Gender-Based Violence in the Context of the Ukraine Crisis

ROMANIA ASSESSMENT

Bucharest, 2023
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<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>CEDAW</td>
<td>The Convention on the Elimination of All Forms of Discrimination Against Women</td>
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<td>CoE</td>
<td>The Council of Europe</td>
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<td>CSO</td>
<td>Civil society organizations</td>
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<td>EU</td>
<td>European Union</td>
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<td>FGD</td>
<td>Focus group discussions</td>
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<td>GBV</td>
<td>Gender-based violence</td>
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<td>GREVIO</td>
<td>Group of Experts on Violence Against Women and Domestic Violence</td>
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<td>IOM</td>
<td>International Organization for Migration</td>
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<td>KII</td>
<td>Key informant interview</td>
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<tr>
<td>LGBTIQ+</td>
<td>Lesbian, gay, bisexual, transgender, intersex and queer</td>
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<td>MHPSS</td>
<td>Mental health and psychosocial support</td>
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<td>NAEO/ANES</td>
<td>National Agency for Equal Opportunities between Women and Men</td>
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<tr>
<td>NGO</td>
<td>Non-governmental organization</td>
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<td>RON</td>
<td>Romanian lei</td>
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<tr>
<td>PSEA</td>
<td>Prevention of sexual exploitation and abuse</td>
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<td>SEA</td>
<td>Sexual exploitation and abuse</td>
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<td>UN</td>
<td>United Nations</td>
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<td>UNHCR</td>
<td>United National High Commissioner for Refugees</td>
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<tr>
<td>VAWG</td>
<td>Violence against women and girls</td>
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<td>WHO</td>
<td>World Health Organization</td>
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The Russian war against Ukraine continues to have a significant impact on neighboring countries, including Romania. As a result, Romania is in an unprecedented situation, having sheltered the largest number of refugees - over 3 million - in the country's history. While many refugees have since left Romania, recent data show 137,384 Ukrainians and 1,320 third-country nationals have obtained temporary protection on Romanian territory. Approximately 80% of the Ukrainian refugees in Romania are women and children. The country has proven resilient and provided refugees from Ukraine with emergency humanitarian aid and longer-term support to foster their social and economic integration. Along with the refugee crisis, Romania is also facing an economic crisis, experiencing the highest inflation rate in the last three decades.

This is the second assessment undertaken by VOICE looking at the safety, protection, and well-being needs of Ukrainian women refugees living in Romania. It is a continuation of VOICE’s and HIAS’s efforts to draw attention to and address the gender-based violence (GBV) related situation of women and girls in the context of the Ukrainian crisis response. A rapid assessment in a dynamic environment, the first assessment, undertaken in the summer of 2022, focused on three issues: 1. the GBV situation and risks of refugee women during displacement, including at border crossing points; 2. the situation in temporary accommodation centers, and 3. funding needs of women’s civil society organizations supporting refugee women. This second assessment sought to obtain a deeper understanding of the situation and needs of displaced Ukrainian women and other groups of women living in Romania. During the initial phase of response to the refugee crisis, beginning in February 2022, the priority was to ensure the safety of people fleeing Ukraine and provide refugees with safe accommodation and humanitarian assistance to meet their needs. This assessment focused on the situation for these women one year on, in particular the GBV-related safety situation of refugee women and vulnerable host community women in Romania. It focused on the intersection of GBV and economic and psychosocial needs to inform HIAS and VOICE multi-sectoral programming and continued support to Romanian partners to promote women’s safety, protection, and well-being.

The assessment was carried out during March and April 2023 in six localities, including four urban settings of Braila, Constanta, Bucharest, and Galati, and two rural communities of Curcani (Calarasi County) and Romanesti villages (Dambovita County), each located approximately 40 km from Bucharest. The urban localities were selected as they are considered home to the largest number of refugees fleeing Ukraine. The rural areas were chosen to provide an understanding of the safety and socio-economic situation of Ukrainian refugees and other vulnerable women living outside urban areas, including Romanian Roma women. In total, 145 women, including Ukrainian, Syrian, Somali, and Yemeni women refugees and Romanian Roma women, participated in the assessment, as well as 22 representatives from civil society and government agencies supporting refugees and other vulnerable women.

The situation one year on

Despite being initially beneficial and supportive, the 50/20 humanitarian support program implemented by the Government of Romania has been controversial as it was unmonitored and created serious GBV risks, including putting vulnerable refugee women at the mercy of traffickers and rapists. The program was eventually dismantled in February 2023, following criticism from human rights organizations and the Romanian public. This was a significant step forward in ensuring the safety and well-being of women and girls in Romania.

of landlords who have profited from the program in the absence of effective monitoring. Furthermore, while the program focused on ensuring immediate safety and survival, for some women it has served as a disincentive towards economic and social integration in Romania, as they continue to hope the war will end and they can return home. Other Ukrainian women have coped with displacement by trying to integrate into a new reality. Many of these women have worked as volunteers in shelters or other humanitarian services, as translators, or as intermediaries facilitating relationships between the Ukrainian community and Romanian helpers. Many women, particularly those with training in psychology, education, or law, have used their skills to provide other refugees with psychological and social support or teach displaced children. Other groups of women have faced specific challenges to integrate due to discrimination, including Roma, LGBTIQ+ older women, and those with disabilities. Discrimination against Roma women refugees, as with Romanian Roma women, has been exacerbated by the COVID-19 pandemic and the current economic crisis. The pandemic and the social and economic effects of the war have also impacted vulnerable Romanian women. COVID-19 led to increased violence against women in Romania, particularly family and intimate partner violence, and both the pandemic and the refugee crises following it have put significant strain on already stretched health and social services for GBV survivors. Both crises have also negatively affected women’s economic opportunities - a key protective factor against GBV.

The Romanian Government’s policy shift from emergency relief to integration of refugees has brought additional challenges and risks for women and girls displaced to Romania by the war in Ukraine. The second phase of the government’s aid program for Ukrainian refugees is still unclear, and refugees are having difficulty accessing timely information about the program and how to apply for support. As of 1 May 2023, to qualify for government assistance, Ukrainian refugees must prove their children are enrolled in school, adults are in job-seeking programs, they have a Romanian bank account, and residence. Obtaining all this evidence is challenging due to language barriers, the amount of time it takes to get the required documentation from different institutions, and the requirement for documentation that may be difficult to obtain. The situation is particularly challenging for refugees who are single mothers with care responsibilities, or those with disabilities or trauma from the war.

The new program is being implemented in the context of an uncertain economic outlook in Romania and the potential for further economic disruption. The biggest threat to the economy is posed by negative developments in the gas market and the risk of shortages, particularly in the coming winter. Beyond gas supply, the European Union (EU) remains directly and indirectly exposed to further shocks to other commodity markets, inflation and possible adjustments in global financial markets to the new high-interest rate environment. For refugee women, a potential economic downturn will magnify the risk of exploitation, abuse, and backlash from Romanian neighbors who are also struggling economically.

**Common issues facing women across countries**

In addition to this assessment, VOICE undertook assessments on the situation of displaced Ukrainian women living in Poland and Moldova. Similarities are apparent across settings worth highlighting. Concerning domestic violence, though refugee women in Romania and Moldova experience lower levels of physical domestic violence than they did at home, some continue to be subjected to emotional and psychological abuse from their husbands who remain in Ukraine. Moreover, women are concerned about the impact the war will have on men’s mental health and behavior in the

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7 The assessment undertaken in Moldova had similar objectives, while in Poland the focus was on identifying availability and gaps in services for Ukrainian women.
longer term, fearing increased levels of domestic violence when they return home at the end of the war.

Even after they have reached the ‘safety’ of a new country, refugee women across countries experience a generalized fear of harassment when going about daily life. In response, they are adopting protective behaviors, such as restricting their movement at night. Language is a major barrier to refugee women feeling safe and integrated, as they are not easily able to access information and services, report abuse or violence to authorities, or connect with other women in their new communities. The language barrier also impedes their access to education, employment opportunities, health care, and the cultural and social resources that help facilitate resilience, adjustment, and adaptation to life in border countries.

Refugee women suffer the multiple burdens of responsibility for the safety and well-being of their children and other family members, separation from their loved ones who remain in Ukraine, and limited integration into the host community. Women across the settings have common economic and psychosocial needs, including employment and economic independence, safe spaces, and social connection. Economic independence to build security, confidence, and capacity to provide for themselves and their children is a priority. Women also highlighted that employment is key to realizing their rights and autonomy over their time, lives, and bodies. Economic security is a known protective factor against GBV, and safe and fair employment is therefore crucial for women’s integration, well-being, and protection.

Promoting community involvement and leadership of displaced women is important when developing culturally competent and responsive programming. The assessments in each country have highlighted the need for dedicated women and girls’ safe spaces that build upon groups formed by women themselves and that are delivered by organizations that women know and trust. While the mutual support groups formed by women are an example of a positive coping strategy that supports psychosocial well-being, there is also a need for specialized psychological care for those women struggling with distress and deteriorating mental health as a result of displacement.

Key findings from Romania

Factors contributing to violence against refugee women from all backgrounds in Romania include both traumatic pre-arrival experiences and issues related to settling in Romania, including integration challenges, language barriers, economic dependence, stress, and social isolation. Traumatic pre-arrival experiences include harassment, exploitation, and abuse while in transit. Syrian, Somali, and Yemeni women reported experiencing high levels of violence perpetrated by smugglers, border guards, and other men during their journey to Romania. Ukrainian women participating in the assessment reported since arriving, they have a general fear of harassment when going about their daily activities, including when going out shopping or walking alone at night. They also
reported that sexual violence is a common issue they face in Romania, particularly in public spaces, including on public transport and in intimate or dating relationships. Ukrainian adolescent girls were identified as particularly vulnerable to sexual abuse and trafficking due to their age, lack of Romanian language, and use of technology, including dating apps. However, survivors do not want to report sexual violence to the police, due to fear of revictimization.

Ukrainian women were reluctant to discuss intimate partner violence, however, those who did indicated that it is normalized and minimized due to rigid and inequitable gender norms that inhibit women from disclosing the abuse and seeking help. It was reported that many refugee women continue to experience controlling and psychologically, emotionally, and financially abusive behaviors, manipulation, and blackmail from their partners who remain in Ukraine. In some cases, abusive men are demanding that their partner return to Ukraine and threaten to have the women’s children taken away. One woman’s husband denied her permission to return to Romania due to his concern she would separate from him. Ukrainian women rarely report to the authorities or seek help from support services in these situations due to a fear of losing their temporary protection status.

