

Regional Assessment Report Two Years On

Still Waiting for the Sky to Close: Women's Organizations at the Frontline of the Ukrainian Crisis Two Years On



Acknowledgements

We extend our deepest gratitude to the individuals who shared their invaluable insights and experiences through our survey. Your courage and resilience fuel our mission, and we are deeply committed to advocating for your rights and well-being. This report is a testament to your unyielding commitment, perseverance, and dedication throughout these challenging two years. It is our sincerest hope that we have accurately and respectfully conveyed your perspectives and priorities.

Our heartfelt thanks go to VOICE's network of supportive partners, generous donors, and steadfast allies. HIAS has been the largest financial supporter of our work in Ukraine, Poland, Romania and Moldova. Other donors also include CARE USA, CORE Response, UJA Federation, Urgent Action Fund, the Global Fund for Women, Madre, and UUSC. Our appreciation also extends to the Impact Mapper team, especially Alexandra Pittman, Mariana Servidio, and Victor Atunes, for their exceptional technical guidance.

Crafting this report was a collaborative endeavor, made possible by the contributions of Lauren Messina, Joullanar Darouiche, Sophie Read-Hamilton, Rachel Hills, Yana Tovpeko, Anastasia Chebotaryova, Ania Chromik, Anna Wolczynska, Rodica Moraru-Chilimar, Liliana Istrate, Maria Vieru, Mihaela Gheorghe, and Mihaela Craciun. Your expertise and dedication have been pivotal in bringing this important work to fruition.

Acronyms

- ▶ **AAP** – Accountability to Affected Populations
- ▶ **CBO** – Community-based organization
- ▶ **CSO** – Civil society organization
- ▶ **FDP** – Forcibly displaced person
- ▶ **GBV** – Gender-based violence
- ▶ **GBViE** – Gender-based violence in emergencies
- ▶ **IDP** – Internally displaced person
- ▶ **INGO** – International non-governmental organization
- ▶ **LGBTQI+** – Lesbian, gay, bisexual, transgender, queer, intersex plus
- ▶ **MHPSS** – Mental health and psychosocial support
- ▶ **NGO** – Non-governmental organization
- ▶ **PSEA** – Protection from sexual exploitation and abuse
- ▶ **SEA** – Sexual exploitation and abuse
- ▶ **UN** – United Nations
- ▶ **UNHCR** – United Nations High Commissioner for Refugees
- ▶ **VAWG** – Violence against women and girls
- ▶ **WLO** – Women-led organization
- ▶ **WRO** – Women’s rights organization

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I. Executive Summary

Almost two years after the full-scale invasion began, Russia's war on Ukraine rages on. With it, so does the scale of the humanitarian crisis: as of December 31, 2023, there were over 6.3 million Ukrainian refugees globally, the vast majority of whom (5.9 million) were seeking refuge in neighboring European countries. Women account for at least 70% of these. A further 3.7 million people are internally displaced.

Women's rights organizations (WROs) throughout the region have been frontline responders and leaders in the humanitarian response, drawing on their unique local knowledge and networks to adapt and continue operating throughout the crisis. Since the beginning of 2022, they have overhauled their activities to respond to the surge in demand for frontline support and social services, extending a vital yet increasingly frayed lifeline to millions of displaced women and children.

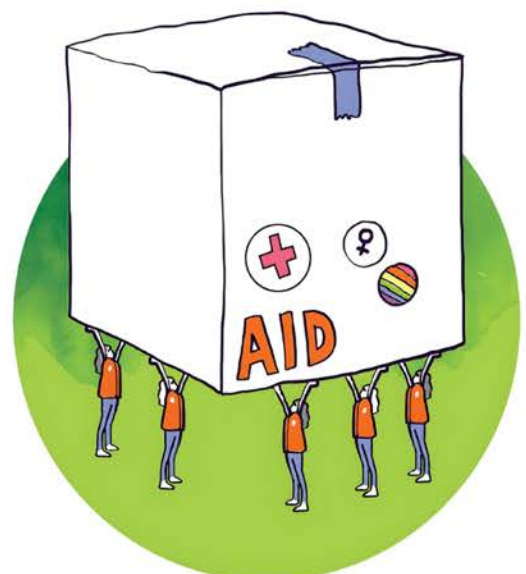
To better understand the realities of these organizations and the women and children they serve, and what donors, UN agencies and international non-governmental organizations (INGOS)' can do to help them, VOICE surveyed 78 WRO leaders and other experts working in Ukraine, Poland, Moldova, and Romania in January 2024. This report synthesizes those findings, focusing on the localized needs and insights of those who have been leading the humanitarian response on the ground. It builds on VOICE's extensive 2022 research (in partnership with HIAS) on the experiences of Ukrainian women refugees, and the role of WROs in the aftermath of the invasion.

