

Waiting for the Sky to Close: The Unprecedented Crisis Facing Women and Girls Fleeing Ukraine



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I. Executive Summary



While there has been an outpouring of public and private support for those fleeing Ukraine, the largely ad hoc and gender-blind response cannot meet the basic needs and protection concerns of forcibly displaced persons (FDPs)¹ and their host communities in Romania. Duty-bearers—including international non-governmental organizations (INGOs) and the United Nations (UN)—have so far failed to adhere to their own global commitments to localization of the humanitarian response. This includes systematically creating ways for women and girls to design and lead responses, incorporating their views into all phases of the operational management cycle.² With few exceptions, dedicated funding

for sexual and reproductive health (SRH) and services for violence against women and girls (VAWG) has failed to materialize. Instead of the multi-year flexible funding that local women- and girl-led organizations need, these overworked frontline groups find themselves chasing grants that may only cover one to three months of total costs. In this way, they are made to take on humanitarian work that they are not necessarily trained for,³ which ultimately derails their core missions.

In every armed conflict, men's violence against women and girls (VAWG) increases rapidly and stays elevated long after the fighting stops. Like the other countries bordering Ukraine, Romania is facing an unprecedented refugee crisis of women and children displaced by the war. Urgently-needed, gender-sensitive violence prevention

¹ The term forcibly displaced persons (FDPs, or forced migrants) used here is an imperfect one that includes FDPs and asylum seekers, as well as some economic migrants. Some foreigners living in countries neighboring Ukraine are technically economic migrants rather than FDPs or asylum seekers; however this is a gray area depending on whether their movement was forced by a loss of livelihood related to the conflict, or other causes.

² The Operational Management Cycle (OMC) for refugee emergencies or the Humanitarian Programme Cycle (HPC) for internally displaced persons emergencies refer to a series of actions to help prepare for, manage and deliver humanitarian response.

They provide entry points for working with and for women and girls at every stage and across all clusters/working groups.

³ We must acknowledge that refugee crises in the region are not new, considering the displacement caused by the previous conflict in Ukraine in 2014 and the large displacement caused by the conflict in Syria in 2015.

and risk mitigation measures are trailing behind the general response. Women's rights organizations (WROs) in Romania have been responding to the needs of forcibly displaced women and girls since the war began, and these localized WROs are best positioned to design, build, and provide the creative solutions necessary. Local organizations have comprehensive strategies that can absorb the refugee response if provided the flexible funding and specific technical support needed to apply critical gender-based violence (GBV) services to the refugee crisis. These organizations are asking for recognition of their expertise and for the requisite funding to utilize their knowledge in continued response to this crisis, while not losing sight of—and continuing to meet the needs of—Romanian women and girls.

Instead, a familiar structure is developing: a top-down, unequal relationship between capable local actors and international humanitarian agencies. This arrangement always fails women and girls, even by these agencies' own standards.⁴ Women and girls are not consulted in the design of the very aid that is being developed for them, and WROs are alienated from humanitarian coordination structures and are expected to do more than ever, with little or no extra funding. VOICE witnessed this familiar scenario play out in relation to the international humanitarian community's response to COVID-19, where yet again the humanitarian aid sector—despite its commitments to crisis-affected populations—contributed to denying women and girls their rights to participation, consultation, and services, and in some cases subjected them to its own types of violence.⁵

In addition, there are a number of actors and organizations playing a vital role in the humani-

tarian space that may not have traditional humanitarian or crisis experience, and therefore may not have the more nuanced GBV and broader protection experience.⁶ These entities are strongly encouraged to engage expertise to navigate and implement GBV and other protection regulations, policies, and strategies, and to strongly consider and integrate the related assessment recommendations included in this report.

Through a new partnership between VOICE and HIAS, and as part of a six-country assessment in the region, VOICE conducted a 10-day rapid assessment in Romania to assess the needs of women and girls affected by the war in Ukraine and the needs of WROs and groups responding to the emergency. WROs and forcibly displaced women reported high risks of trafficking; a lack of access to livelihoods and cash-based assistance; and inconsistent access to reliable information and services. The assessment also revealed protection concerns related to sexual exploitation and abuse (SEA) and unsustainable housing (often heightening the risk of exploitive labor). Overall, FDPs in Romania lack access to GBV services, reproductive healthcare, mental health and psychosocial support (MHPSS) services, and legal services and information. On top of this, Roma and LGBTQIA+ communities face additional discrimination and protection concerns.

Forcibly displaced women are running out of financial resources, and consistent access to cash assistance and sustainable housing remains out of reach for most. This is a disaster in the making that can be avoided. By providing holistic and accessible cash assistance, some of the major protection concerns that most women face—such as accepting exploitive labor, engaging in sex work, and falling prey to trafficking or SEA—will be prevented.

⁴ Including the World Humanitarian Summit's Grand Bargain and Core Commitments to Women and Girls; the Sphere standards; the IASC GBV Guidelines; the Minimum Initial Services Package (MISP); and others.

⁵ *We Must Do Better: A Feminist Assessment of the Humanitarian Aid System's Support of Women- and Girl-Led Organizations during*

the COVID-19 Pandemic. VOICE, 2021, <https://voiceamplified.org/voice-research-report-we-must-do-better/>

⁶ These entities include private businesses, international for-profit organizations and other international contractors.

Local organizations that mobilized and responded from day one of the war are exhausted, stretched past capacity, and underfunded, with almost no money being provided through the emergency response for core programmatic needs. Most centers are only surviving week-to-week, relying on the generosity of decreasing donations and the labor of staff and volunteers. At the time of the assessment, many organizations had been approached by or were receiving refugee response funds from INGOs; but they say these funds are too restrictive and more reflective of international priorities than local needs.

Women and children are the face of the FDP crisis, and are on the front lines of the conflict. The crisis requires locally driven, tailored responses through which women's organizations should influence the humanitarian response.



Romania-specific Recommendations

ICON KEY			
 <p>United Nations (UN) Entities</p>	 <p>European Union (EU)</p>	 <p>Host Country Governments</p>	 <p>Government of Ukraine</p>
 <p>Feminist Philanthropy/ Feminist Funds</p>	 <p>Member State Donors</p>	 <p>LNGO (Local Non Governmental Organization)</p>	 <p>INGO (International Non Governmental Organization)</p>

- **Provide unrestricted mid- and long-term funds to WROs and organizations specializing in GBV services for FDPs and host communities. Ensure these funds can be absorbed into core mandates, rather than providing short-term funds only to FPD projects.**⁷ Funding must take into account the Romanian tax realities, which include 45% tax on salaries, to enable organizations to pay competitive salaries.



⁷ This is a general recommendation made across all reports, but it is being highlighted here as it was one of the priority concerns noted by WROs in Romania.

- **Support Romanian organizations to professionalize volunteers by increasing their capacity related to GBV, anti-trafficking, and anti-exploitation efforts and providing them with compensation when possible.**⁸

⁸ This is a general recommendation made across all reports, but it is being highlighted here as it was one of the priority concerns noted by WROs in Romania.



- **Create and fund safe spaces where women can gather, build social connections, and safely disclose protection concerns, including sexual and domestic violence.** Ensure outreach efforts prioritize women who are in private accommodations, as this can be a safe entry point for survivors or those at risk of violence.



- **Make in-person holistic psychosocial services available, particularly related to anti-trafficking prevention, trauma support, and access to other essential services.** These services must be offered by professionals who are trained in providing support in an emergency environment. Build the technical capacity of providers in trauma/crisis psychological responses to support the immediate needs of forcibly displaced women and girls.



- **Systematize translation, interpretation, and accompaniment services and make them widely available** so that basic services—including registration, food, shelter, and psychosocial support—are more accessible.



- **Increase access and accompaniment to free and holistic medical care, reproductive health care, and GBV services for FDPs in Romania.**



- **Provide sustained support to NGOs managing shelters, as they are the first line of defense for FDPs facing protection risks and exploitation.** Systematize support for long-term, safe, and sustainable housing/shelter for FDPs.



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- **Systematize the delivery of cash assistance with an integrated protection approach, understanding the specific risks and vulnerabilities of women and girls.**



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- **Enhance and promote information sites such as dopomoha.ro to effectively share information with FDPs. Build upon existing networks through which FDPs are sharing information** —including informal channels such as Facebook groups and Telegram chats— to spread reliable and essential information.



II. Assessment framework overview



A. Working in partnership to support Women's Rights Organizations

VOICE and HIAS⁹ share a vision of supporting women's rights organizations (WROs) and women's groups across the region to lead on the Ukraine humanitarian response.

The partnership aims to help WROs, local civil society organizations (CSOs), and informal groups to shape humanitarian response, recognizing the unique impact of humanitarian emergencies on

women, girls, and other at-risk groups in all their diversity. It is critical that humanitarian actions—both within Ukraine and regionally—build upon the advances in gender equality and women's empowerment made by Ukrainian and regional women's rights activists, women-led groups, and CSOs.