Economic insecurity is increasing refugee women’s vulnerability to violence and exploitation, due to their lack of resources to meet their most basic needs, such as food and shelter, and GBV service providers are increasingly concerned about the inextricable linkages between refugee women’s economic security and their safety. Women’s employment options have been limited by Ukrainian professional qualifications not being recognized in Romania because Ukraine is not a member of the European Union. While not all Ukrainian refugee women in Romania want to work, it is critical that the barriers to employment for those who do wish to be reduced, including by enabling those with qualifications to work in jobs that reflect their skills. It is understood that as of August 2023, this issue is being resolved between the governments of Ukraine and Romania, which will reduce barriers to the labor market that professional women have faced. Until this is resolved, those with tertiary or other professional qualifications will continue to be forced to take whatever work they can to survive. For many, this has meant working in the informal sector, which brings risks of exploitation and GBV.

For refugees from all backgrounds living in Romania, language is a major barrier to employment, integration, accessing services, and feeling safe in Romania. Refugees who do not speak Romanian find it hard to report GBV to authorities. Concerningly, most of the women and girls participating in the assessment, regardless of their socioeconomic status or educational background, reported they do not feel confident to access GBV support services.

Roma women refugees face similar challenges to other refugees from Ukraine, including safety concerns, language barriers, and obstacles to accessing essential services. On top of this, they face an added layer of discrimination because they are Roma. As a result of this discrimination, their authenticity as refugees deserving of assistance is questioned by Romanian authorities, NGOs, and the host community. For Romanian and refugee Roma women, violence shapes all aspects of their lives due to the intersection of gender and ethnicity. This includes GBV in the family and wider community. Early marriage and childbirth are prevalent, harming adolescent Roma girls. Adolescent Roma girls from urban areas are at particular risk of grooming, trafficking, and forced prostitution. Due to the lack of trust in and fear of racism from authorities, Roma women and adolescent girls do not report sexual abuse and exploitation or other forms of GBV. Roma survivors of domestic violence face greater difficulties accessing services than other domestic violence survivors in Romania due to poverty, social exclusion, and the lack of social services in the areas where they live. For Roma women reported high rates of depression and a need for professional treatment.

Women from the LGBTQI+ community do not disclose their identities and have limited access to all types of support. Some seek help and support from LGBTQI+ rights groups and

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8 For more information, see Open Society et al. Report Phenja: Sisterhood among women against GBV, 2016, available at: https://e-romnja.ro/rapoarte/resurse/
NGOs to keep themselves safe from violence and harassment and reduce their sense of isolation and marginalization. LGBTIQ+ women are seeking a community and support system as they feel excluded from mainstream humanitarian assistance and support services, and information about LGBTIQ+ events is in Romanian and therefore inaccessible.

Within a deteriorating economic context, women refugees in Romania are facing barriers to accessing education, employment, healthcare services, and cultural, social, and material resources that support resilience and facilitate adjustment and adaptation to life in Romania. Displacement has been challenging for Ukrainian refugee women due to the multiple burdens of responsibility for the safety and well-being of their children and other family members, separation from and fear for the safety of their loved ones, and limited ability to integrate into their host community, on top of trauma from the war. All of the women interviewed spoke about the need for economic security, psychosocial support, safe spaces, and social connection. Employment is a priority protection strategy and also key to women’s psychological well-being. While refugee women have created mutual support groups and networks to improve their safety, protection, and well-being, they are seeking greater community connection and support for the groups they have established to foster their resilience. Promoting refugee women’s involvement and leadership and building on the coping strategies women themselves have initiated will be essential for developing culturally competent and appropriate programming to foster women’s safety and well-being and reduce their exposure to GBV.
Recommendations

Develop and disseminate information and education materials about GBV, women’s rights, sexual and reproductive health, and available GBV and reproductive health services in relevant languages to refugee and other vulnerable women. Use existing programs, such as mental health and psychosocial support services (MHPSS), as an entry point for information-sharing and awareness-raising on GBV among women.

Strengthen local coordination and referral pathways between women’s organizations and other service providers that respond to GBV. Ensure that relevant stakeholders, including those providing humanitarian assistance, know how to make referrals to specialist GBV services for survivors.

Provide culturally appropriate and safe MHPSS services. Women from all backgrounds are experiencing mental health and psychosocial well-being issues. Ensure both targeted services for those who need them are available, as well as community-based supports to foster coping and resilience, through:

- Ensuring refugee women from all backgrounds who are experiencing persistent mental health problems can access psychology services in appropriate languages;
- Implementing community-based approaches to support psychosocial well-being building on mutual and peer support strategies women have developed;
- Delivering activities that build relationships between women, foster resiliency, and increase access to information and strategies to promote emotional well-being, including information and referral for mental health support.

Create safe spaces for displaced women and girls, including Roma women and adolescent girls, to deliver activities, programs, and services to improve women’s safety, protection, and well-being. Safe spaces should be hosted by existing community centers run by women’s rights and civil society organizations, and train and fund these organizations to establish safe spaces and deliver programs in line with GBV in emergencies guidance, including:

- Providing refugee women with information about GBV and available services, and opportunities to confidentially disclose and receive support to access GBV services;
- Promoting social connection and integration;

10 For more information, see GBV AoR Handbook for Coordinating GBV Interventions in Emergency Settings, 2019, available at: https://gbvaor.net/sites/default/files/2019-10/Handbook%20for%20Coordinating%20GBV%20in%20Emergencies_fin.pdf. However, it will be important to build on and not undermine local coordination and referral structures.
Delivering education programs for adolescent girls, including young Roma women, focusing on gender equality and GBV;\(^\text{12}\)

Offering Romanian and English language courses;

Increasing refugee women’s safe access to technology and digital tools to enhance their access to information, services, and resources to support their economic inclusion and psychosocial well-being.

**Implement activities to help refugee women better integrate into the host community.** For example, facilitate social activities between refugee and Romanian women and between refugee children and Romanian children to help them connect, build relationships, and create social networks and belonging.

**Implement skill-building and income-generating activities for women and girls that address barriers to the labor market** as part of livelihoods programming to enable the transition from the 50/20 social assistance program to a new phase of labor market integration for refugee women.\(^\text{13}\) This should include assistance to help refugee women leverage and utilize existing qualifications to obtain employment, skill-building programs based on market analysis, and employability training.

**Support the institutional capacity of women’s rights and civil society organizations working with Ukrainian refugee women, including Roma refugee women to provide:**

- GBV case management, legal services and advice, and individual and group counseling. Ensure dedicated legal advice on separating from abusive partners and accessing legal protection;
- Access to SRHR services for refugee women through the development of a digital platform for refugee women making available lists of doctors with translation services who SRHR support for Ukrainian women.

**Provide mental health support for social workers and other frontline workers** working with refugees who are experiencing burnout.

**Provide specific training on GBV core concepts, reproductive health, and legal instruments to humanitarian aid providers working with refugee and migrant women,** including social workers, translators, community facilitators, and cultural mediators.

**Build the capacity of organizations providing services to refugees to mainstream GBV risk mitigation in line with good practice standards set out in the IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action** to identify and address GBV risks that emerge in programs and services.


Strengthen the capacity of service providers in protection from sexual exploitation and abuse (PSEA), including the development of an organizational PSEA policy, building awareness of SEA among frontline workers, refugee women, and host communities, and ensuring confidential and accessible reporting mechanisms.14

Undertake advocacy for funding for GBV prevention and response, including for:

- Comprehensive specialist GBV services, including case management, for survivors of all forms of GBV;
- Reproductive health care;
- GBV prevention campaigns and training of Municipality staff and local social services staff on GBV;
- Making available digital tools for GBV survivors to access specialist support and legal advice.

14 See the Safeguarding Resource and Support Hub for Eastern Europe for more information and resources on preventing sexual exploitation and abuse: https://easterneurope.safeguardingsupporthub.org/
I. OVERVIEW OF HIAS AND VOICE

HIAS

HIAS, the international Jewish humanitarian organization that provides vital services to refugees and asylum seekers, has helped forcibly displaced persons find welcome, safety, and opportunity for more than 130 years. Currently operational 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 gender-based violence (GBV) prevention and response programming, with a focus on violence against women and girls and individuals identifying as LGBTIQ+. Using a survivor-centered approach, HIAS prioritizes the voices and needs of survivors and those disproportionately impacted by GBV: women and girls. HIAS’ support of this assessment is just one example of its commitment to amplifying the voices of women and girls, and the leadership of women’s rights and civil society organizations.

VOICE

VOICE is a cutting-edge feminist organization working to end violence against women and girls (VAWG) in conflict, crisis, and disaster settings around the world. 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. VOICE challenges ineffective methods of addressing VAWG in humanitarian 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 in the fight to end VAWG. We are working towards 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. VOICE’s goal is greater resourcing of local women’s organizations and their solutions to address violence.

About the partnership

VOICE and HIAS share a vision whereby the needs of women and girls in all their diversities are centered in humanitarian responses. In this joint vision, access to survivor support is a top priority for the international community in word and action. With a unifying commitment to support women’s rights organizations (WROs) and women’s groups around the region to lead the Ukraine humanitarian response, HIAS and VOICE continue a journey of reflection on how to make the localization agenda a reality. It is critical that humanitarian action builds upon the advances in gender equality and women’s empowerment made by regional and local women’s rights activists, women-led groups, and civil society organizations (CSOs). In addition to supporting direct service delivery by local organizations, HIAS and VOICE together will continue to advocate for flexible and sustained support to WROs.

HIAS and VOICE are committed to ensuring contextually appropriate application of minimum standards and best practices within GBV and sexual and reproductive health (SRH) in emergencies service delivery in the Ukraine response, with a particular focus on GBV in emergencies (GBViE) programming both through direct service delivery and through complementing and supporting partner organizations in the region.

15 https://hias.org/
16 https://voiceamplified.org/
II. INTRODUCTION TO THE ASSESSMENT

Romania is in an unprecedented situation following the invasion of Ukraine, having sheltered the largest number of refugees - over 3 million - in the history of the country. While many refugees have since left Romania, recent data show 137,384 Ukrainians and 1,320 third-country nationals have obtained temporary protection on Romanian territory. Approximately 75% of the Ukrainian refugees in Romania are women and children. The country has had difficulties responding to previous refugee crises, though has proven resilient and provided refugees from Ukraine with both emergency humanitarian aid and longer-term support to foster their social and economic integration. Along with the refugee crisis, Romania is also facing an economic crisis, experiencing the highest inflation rate in the last three decades.

This is the second assessment undertaken by VOICE looking at the safety, protection, and well-being needs of Ukrainian women refugees living in Romania. It is a continuation of VOICE’s and HIAS’s efforts to draw attention to and address the gender-based violence (GBV) related situation of women and girls in the context of the Ukrainian crisis response. A rapid assessment in a dynamic environment, the first assessment, undertaken in the summer of 2022 focused on three issues: 1. the GBV situation and risks of refugee women in the context of displacement, including at border crossing points; 2. the situation in temporary accommodation centers, and 3. funding needs of women’s civil society organizations supporting refugee women. This second assessment sought to obtain a deeper understanding of the situation and needs of displaced Ukrainian women and other groups of vulnerable women living in Romania one year into the crisis.