The overall picture is one of simultaneous resilience and exhaustion. Despite operating under challenging conditions, over three-quarters of WROs (78%) said they have been able to continue working in line with their organizational mission since Russia's invasion

of Ukraine in February 2022 as well as expand their capabilities to provide humanitarian support to displaced Ukrainians. They have done this at considerable cost: one Moldovan WRO in VOICE's network reported a tenfold increase in the number of annual service users.

WROs have broadened their scope, hired new teams, adapted their programming, and learned the requirements of working within a bureaucratic humanitarian system that is not living up to localization commitments. They have provided critical, life-saving services for Ukrainian women and children, without ceasing their vital work within their own countries and communities. And they have managed to do all this without a significant increase in their budgets.

But the specter of a funding cliff looms large, with well over half of respondents citing a critical lack of financial resources. As one organization put it, "Our very existence is threatened. Our biggest concern is that by the end of 2024, there will be no Ukrainian-led organizations providing gender-based violence services in Ukraine. The work that our colleagues are doing is fantastic and critical, but it is not enough. Funders keep ignoring us or offering us small grants. This is not sustainable for our organization and it is irresponsible for our funders."



Gender-based violence (GBV) was officially added as one of the Central Emergency Response Fund (CERF) life-saving criteria in 2009, yet it remains desperately underfunded in humanitarian emergencies. Despite over half of WROs in our report providing GBV services, and a strong willingness to expand these services if resources permit, the demand far outstrips the supply. Unfortunately, compared to the onset of the crisis two years ago, the situation has seen little improvement.

Now, as in 2022, it is clear that local civil society actors, including WROs, need sustained, flexible, and long-term funding to increase their capacity to operate and enable them to continue their work. It's not just that these organizations are underfunded - that refrain can be heard globally, across multiple humanitarian contexts. It's that the funding they do have is often tied to rigid requirements and processes that just don't make sense within the uncertain, everchanging crisis environment of the region post-invasion.

“It would be good if international organizations understood the context and respected the experience and expertise of Ukrainian NGOs. We need more long-term financial support to maintain the stability of the NGO's work, in particular, maintenance of staff, our offices, etc.”

— Ukrainian WRO

In spite of heroic efforts by WROs, service gaps for displaced and war-affected women and girls remain a critical concern across surveyed countries. In addition to GBV prevention and response services, the most significant deficits are in adequate housing and accommodation, and economic and livelihood

support. In addition, Ukrainian women and children need, now as much as ever before, access to free legal advice and psychosocial support to cope with trauma and displacement. “The biggest problem is the insufficient number of counseling and psychosocial support services for survivors and awareness among the general public on these issues,” said one WRO.

The interaction between WROs and the humanitarian system in the aftermath of the invasion reveals a landscape rife with challenges and unmet expectations.

VOICE’s 2022 research warned against the development of a top-down, unequal relationship between capable local actors and international humanitarian agencies. Today, while these relationships have improved, the power asymmetry continues - despite localization commitments. WROs report limited participation in coordination structures, coupled with frustrations over burdensome reporting requirements, inadequate funding, and a lack of meaningful engagement in decision-making processes. These issues underscore the pressing need for a more inclusive, responsive, and supportive humanitarian ecosystem that genuinely values and leverages the critical role of WROs and local actors in addressing the complex needs of affected populations, moving beyond superficial interventions to ensure impactful, sustainable support.

It is clear that not enough has changed since our original assessment. Two years later, despite huge investment, there is still a pressing need to:

- Make a significant investment in flexible, multi-year and unrestricted funding for WROs to allow them to maintain and expand their life-saving humanitarian and women’s rights work

- Reduce burdensome reporting and administrative requirements for small organizations
- Provide greater information and practical support to help WROs access funding opportunities
- Assess and address critical gaps in housing and accommodation, and economic and livelihood support for displaced women and girls
- Scale up GBV prevention and response for displaced and other vulnerable women and girls, and expand access to reproductive healthcare
- Promote WRO leadership in humanitarian governance and assistance
- Increase attention to the voices of women and girls from particularly marginalized communities, including Roma and LGBTQ+ communities
- Invest in strengthening local women's organizations to ensure that humanitarian assistance is more effective and community-centered

VOICE and our WRO partners in Ukraine, Poland, Romania, and Moldova are calling on governments, UN agencies, and INGOs to step up to fulfill their promises and obligations to WROs, the local humanitarians shouldering the burden of providing care, support and protection to women and children displaced by Russia's war on Ukraine, and to fulfill their responsibilities as duty-bearers to those women and children.