In addition to supporting direct service delivery by local organizations, HIAS and VOICE together will continue to advocate for the need to support WROs with un-earmarked crisis funds.

About VOICE

VOICE believes that the humanitarian sector must deliver on its promise to protect women and girls—and that women and girls themselves must lead that revolution. We are confronting one of the world's oldest and most widespread human rights abuses: violence against women and girls (VAWG). We challenge traditional, ineffectual methods of addressing VAWG in humani-

⁹ HIAS, the international Jewish humanitarian organization that provides vital services to refugees and asylum seekers, has been helping forcibly displaced persons find welcome, safety and opportunity for more than 130 years. Currently working in more than 17 countries, HIAS is responding to the war in Ukraine through its core programming areas, including Economic Inclusion, Mental Health and Psychosocial Support, Legal Protection, and Prevention and Response for GBV, with a focus on violence against women and girls and individuals identifying as LGBTQIA+.

tarian emergencies, with a proven but chronically underused resource: the leadership of women and girls themselves.

VOICE's approach, steeped in women's rights practice, offers something new and necessary in the fight to end VAWG. We are working toward a world where girls and women are respected leaders in designing and implementing solutions to eradicate violence—both in their communities and within the halls of power. Ultimately, VOICE's goal is greater direct resourcing of local women's organizations and their solutions to address violence. We help meet the needs of women- and girl-led organizations in a growing number of countries, including Afghanistan, Bangladesh, Colombia, Hungary, Iraq, Moldova, Myanmar, Pakistan, Poland, Romania, Slovakia, South Sudan, Syria, Ukraine, the United States, Venezuela, and Yemen.

B. What we did

VOICE's approach to this assessment is steeped in international best practices and centered on WROs identified through our network. Our focus on WROs is grounded in the recognition that these organizations are and will always be the first to respond, and have the most creative and timely solutions to address the risks of women and girls.

The VOICE assessment team spent 10 days in Romania conducting this rapid assessment, which focused on the needs of women and girls affected by the war in Ukraine and the needs of WROs, CSOs, and groups responding to the emergency.¹⁰

¹⁰ The overall assessment framework was envisioned and conducted by a team of VAWG and women's rights activists and practitioners from Eastern Europe and Ukraine; seasoned gender-based violence in emergencies (GBViE) technical specialists; a conflict medicine/nurse practitioner sexual and reproductive

During the assessment, the following key informant interviews (KIIs), focus group discussions (FGDs), and site observations were conducted:¹¹

- ▶ 28 KIIs with: 3 government social workers; 1 local government official; 6 Ukrainian forcibly displaced persons (from Odessa, Kharkiv and Mariupol); 8 NGOs providing VAWG/protection services; 3 NGOs providing VAWG or LGBTQIA+ services; and 7 meetings with UN agencies, INGOs and donors
- ▶ 2 FGDs: 1 with 3 forcibly displaced women from Ukraine; and 1 with 7 forcibly displaced women from Ukraine
- ▶ 6 site observations at: 5 refugee centers (including discussions with management); and 1 government transit center not yet in use

All information shared was treated as confidential to ensure principles of Do No Harm. Through the assessment, the team was able to develop

health (SRH) expert; LGBTQIA+ practitioners and activists; a trauma-informed stabilization expert; and VOICE Leadership Team members, including the Executive Director and the Emergency Response Director. This dynamic team brought global, regional and local expertise together with a range of language skills and deep connections to Ukraine and Eastern Europe—building from years of VOICE's work in the region and from the specific and unique expertise of the assessment team.

¹¹ Questions were focused around the following areas of inquiry: concerns for women and girls at border crossings and while on the move; overall safety concerns in their current location; any discrimination specific groups have experienced or have been witnessed to have experienced; GBV risks for women and girls (including sexual exploitation and abuse); availability and accessibility of facilities and services; cash assistance, cash distributions, access to cash, and remaining levels of financial resources; shelter sites and private accommodations and the risks and concerns of each; legal documentation and access to legal services; access to health services, including sexual and reproductive health services such as the clinical management of rape, abortion, and pre- and post-natal care; access to good and decent work; and language accessibility through existing service provision.

a clear picture of cross-cutting risks for VAWG across the emergency response and how they are interlinked with access to essential services.

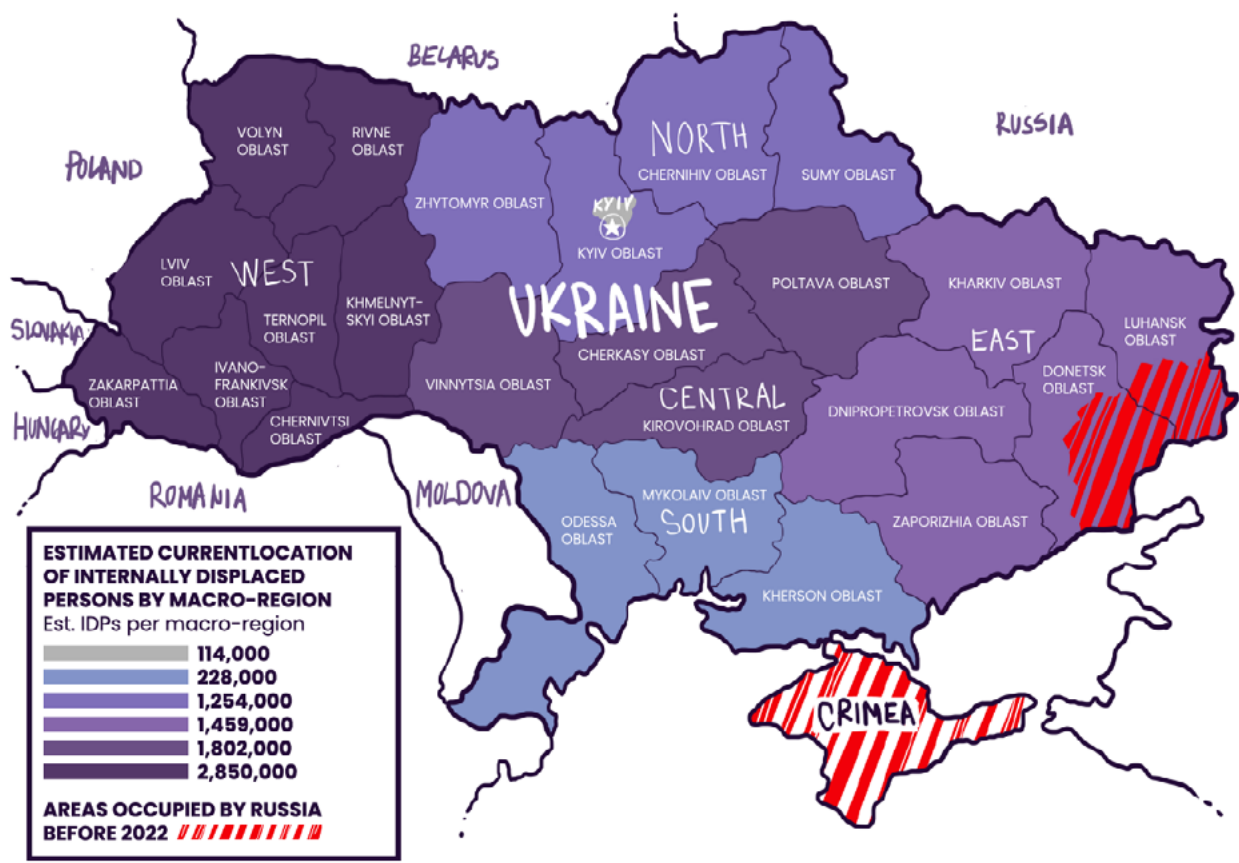
C. Limitations

Due to the rapid nature of data collection in a complex and fluid environment, this was a rapid needs assessment and not intended to be a comprehensive risk and needs assessment. There were limitations of time, areas covered, COVID-19 pandemic precautions, and safety and security concerns. The approach was grounded in and directed by adherence to ethical considerations, which at times prevented interviews and discussions from happening. In many instances, the level of visible trauma was such that it would

not have been ethical to ask different protection questions. Lastly, information was challenging to obtain in Romania, and while official numbers and data were triangulated, it was almost impossible to find consistent and reliable sources of information.

In interviews across the five border countries assessed (Hungary, Poland, Romania, Moldova and Slovakia), forcibly displaced Ukrainian women were often reluctant to share or "complain," and they expressed gratitude for the support they were receiving. This raises the question of whether women were under-reporting instances and risks of violence.

Map of Ukraine



III. Romania background information



A. The humanitarian emergency in Romania

As of the May 15, 2022, over 919,000 forcibly displaced persons (FDPs)—primarily Ukrainian—have entered Romania,¹² with approximately 80,000^{13,14} remaining in the country. The response by the Government of Romania and Romanian civil society has been strong, providing comprehensive support during an unparalleled crisis. Despite loopholes and inconsistency in enforcement, there are systemic efforts to provide FDPs with safe shelter, protection against trafficking,

and access to mental health and psychosocial support (MHPSS).