Aim and objectives

The assessment aimed to assess the GBV-related safety and protection situation of refugee and host community women, girls, and LGBTIQ+ people in Romania, with a focus on the intersection of GBV and economic and psychosocial needs. The purpose was to inform HIAS and VOICE integrated multi-sectoral programming and continued support to Romanian partners to promote women’s safety, protection, and well-being. The objectives of the assessment were to:

1. Identify GBV safety, protection, and well-being concerns of refugee women, girls, and LGBTIQ+ people from Ukraine and other countries, as well as vulnerable groups in Romania;
2. Identify community-based GBV protection strategies among refugee women, and opportunities for building women and girls’ safety and protection and mitigating GBV risks;
3. Assess barriers to economic inclusion and opportunities for addressing them.

Location

The assessment was undertaken during March and April 2023 in six localities, including four urban settings of Braila, Constanta, Bucharest, and Galati, and two rural communities of Curcani (Calarasi County) and Romanesti (Dambovita County) villages, each located approximately 40 kilometers from Bucharest. The urban localities were selected as they are home to the largest number of refugees fleeing...
Ukraine. The rural areas were chosen to provide an understanding of the safety and socio-economic situation of Ukrainian refugees and other vulnerable women living outside urban areas, such as Romanian Roma women.

Constanta is a commercial, industrial, and tourist centre, and home to the country’s largest port, the fourth largest in Europe, with one of the largest shipyards. Constanta has a population of 285,000 inhabitants, with approximately 15,126 Ukrainians with temporary residency permits residing there. Tourism is a key part of the economy and is impacting refugees’ ability to find accommodation, as landlords have refused to rent accommodation to refugees, preferring instead to wait for seasonal tourists during the summer season, who pay as much as 300 lei a night.

Galati is one of the largest economic centers in Romania located on the Danube River, the most important European commercial river artery. Along the Danube-Main-Rhine Canal, its economy is centered around the shipyard, steelworks, and port. Agriculture is also an important economic activity. It is estimated that around 12,197 Ukrainians with temporary residency permits are currently living in Galati.

Braila is a small city with 200,000 inhabitants in eastern Romania and is a strategic trade center due to its proximity to one of the most important commercial ports on the Danube River. The economy of Braila is almost entirely linked to the commercial traffic on the Danube. There are 1,408 Ukrainians with temporary residency permits registered in Braila, with unofficial estimates indicating 20,000 Ukrainian refugees crossed into the country at Braila.

Bucharest, the capital city, is located in south-east Romania, close to the border with Bulgaria. It is the country’s economic center with a growing economy in IT, finance, and manufacturing, and is one of the main industrial centers and transport hubs in Eastern Europe. The city has approximately 3 million inhabitants, with an estimated 44,886 Ukrainian refugees living there with temporary residency permits. Asylum-seekers and migrants from the Middle East, Africa, and Asia are also living in Bucharest under temporary protection visas.

Curcani village has a population of 5,672 people, of which 3,000 are Roma, while 2,000 Roma people live in Romanesti village. Infrastructure in both communities is extremely poor, with inadequate public water, sewerage systems, and gas networks, bad roads, and no playgrounds. Only 20% of pupils in both villages successfully graduate from middle school, while others leave school as early as age 10 or 11. Survey data collected by local NGOs in the two rural localities shows that in one out of five families with children, the youngest child has never attended kindergarten. Amongst the target groups, the average monthly income is about USD 400 for a family of five or more. There are high rates of youth unemployment, with data showing that in 18% of families, there is at least one young person aged 18-24 not engaged in education, employment, or training. In the absence of local employment opportunities, the residents of both Curcani and Romanesti commute to the Bucharest labor market. In Curcani, agriculture has declined as an economic activity and only a few households now survive by farming. In Romanesti, most Roma men work in building construction while women mostly work in the domestic sphere as caregivers.

**Methodology**

Drawing on good practice in GBV assessments in humanitarian contexts and designed based on the assessment aim and objectives, the assessment used a qualitative approach, collecting data using the following methods:

1. Desk review of secondary data, including information on the normative and regulatory framework relevant to GBV in Romania, the humanitarian context, and data, research, and recent reports relevant to the context;

2. Twelve focus group discussions (FGDs) with 145 women from diverse backgrounds displaced from Ukraine, Somalia, Syria, Yemen, and women from the host communities, inclusive of older women, young women, LGBTIQ+ women, and women of the Roma ethnic minority (see Annex A for details);
3. Nineteen key informant interviews (KIIs) with 22 representatives of civil society organizations providing services to women and local public authorities (see Annex B for details).

Women were recruited via NGOs providing direct services to the community. This included HIAS partner organizations working with refugees from Ukraine and other countries. Romanian Roma women were identified and recruited with the support of NGOs specifically supporting Roma people in Romania.

**Ethical and safety considerations**

The assessment team was led by VOICE’s Romania Country Lead and overseen by VOICE’s Gender-Based Violence in Emergencies (GBViE) technical specialists. The assessment methodology and tools were developed in line with guiding principles and minimum standards for ethical and safe practice in GBV in humanitarian settings, including WHO Ethical and safety recommendations for researching, documenting, and monitoring sexual violence in emergencies and Inter-Agency Minimum Standards for GBV in Emergencies Programming. Due to sensitivities associated with collecting information about GBV, all field research was conducted by staff experienced in working with GBV survivors and with appropriate expertise relevant to working with each of the diverse target groups. The team was provided with additional training on ‘do no harm’, a survivor-centered approach, and on safely and effectively responding to GBV disclosure, including making confidential referrals in line with best practices in GBV-related information gathering and assessment. A child protection and safeguarding protocol was put in place to respond to any disclosure of child abuse during assessment activities, and the limits of confidentiality were explained to participants. Participation was voluntary, with all participants being informed about the purpose and issues to be discussed, and advised that they were free to withdraw their participation at any time. Potential risks during and after data collection were identified and addressed. No unintended negative consequences of the assessment activities were reported.

**Challenges and limitations**

The assessment gathered information about women’s and girls’ perception of risk, and how displacement has affected women’s and girls’ sense of safety and well-being. It does not speak to patterns or prevalence of violence and findings are not generalizable to the population as a whole. The FGDs sought to contextualize (not generalize) GBV experiences and identify the needs of women and girls to help identify strategies for integrating a gender and GBV perspective into social and economic responses for refugee women.

The data collected is time-bound and the findings are limited to specific geographical areas. Therefore, findings should not be used to draw broad conclusions about the experience of all refugees and Roma women and girls in Romania. Ethical best practices for assessments preclude conducting in-depth interviews and discussions if the engagement could be potentially unsafe for women and girls. As a result of the high level of stigmatization and taboo surrounding GBV, it is highly likely that participants who took part in the FGDs did not feel fully comfortable raising all their concerns. To address this, VOICE conducted KIIs to provide alternative opportunities for women to confidentially communicate their needs and concerns. It is also likely that the refugee women and girls VOICE spoke to were underreporting their concerns as GBV is an under-reported phenomenon globally, even in stable and well-resourced settings.

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21 WHO Ethical and safety recommendations for researching, documenting, and monitoring sexual violence in emergencies.
22 Inter-Agency Minimum Standards for GBV in Emergencies Programming.
23 World Health Organization. Ethical and safety recommendations for researching, documenting and monitoring sexual violence in emergencies. 2007, available at: [https://www.who.int/publications/i/item/9789241595681](https://www.who.int/publications/i/item/9789241595681)
III. CONTEXT ANALYSIS

Humanitarian context

Since 24 February 2023, over 8 million refugees from Ukraine have been registered across Europe. As one of Ukraine’s bordering countries and one of the main transit countries for refugees, Romania has recorded over 3 million border crossings from Ukraine. As of late July 2023, Romania hosted around 140,000 Ukrainian refugees, the majority of whom are women (53%) and children (21%), and around one-quarter (26%) men. Since the onset of the crisis, stakeholders including the Government of Romania’s central, regional, and local subdivisions, UN agencies, international NGOs, and Romanian civil society, including women’s rights organizations (WROs), have mobilized their efforts and resources to respond to the humanitarian situation. The Romanian government created national-level decision-making and operational task forces to manage the national response to the crisis and established an official online platform for Ukrainian refugees. A considerable amount of responsibility for humanitarian response has been delegated to county and local councils across Romania, which have varying levels of resources. UN agencies have supported the government, creating working groups to coordinate humanitarian responses among international NGOs, Romanian civil society, and state agencies. GBV is acknowledged as a priority humanitarian concern, and UNHCR established a sub-working group focused on GBV, which includes UN agencies, government, NGOs, and Romanian civil society organizations, including women’s organizations. The national level GBV sub-working group, co-chaired by UNHCR and ANAIS, is part of the Regional GBV Sub-Working Group, co-chaired by UNHCR and Women Against Violence Europe (WAVE), whose role is to bolster GBV protection, risk mitigation, and response across the Ukraine response.

The chaotic early days of the refugee influx were characterized by a reliance on volunteerism by the Romanian authorities, whereby civil society organizations mobilized in impressive numbers to provide humanitarian support to refugees from Ukraine. However, this volunteer-based response raised concerns regarding GBV and human trafficking, as there was a lack of background checks and supervision of volunteers at border and transit points, and of individuals hosting Ukrainian refugees in their homes. During that same period, the Government of Romania issued over 20 pieces of legislation designed to meet the needs of the Ukrainian refugee population. Some of these legislative measures included free humanitarian transportation for refugees in special situations from the border crossings to other parts of Romania (the program was canceled on January 1, 2023), inclusion of refugees in the national health system, the right to work for Ukrainians who do not have Romanian work visas, among others. One of the most important pieces of legislation enacted by the Romanian Government was Emergency Ordinance No. 28/2022, widely known as the 50/20 Program. The program provides 50 RON (USD 11) per day per person to locals who host

26 Ibid
27 See https://protectieucraina.gov.ro. Information is also available through another online platform (www.dopomo.ro), which was developed by Code for Romania in partnership with Romanian Government and other intergovernmental institutions to help monitor available resources from various CSOs of support and requests for support from Ukrainian refugees.
29 https://asociatia-anais.ro/
30 https://wave-network.org/
Ukrainian refugees to cover accommodation costs, and 20 RON (USD 4.5) per day per person to cover food costs for the refugees. The host receives the entire amount and is expected to give part of the sum covering food expenses to the person/people they are hosting. To qualify for the program, hosts must submit a folder to the local authorities with proof of identification, proof that they are legally entitled to inhabit the residence, an official request for reimbursement, and an affidavit proving that the person is hosting a specified number of refugees.