II. Background

As the relentless Russian war against Ukraine rages on, its profound and far-reaching impacts continue to unfold, notably through the massive refugee influx into neighboring countries. As of December 31, 2023, the global count of Ukrainian refugees has surpassed 6.3 million, with the vast majority—5.9 million—seeking refuge in neighboring European countries,¹ and an additional 470,000 displaced beyond Europe's borders.² The internal displacement within Ukraine itself has escalated to an alarming 3.7 million people by January 2024, underscoring the severity of the crisis. Predominantly composed of women and children, these refugees, with women making up at least 70% of the population across host countries, face unparalleled challenges. Amidst this turmoil, women's rights organizations (WROs³) in Ukraine and its neighboring countries, despite being chronically underfunded, have rapidly mobilized since Russia's invasion in February 2022, demonstrating remarkable adaptability and resilience in their unwavering support for forcibly displaced persons (FDPs⁴).

Before the war, these WROs already had substantial expertise working to advance gender equality and respond to the needs of women and girls, while at the same

time struggling to maintain gains in the face of increasingly overt attacks on women's rights throughout the region. They pride themselves on being flexible and adaptable, and this expertise and adaptability positioned them well to rapidly mobilize and pivot to address the needs of women and girls impacted by the crises. However, a lack of adequate resourcing and support has put immense pressure on many WROs, many of whom are concerned about their capacity to continue supporting women and vulnerable populations from their communities in addition to those displaced by the war. Despite localization commitments and calls by VOICE and others to ensure adequate funding of women-led organizations (WLOs) from the beginning of the crisis until now,⁵ the situation has not changed. Instead, the need for sustainable solutions and funding has only grown (see Box 1 for 2024 funding requirements). While early in the crisis there was hope for a short-term resolution to the war, this has not been the case, and **though the people of Ukraine have shown tremendous resiliency, humanitarian funding has not.**

VOICE's overarching goal for the Ukraine emergency response since the beginning has been to support and position WROs in the region as leaders in the humanitarian response. To achieve this goal, VOICE has focused on providing a comprehensive menu of support options, including:

- technical assistance and capacity building in GBViE prevention, risk mitigation, and response;
- support for advocacy and awareness raising on this invasion's unique impact on women, girls, lesbian, gay, bisexual, trans and queer (LGBTQI+) and other at-risk groups;

¹ <https://data.unhcr.org/en/documents/details/105903>

² <https://reporting.unhcr.org/ukraine-situation-flash-update-57-6189>

³ At VOICE we define WROs as feminist groups, collectives, formal organizations, informal groups, and registered and unregistered organizations that are committed to gender equality and explicitly work towards the well-being of women and gender minorities. While not all groups or organizations may want to identify as feminist for a plethora of reasons, we acknowledge organizations that uphold and embody feminist values and principles in their work and their aspirations. These organizations are working on and are led by people from various intersecting identities LGBTQIA+, migrants, and refugees for example.

⁴ The term forcibly displaced persons (FDPs, or forced migrants) used here is an imperfect one that includes FDPs and asylum seekers, as well as some economic migrants. Some foreigners living in countries neighboring Ukraine are technically economic migrants rather than refugees or asylum seekers; however this is a gray area depending on whether their movement was forced by a loss of livelihood related to the conflict, or other causes.

⁵ https://voiceamplified.org/wp-content/uploads/2022/09/REGIONAL_ASSESSMENT_REPORT.pdf

Box 1. 2024 Funding requirements for WLOs in the Regional Response Plan

The total funding requirements to implement the Ukraine Refugee Response Plan 2024 is USD 1.1 billion⁶ and for Ukraine, it is USD 3.11 billion.⁷

For the first time, WLO funding requirements have been listed as a discrete category within interagency financial requirements in the Regional Refugee Response Plan 2024.⁸ The required funding for 89 WLOs across the region for 2024 is USD 45.2 million. For the countries that were part of this assessment, WLOs have the following requirements:

- Poland USD 27,340,827
- Moldova USD 6,749,549
- Romania USD 5,486,900

Note: While the figures speak to the funding needs of WLOs within the Ukraine refugee response, it is important to note that they only reflect the needs of WLOs who participated in the development of the plan and the real needs are likely to be much higher.

- adaptive solutions to support mental health and prevent burnout among WRO staff and volunteers;
- facilitating access to funding and providing small emergency grants.

In addition to supporting WROs, in partnership with HIAS, VOICE has undertaken various assessments and analyses of the context to ensure visibility and attention to the needs and rights of women and girls and the organizations serving them.

The first of these was a rapid situation assessment undertaken in the weeks following the current Russian invasion, between March 25 and April 15.

The findings of this assessment, detailed in *Waiting for the Sky to Close: The Unprecedented Crisis Facing Women and Girls Fleeing Ukraine*, highlighted the myriad challenges faced by women and girls displaced by Russia's invasion, as well as the need to ensure that WROs are integrated into humanitarian response design and leadership from the beginning.