Essential efforts in protection and basic services from civil society, however, have been underfunded or not funded at all. WROs, CSOs, and United Nations (UN) entities shared significant concerns that the influx of FDPs into Romania will increase, while dwindling private donations will make it difficult to maintain current levels of support. While there is a national-level government response to the crisis, much of it has been delegated to local councils, and it is unclear if they have the budget or other resources to help. The response remains inconsistent, and information collection is not systematized, detailed, or keeping pace as services shift from emergency to mid- to long-term planning.

Romania is primarily considered a transit country for FDPs fleeing Ukraine, and those who have the ability and resources tend to move on to other countries in Europe. Due to the language

¹² UNHCR. "Operational Data Portal." *Ukraine FDP Situation*, 16 May 2022, <https://data2.unhcr.org/en/situations/ukraine>

¹³ Roșu, Iulia. "Câți Ucrainenii Au Rămas În România, de La Începutul Războiului, Din Cei Peste 700.000 Care Au Intrat În Țară" *Libertatea*, 14 Apr. 2022, www.libertatea.ro/stiri/cati-ucraineni-au-ramas-in-romania-de-la-inceputul-razboiului-4084795. Accessed 28 Apr. 2022

¹⁴ The Ministry of Internal Affairs does not provide updated data in regards to the number of FDPs who remain in Romania. The latest data is from April 14, 2022.

differences, those who remain in Romania face challenges in accessing essential services, interacting with government officials, finding employment, and accessing education.¹⁵

The ability for FDPs to attain temporary protection status (TPS) is inconsistent. For example, FDPs reported that accessing TPS was easy and relatively fast in Suceava, whereas in Iași and Bucharest, the application process was very long and time consuming. The team also heard that government social workers at a local registration center misinformed women about when they could apply.

While Ukrainian citizens from the age of 16 have the right to travel abroad unaccompanied, Ukrainian FDPs aged 16 and 17 are recognized in Romania as unaccompanied minors who need an official authorization from a parent or guardian. They are accommodated separately in specific government shelters, and Romanian officials at the border help them to contact their parents for verification, after which they can continue their journey.

Overall, FDPs said they felt safe crossing the border and had no difficulties with Romanian authorities. Another indication of the relative level of perceived safety in crossing the Ukrainian-Romanian border is the number of women crossing back and forth between the two countries, either for work or to visit male relatives who are unable to leave.

B. Pre-existing prevalence of GBV in Romania & existing legal framework

¹⁵ The national official language in Romania is Romanian, spoken by 90% of the population. Other languages such as Hungarian, Romani, German, and Turkish are also spoken by ethnic minorities.

The overall context of gender-based violence (GBV) in Romania is complex. Between 2003 and 2021, legislation has been strengthened toward the prevention of GBV and assistance for survivors.^{16,17} However, mandated reporting requirements remain unclear, and it is unknown if there is a legal obligation of medical and law enforcement personnel to report sexual assault.

Romania ratified the Council of Europe Convention on Preventing and Combating Violence Against Women and Domestic Violence (also known as the Istanbul Convention) on May 23, 2016, and it entered into force on September 1 of the same year.¹⁸ According to the Convention, Romania is obliged to establish protection and support mechanisms to respond to violence against women, such as organizing enough shelters for survivors of GBV and domestic violence; creating crisis centers for survivors of sexual violence; organizing free round-the-clock help-lines; and implementing a program of psychological counseling and medical care. However, recent years have seen a growing opposition within Romania to the Convention, and cases of domestic violence are increasing. Organizations argue that this increase is not due to an actual increase in incidence, but because more survivors are reporting cases to the authorities.¹⁹

¹⁶ Săsărman, Mihaela, et al. Raport de Monitorizare a Serviciilor Existente Pentru Victimele Violenței Domestice Și Agresori În Vederea Realizării Unei Hărți Naționale. Centrul Filia, Asociația Transcena, Asociația Anais, Asociația E-Romnija, Asociația Front, 2021, https://violentaimpotrivaefemeilor.ro/wp-content/uploads/2022/04/RAPORT-SERVICII_VIF.pdf

¹⁷ Some important laws include Law no. 25/2012, which introduces protection orders; Ordinance no. 6/2015, which institutes an Equal Opportunities Department; Law no. 351/2015, which determines the time for obtaining a protection order to 72 hours; Law no. 106/2020, which includes cybernetic violence as a form of violence; and Law no. 146/2021, which requires the electronic monitoring of aggressors during judicial and penal procedures.

¹⁸ "Chart of signatures and ratifications of Treaty 210." Council of Europe Portal, 14 May, 2022. www.coe.int/en/web/conventions/full-list?module=signatures-by-treaty&treaty-num=210. Accessed 14 May, 2022.

¹⁹ Săsărman, Mihaela, et al. Raport de Monitorizare a Serviciilor Existente Pentru Victimele Violenței Domestice Și Agresori În Vederea Realizării Unei Hărți Naționale. Centrul Filia, Asociația

“I consider this as ‘positive,’” said one WRO representative, “as it means more women are coming forward to report.”

COVID-19 has worsened the GBV situation in Romania in several ways.²⁰ The number of cases of any form of GBV in the first six months of 2021 were higher than in the same period in 2020.²¹ Because of lockdowns, women were forced to stay in the same house with their aggressors, which led to greater violence in the home; the National Agency for Equal Opportunities between Men and Women announced that from March to October 2020, they received 1,394 calls reporting domestic violence cases.²² During isolation, survivors could not access judicial and social assistance or medical treatment, and most counseling support had to be held online or via phone—excluding women with limited internet access from accessing these services. Despite the increase in GBV, WROs say they have not received additional funding from donors, and they currently receive no funding from the government of Romania.

Romania is one of the primary source countries for sex and labor trafficking victims in Europe. The National Anti-Trafficking Agency (ANITP) was founded in 2011 to lead the national response, and has organized training for police,

social workers, labor inspectors, and frontline officials on investigating trafficking cases, victim identification, and assistance. ANITP also collaborated with important institutions, such as the Romanian Orthodox Church, to raise awareness of prevention and protection measures. In 2020, 72% of identified victims were sex trafficking victims, and nearly 50% were children. Despite the government’s growing efforts to increase law enforcement, reports show their efforts are hindered by low-level official complicity in trafficking, deficits within law enforcement, knowledge gaps, insufficient services provided to survivors, and limited financial assistance to non-governmental organizations (NGOs).

C. Overall healthcare system in Romania

Before the war, the healthcare infrastructure of Romania ranked last in Europe for its overall capabilities and quality of care. While considerable improvements have been made in recent years, including the recent opening of a children’s cancer center in Bucharest, many citizens experience health disparities and problems with accessing care²³. While the government has started letting international non-governmental organizations (INGOs) and NGOs provide FDP-specific healthcare, emergency care is still largely sought through the existing system. With a pre-war personnel shortage of 30%, the FDP influx increases existing health inequity, which in turn increases the risks of exploitation and inaccessibility.²⁴

Romania has an open pharmacy system, which theoretically allows FDPs to continue to utilize their Ukrainian providers; however, it is unclear

Transcena, Asociația Anais, Asociația E-Romnja, Asociația Front, 2021.

²⁰ Alexandru, Adela, et al. *Experiențele Femeilor În Timpul Pandemiei. Starea de Fapt Și Recomandări Pentru Măsuri Post-Criză Sensibile La Gen.* Centrul Filia, Agenția Națională pentru Egalitate de Șanse între Femei și Bărbați, 2021, https://coronavirus.centrulfilia.ro/wp-content/uploads/2021/01/Raport_Online_ro-1.pdf

²¹ Rețeaua pentru prevenirea și combaterea violenței împotriva femeilor. *Împreună Pentru Siguranța Femeilor: Proiect de Intervenție Multidimensională Împotriva Violenței de Gen.* 2021, <https://violentaimpotrivafemeilor.ro/impreuna-pentru-siguran-ta-femeilor-proiect/>. Accessed 20 Apr. 2022.

²² Agenția Națională pentru Egalitatea de Șanse între Femei și Bărbați - ANES. “Sună la linia telefonică națională destinată victimelor violenței domestice.” Facebook, 3 Nov. 2020, <www.facebook.com/egalitatedesanse/posts/1830346667121967>. Accessed 20 Apr. 2022.

²³ Thelwell, Kim. “5 Facts about Healthcare in Romania.” The Borgen Project, 5 Aug. 2020, <https://borgenproject.org/health-care-in-romania/>. Accessed 20 Apr. 2022.