The initial government 50/20 program was an emergency response, and therefore risks were not properly assessed and mitigated. Inadequate attention was paid to the impact of the program (which only targeted Ukrainians) on refugees from other backgrounds in Romania (the Middle East, Africa, etc.), and this has caused concern among civil society organizations and international organizations. The Romanian Government do not have a comprehensive national plan for integrating refugees, regardless of nationality. Further, the initial scheme for refugees had the unintended consequence of increasing rental costs in the housing market. For example, the owner of a two-bedroom apartment in Bucharest hosting a family of five would receive approximately USD 1,500 for an apartment rented for USD 500–600 before the war. This rental inflation is creating a cost of living problem for both locals and Ukrainians, especially since the government’s aid program ended, as landlords are still demanding high rents or are not renting their properties while waiting for better opportunities (such as renting the units for offices, which pays considerably more).

At the end of March 2023, the Romanian Government published another ordinance that fundamentally changed the 50/20 Program. As of May 1, 2023, refugees receive 2,000 RON (USD 440) per month per family or for a single person for a maximum of four consecutive months. This amount is supposed to cover rental expenses as well as food. The ordinance also provides that refugees who remain in the country after four months will be eligible to receive the same monthly amount until the end of 2023, in addition to unemployment benefits. However, the program is not yet fully operational, with refugees still in the process of registering to access the program. Some landlords are pressuring tenants to agree to very high rents as they let them remain on the premises as they wait to receive the government rental subsidy.

The second phase of the government’s aid program for refugees from Ukraine is still unclear, and refugees are having difficulty accessing timely information about and are unsure of procedures for applying for support. As of May 1, 2023, to qualify for assistance, Ukrainian refugees are required to prove their children are enrolled in school, that adults are enrolled in job-seeking programs, and that they have a Romanian bank account and proof of residence. Obtaining all of this evidence is challenging due to language barriers and the amount of time it takes to get the necessary documents from different institutions. The situation is particularly difficult for single mothers with caretaking responsibilities for extended family members, and who are traumatized due to the war. The new program beginning in August 2023 will create even greater burdens in accessing assistance as it introduces a requirement to provide either a job contract or an official disability certificate. Starting September 1, 2023, families will qualify for 2000 RON (less than USD 450) support for rent if they have a valid work contract in Romania. Acceptable contract types are limited, with specific services not eligible according to current legislation. Moreover, despite the length of time since the war started, many humanitarian assistance programs delivered by humanitarian actors are short-term, with refugees facing the same challenges and problems as a year ago, but now receiving much less help.

Women’s rights in Romania

As part of the process of accession to the European Union, Romania has conducted an intensive gender mainstreaming process. Additionally, consecutive Romanian governments have made international and national commitments to advance gender equality in recent decades, including ratifying the CEDAW Convention and Istanbul Convention. The Romanian Constitution preserves the right to gender equality at work and in the labor market, as well as establishing equal opportunities for
women and men, equal pay, and equal access to public, civil, or military jobs. In 2002, the Romanian Parliament adopted Law 202/2002 on Equal Opportunities between Women and Men, which focuses on gender equality. The law also established the National Agency for Equal Opportunities between Women and Men (NAEO/ANES), a governmental body responsible for the advancement of gender equality. There is also an anti-discrimination act in place. While Romania has made notable progress in terms of legislation, there are significant gaps within public policy. Law 217/2003 is the most important legislative framework for preventing and combating family violence in Romania. However, this and other legislation lacks an intersectional perspective and inclusion of mechanisms set out in the Istanbul Convention to protect women, girls, and other marginalized groups who encounter multiple intersecting forms of discrimination and violence.

Despite legislation that provides for gender equality in multiple spheres, patriarchal values remain embedded into every aspect of society. Key areas of inequality include domains such as family, health, education, politics, and the labor market. In 2022, Romania ranked in the 26th position within the European Union (EU) in the Gender Equality Index developed by the European Institute for Gender Equality (EIGE). The COVID-19 pandemic negatively impacted gender equality in Romania, and gender disparities increased significantly, particularly in the private sphere, compared to previous years. Some of the areas that require improvement include inequality in childcare and domestic work, with Romania having the highest gender gap in the EU. Romania also ranks the lowest in the EU in the representation of women in decision-making and influence across the political, economic, and social domains.

While Romania has the second lowest gender pay gap (2.2%) in the EU, it has one of the highest gender employment gaps. With one of the lowest minimum wage levels, and many earning only minimum wage, the seemingly low gender pay gap is in reality an effect of an impoverished and exploited labor force. In 2016-2020, Romanian women recorded the lowest rate of participation in the labor market compared to men in the last 30 years, representing only 45.5% of the working-age population. The main reasons for this are women’s caretaking and domestic responsibilities, as well as their low rates of education; the tertiary education attainment rate for women in Romania was 26.2% in 2021. Gender segregation by industry and occupation is also apparent; women represent the vast majority of workers (65%) in the manufacturing, trade, health, and education sectors, while sectors such as construction, extractive industries, and transportation remain male-dominated, with women constituting less than 25% of the workforce. Data also show a correlation between the degree of workforce feminization and the gender pay gap – the more feminized an occupation is, the more the gender pay gap increases.

Romania is also the EU country with the highest rate of underage mothers. A recent study by Save the Children Romania found that 45% of the total births in the EU by mothers under the age of 15 are from Romania. This is in part due to a lack of awareness about reproductive health and rights, with sex education being

34 Ibid
37 Ibid
41 Ibid
42 Ibid
considered a taboo topic and not mandatory in schools. Sexual violence is also a contributing factor to the high rate of teenage pregnancy, as many pregnancies are due to sexual abuse by older men. Additionally, poverty intertwined with unequal access to education and structural racism in the case of Roma girls, are also factors. Compounding the problem of adolescent pregnancy, Romania has been facing a backlash against reproductive health and rights. This backlash is being driven by the rise of right-wing political parties, such as the Alliance for Romanian Unity, and conservative church-led initiatives, such as the Coalition for Family. The overthrow of Ceaușescu’s regime in 1989 also meant the overthrow of the infamous Decree 770 from 1966 that banned abortion and led to the death of an estimated 10,000 women. While reproductive rights began to improve in the 1990s, there has been a decline in rights over the last decade due to government cuts to funding for the family planning program and ending subsidies for contraceptives in 2011. Moreover, the number of gynecologists who refuse to perform abortions for moral or personal reasons (such as religious beliefs) is increasing. In the first six months of 2022, over 13 counties out of 41 reported no abortions performed in the public health system.

**Roma women**

In Romania, the Roma minority represents 3.4% of the population. Roma people are a stateless minority, and nearly 12 million are living across Europe in significantly deprived communities without access to basic education, health, social and economic rights. In rural areas, stigma, racism, strong patriarchal and traditional beliefs, and gender-based inequalities in the Roma community are barriers to the labor market for Roma women, creating economic dependence on their spouses. According to a recent report on the situation of Roma people in European countries, in 2021 only 23% of Roma women were employed compared to 59% of Roma men. Concerningly, data shows that 69% of young Roma women across Europe are not in employment, education, or training, compared with 44% of young Roma men. Roma men, especially those living in rural areas, exercise control over their wives and commonly do not allow women to work outside their households. Lack of financial independence and limited education regulates women to the domestic sphere, where they are providers of care for children, husbands, parents-in-law, or other members of the extended family. The lack of financial autonomy leaves Roma women subject to mistreatment and misogyny from their mothers-in-law or other in-laws and the domestic and care burden often leads to low self-esteem among Roma women.

Racial prejudices are deeply embedded in Romanians’ attitudes and perceptions, particularly regarding the Roma community and immigrants. A study shows that seven out of ten Romanians do not trust these two marginalized groups. Structural racism, interwoven with classism and sexism, is prevalent and visible in multiple aspects of life. For example, Roma girls and women have lower access to education, housing, health services, and the labor market. The lack of public childcare services, particularly in rural areas, as well as the lack of birth certificates and other identity documents, restricts access to education. Early marriage and early childbearing are additional factors contributing to this gap. Roma women, particularly those living in rural areas, also have worse access to medical and reproductive health services. Additionally, Roma patients may encounter discrimination and racial prejudice while accessing healthcare, which can lead to misdiagnosis, and discourage them from accessing services in the future.
GBV situation in Romania

GBV is widespread in Romania. A 2014 study by the European Union Agency for Fundamental Rights (FRA)\(^{51}\) found that 30% of women in Romania have experienced physical and/or sexual violence, while only 23% of those women reported the violence to the police. Data from the Romanian General Inspectorate of Police indicates that 32,814 women reported domestic violence in the first ten months of 2022, an increase in reported cases of 13% compared to the first ten months of 2021. Data from ANES shows that in 2022, there were 5,338 calls for support for domestic violence to the national helpline.\(^{52}\) Further, femicide in the context of intimate partner violence is an issue of concern in Romania. Between 2011 and 2015, 184 cases of intimate partner femicide were recorded,\(^{53}\) and more recent data from 2020 indicates 44 women were killed by a family member or intimate partner that year.\(^{54}\)

These figures do not represent the true extent of GBV in Romania, as GBV is chronically underreported and there are significant gaps in the data collection systems on violence against women in Romania, as elsewhere. The Council of Europe Group of Experts on Action against Violence against Women and Domestic Violence (GREVIO) report, published in June 2022,\(^ {55}\) considers this to be a key area of concern “that prevent[s] a comprehensive view of gender-based violence against women and domestic violence from emerging in Romania and hinder[s] the evaluation of public policies and laws.”

Patriarchal values are still widespread in Romanian society. A recent report released by UNDP shows that prejudiced views concerning women have actually increased among Romanian men over the past decade, while they’ve remained constant among women. Only 8% of men were found to hold no gender biases, as opposed to 18% of women.\(^{56}\) According to a recent study measuring Romanians’ perceptions and attitudes towards GBV,\(^ {57}\) almost one-third (27%) of Romanians considered non-consensual sex as justifiable under some conditions. The same study shows that there are significant areas of concern regarding gender equality, men’s economic control over women, as well as control over their freedom of movement. Moreover, the study shows that while certain types of GBV, such as verbal and physical violence are generally recognized as GBV by Romanians, there is a significant lack of awareness and recognition of other forms of violence against women, such as social, economic, and spiritual violence.

