional barriers to accessing MHPSS including awareness raising, targeting under-served communities, and creating more mechanisms to establish safety and trust.

6.6 Provide MHPSS support to front line workers and host families to address burnout and secondary trauma. Raise awareness on the importance of MHPSS among refugees, front line workers and host communities.

6.7 Conduct assessments on the potential barriers to accessing health care by sex, age or diversity including on access to and use of sexual and reproductive health (SRH) services, and on availability of specific medical (e.g. hormone) treatments for LGBTQIA+ persons.

WASH

7.1 Continue to provide support to host families for infrastructure repair including improving WASH facilities. Assist vulnerable households hosting refugees who require additional support for emergency repairs.

7.2 Adapt WASH facilities to accommodate the specific accessibility needs of people with disabilities, older persons, LGBTQIA+ persons, and pregnant women.

7.3 Ensure that RACs have proportional sex-segregated and accessible toilets and bathing spaces (in line with demographics of residents), with suitable lighting, internal locks, and facilities to bathe babies.

Education

8.1 Develop targeted education programmes for out of school Roma girls. This includes school catch up classes, changing community attitudes towards girls' education, working with parents, improving livelihood opportunities for families, as well as facilitating access to civil status documentation for Roma women, men, girls and boys. Consider providing vouchers to cover costs of internet and equipment for remote learning, or for travel to distant schools.

8.2 Provide targeted support to adolescent boys at risk of school dropout, including addressing or mitigating negative coping mechanisms.

8.3 Implement more non-formal education (NFE) activities for diverse refugee boys and girls of all ages; encourage joint NFE activities with Moldovan children to promote social integration and strengthen social capital.

8.4 Support existing (e.g. through refurbishment) and/or establish new day care and kindergarten facilities in host communities with a concentrated number of refugee women and young children.

8.5 Elaborate a system to effectively collect, analyze and use sex, age and diversity-disaggregated data from schools to inform programmes, and introduce a mechanism that would allow authorities to track school attendance for boys and girls pursuing distance learning.

8.6. Ensure children with disabilities have access to inclusive education and non-formal education opportunities, including support services and assistive equipment for better integration of refugee children with disabilities in schools.

Access to Information and Participation

9.1 Provide timely information to diverse groups of refugees about available services (including food assistance, health care, education), financial assistance, employment, and legal status. Continue promoting the green line and other information channels where refugees can access reliable and timely information. Ensure information is clear and accessible to all, in particular refugees living in rural areas or remote communities who may not have easy access to internet or mobile connectivity, to people with limited literacy skills, people with disabilities, and in appropriate languages (e.g. Russian, Ukrainian and Romani).

9.2 Counter misinformation and fake news by providing reliable, timely and accessible sources of information to refugees. Enhance awareness of Moldovan society about refugee services and rights including to avoid potential resentment stemming from misinformation.

9.3. Strengthen existing (or establish new) feedback and complaint mechanisms, including in rural areas, and act on the information provided.

9.4 Introduce outreach programmes that address cultural barriers to participation and enable Roma women to have a voice. Enhance participation of diverse refugees in all stages of humanitarian response and ensure traditionally marginalised groups are engaged and represented.

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REPORT AUTHOR: Galit Wolfensohn

PRIMARY DATA RESEARCH METHODOLOGY AND COLLECTION: Victoria Rosa, Cristina Lescnic, Aurelia Mamolea, Magenta research company

REVIEWERS/CONTRIBUTORS:

UN Women Moldova: Dominika Stojanoska, Evghenia Hiora, Sabine Ebner, Tatiana Udrea, Nighina Azizov, Ala Svet, Svetlana Albina

UN Women Palestine: Heba Zayyan

Keystone Moldova: Ludmila Malcoci

PRODUCTION, COMMUNICATION AND OUTREACH: Olesea Simion, Lovisa Salomonsson

PHOTO: Aurel Obreja, Maxime Fossat, Stela Donțu

DESIGN: Cristina Cazanji

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202, Stefan cel Mare si Sfant Bvd., 3rd Floor Chisinau, Republic of Moldova Tel: +373 22 839 898

> Email: info.md@unwomen.org Website: moldova.unwomen.org Facebook: unwomenmoldova Twitter: @unwomenmoldova