²⁴ Romania: Health Care Units by Type 2020. Statista, July 2021, <www.statista.com/statistics/1139381/romania-health-care-units-by-type/>. Accessed 20 Apr. 2022.

whether FDPs know this or are doing so. Many FDPs stated that they are using public emergency services free of cost, when needed. Medication is not free, however, and most FDPs were unable to afford their prescriptions, despite Romania's generally low drug prices. Healthcare infrastructure for FDPs in Romania may have (temporarily) created new pathways for obstetric care, pediatrics, primary health, and oncologic care—pathways that do not exist in neighboring countries and that may not be known or fully accessible to FDPs. There is a lot of general information but very little specificity or clarity on how FDPs can access healthcare; many are utilizing the emergency rooms, as they are free of charge. However, one shelter manager said that TPS is necessary in order to register with a family doctor, so it is unclear if these pathways are accessible without TPS. Although the website dopomoha.ro pro-

vides a hotline in Ukrainian and English, the assessment did not encounter any FDPs who knew about this number or any specialized pathways.



IV. Findings

WROs and forcibly displaced women reported that they are most concerned about trafficking; protection concerns related to shelter and unsustainable housing; a lack of access to livelihoods and cash-based assistance; inconsistent access to reliable information; barriers in accessing GBV, reproductive healthcare, and MHPSS services; and discrimination against Roma and LGBTQIA+ communities.

Grants received to date have been smaller, earmarked, project-specific, and focused on FDPs, leaving NGOs without the core funds needed to maintain the overall health of their organizations. Many of the available funds are restricted, which robs NGOs of their agency to determine how best to respond to the rapidly-changing needs of FDPs. As one WRO manager expressed, “I need real resources and I need the freedom to spend the money because the needs change.”

A. Needs and risks of women’s organizations, groups and collectives²⁵

There is a strong presence of Romanian WROs and NGOs who have been on the forefront of the response since the first day of the crisis, providing support, shelter, and transportation to FDPs before international agencies arrived. However, these organizations are in need of core support and unrestricted funds to continue this work. Six weeks into the crisis, they were still waiting for funding and support from larger international and multilateral donors, despite frequent visits from donors who praised their work. “None of the larger institutions have reached out,” said one NGO representative. “It’s not clear that they want to work with us.” These organizations—especially those providing GBV services—are already under tremendous strain as a result of the COVID-19 pandemic.

“We have appealed to specific UN agencies and ... nothing [has happened yet].” “We are connected to them [the UN], they know about our work. They have seen the center. But yes, please, tell them we need resources, we have asked and haven’t heard back.” — Local women’s organization

Hiring new staff for time-limited projects also creates more burden for existing staff and runs counter to most organizations’ culture, which is premised on investing in staff for the long-term. Furthermore, organizations noted that highly qualified and experienced staff are less likely to apply for short-term positions, which risks lowering the overall quality of services they are able to provide. One WRO director complained that international funders often provide insufficient funding levels to cover the significant overhead costs organizations have, due to the 45% Romanian income tax on salaries. Another NGO director mentioned his organization is not able to offer employees competitive salaries, which makes it difficult to find and retain qualified workers.

NGOs complained about time-consuming proposal and application processes, as well as the administrative burden of donor reporting, which

²⁵ The assessment team held in-depth discussions with women-run organizations; organizations addressing GBV and gender protection; LGBTQIA+ organizations; and feminist organizations. Unfortunately, it was not possible to meet with Roma organizations or those specifically supporting individuals with disabilities/special needs or the elderly, although some organizations were supporting these individuals.

often necessitates diverting valuable staff time just for this function. A director of a GBV WRO mentioned in relation to applying for different funds: “Look at all of these stacks of papers. I used to be an expert in preventing gender-based violence, now I am an expert in paper.” Another NGO manager explained:

“[It’s a] huge, huge amount of paperwork; the report you have to give back is crazy. How do I explain? You [donor] give me 1000 lei [250 USD] for a stove, and every week, we have to report on that stove. Then we have to push our way into people’s houses and take a picture of them pretending to cook or smiling? This is an intimacy issue. I wish the donors would understand that. Thank you for listening; this is another thing [donors aren’t doing].”

From a stabilization perspective, funding FDP-focused projects could cause resentment among local vulnerable populations who continue to require support from these organizations. “Everyone is giving to refugees,” said one local woman, “and no one is giving to my children.” WROs are concerned about securing funding for their core work of supporting Romanian women and vulnerable populations; many rely on funds from private donors or international grants, who have now shifted to providing funds only to the FDP response. Many say that they have just enough funding to cover the bare minimum of programming and no funding to expand into areas they see are critical to advance innovative and needed GBV programming.

The lack of long-term funding, constant hoop-jumping, and what WROs see as donors' lack of listening and trust are stretching organizations

thin and exacerbating burnout amongst their staff. “We are therapists, we know about self-care, we just don’t have time,” said one WRO leader. “We are hoping to find some time to relax over the Easter holiday. It will be our first break.”

At the level of the government, a high-level decision-making task force was established on the first day of the war under the coordination of the Prime Minister. There is also an operations task force called the Ukraine Commission overseeing the activities of the ministries involved. Representatives of CSOs, INGOs, UN Agencies, and private actors are theoretically part of both, but in practice, rather than integration and co-operation, NGOs report these parallel structures only take up precious time with duplicate meetings.

Local groups want the UN to build the capacity of Romanian NGOs to lead the FDP response, rather than funding INGOs who will poach the staff of Romanian CSOs and erode their capacity. “It’s a matter of who will do the work six or seven months from now,” remarked a Romanian NGO leader. Though overwhelmed by the magnitude of the crisis, UNHCR staff reported wanting to engage with those involved in the response. This engagement requires urgent sustained funding from the UN or other institutions to keep local organizations providing necessary services. If the international humanitarian community and donors continue to push back against local realities, the response will fail to deliver life-saving services to women, girls, and the LGBTQIA+ community.

B. Trafficking Risks

Sex and labor trafficking is a high risk at the border and beyond in Romania. There have been moves to systematize anti-trafficking and anti-exploitation by the Government, as well as by some WROs and CSOs, through registering

volunteers, organizations, and those providing transportation services. The government is now providing transportation to different centers and towns, which increases protection; however, these efforts are applied inconsistently at the various border crossings. The registration process does not include a background check, and one volunteer at the Siret border said he was simply asked if he spoke Russian or Ukrainian and then given a badge to start working. An organizing body for CSOs holds weekly meetings to coordinate and troubleshoot their efforts, but this group lacks an accountability mechanism; in one case, this prevented the reporting of a registered male who was observed asking a small child for a kiss “on the lips” in exchange for a cookie. Without consistent security at the border, potential traffickers have easy access to potential victims. One person working at the border said that an unknown man had approached and told her to “bring him 3 female refugees” to transport.

Several WROs interviewed shared a growing concern that unaccompanied minors are at high risk of trafficking. There are children who have been sent from Ukrainian orphanages to the Romanian child protection systems; these children have crossed the border in various ways, and their safety cannot always be verified.

“We are concerned about the children who crossed the border with uncles or aunts or grandparents, or even children who fled in the care of their teachers or coaches. Many of them were let in in the early days of the conflict and are still not identified.” — WRO Representative

Staff of one center highlighted the critical need to engage women directly and frequently on trafficking issues, as they are increasingly vulnerable

to sophisticated trafficking attempts.²⁶ One example was given of a man who was promoting himself through social media as representing an American OB/GYN association, offering to shelter 10 pregnant women. One woman invited him to the shelter, which had significant security and registration processes in place. The manager, realizing it was an attempted trafficking, tried to dissuade the women, who insisted they wanted to stay with him. She sent a social worker with them to the accommodations, which had no internet, no supplies, bare rooms, and no TV. Realizing what was happening, the women went back to the shelter. In another example, a man came to the center offering to accommodate 14 children in a remote mountain lodge. Both of these men were reported to authorities.

With the outpouring of support and generosity, volunteers are generally applauded for offering rides, accommodation and other services. With this narrative in the media, a trafficker can pretend to be just another selfless person providing shelter and support. The reliance on volunteers by government and NGOs is a considerable risk as well, as they are not always screened or trained.

At the registration office in which women may be standing in line for hours, the team observed individuals who are likely posing as volunteers who are asking for personal data and information, underscoring the need for professionalized services, deep screening of personnel, interpreters, and accompaniment. One anti-trafficking expert said, “I see trafficking potential everywhere.” Risk of exploitation and trafficking is also significant beyond the borders, especially in private accommodations for FDPs, as described below.

²⁶ The manager stated that most women simply do not believe that they would be targeted for trafficking.

There are significant efforts to provide comprehensive information related to trafficking risks and access to basic services through distribution of flyers, information posters, and the website dopomoha.ro. However, this amount of information can be overwhelming, particularly when an individual is in a state of shock or trauma. In addition, trafficking efforts are sophisticated with credible cover stories, advertising on social media, and direct appeals. In several cases, it was only the effort of women on-site directly intervening that prevented a trafficking attempt. Despite the availability of written information on how to identify trafficking at transit centers, WROs say that without constant psychosocial and protective services, women and girls remain highly vulnerable. Women need access to ongoing specialized conversations where they can access comprehensive information related to the range of protections issues they face. This is critical to reduce the risk of violence women and girls are facing.