Political context

In recent years, women’s rights and LGBTIQ+ organizations in Romania have been confronted with an anti-gender agenda, in the form of a referendum in 2018 against same-sex marriage and “gender ideology”. This has led to direct budget cuts for centers for victims of domestic violence and the weakening of institutions responsible for gender equality.\(^ {58}\) Sex education has been under attack, while the concept of gender has been instrumentalized by the conservative movement to stir controversy, up to the point of attacking the teaching of gender studies in universities or of any references to gender in schools. In tight connection with the anti-gender movement, the anti-choice movement has gained visibility in Romania, infiltrating the political agenda, local communities, hospitals and severely decreasing access to abortion for women throughout the country and spreading anti-choice rhetoric in the name of “defending

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\(^{54}\) https://eige.europa.eu/gender-equality-index/2022/ domain/violence/RO#:~:text=EU%2Dwide%20data%2C%20intimate%20partner%20in%202020
\(^{55}\) https://rm.coe.int/final-report-on-romania/ 1680a6e439
family values." In a similar evolution with that of the orchestrated anti-choice movement in the US and Poland, Romania is currently facing the 'pre-outlawing phase', with severe restrictions in access to abortion. The anti-gender and anti-choice movements are strongly supported by the Romanian Orthodox Church, which is the most trusted institution by Romanians, according to recent multiple opinion polls, but is also significantly supported by the protestant movement and funding traced back to the USA. This not only has negative implications for women's reproductive autonomy and rights, but also for sexual violence survivors.

Policy and legal context

In the last two decades, Romania has made important progress in addressing GBV, including by adopting Law 217/2003 for the prevention and combating of domestic violence. This law defines domestic violence as "any intentional physical, sexual, psychological, economic, social or spiritual violence or inaction that occurs in a family or domestic setting or between spouses or ex-spouses, as well as between current or former partners, regardless of whether the perpetrator lives or has lived with the victim." It includes psychological, physical, economic, social, spiritual, and cyber violence as types of domestic violence. A recent revision to the law introduces temporary protection orders, achieved due to years of advocacy by feminist activists. However, women are not aware of the protections available to them within specific laws, such as provision for restraining orders and electronic monitoring bracelets of perpetrators.

Lack of effective implementation of the existing legislation and policies is also a problem in relation to law enforcement and prosecution of domestic and sexual violence. For example, in 2022 almost 70% of reported offenses of sexual assault against a minor were not prosecuted, and considered as 'settled' including through classifying rape of 10–12-year-old girls as consensual sexual acts with adult men. The introduction of 16 years as the age of consent within the Penal Code and Code of Penal Procedure (no. 457/2022) will hopefully reduce the pressure on child survivors to prove a crime that is usually hidden. Positively, recent reforms have removed the requirement for virginity certificates by medical examiners, which was a form of secondary abuse on girls to prove their virginity. Another important piece of proposed legislation, initiated by WROs, would provide for free access to abortion for girls under age 18, women who are unemployed or low income, and survivors of rape or other types of criminal sexual acts. The law was rejected by the Romanian Senate in May this year due to conservative backlash.

Services for GBV survivors

Romanian policy stipulates that each county is obligated to provide services for survivors of domestic violence. These services are offered free of charge by public authorities, such as the General Directorate of Social Assistance and Child Protection (DGASPC) or by NGOs. According to data from ANES, there are 142 centers for victims of domestic violence throughout the country. However, in reality, it is not certain whether these centers are active, many believed not to be due to a lack of financial resources or qualified personnel. Accommodation services for domestic violence survivors include emergency reception centers, recovery centers, and sheltered housing. Social services provided through non-residential centers include centers for providing information, referral, and other support to survivors and perpetrator rehabilitation centers. There is also a free national helpline for victims of domestic violence. Since 2021, the government has committed to establishing ten integrated sexual violence crisis centers. Their role is to provide medical and forensic examination, post-trauma

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61 According to anecdotal evidence from the trial of use of electronic monitoring in three counties in Romania, the monitoring bracelets on perpetrators have only been successful in only 13% of cases, further, according to official estimates, a quarter of restraining orders are broken by perpetrators.
62 According to the Romanian Judicial Inspection Report published in 2021
care, and counseling in the same location for victims of sexual violence.

While there are multiple types of services stipulated by legislation and public policy, in reality, most of these services exist only on paper.63 A recent investigation found that out of the ten integrated sexual violence crisis centers around the country, five of them have not recorded any clients since opening.64 This is a major concern, considering that data from the Romanian Police show that between January and November 2022, there were 6,170 reported cases of sexual violence.65 Officials and WROs have identified several reasons for this inconsistency. First, there is a general lack of awareness of the existence of these centers, while fear and stigmatization discourage survivors from seeking help. The Gender Equality Index confirms that Romanians have the lowest rate among EU citizens of awareness of the existence of services for survivors of domestic violence. WROs also report that domestic violence support centers are unequally distributed throughout the country and that in many instances, as noted above, services do not exist. In 2020, eight out of 48 counties did not have any centers for survivors, while there were only three county rehabilitation centers for perpetrators, with two in Bucharest.66 Moreover, funding for these centers comes from local and county budgets, significantly affecting quality and access to services.

While there are a small number of WROs focused on supporting refugee women who are GBV survivors and advocating for dedicated policies and programs for refugee women, most Romanian NGOs engaged in the provision of humanitarian aid to refugees have little experience addressing GBV. Case management for GBV survivors is being provided by women's organizations including ANAIS and Sensiblu Foundation, who provide legal aid, counseling, referrals, and other direct support. Women’s organizations are also trying, with limited resources, to increase refugee women’s protection and dignity by helping them access basic resources for themselves and their children, such as clothing items and hygiene products through donations from private individuals committed to helping refugee families. There are also several NGOs in Romania helping Roma Ukrainian refugee women through case management, counseling, referrals, and accompaniment to services, as well as through group support programs (which have the triple benefit of addressing GBV, creating mutual support networks, and providing information about their rights).

Women’s civil society organizations in Romania

For three decades, WROs have been actively advocating to improve legislation and public policy around GBV and providing responses to GBV survivors. There are several networks focused on gender equality and GBV, including

- **The Coalition for Gender Equality (Coalitia pentru Egalitate de Gen)** – a national coalition of 15 organizations involved in gender equality and GBV advocacy. The Coalition was founded in 2014;
- **Romanian Network for Prevention and Combating Violence against Women (Rețeaua VIF)** – a national network of 25 organizations that began in 2011, whose mission is to increase protection of GBV survivors by improving legislation and services, education and information, lobbying and advocacy; and
- **#ȘiEuReușesc** – a national network of GBV survivors run by ALEG, a WRO based in Sibiu.

In addition to these networks, there are many NGOs and CBOs across the country addressing women's rights and gender equality. The
majority are based in Bucharest, however, there are WROs working throughout the country, and NGOs outside the capital that include women’s rights work in their broader missions to support children, young people, and disadvantaged and vulnerable groups. Women’s organizations provide essential services to GBV victims and survivors, organize at the grassroots level, and join forces with other organizations such as Roma and LGBTQ+ organizations in various efforts. Despite austerity measures in the past, women’s organizations continued to mobilize. While advocacy has not been easy within the current political context, several gains have been made due to the sustained efforts of these organizations and alliances. For example, the Network for the Prevention and Combating Violence against Women successfully advocated for the recently adopted anti-rape law passed by the Romanian Parliament which sets the minimum sexual consent age of 16. Women’s organizations also successfully advocated for the introduction of protection orders and outlawing of virginity tests.

### Roma women’s rights movement

Roma women have been advocating for their rights for nearly two decades, beginning in 2006 when ANES invited civil society representatives to discuss the amendment of Law 202/2002. Roma representatives attempted to have “multiple discrimination” inserted in Article 4, to emphasize that women can face discrimination not only on the basis of sex but also on the basis of race, ethnicity, religion, gender orientation, disability, etc. When ANES rejected this suggestion, Roma women mobilized and put forward an open letter, signed by Roma and non-Roma women and activists, expressing concern about a body specifically established to advance women’s issues not standing by the principle of discrimination. A round table was organized in response to the Roma women. Several CSOs and Roma activists pushed the responsible governmental bodies, ANES and the National Council for Combating Discrimination, to recognize the importance of introducing the term multiple discrimination in the specific article. Later, the term multiple discrimination took the broader shape of intersectionality.

This was the first Roma women’s initiative advocating for women’s rights. Others followed, including various campaigns against gender violence, marches, and protests for women’s rights. The establishment of the first feminist self-led NGO in Romania, E-Romnja, for the promotion of Roma women’s rights, has since shaped the movement for Roma women’s rights and intersectionality at both national and international levels with its groundbreaking research report on violence and intersectionality. Through support and mentorship, the organization has created an international Romani feminist movement aimed at changing attitudes and making visible the needs of Roma girls and women, such as access to public water, free contraceptives, and free medical care for the prevention of cervical cancer. Now, local groups and two community centers dedicated to Romani women’s needs operate in the southeast of Romania, fighting GBV, and forced evacuations, and advocating for reproductive rights, gender equality, and intersectionality. Through E-Romnja, Roma women are part of the mainstream Coalition for Gender Equality, National Network for the Prevention of Violence against Women, Housing Block, and Network for Breaking the Silence against Sexual Violence and are strong advocates and supporters of various legislative initiatives against GBV and discrimination against Romani women. Although there is a national and international trend toward recognition of Roma women’s rights, Roma women still face discrimination in access to employment, quality education, reproductive health, and justice.
GBV, safety and protection concerns

Ukrainian women

Single women with children are the group most at risk of experiencing harassment, exploitation, and abuse during transit and in displacement. In FGDs with Ukrainian women carried out across assessment sites, participants described single women, who make up the majority of Ukrainian refugees crossing into Romania and often travel alone, as most at risk of GBV. The risks facing Ukrainian women in transit have been well-documented, and include increased risks of trafficking, abuse by unvetted volunteers at transit sites, and exploitation when attempting to access services.

When discussing their sense of safety since arrival, all of the Ukrainian women participating in the assessment discussed fear of harassment when going about their daily activities in Romania, including when going out shopping or walking alone at night. A number of participants linked the feeling of safety to ‘home’, and the safety of family members in Ukraine is at the forefront of their list of priorities. The free internet access and telephone conversations to Ukraine help foster a feeling of safety for refugees, as it has brought home closer to them. Women also reported that sexual violence is a particularly common issue that they face in Romania, in public spaces, including public transport, and in dating relationships. Women do not want to report to the police as they are afraid of being revictimized.

Ukrainian women were generally reluctant to discuss intimate partner violence, however, those who did, indicated that it is normalized and minimized within their communities, making it hard for women to speak about it and ask for help. Women reported that gender norms and roles are very rigid in their communities, putting a great deal of pressure on already burdened women to provide care for everyone else, while also looking good. Currently, they feel additional pressure as they are constantly being compared to Ukrainian men, who are themselves conforming to strict gender roles by joining the army or working abroad to support their families. In the context of the war, women are finding it difficult to challenge traditional gender norms, including those that normalize and enable domestic violence and that maintain silence around it. It was reported during focus groups and during individual interviews that many refugee women in Romania are still experiencing domestic violence even in Romania, with their husbands/partners in Ukraine exerting control over them remotely, including through manipulation and blackmail. For example, some abusive men are threatening to have women’s children taken away from them and demanding they return to Ukraine. One woman was denied permission by her Ukrainian husband to return to Romania due to his concern she “will emancipate”, and separate from him. Ukrainian women almost never complain to the authorities or other services in these situations due to fear of losing humanitarian protection support. FGD participants reported they know of many cases that do not turn to anyone for help to anyone.

GBV service providers are increasingly aware of the linkage between refugee women’s safety and their economic security. Economic insecurity is increasing the vulnerability of refugee women from all backgrounds living in Romania to violence and exploitation due to their lack of resources to meet their most basic needs, such as food and shelter. Ukrainian women have a variety of professional qualifications,

- IV. FINDINGS FROM FOCUS GROUPS AND INTERVIEWS -
which have not formally been recognized in Romania. Thus, they are only able to take jobs in child care, domestic work, and the hospitality industry, primarily in restaurants. However, positively the beauty industry has recognized Ukrainian qualifications, enabling Ukrainian women to work in this sector while in Romania. Financial insecurity has led to pregnancy for some single women seeking to secure shelter and a safe environment for their children. Many have fallen into the trap of romantic relationships with Romanian men who offer to support them, only to later abandon them, leaving them in an even more difficult situation. NGOs providing humanitarian assistance reported during the assessment that Ukrainian refugee women have been recently seen in the center of the capital begging with their children.

Language is a major barrier to creating a sense of safety in Romania, as refugees find it challenging to access services, report abuse or violence to authorities, or connect with Romanian women in their new home. The lack of information, specifically information in a language refugees can understand, is a problem. As one key informant stated “The main issue is the lack of access to information regarding safety and protection. Most of the women and girls, regardless of their socioeconomic status or educational background, do not have access to information about what they can do if they are unsafe or need help”. Ukrainian women feel very stigmatized speaking Russian, as it is considered the language of the oppressors. When it comes to translation, many Romanians may understand Russian, but currently, it is forbidden to use the language.

Romanian health, education, and child care services are generally not easily accessible to refugees, as they are not designed to accommodate refugees’ needs. For example, many Ukrainian women living outside Bucharest struggle to access public health services, as these services are limited to large urban areas which can be difficult to attend, particularly for mothers who do not have access to child care and can’t easily travel with children. When women do manage to come to Bucharest, they may struggle to find an appointment and need to stay overnight, which is expensive. Schools and medical services do not have additional funding and systems in place to accommodate refugees’ needs, and therefore many family doctors do not take refugees as patients. They do not have translators or the capacity to translate medical documents, and women cannot ask questions, and as such they are forced into consenting to procedures they may not understand, which can result in various forms of violence. Women’s reliance on translators and cultural mediators who may subscribe to cultural norms that normalize GBV and therefore do not share appropriate information about GBV means that GBV can be overlooked and unaddressed, leaving women without access to specialist support. For example, mediators may hold the belief that women have a “sexual duty” towards their male partners when reunited (either in Romania or in Ukraine as part of family visitation efforts). Women feel both cultural obligation and pressure to provide sexual gratification to their male partners due to the risks they are taking with their lives as part of the war effort. However, this raises concerns around the issue of consent.

It is clear that intersecting factors contribute to violence against refugee women in Romania, including both traumatic pre-arrival experiences, and issues related to settling in Romania, such as acculturation, economic dependence, stress, and social isolation. Those most at risk are those marginalized due to other identities, be it ethnic, economic, sexual orientation, or age. To assist in overcoming integration challenges, service providers are increasingly implementing strategies to enhance cultural safety and improve coordination with refugee or migrant support organizations. Promoting refugee women’s involvement and leadership has proven important in developing culturally competent programming and is underpinning effective violence prevention strategies.

**Women from Africa and the Middle East**

Syrian, Somali, and Yemeni FGD participants in Bucharest shared disturbing accounts of violence by smugglers, border guards, and other men encountered along their journey to Romania. In contrast to Ukrainian women, who were more reluctant to discuss GBV during their

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67 It is understood that as of August 2023, this issue is being resolved between the governments of Romania and Ukraine.
flight from Ukraine, the women from Africa and the Middle East spoke openly about the violence they experienced and witnessed during their journey to Romania. While many mentioned feeling much safer since they obtained asylum in Romania, their stories draw attention to the need to further examine and raise awareness about the risks and needs of refugee women and girls from Africa and the Middle East who seek refuge in Romania and elsewhere. Refugees from the Middle East and Africa make markedly longer, and thus, often more dangerous journeys to Romania.68 Forced to cross multiple borders, without the guaranteed right to asylum and protection, women from these contexts are exposed to immense risks and violence. During interviews with women from Africa and the Middle East during the assessment, women shared harrowing accounts of their journeys to reach safety in Romania. Some were fleeing persecution, conflict, and disasters in their countries, others were leaving abusive relationships with husbands or family members. Regardless of their reasons for making this arduous journey, being a woman who traveled alone greatly increased the risks they faced along the way. One caseworker shared the following experience of one of her clients:

“There was one woman I worked with who left her country and was raped numerous times by different men she encountered along the way. She went to Turkey and from there to Greece. In Greece, she stayed in a house with several men who raped her constantly. To escape them, she moved to another house, with three men. Unfortunately, they also abused her for two more months. She did not know the way to escape and could not run away. She managed to leave with one of them to Serbia and then ran, managing to find her way to Romania alone. When she arrived in our country, she was already 14 weeks pregnant. She was married and her husband came to Romania and discovered that she was pregnant. Fortunately, he accepted and recognized the child. The husband helped her a lot, especially because she had serious problems with the pregnancy, and she had an infection.”

Many assessment participants shared similar stories of abuse at the hands of the men entrusted with helping them reach a safe country. Others shared stories about the abuse they suffered perpetrated by European border guards while attempting to request asylum.

Refugee women from Syria, Somalia, and Yemen shared how changing social and gender norms have allowed them to push social boundaries and explore greater freedoms since living in Romania. One woman reported that “In Syria, there is no respect for women, no school, no work. I was always locked in the house”, while another stated “Women are forced all the time by religion, they don’t have the right to speak up, especially out loud, to say no or have any say regarding marriage. About 80% of women in Syria are in this situation”. Refugee women from these communities reported that due to different gender norms and the environment they currently live in, they generally feel safe in Romania, especially in comparison to their home countries, which are under constant attack and insecurity.

Women from African and Middle Eastern communities experiencing GBV generally seek support from family members since arriving in Romania. While they are reluctant to report to Romanian authorities, they do seek support from other trusted sources including cultural mediators working with humanitarian organizations whom they feel safe with. Cultural mediators with protection experience and familiarity with Romanian law have helped several women in serious domestic violence situations. They have supported survivors to access emergency shelters and obtain restraining orders. However, following immediate protective actions, such as restraining orders, women reportedly often drop the case due to the bureaucratic legal process, economic dependence on their spouses, and cultural and social norms. Women in contact with social workers are provided legal advice on how to obtain protection separately from their abusive husbands. However, obtaining a divorce from their husband is difficult as they are living in another jurisdiction from where they were married, complicating matters and

making it difficult to monitor the situation of women trying to escape their abuser.

The lack of available interpretation services for women from Syria, Somalia, and Yemen is problematic for GBV survivors. As one person stated “The lack of interpretation services at government agencies including at police stations presents another issue for the safety and protection of refugee women and girls. The police do not have any interpreters, so they call on the GBV centers to ask for translators and if the translator is not available, then the case is closed without deeper investigation. Most of the time they do not take further measures”. When women discuss these challenges with each other, it lessens the amount of trust in social services and reduces the number of women who will seek help in the future.

**Roma women**

Roma women reportedly face similar safety, language barriers, and service access issues, with discrimination against Roma people exacerbating the challenges faced by Ukrainian Roma women refugees. According to FGD participants, Roma women face discrimination at the hands of Romanian authorities, NGOs, and the host community. Roma women are often not considered to be genuine refugees and are believed to not be deserving of assistance. Negative stereotypes abound, with many Romanians complaining that Roma “are just here for economic reasons, have too many children, or are just coming so they can bring their families”. According to one FGD participant, while other Ukrainian women who try to help their families are often seen as noble, Roma women attempting to help their families are seen as “something bad”. This discrimination is another layer of abuse Roma women face in Romania. Most of the Roma in Romania and Ukraine abide by traditional gender norms. Roma women are expected to be responsible for maintaining their homes and looking after their children. They are not encouraged by the men in their community to obtain an education, despite many women, especially mothers, seeing the value of their daughters gaining an education. The low educational attainment of Roma women impacts their labor market participation and low wages. Sexism, old-fashioned and set views, and restrictions on the types of work that is considered acceptable all impede Roman women’s access to employment.

Roma women experience very high rates of GBV at home and in the community due to their intersecting gender and ethnic identities. The Roma women who participated in FGDs all shared their experience of multiple types of violence: physical, psychological, sexual, and economic. Physical violence is the most frequently reported. One woman shared “Once I was so beaten by my husband that the bruises covered my whole body. You couldn’t put the width of a finger anywhere on my body without touching a bruise, but I stayed for my children”. Many Roma participants shared their experiences of harassment and violence in the workplace by colleagues and employers. The harassment has forced some to stop work because they fear for their safety and fear reprisal if they make a complaint. Younger women were the most likely to share experiences of ongoing or recent harassment in workplaces or public spaces, while the older women in the groups spoke more about domestic violence. Early marriage and pregnancy are also common in the Roma community and negatively impact adolescent Roma girls. Many of the women participants had been married at a young age and regretted their lost childhoods and inability to continue their education. As a result, they want their daughters to study and have a career instead of getting married and being burdened with the responsibility of caring for children and families.

Roma women participants in Constanta and Bucharest shared fears over the safety of young girls in the community. Many women reported that because of their lower socioeconomic status, adolescent Roma girls are at particular risk of grooming, trafficking, and forced prostitution. Due to the lack of trust and fear of racism from authorities, many don’t report sexual abuse and exploitation. Fear of judgment and shame are also significant barriers to girls and their families reporting sexual exploitation to authorities and seeking support from services. A frequently discussed issue facing adolescent girls was the “loverboy”
phenomenon, a common coercion tactic that involves an abuser targeting vulnerable, poor, and often young women and girls online for sexual exploitation by pretending to be seeking a romantic relationship. Using social media and other platforms, these perpetrators obtain sensitive information and intimate images from girls and use them to blackmail them into prostitution. One Roma woman reported, "what I teach girls is to stay away from drugs, prostitution, and video-chat. At one point my daughter would come home depressed and ask me to send her to a psychologist because she was being blackmailed at school by boys - to take nude photos etc. They were blackmailing her to shame her.' Violence is also commonly used as a method of coercion by perpetrators of sexual exploitation.