C. Shelter, sustainable housing, and food insecurity risks

There are three different types of shelters/transit sites in Romania: fully government-run sites (unobserved by the assessment team); government and NGO jointly-run sites (observed); and fully private sites (observed). The government/NGO hybrid model primarily relies on the services, expertise, and funding/donations of the affiliated NGO. Government support is provided at the local level, and local government engagement varies; in most cases, NGOs mentioned that local government support is limited to the provision of physical space, with NGOs managing operations (including paying for utilities, internet service, etc.), providing essential services, and securing funding from donors, donations, or their current reserves.²⁷ This is a major burden on the NGOs, who are also responsible for the safety and well-being of FDPs for an indefinite period. Most centers are only surviving week-to-week, relying on the generosity of decreasing donations and the labor of staff and volunteers.

Most of the NGOs interviewed had experience with vulnerable groups and protection issues and had solid protective measures in place. Some could facilitate access to psychosocial support depending on the availability of translation, and they were able to assist with registration and medical support. Case management and referral services seemed to be available from a small number of WROs who consider themselves secondary responders in support of shelters. However, they too expressed challenges in providing services due to the lack of qualified and professional translation services.

²⁷ A notable exception to this was the Sibiu local council, which a local NGO invited to join a conversation with the assessment team on the FDP response. Overall, the local council and civil society seemed to be coordinating together to address a range of FDP needs.

The most pressing issue related to shelter is determining a plan for stable, safe, and sustainable accommodations in the mid- to long-term. NGOs all shared the concern that FDPs are mostly housed in private accommodations, where their well-being cannot easily be verified and risks of exploitation, GBV, and trafficking exist. There are measures in place to screen hosts who register on dopomoha.ro, with small fines for hosts who do not comply.²⁸ Some FDPs have been provided with information on how to get help and report hosts who break the law, but activists say these measures are inadequate. Many FDPs who find their housing through chat rooms and word-of-mouth are completely without protection if they have a predatory host. The government is offering reimbursement for accommodation and food to hosts if they register, but there is no guarantee that the food will go to the FDPs. One forcibly displaced woman called for Ukrainians to be accompanied to their accommodations to ensure the safety and appropriateness of the location and accommodation. This is an example of how critical it is to hear directly from women about how best to mitigate risks of exploitation and abuse, and keep them safe from violence.

FDPs reported finding accommodation either with the help of volunteers at the border crossings or through personal contacts, Facebook groups (such as "Ukrainians in Romania") and Telegram chats, which remain the main sources of information for newcomers. Some used dopomoha.ro and similar platforms to search for housing, but noted the lack of description of offered accommodations.²⁹ Some apartments

offered on these platforms turned out to not be child-friendly, and as mentioned above, some offers of shelter can be fronts for trafficking and abuse.

D. Lack of cash-based assistance, livelihoods, and access to decent work

Ukrainian FDPs are not required to have TPS or a work permit to gain legal work in Romania for the first 90 days of their stay. The language barrier, however, is a stated obstacle to finding meaningful and decent work.³⁰ The government of Romania has provided an expedited process for licensing in specialized professions, and some NGOs responding to the crisis have hired FDPs with English language skills to help with the humanitarian response; however, these opportunities are few and often only provide short-term work. Several WROs emphasized the importance of creating support systems for FDPs to provide meaningful employment. Many noted that women are highly capable, and work would provide an important psychosocial benefit, enhance a sense of dignity and purpose, and address the urgent need for financial independence. This financial independence also creates space for women to provide for their families and makes them more resistant to the exploitation they may face.

²⁸ GoR has published fines of 100-300 lei (20 - 75 USD) on dopomoha.ro

²⁹ Dopomoha.ro is the main website created specifically to provide FDPs with detailed understanding of their rights and how to access services and is highlighted in all posters, pamphlets and other materials FDPs receive. Despite this, only about 30-50% of the FDPs spoken to knew about the site or accessed it for information. Members of the assessment team speak fluent English, Romanian, Ukrainian, and Russian, which are also the languages available on the dopomoha.ro site. Despite fluency in multiple languages, the team had to cross-verify specific details that

weren't clear on the site, particularly related to TPS and access to different essential services, and are still not 100% confident in their understanding of the information. This only pushes FDPs to rely on chat rooms and word-of-mouth information, which may not be accurate and increases reliance on hosts.

³⁰ The International Labor Organization defines "decent work" as sums up the aspirations of people in their working lives. It involves opportunities for work that is productive and delivers a fair income, security in the workplace and social protection for families, better prospects for personal development and social integration, freedom for people to express their concerns, organize and participate in the decisions that affect their lives and equality of opportunity and treatment for all women and men. www.ilo.org/global/topics/decent-work/lang-en/index.htm

FDPs are running out of cash, and cash and voucher assistance (CVA) is not available yet for the majority of FDPs.

The UNHCR CVA program is still in the pilot phase, with the full rollout delayed at the time of writing; amounts and distribution modalities are not yet known. The process to access cash will require FDPs to sign up through dopomoha.ro for an in-person appointment, and mobile teams will be available to register people. If the cash assistance program is targeted largely to people living in shelters, it will fail to reach the many women and children who are housed in private accommodations and who may require more cash for basic needs that are often provided in shelters. The assessment team did encounter two NGOs managing shelters who received one-time vouchers from an INGO to distribute to FDPs. The distribution mechanism was not consistent across centers, and managers did not know how many more rounds of vouchers, if any, they would receive.

One-time CVA is not sufficient to address medium or long-term needs, and there is a critical need for support beyond this acute phase. The dopomoha.ro site states that once an FDP receives TPS, they are eligible for state unemployment of 525.50 lei (115 USD) per month, but this could not be verified. It is unclear how one would sign up for this assistance, whether this support will be long-term, or how it relates to UNHCR's CVA program.

Women cannot work if they do not have access to schooling for their young children or daycare options—putting further strain on them to provide for their families. The government guarantees access to education to all displaced children, even those without TPS; however, language is a considerable obstacle. Local governments are trying to either provide Ukrainian language classes or help students integrate into Romanian-speaking classes. According to dopomoha.ro there are 45

schools, 10 high schools, and three universities that teach in Ukrainian; however, the schools are not listed. Another obstacle shared by a shelter manager is overcrowded classrooms: in one case, a refugee's son was only able to attend for one of the three hours of class time due to overcrowding. Some children are attending remote classes with their Ukrainian teachers, but access to hardware and the internet remains a barrier. FDPs have little knowledge of education options beyond the few classes organized at private institutions, such as the Finnish school in Bucharest. Relying on donations, private courses may not be sustainable without long-term funding.³¹

E. Lack of access to accurate information

FDPs fleeing Ukraine, including non-Ukrainian citizens, can immediately apply for TPS upon entering Romania, which would allow them to live and work in the country for one year. Due to the visa-free regime between the EU and Ukraine, Ukrainian citizens who have a biometric passport can stay legally in Romania for 90 days without TPS. Most Ukrainian FDPs interviewed said they were still waiting to decide whether to apply for TPS; they were hoping the war would end before 90 days so they could go home. Many are not sure they want to stay in Romania and may move on to a third country; others are applying for temporary migration to Canada.

Misinformation related to TPS is adding confusion to the process. One of the main (inaccurate) concerns articulated by FDPs is that if they apply for TPS in Romania, they will not be able to receive it in another country if they want to move on, and because of this they do not apply. There is also a lack of public understanding around Romania's 90-day period of stay being

³¹ A Sibiu local council member mentioned that they are in the process of helping to arrange Ukrainian language education.

separate from that of the Schengen area.³² Some government officials have been telling FDPs incorrectly that they cannot apply for TPS during their 90-day initial period, suggesting confusion within the government itself. While *dopomoha.ro* provides information on TPS and asylum, it does not explain the differences between them, further adding to confusion.³³ The site does not provide the nuanced details needed for FDPs to understand how to access essential services. In addition, if the government continues with a decentralized approach in which local councils take the lead on area-specific responses, the local councils need to provide local information through websites and information services.



³² Romania is part of the EU, but not part of the Schengen system, which also seems to create some confusion, as stay in Romania is not calculated in the overall period of stay for the Schengen area. Instead, the 90-day limit is calculated individually for Romania and other EU states that are not in the Schengen area; for instance, after a 90-day stay in the Schengen area, the person can immediately travel to Romania and stay for another 90 days there. It is not clear if Ukrainian FDPs are aware of this EU rule; if they are, this may be an additional reason for hesitating with applying for TPS in Romania. European External Action Service (EEAS), *Frequently Asked Questions on the Schengen Visa-Free*, www.eeas.europa.eu/sites/default/files/visa_waiver_faqs_en.pdf. Accessed 25 Apr. 2022.

³³ Asylum seekers have the right to receive 20 lei (4.2 USD) per day, which they receive monthly at the Regional Accommodation and Procedures Center for Asylum Seekers where they are registered.

F. Reproductive health and GBV services

Access to reproductive healthcare in Romania is limited, even for nationals. While abortion is legal through the 14th week of gestation³⁴ or the 24th week for medical reasons,³⁵ availability of resources and willing providers is increasingly limited.^{36,37} All abortions are surgical, with no option for medical abortions; however, emergency contraceptives (the "day-after pill") are available without prescription. During the COVID-19 pandemic, abortive care was no longer listed as a required service to be offered at public hospitals, although WROs did state that it was still available through some doctors in public hospitals; the problem, however, is finding those specific doctors. While private abortions are still available, the cost is significant at around 720 USD.

There is broad availability of a range of contraceptives, but they are costly, which may limit accessibility. Access is also limited in rural areas, primarily due to a lack of family planning services and the conservative views of older, more 'traditional' medical providers. With the increasing influence and popularity of 'neo-protestant' churches, there is a growing pro-life movement and an intensifying push to restrict women's reproductive rights to include anti-abortion and anti-contraception positions. Anti-LGBTQIA+ forces are increasing as well, including a failed attempt to regulate marriage as a union between "a man and a woman" in 2018.

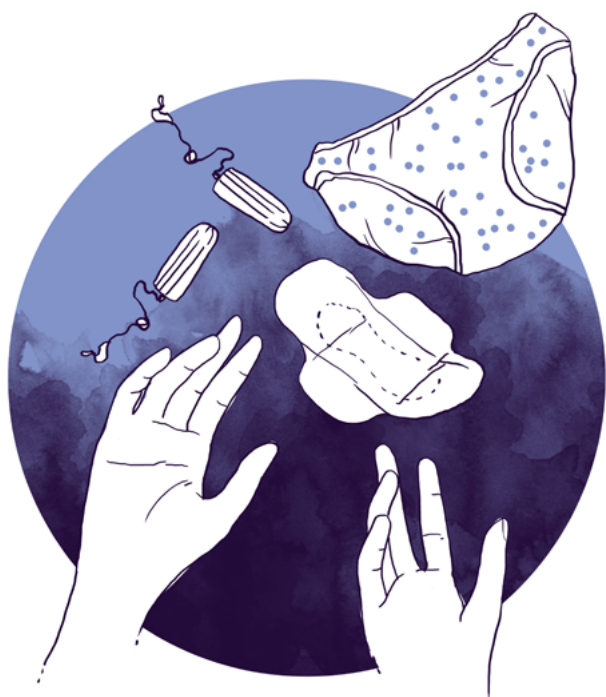
³⁴ "Art 201/1(c) - Abortion Bill." Penal Code.

³⁵ "Art 201/6 - Abortion Bill," Penal Code.

³⁶ Benavides, Lucía. "Activists Say Romania Has Been Quietly Phasing Out Abortion." National Public Radio, 1 Sept. 2021, <https://wamu.org/story/21/09/01/activists-say-romania-has-been-quietly-phasing-out-abortion/>. Accessed 23 Apr. 2022.

³⁷ In 2019, over 30% percent of hospitals in Romania were refusing legal abortions. See more at: <https://theblacksea.eu/stories/quarter-hospitals-romania-are-refusing-legal-abortions/>

FDPs face language barriers to accessing GBV and reproductive health services, and FDPs in private accommodations (who are the majority of FDPs) face additional obstacles to accessing services. For those accommodated in NGO-run centers, NGOs are either providing access to GBV services or are able to facilitate access to these services. Some WROs (unaffiliated with shelters) mentioned that they have provided limited services to FDPs and/or are ready to provide those services. They mention the need for properly trained translators or Ukrainian/Russian speaking therapists on their teams. FDPs are mainly relying on localized chat groups to self-organize support and share information related to services. One local official suggested “a live chat, staffed with Ukrainian or Russian speakers, to provide FDPs with detailed and accurate information at the local level in real time.”



G. Mental health and psychosocial support

Provision of mental health and psychosocial support (MHPSS) services is limited for FDPs and generally only available to those who are

in centers. One center provides structured conversations with women about trafficking and how to access different services. Others hold discussions on psychosocial or protection issues as needed if they have the in-house capacity. All centers visited facilitate specialized support for specialized services, including medical and often psychological aid.

Those providing psychological support require and are asking for specialized rapid training on trauma/crisis intervention, as their current training in psychology or social work is not well suited to respond to the needs of FDPs in this crisis.

The lack of translation/interpretation has been noted by WROs as one of the main inhibitors to providing psychosocial support—and often the services being provided are done through volunteers who may not have the technical expertise. In particular, male interpreters may have adverse and harmful personal opinions or beliefs related to gender protection issues, which impacts their ability to provide unbiased and clear interpretation. In addition, given the high levels of violence against women and girls in this crisis perpetrated by men, it is a best practice to use women interpreters when possible.

H. Double discrimination against populations of concern

Roma, LGBTQIA+, people of color, and other marginalized people who already face discrimination across the region are likely to be those most greatly impacted by the current crisis. Transgender women are reportedly undergoing humiliating “bio-medical” checks in a tent at the border (on the Ukraine side), and those who have not undergone gender-affirming surgery are









being immediately conscripted and sent back. There were also several racist incidents reported through several media sources in Gara de Nord (Bucharest) involving Roma families being kicked out of the waiting room where food and other necessary resources were available, and being neglected by volunteers and officers when asking for logistical help.³⁸

³⁸ Meseșan, Diana. "REPORTAJ. Ce Au Pățit Niște Romi Săraci Din Ucraina Când Au Fost Confundați, În Gara de Nord, Cu Romi de La Noi Citește Întreaga Știre: REPORTAJ. Ce Au Pățit Niște Romi Săraci Din Ucraina Când Au Fost Confundați, În Gara de Nord, Cu Romi de La Noi." Libertatea, 9 Mar. 2022, www.libertatea.ro/stiri/reportaj-ce-a-patit-un-grup-de-romi-saraci-din-ucraina-cand-au-fost-confundati-in-gara-de-nord-cu-romi-de-la-noi-4022475. Accessed 25 Apr. 2022.



V. Recommendations and ways forward

These regional recommendations are foundational for the UN, Donor/Member States, the European Union, philanthropy, host country governments, INGOs, and local NGOs to implement. They are complementary to the country-specific recommendations included in this report.

ICON KEY			
 <p>United Nations (UN) Entities</p>	 <p>European Union (EU)</p>	 <p>Host Country Governments</p>	 <p>Government of Ukraine</p>
 <p>Feminist Philanthropy/ Feminist Funds</p>	 <p>Member State Donors</p>	 <p>LNGO (Local Non Governmental Organization)</p>	 <p>INGO (International Non Governmental Organization)</p>

1. Ensure a gender-sensitive humanitarian response by supporting women’s movements across the region

A commitment to sustaining the gains for women and girls made in previous decades must underpin all programming for internally displaced persons (IDPs) in Ukraine and FDPs in border countries, with robust challenges to the inevitable patriarchal backlash. For a gender-sensitive humanitarian response to be successful, women’s and girls’ organizations and other feminist and gender justice groups providing specialist services must be supported to sustain their networks, systems of solidarity, and collective peer care.

Recommendations:

- Fund programming tailored to the specific needs of the women and children fleeing Ukraine, as well as host communities in all border countries and beyond.** Funding should prioritize the prevention of and re-



sponse to trafficking and GBV, as well as access to healthcare, childcare, CVA and education. Funding must be flexible enough to support the core operations of WROs to ensure their stability both during and after the current emergency.

- **Design programs that will not rely on women and girls to provide unpaid or underpaid labor.** In most parts of the world, women are socially expected to care for other people in their homes, families and communities. Emergency program interventions must be built in ways to reduce the burdens of unpaid care work on women and girls, making every effort not to exploit them further. Make this a core principle of all programming, and ensure donors understand this as well.



- **Support local/national feminist priorities,** ranging from legal reforms and political participation to gender mainstreaming in public policies, ending VAWG, economic empowerment, and more. Look from a systemic perspective at how to best support local activism and political agendas of women's rights, feminist, and LGBTQIA+ organizations.