Violence against Roma women is still significantly under-reported. Survivors of GBV do not seek help from GBV services or report GBV to authorities because of their experience of intersectional discrimination which feeds into the lack of trust in local and governmental institutions. Roma survivors of domestic violence also face greater difficulties accessing services than other domestic violence survivors due to poverty, social exclusion, and the lack of social services in the areas where they live.69 According to assessment participants, survivors tend to try to resolve their problems with the help of their parents and in-laws acting as mediators. However, increasingly Roma women are seeking safe spaces to be able to build social networks with other Roma women. The women reported high rates of depression and a need for professional treatment. They stated that depression among Roma women is linked to their reluctance to express their feelings and exhaustion from their multiple paid and unpaid responsibilities as workers, mothers, wives, daughters-in-law, sisters, community members, and friends.

Reproductive health

Access to contraception and abortion has been severely reduced in Romania in recent years. In the early 2000s contraceptives were free, while currently, the cost is high and inaccessible to socially disadvantaged groups of women, including refugees and Roma women. In rural areas, Romanian women cannot access free contraceptives, and Roma women find themselves mistreated and discriminated against by male gynecologists who have racist attitudes. Corruption among doctors is still a concern. Pregnancy is an additional challenge for refugee women due to their precarious economic situations. Yet few organizations and community centers provide training on family planning, sex education for youth, language classes, and GBV information, despite the high need to address the reproductive health of Ukrainian refugee women. Complicating the situation, women do not have access to adequate translation within medical services; although the clinics state they have Russian-speaking doctors and therefore do not allow external translators to accompany women to appointments (as other specialist NGOs working in the area would provide). As one key informant advised, “Pregnant women are particularly vulnerable because of this, and a few pregnant women have experienced violent medical procedures, lack of consent or information provided, being separated from their newborn for weeks without any information about what is going on, etc.” Moreover, adolescent girls living in accommodation centers are reported to be engaging in risky sexual behavior with little knowledge about sexually transmitted diseases, pregnancy risks, or consent. Support is therefore needed to provide adequate and appropriate information and education on reproductive health and GBV to women and adolescent girls in Ukrainian. It was reported that a midwife medical service is set to be piloted in a Ukrainian refugee women’s shelter in Bucharest by a local WRO, which is a positive development.

Priority economic and psychosocial needs among refugees

The economic outlook in Romania remains marked by an exceptional degree of uncertainty as Russia’s war against Ukraine continues and the potential for further economic disruption is far from over. The biggest threat to the economy is posed by negative developments in the gas market and the risk of shortages, particularly in the coming winter. Beyond gas supply, the EU remains directly and indirectly exposed to further shocks to other commodity markets. Long-term inflation and possible adjustments in global financial markets to the new high-interest rate environment also remain important risk factors.

For refugee women, a potential economic downturn will magnify the impact of the exploitation of the 50/20 program by landlords who make women pay the utilities from their daily allowance from the Romanian Government of 20 RON (approx. USD 4.5) which is supposed to be for food. Giving landlords, rather than refugees, the 50/20 safety net creates opportunities for the “landlords who accommodate more Ukrainian refugees to benefit from an income of over 1,100 dollars per month” without reimbursing the amounts to refugees as required. The 50/20 program has led to a “transformation from warmth to a predominantly material interest” towards refugees, according to one Ukrainian refugee woman in Bucharest who participated in the assessment, leaving women vulnerable to exploitation and abuse. Compounding this, Ukrainian women on the 50/20 program are already facing backlash from Romanian neighbors, which is likely to worsen should the economic situation deteriorate. As one woman noted, “Sometimes, my baby cries, and I immediately have neighbors at my door telling me to make him stop, or if I take the garbage to the public trash can I would have neighbors shouting at me that we, Ukrainians should go back home, as we have taken too much money from them”. Within this deteriorating context, all of the women interviewed spoke about essential economic and psychosocial needs, including employment, safe spaces, and social connections.

Employment

Women participating in this assessment stressed that finding work in Romania is a priority protection strategy and articulated how employment contributes to women’s well-being and safety, including because they would no longer be dependent on the generosity of strangers for survival. Many refugees shared their gratitude to the Romanian people for their generosity but also expressed fear about the limitations of the resources available to support them and waning support. As one woman put it “It’s difficult for us to protect ourselves because we’re always in this precarious uncertain situation. We depend on all these generous people that help us, and we’re afraid that if we make a mistake, we could lose this help”. Women participating in this assessment overwhelmingly shared an aspiration for economic independence to be able to meet their basic needs. Economic independence provides security, confidence, and the ability to provide for themselves and their children. Women highlighted that it is also key to the realization of their rights and autonomy over their own time, lives, and bodies. Economic security is a known protective factor against GBV, including domestic violence. As one service provider noted, in the context of domestic violence, without financial support for themselves and their children, “Most women will return to their abusive partners”.

The work that refugee women are doing does not reflect their skills and qualifications. Many Ukrainian refugees have tertiary or professional qualifications as accountants, photographers, nurses, teachers, civil servants, senior managers, and businesswomen. Very few who had worked before coming to Romania are now working in jobs that reflect these skills or the jobs they were doing in Ukraine. For the most part, women are working in less skilled roles, for example, teachers are working as interpreters. Language classes and training to help transfer qualifications could reduce barriers to the labor market for these women. While two-thirds of refugee women participating in the assessment have attended English language classes, there...
remains a large cohort who are not accessing language tuition. Some single mothers have had difficulty completing language courses due to childcare or family commitments. The assessment found that not all refugee women want to work; the key focus of those supporting displaced women is Romania should be to reduce the barriers for those who wish to, including enabling those with skills and qualifications to work in jobs that reflect them. Due to changing social norms and their financial situation, Roma refugee women are trying, but struggling, to find safe and dignified work. Working in unskilled professions, they are burdened with responsibilities as domestic caretakers and as workers in paid employment, with little support from disapproving male family members or access to childcare. Among Ukrainian refugees, Roma women are the most vulnerable, not even able to access accommodation outside shelters as private accommodation owners can be racist and discriminatory towards them.

**Safe spaces and social connection for women and girls to support their mental health and psychosocial well-being**

In nearly every FGD, women spoke about the need for connection and having a place for women to gather, socialize with other women, learn new skills and access activities and services to support their psychosocial well-being. They are seeking an emotionally safe space to express themselves without fear of judgment. Multiple key informants also highlighted the need for dedicated women and girls’ safe spaces to support GBV survivors, as well as support refugee women more broadly, building on existing community groups and organizations. One key informant advised “They would need, for example, an organization that does this kind of community-based approach and that brings everybody together. They can cook meals, and organize activities for kids. If you involve women who are survivors of GBV, then you can help introduce them to a community network where they can get different types of support. By doing this, you can strengthen the protective environment in the community, improve women’s economic and psychosocial well-being, and empower survivors in so many ways. It’s not enough to just receive counseling sessions or cash assistance”.

The main resource refugee women currently utilize to ensure their safety is each other. Women shared that they have sought out and created informal mutual support groups to help improve their safety, protection, and psychosocial well-being. For example, Ukrainian refugee women have created virtual safe spaces to share information about services and coping strategies. However, while they are making efforts to organize safe spaces, they lack a physical venue, trained personnel to provide mental health support, facilitators for skill-building and well-being activities, and resources for recreational activities. Through networking and community building, refugee women and girls are gaining increased access to information and are learning from each other how best to safely navigate their new home. FGD participants shared that they use social media platforms, such as Telegram, Facebook, and WhatsApp, to connect with each other, share information about safety issues they encounter, (for example, threatening taxi drivers), and resources, such as good doctors who speak their language. They also rely heavily on the few trusted interpreters in their community, who act as cultural mediators. Programs that support these cultural mediators to learn about the humanitarian system, how to access services, and how to speak about sensitive issues like GBV, would be immensely beneficial, not only to individual interpreters but to the communities they serve. This is because interpreters play a vital role in enabling refugee women’s access to services and information. Refugee women also reach out to local women’s organizations, especially when recommended by other refugees.

Refugee women reported that routine tasks, such as helping children with homework, going out for walks, and playing with children are positive coping strategies. Women in Constanta shared that walking on the beach supports their emotional and psychological well-being. Some participants advised, however, that these strategies are not enough and that they are struggling psychologically, using sedatives and alcohol to cope with their distress.

Further, women reported that the constant needs assessments they are being subjected to are harming and not helping their well-being. The constant assessments by different stakeholders
are exhausting and meaningless to them. One social worker from a local NGO mentioned that they “Are tired of being used only as numbers in a statistical analysis.” Another social worker stated “Their existence here as refugees is in and of itself a form of violence, they are constantly being harassed and pushed to the side”.

**LGBTIQ+ women**

LGBTIQ+ refugee women are more financially well-off than other refugees and tend to be highly educated and from professional backgrounds in Ukraine. However, as with other women from Ukraine, they are not able to work in their professions due to language barriers and lack of recognition of their qualifications, and so are working in jobs such as food delivery.

Because of fear of harassment, many LGBTIQ+ refugee women hide their sexuality from authorities and NGOs as they feel safer passing as heterosexual in Romania. They live in a state of constant vigilance and suspicion, fearing they will be ousted. LGBTIQ+ women living in shelters experience consistent fear that they will lose their accommodation if their sexuality is discovered, making them afraid to report harassment or exploitation due to fear of eviction. As with other women from Ukraine, those living in private accommodation are at risk of exploitation, for example, being made to do unpaid domestic work.

LGBTIQ+ women, particularly those who identify as transgender, also have limited access to all types of services. All of them are seeking a ‘community’ to act as a resource and support system. Participants shared they feel excluded from available humanitarian assistance and support services, as many safe spaces and events are advertised for mothers and children, and information about LGBTIQ+ events are in Romanian and therefore inaccessible to them. They generally seek help and support from LGBTIQ+ groups to keep themselves safe from violence and harassment. Being connected with LGBTIQ+ rights organizations makes them feel less isolated and marginalized. Positively, LGBTIQ+ refugee women had greater knowledge and information than other refugee women about mental health issues, and have been accessing mental health services, including psychiatric services through referrals from NGOs.

**Opportunities for strengthening support for refugee women**

**Support women's organizations, including those providing GBV services**

Women’s civil society and women’s rights organizations are leading the way in strengthening refugee women and girls’ safety, protection, and well-being in Romania, including by providing essential services and holistic assistance. Their understanding of the context, women’s experience and needs, and their formal and informal networks are all significant resources that international organizations should be supporting and building on. Many local organizations have been working with women and girls and marginalized communities for decades, and have the knowledge and expertise to design comprehensive interventions that address women’s safety and protection, including GBV.

Women’s organizations are leading in providing GBV response services to survivors and other at-risk women and girls. They provide comprehensive case management for GBV survivors, offer free legal services, counseling, community building, and provide access to reproductive healthcare, including accompanying support for women, and distribute sexual and reproductive health materials. Pregnant refugee women are particularly vulnerable due to language barriers and not being allowed to have interpreters present in medical consultations. The lack of information provided and the inability to give consent in their language causes a lot of distress to these women. WROs are the main point of contact for pregnant refugee women and understand their needs and offer targeted solutions, such as helping them to navigate the healthcare system and providing weekly groceries.