- **Understand the linkages between emergency response and women's rights movement-building work.** Donors who fund movements (rather than emergency response) need to understand that organizations' emergency response activities are inextricably connected to their movement-building work. Conversely, donors who fund emergency response and not women's rights work need to understand that to divorce funding from this reality will have major shortcomings in the outcomes of the response. The localization agenda must be supported and adhered to, cou-



pled with a critical lens that deeply understands why funding and linkages across the Humanitarian-Development Nexus³⁹ are essential to the goals we share of alleviating suffering and meeting humanitarian **needs, while strengthening existing systems and structures long term.**

³⁹ The Humanitarian-Development Nexus is the concept of increased collaboration between organizations working in short term humanitarian aid and long term international development promoted since 2016. Strand, Arne. "Humanitarian-development Nexus". *Humanitarianism*. Leiden, The Netherlands: Brill, 2020. https://doi.org/10.1163/9789004431140_049; and Stamnes, Eli. "Rethinking the Humanitarian-Development Nexus". *Norwegian Institute of International Affairs*, vol. 24, 2016, <https://ethz.ch/content/dam/ethz/special-interest/gess/cis/center-for-securities-studies/resources/docs/NUPI-Rethinking%20the%20Humanitarian-Development.pdf>.

2. Fulfill commitments to localization by shifting power to women-led organizations

Localization became a formal part of the mainstream humanitarian reform agenda through its inclusion in the 2016 Grand Bargain, a major reform agreement between humanitarian actors. The localization agenda is focused on increasing local actors' access to international humanitarian funding, partnerships, coordination spaces, and capacity building.⁴⁰ Localization is one key to upholding the rights of women and girls in emergencies, as local women's responses are often more relevant and effective than external ones.

⁴⁰ Robillard, Sabina, et al. *Localization: A «Landscape» Report*. Feinstein International Center Publication, Tufts University, December, 2021. <https://fic.tufts.edu/publication-item/localization-a-landscape-report/>.

Recommendations: Ethical partnership

- **Engage with local organizations and WROs as equal partners toward the enhanced protection of FDPs.** The meaningful participation of women and girls, including those from marginalized groups, should be facilitated in all decision-making processes, including in planning, coordination, implementation and monitoring.



- **Ensure WROs and other local actors are part of the (re)design of coordination structures from the beginning.** Structures should complement local efforts rather than create parallel processes, which traditionally keep power in the hands of UN entities and INGOs.



- **Avoid treating women's groups as homogeneous,** and understand groups' intersectional diversity based on age, religion, ethnicity, sexual orientation, disability status, etc.



- **Enable women-led organizations and activists as leaders and change-makers at all decision-making platforms,** including them within the cluster system, the UNHCR Refugee Response Plan, and all coordination structures. UN agencies and INGOs should take action to employ staff members who understand how to engage women-led organizations in a positive and productive manner.



- **Provide access to technology and address other barriers to WROs' participation.**



The VOICE-UNICEF [Partnership Assessment Guide \(PAG\)](#) provides an intersectional and feminist approach to partnership building that leverages both the resources that large funding agencies can bring, as well as the local presence and specialized knowledge that women-led organizations provide. Developed through a consultative process with women leaders in Afghanistan, Bangladesh, Kenya, Liberia, Sri Lanka and South Sudan, it provides a blueprint for a new format of partnership that centers the roles of groups and organizations that are often marginalized due to arbitrary criteria.

- **Hire bilingual coordinators to enhance locally-led coordination structures.** This not only enhances localization, but is also important for government and private shelters to ensure quality service delivery in health and psychosocial support. The coordinator can act as an interlocutor between the international and local actors.



Support and promote safe spaces (virtual or actual) for staff and volunteers in women- and girl-led organizations to meet, share experiences, and support each other.

Ensure these are focused on care for staff and volunteers and not implementation of activities, and ensure they are regular and prioritized events.



Recommendations: Funding

- **Increase stable and predictable funding for GBV programming, and support its expansion and accessibility by FDP women and girls.** This will help civil society actors respond more effectively to all forms of GBV, including sexual violence, intimate partner violence, trafficking, and SEA.



- **Provide flexible, multi-year, and unrestricted funding to local women-led organizations, including WROs, feminist organizations, and those who have been responding to the crisis in Ukraine. Include allocations for organizational strengthening and support to keep organizations sustained and healthy.** Organizations need to be trusted to determine how to spend funding according to evolving needs; just as INGOs and UN entities prefer unearmarked core funds, WROs and networks need access to the same funding flexibility. Funding and resources for WROs must be ring-fenced from the beginning and used to bolster the work these organizations are doing, especially at a time when the region's women's rights movements are facing historic threats. Include funds to reimburse WROs for costs they have incurred since the beginning of the crisis, allowing them to backdate expenditures as needed.



- **Fund both registered organizations and unregistered groups who are providing critical and urgent frontline response and services.** Supporting the sustainability of local response directly impacts the quality and scope of FDP crisis response.



- **Make it easier for WROs to access funding by reducing bureaucratic and administrative burdens.** Decrease the amount of paperwork required, and make funding mechanisms available in relevant languages as well as English so that English proficiency is not required (e.g., in Poland surrounding this emergency response, make funding mechanisms available in Polish and Ukrainian). Establish definitions and criteria for tracking against these commitments.⁴¹



⁴¹ *Feminist Humanitarian System Building Block I: Advancing Gender-Transformative Localization*. Women Deliver, 2018, https://womendeliver.org/wp-content/uploads/2019/09/WD_Humanitarian-Paper-WEB.pdf.

- **Invite WROs to lead on defining their scope of work, and take care not to incentivize 'NGO-ization'⁴² of local groups,** which threatens to derail them from their core missions. WROs should be asked what they need and what roles they would like to play as partners in the coordinated response. Work with them to unpack any unintended risks that could come with their participation.



⁴² 'NGO-ization' refers to the professionalization, bureaucratization, and institutionalization of social movements as they adopt the form of nongovernmental organizations (NGOs), which often leads to the de-politicizing of their social movements.

- **Convene current and potential grantees to discuss ways that donors (INGOs, international organizations, government/donor entities, and philanthropists) can sus-**



tainably fund local, women-led, and other feminist groups and organizations. These convenings should be non-burdensome to grantees, using approaches they agree on. Topics should include how donors can work to level the playing field.

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- **Make emergency funds accessible so that WROs can redistribute aid to women at greater vulnerability.**
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3. Address gaps in the protection of women and children

Given the unparalleled levels of funding that have gone into this response, along with the high level of humanitarian access to the border countries, it is paramount that essential life-saving protection interventions —detailed below— are prioritized and strengthened.

Recommendations:

- **All Call to Action on Protection from Gender-based Violence in Emergencies⁴³ (CTA) partners —especially donor/member states and international organizations— should continue to strengthen donor accountability to the Road Map⁴⁴ to promote increased transparency around what each government/donor entity is investing in GBV or, at minimum, the efforts they are undertaking to influence their investments so that they are applied to GBV response and prevention efforts.**



⁴³ The Call to Action is a multi-stakeholder initiative specifically aimed at driving change and increasing accountability of the humanitarian system on its response to GBV in emergencies.

⁴⁴ *The Road Map* is the Call to Action's overarching guiding framework that sets out common objectives, targets, and a governance structure to ensure that pledges are translated into concrete and targeted action on the ground. www.calltoactiongbv.com/what-we-do

- **Incorporate the views and contributions of FDPs into program monitoring to ensure Accountability to Affected Populations (AAP),** which all coordination systems (clusters/working groups), INGOs, and UN agencies have endorsed commitments to. In the preparatory stage, ensure that: women and girls participate in discussions on indicators and targets; mechanisms are developed for girls and women to provide feedback safely; and findings are used and disseminated. Anonymous feedback is also a key component of the prevention of SEA. Feedback can be collected by installing complaint boxes, distributing feedback forms, offering a website to visit or a toll-free number to call or text, and other means.⁴⁵ Communication with affected people should come through their preferred and trusted channels and media. Ensure participatory program design and continuous monitoring to ensure the response adapts to meet changing protection needs.

⁴⁵ Paragraph redacted from: IASC, *With us & for us: Working with and for Young People in Humanitarian and Protracted Crises*, UNICEF and NRC for the Compact for Young People in Humanitarian Action, 2020.



- **Bring a gender power analysis to all interventions to expose the specific risks and vulnerabilities of women and girls within the response.** Design interventions and policies that take into account women's and girls' greater exposure to SEA, trafficking, and other protection concerns. Ensure the specific risks faced by double-marginalized groups of women and girls—such as women and girls with disabilities, LGBTQIA+, and Roma—are taken into account and advocated for.



- **Increase action to regulate unofficial transportation in the region to limit risks of SEA and trafficking.**



- **Support governments to collect and responsibly share FDP demographic data** disaggregated by age, gender, origin, and other factors to strengthen PSEA, anti-trafficking, and integration efforts. Lobby governments to collect and share data on FDP movement and aid delivery.



- **Expand implementation of and compliance with the existing Humanitarian Country Team Framework on Protection from Sexual Exploitation and Abuse (PSEA).** Maintain the inter-agency community-based complaints mechanism, and disseminate information to both host and FDP communities on what PSEA is, what their rights are, and how they can access the complaints mechanism. All actors in humanitarian response, including staff and volunteers, must be aware of their responsibilities and obligations related to PSEA, including reporting cases of SEA and maintaining adherence to codes of conduct. INGOs, local NGOs, and women's organizations should be engaged to monitor the risks of SEA, with specific attention to women and girls.



* with a focus on UNHCR

- **Institutionalize the use of the [Guidelines for Integrating GBV Interventions in Humanitarian Action](#), the [Interagency Minimum Standards for GBV in Emergencies Programming](#), and the [Interagency Standing Committee Gender Handbook for Humanitarian Action](#) to inform service delivery.**



- **Host governments should be pressured to treat third country nationals, people of color, LGBTQIA+ people, and the Roma commu-**



nity fairly and without discrimination, including in accessing safe accommodation; providing adequate reception conditions; and receiving protection and integration support if unable to return to their countries of origin.



4. Improve access to essential services

As lack of access to essential and life-saving services is directly correlated with safety and security risks, all actors must take action to meet FDP reception and integration needs—including needs for healthcare, psychosocial support, safe accommodation, cash and voucher assistance, livelihoods support, and education. As discussed above, an effective response must be grounded in local CSOs and especially WROs by investing in their capacity to scale existing services.

Recommendations: Overall

- **Each border country government should develop long-term, gender-informed strategies for response to the Ukrainian crisis, with participation of WROs, feminist groups, local NGOs, INGOs, and the EU.** In recognition of limitations of government response capacities across the different countries, the international community should help close gaps in life-saving services, including those listed below.



- **Systematize translation and interpretation services across border countries.** The lack of interpreters has been cited as a barrier in all service categories. Translators can be sourced from inside all border countries, as well as within the Ukrainian population, and could provide jobs that are desperately needed.



- **Border countries should consider the creation of humanitarian hub facilities where services can be co-located to reduce bar-**



riers to access, especially for protection, health, and MHPSS.

- **Address legal constraints that inhibit those who entered border countries before February 24, 2022 (both Ukrainians and third-country nationals) from being eligible for TPS.**



- **Raise awareness among journalists, human rights documentation organizations, and government entities on survivor-centered principles and approaches to prevent them from doing unintentional harm.** This should include the importance of taking every action to protect survivors who choose to go public; and the risks of prioritizing support and care for conflict-related sexual violence (CRSV) over other forms of GBV. All actors should be guided by people with expertise on GBV in emergencies, including CRSV.



Recommendations: Health, reproductive health, and GBV services

- ▶ **Ensure medical care and reproductive health services are accessible, free and holistic.**
- ▶ **Facilitate the use of multinational medical NGOs and local volunteer services to help create direct pathways for FDP patients to obtain primary medical care.** Ideally, medical service delivery can be co-located with major FDP reception and shelter locations, as well as supported by mobile clinics at smaller shelters and apartment complexes. This will also decrease the amount of emergency room utilization and decrease emergency needs.
- ▶ **Protect and enhance reproductive health services through ring-fenced funding**, in recognition of their essential and life-saving functions for women and girls. Build capacity of reproduc-



tive health services to include responsive and survivor-centered GBV services, and ensure the provision of menstrual hygiene materials.

- ▶ **Offer additional training and education on the clinical management of rape (CMR) to providers, referral services, and volunteers working with sexual assault survivors.** Include information on the difference between forensics evidence gathering for instances of rape (i.e., ‘rape kits’), and the medical and mental health service provisions involved in CMR.
 - ▶ **Employ Ukrainian medical personnel who have been displaced.** Process and permit transfer of licensing and accreditation from Ukraine for medical and mental health personnel, educators, and other essential staff in short supply. Ministries of Health should establish prescriptive permissions for foreign providers and medical INGOs to increase equitable access to medication.
 - ▶ **Ensure testing and vaccinations for communicable disease (including COVID-19 and tuberculosis) are widely available at shelter sites and public areas.**
 - ▶ **Establish dental clinics to provide services free of charge.**
 - ▶ **Explore models of outreach or mobile services to reach those confined at home.**
-

Recommendations: Mental health and psychosocial support

- ▶ **Continue to provide comprehensive information related to trafficking risks, access to basic services, registration processes, legal rights, and other essential information** through the distribution of flyers, informational posters, and government websites.



- ▶ **Provide direct and ongoing training to mental health providers and volunteers on recognizing risk factors for trafficking, as well as how to safely intervene and report.**
 - ▶ **Create safe spaces for women —particularly those in private accommodations— to gather** to build healthy social connection and support, as well as to share comprehensive information on risks and protection issues.
 - ▶ **Provide technical capacity in trauma/crisis psychological response, including specialized rapid training on trauma/crisis intervention.**
-

Recommendations: Food, shelter and sustainable housing

- ▶ **Operationalize immediate programming to address the food insecurity of FDPs in the region.** Work with women's organizations to mitigate negative coping mechanisms and prevent risks of violence to women and girls in relation to their increased insecurity due to not being able to meet their basic needs.
- ▶ **Develop and support strategies for long-term accommodations across all border countries.** Government-run reception centers need to provide more long-term accommodations and establish them as shelters following international standards.
- ▶ **Advocate for all shelter managers —whether hosting FDPs in a house, local business, hotel, or elsewhere— to adhere to this GBV AoR [guidance note](#),**⁴⁶ which aligns with international standards and considers the GBV and protection risks of women, girls, and other marginalized groups. The guidance note advises why and how to be aware



⁴⁶ Michelis, Ilaria. *Supporting Women and Girls Fleeing Ukraine: Guidance and Tips for Private Accommodation Hosts*. GBV AoR HelpDesk, April 13, 2022, https://www.sddirect.org.uk/media/2485/gbv-aor-helpdesk_guidance-and-tips-for-private-accommodation-hosts-20042022.pdf.

of power dynamics, to provide basic emotional support, and to link to support services.

- ▶ **Ensure secure shelter facilities by conducting resident registration and restricting access to public visitors.**
 - ▶ **Provide basic training for shelter volunteers on GBV risk reduction and PSEA.**
 - ▶ **Ensure appropriate spacing of cots (in line with SPHERE standards), quantity of handwashing stations, and available COVID-19 testing.**
 - ▶ **Provide regular information sessions for all residents on shelter plans, programs, and where to report complaints and find available support.**
 - ▶ **Provide access to job counseling and labor market information.** Establish programs for FDPs to obtain new professional skills needed in the labor market.
-

Recommendations: Cash and voucher assistance

- ▶ **Ensure that any cash assistance is coordinated with the Cash For Protection Taskforce in Ukraine and Neighboring Countries,⁴⁷ and is distributed equitably without discrimination against any groups of FDPs, with simple and convenient procedures.**
- ▶ **Blend CVA with other services (such as health or protection).** This has been shown to be more effective than standalone interventions.
- ▶ **Follow best practices for reducing risks of GBV in cash programming.** Agencies should assess and mitigate the risks from cash as-



⁴⁷ Contact information and situation analysis can be found [here](#).

sistance using The Cash Learning Partnership [Programme Quality Toolbox](#).⁴⁸

- ▶ **Sensitize women on how to access CVA.** Some may struggle without accompaniment to distribution points, particularly the elderly or disabled and those caring for them.

- ▶ **Design cash and voucher disbursements to meet the needs of all household members, including children and older people.**

⁴⁸ "Programme Quality Toolbox". CALP Network, <https://www.calpnetwork.org/resources/programme-quality-toolbox/>. Accessed May 17, 2022.

Recommendations: Livelihoods support

- ▶ **Address any legal barriers to the right to work that FDPs are facing.**



- ▶ **Improve and enhance all control of work conditions for FDPs in accordance with host country labor legislation to reduce risks of sexual and labor exploitation.**

- ▶ **Continue efforts to relocate and create new Ukrainian businesses in border countries to create jobs for FDPs and host communities.**

Recommendations: Access to information

- ▶ **Ensure information platforms for refugees include detailed information on how to access services, including locations, phone numbers, and related social media platforms. Ensure those providing services have clear information related to how FDPs can access verified services to facilitate information-sharing with refugees.**



- ▶ **Develop localized information platforms that support information-sharing to specific**

geographic areas, particularly in cases in which the refugee response is decentralized to local governments.

- ▶ **For all platforms, include information for how refugees can file complaints and grievances, who they can call, and or where they can go in emergencies—including for incidences of SEA.**
 - ▶ **Verify information that is physically posted in shelters or other places accessed by FDPs, and remove unverified information that could increase risk of trafficking and exploitation.**
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Recommendations: Education

- ▶ **Integrate all displaced children into the host country's education system to ensure their educational attainment remains in accredited institutions.** Ministries of Education should work with local and international NGOs to meet the specific needs of displaced children in the areas of language, trauma recovery, parental/guardian engagement, and any catch-up or readiness support. If online learning is needed or preferred, then access to appropriate technology should be a focus.
- ▶ **Coordinate any and all education responses with the Education Cluster.**⁴⁹



⁴⁹ For contact information and situation analyses, see: <https://www.educationcluster.net/Ukraine>.

VI. Annex