Important progress has been made so far in the area of GBV reporting in Romania, and an NGO leader stated that “The extent to which cases of violence are reported to the police, to the court, shows that the number of reports has
increased. We are not talking about the amount of violence, because everyone in the press says that violence has increased. No, the violence has not increased, the reporting has increased, which is very good”.

In addition, many women’s organizations are supporting refugees’ access to childcare and kindergarten services to support women’s access to the labor market, alongside providing counseling. They are also creating community spaces for women to gather and meet each other, access information, and learn new skills. Initiatives like these are already in place and are a major resource for international NGOs (INGOs). Instead of developing and piloting new programs, INGOs would be better advised to support refugee women and girls by building on the current work being done by local organizations, helping to increase their capacity (through funding and training), and supporting strategic planning around long-term goals.

However, exclusion from international aid and donor financing systems has left women’s organizations in Romania struggling for funding. Thus, the most effective support international organizations could provide is flexible funding and operational capacity-building for Romanian civil society organizations working with women and girls and their local communities. As one key informant explained:

“The thing local organizations need most is money. International organizations could help them by sustaining their long-running efforts, offering to support them with strategic thinking and planning, and helping them to further develop their expertise in particular areas. Right now, national organizations are always in a quest for money. They move from one area to another, just following the money, and it’s understandable why, everyone needs to have an income and they need money to survive. But we should do more with the national organizations to help them define their goals, know how to present their organizations and work to donors, and develop projects. Right now, NGOs don’t really have a voice, they just comply and run for the money”.

One informant suggested that international organizations should run a pilot project for six months, seconding experts into the organizations that they are funding to build financial and reporting capacity. They could then gather the data used for reporting and teach the organizations and others how to use this data for advocacy and fundraising. This would help make organizations more sustainable and ensure that all of this reporting is not a waste of time and effort. More communication, networking, and coordination between relevant stakeholders is also needed to strengthen the referral network and holistic service provision for survivors and women and risk.
V. RECOMMENDATIONS

Develop and disseminate information and education materials about GBV, women’s rights, sexual and reproductive health, and available GBV and reproductive health services in relevant languages to refugees and other vulnerable women. Use existing programs, such as mental health and psychosocial support services (MHPSS), as an entry point for information-sharing and awareness-raising on GBV among women.

Strengthen local coordination and referral pathways between women’s organizations and other service providers that respond to GBV. Ensure that relevant stakeholders, including those providing humanitarian assistance, know how to make referrals to specialist GBV services for survivors.

Provide culturally appropriate and safe MHPSS services. Women from all backgrounds are experiencing mental health and psychosocial well-being issues. Ensure both targeted services for those who need them are available, as well as community-based supports to foster coping and resilience, through:

- Ensuring refugee women from all backgrounds who are experiencing persistent mental health problems can access psychology services in appropriate languages;
- Implementing community-based approaches to support psychosocial well-being building on mutual and peer support strategies women have developed;
- Delivering activities that build relationships between women, foster resiliency, increase access to information and strategies to promote emotional well-being, including information and referral for mental health support.

Create safe spaces for displaced women and girls, including Roma women and adolescent girls, to deliver activities, programs, and services to improve women’s safety, protection, and well-being. Safe spaces should be hosted by existing community centers run by women’s rights and civil society organizations, and train and fund these organizations to establish safe spaces and deliver programs in line with GBV in emergencies guidance, including:

- Providing refugee women with information about GBV and available services, confidential opportunities to disclose and receive support to access GBV services;
- Promoting social connection and integration;
- Delivering education programs for adolescent girls, including young Roma women, focusing on gender equality and GBV;
- Offering Romanian and English language courses;

72 For more information, see GBV AoR Handbook for Coordinating GBV Interventions in Emergency Settings, 2019, available at: https://gbvaor.net/sites/default/files/2019-07/Handbook%20for%20Coordinating%20GBV%20in%20Emergencies_fin.pdf. However, it will be important to build on and not undermine local coordination and referral structures.
Increasing refugee women's safe access to technology and digital tools to enhance their access to information, services, and resources to support their economic inclusion and psychosocial well-being.

**Implement activities to help refugee women better integrate into the host community.** For example, facilitate social activities between refugee and Romanian women and between refugee children and Romanian children to help them connect, build relationships, and create social networks and belonging.

**Implement skill-building and income-generating activities for women and girls that address barriers to the labor market** as part of livelihoods programming to enable transition from the 50/20 social assistance program to a new phase of labor market integration for refugee women.\(^75\) This should include assistance to help refugee women leverage and utilize existing qualifications to obtain employment, skill-building programs based on market analysis, and employability training.

**Support the institutional capacity of women’s rights and civil society organizations working with Ukrainian refugee women, including Roma refugee women to provide:**

- GBV case management, legal services and advice, and individual and group counseling. Ensure dedicated legal advice on separating from abusive partners and accessing legal protection;
- Access to SRHR services for refugee women through the development of a digital platform for refugee women making available lists of doctors with translation services who SRHR support for Ukrainian women.

**Provide mental health support for social workers and other frontline workers** working with refugees who are experiencing burnout.

**Provide specific training on GBV core concepts, reproductive health, and legal instruments to humanitarian aid providers working with refugee and migrant women,** including social workers, translators, community facilitators, and cultural mediators.

**Build the capacity of organizations providing services to refugees to mainstream GBV risk mitigation in line with good practice standards set out in the IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action,** to identify and address GBV risks that emerge in programs and services.

**Undertake advocacy for funding for GBV prevention and response, including for:**

- Comprehensive specialist GBV services, including case management, for survivors of all forms of GBV;
- Reproductive health care;
- GBV prevention campaigns and training of Municipality staff and local social services staff on GBV;
- Making available digital tools for GBV survivors to access specialist support and legal advice.

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## VI. KEY GBV STANDARDS AND RESOURCES

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<td>Emergencies Programming (2019)</td>
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<tr>
<td>Disclosure Toolkit: Responding to Gender-Based Violence Disclosure in</td>
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<td>Humanitarian Settings (2022)</td>
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<td>The Safeguarding Resource and Support Hub for Eastern Europe</td>
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<td>Advancing Women’s and Girls’ Empowerment in Humanitarian Settings (2019)</td>
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<td>**Resources for Economic Interventions to Empower Women and Reduce GBV</td>
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<td>Risks in Humanitarian Settings</td>
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<td>(CLARA) Tools (2016)</td>
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<td>Women’s Refugee Commission, A Double-Edged Sword: Livelihoods in</td>
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<td>Emergencies Guidance and Tools for Improved Programming (2014)</td>
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VII. REFERENCES


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43. The Inter-Agency Minimum Standards for Gender-Based Violence in Emergencies Programming GBV AOR. (2019). Retrieved from https://gbvaor.net/gbviems
### Annex 1.

**FGD participants**

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<td>11</td>
<td>Romanian women</td>
<td>12</td>
<td>18 - 60 years</td>
<td>Curcani Village,</td>
</tr>
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<td></td>
<td></td>
<td>Călărași</td>
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<tr>
<td>12</td>
<td>Romanian Roma women</td>
<td>15</td>
<td>18 - 52 years</td>
<td>Românești Village,</td>
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<td></td>
<td></td>
<td></td>
<td>Dâmbovița</td>
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<td>Total</td>
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### Annex 2.

#### KII participants

<table>
<thead>
<tr>
<th>No.</th>
<th>Role</th>
<th>Organization</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>MHPSS Working Group representative</td>
<td>World Health Organization</td>
<td>Bucharest</td>
</tr>
<tr>
<td>2.</td>
<td>Director</td>
<td>ANES (National Agency for Equality between Men and Women) GO</td>
<td>Bucharest</td>
</tr>
<tr>
<td>3.</td>
<td>Representative of Service for Preventing and Combating Domestic Violence</td>
<td>DGASMB General Directorate for Social Work of Bucharest Municipality (GO)</td>
<td>Bucharest</td>
</tr>
<tr>
<td>4.</td>
<td>Special Inspector</td>
<td>DGASMB (GO)</td>
<td>Bucharest</td>
</tr>
<tr>
<td>5.</td>
<td>Refugee Coordinator</td>
<td>Public shelter for refugees sector 2</td>
<td>Bucharest</td>
</tr>
<tr>
<td>6.</td>
<td>Clinical psychologist</td>
<td>AIDROM (Association)</td>
<td>Bucharest</td>
</tr>
<tr>
<td>7.</td>
<td>Director</td>
<td>AMI - Association for Independent Midwives</td>
<td>Bucharest</td>
</tr>
<tr>
<td>8.</td>
<td>Director</td>
<td>ANAIS (WRO)</td>
<td>Bucharest</td>
</tr>
<tr>
<td>9.</td>
<td>Community organizer</td>
<td>Centrul FILLIA (Center for Curricula Development and Gender Studies)</td>
<td>Bucharest</td>
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<tr>
<td>10.</td>
<td>Community organizer</td>
<td>FCDL- The Common Front for Housing Rights</td>
<td>Bucharest</td>
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<tr>
<td>11.</td>
<td>Community coordinator</td>
<td>ACCEPT (Association for LGBTQ+ rights)</td>
<td>Bucharest</td>
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<tr>
<td>12.</td>
<td>Humanitarian response staff</td>
<td>Easy Eco (Association for LGBTQ+ rights and intersectional discrimination of Roma)</td>
<td>Bucharest</td>
</tr>
<tr>
<td>13.</td>
<td>Humanitarian response staff</td>
<td>E-Romnja (Feminist Association for Rights of Roma Women and Girls)</td>
<td>Bucharest</td>
</tr>
<tr>
<td>14.</td>
<td>Humanitarian response staff</td>
<td>E-Romnja (Feminist Association for Rights of Roma Women and Girls)</td>
<td>Bucharest</td>
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<td>15.</td>
<td>Cultural mediator</td>
<td>Organization for International Migration</td>
<td>Bucharest</td>
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<tr>
<td>16.</td>
<td>Social workers humanitarian response (3 social workers)</td>
<td>SENSIBLU Foundations</td>
<td>Constanta, Galati, Cluj, Suceava</td>
</tr>
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<td>17.</td>
<td>Humanitarian response staff</td>
<td>SECS (Society of Contraceptive and Sexual Education)</td>
<td>Bucharest</td>
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<tr>
<td>18.</td>
<td>Humanitarian response staff</td>
<td>Association &quot;Problema de pe strada mea&quot;</td>
<td>Braila</td>
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<tr>
<td>19.</td>
<td>Social worker humanitarian response</td>
<td>Foundation Inima de copil</td>
<td>Galati</td>
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