A key observation arising from the assessment was that local civil society actors, including WROs, would need sustained, flexible, and long-term funding to increase their capacity to operate and enable them to continue their work. **It warned against the development of a top-down, unequal relationship between capable local actors and international humanitarian agencies.** The report provided detailed recommendations for humanitarian actors to ensure the realization of localization commitments, empower women's organizations as humanitarian leaders and responders, and promote the safety, protection and rights of forcibly displaced women and children.

Top priorities at the beginning of this invasion included the following:

⁶ <https://reliefweb.int/report/poland/ukraine-situation-regional-refugee-response-plan-january-december-2024-enro#:~:text=The%202024%20RRP%20focuses%20on,socio%20economic%20inclusion%20are%20enhanced%3B>

⁷ <https://reliefweb.int/report/ukraine/ukraine-humanitarian-needs-and-response-plan-2024-december-2023-enuk>

⁸ <https://reliefweb.int/report/poland/ukraine-situation-regional-refugee-response-plan-january-december-2024-enro#:~:text=The%202024%20RRP%20focuses%20on,socio%20economic%20inclusion%20are%20enhanced%3B>

- Ensuring a gender-sensitive humanitarian response by supporting women’s movements across the region;
- Fulfilling commitments to localization by shifting power to WLOs as localization is one key to upholding the rights of women and girls in emergencies;
- Addressing gaps in the protection of women and children and ensuring essential life-saving protection interventions, including GBV services (see Box 2);
- Improving access to essential services, including healthcare, psychosocial support, safe accommodation, cash and voucher assistance, livelihood support, and education.

In early 2024, VOICE implemented a follow-up survey to identify the needs and concerns of WROs supporting displaced and other

vulnerable women and girls in Ukraine, Poland, Romania, and Moldova two years into the crisis. The first part of this report sets out the priority issues for WROs across the four countries, and the second part looks at the specific context and needs within each country.

In addition to providing an update on the challenges that WROs are facing two years after Russia’s full-scale invasion of Ukraine, the information gathered highlights what is needed to improve the protective environment for survivors of GBV and other women, girls, and marginalized groups. Some of these challenges are new; others have persisted since the first regional assessment. The recommendations that VOICE highlighted in the initial report regarding the measures necessary to address the essential protection concerns and needs for women and girls are as relevant and crucial now as they were on first publication; the ongoing needs of WROs across the region have not changed.

Box 2. Protection and GBV as life-saving criteria⁹

The Central Emergency Response Fund (CERF) has established life-saving criteria to guide the allocation of funds in humanitarian emergencies. These criteria prioritize funding for interventions that directly address urgent and life-threatening needs in crisis situations. GBV was officially added as one of the CERF life-saving criteria in 2009. This addition recognized the urgent need to address GBV in humanitarian emergencies and prioritize interventions aimed at preventing and responding to GBV, including:

- Deploying personnel to guide implementation of an inter-agency, multi-sectoral GBV response and as a priority, support health service providers.
- Provision of accessible, confidential, survivor-centered services to address GBV in line with the Inter-Agency Standards for GBV in Emergency Programming.
- Establishment of protection and prevention mechanisms by identifying high-risk areas and risk factors driving GBV in the emergency.
- Support the implementation of GBV risk mitigation and response in all clusters.
- Support quick orientation of direct service providers, community representatives, and groups on mitigating and managing cases of GBV in emergencies.
- Improve access of survivors of GBV to secure, confidential, and appropriate (health, psychosocial, safety, legal), reporting, follow-up and protection.

⁹ <https://cerf.un.org/sites/default/files/resources/CERF%20Life-Saving%20Criteria%202020.pdf>

2022 Assessment

At the beginning of the war, VOICE conducted a four-week rapid assessment of the situation for women and girls and the needs of WROs within Ukraine and five bordering countries including Hungary, Moldova, Poland, Romania, and Slovakia. Between March 25 and April 15, 2022, the VOICE team collected data through:

- 171 key informant interviews, including 33 with WROs and other CSOs inside Ukraine;
- 22 focus group discussions with over 167 women FDPs;
- observation at over 55 sites, including formal, informal and private shelters, train and bus stations, transit camps, border crossings and organizational service points.

The assessment revealed high risks of trafficking and sexual exploitation and abuse (SEA), as well as conflict-related sexual violence, domestic violence, and other forms of GBV. It highlighted other protection concerns related to shelter and unsustainable housing, heightening the risk of exploitative labor practices, a lack of access to livelihoods and cash-based assistance; and inconsistent access to reliable information. Overall, displaced persons throughout the region were found to lack access to GBV services, reproductive healthcare, and psychosocial support services. Roma and LGBTQI+ communities were identified as facing additional discrimination and protection concerns.

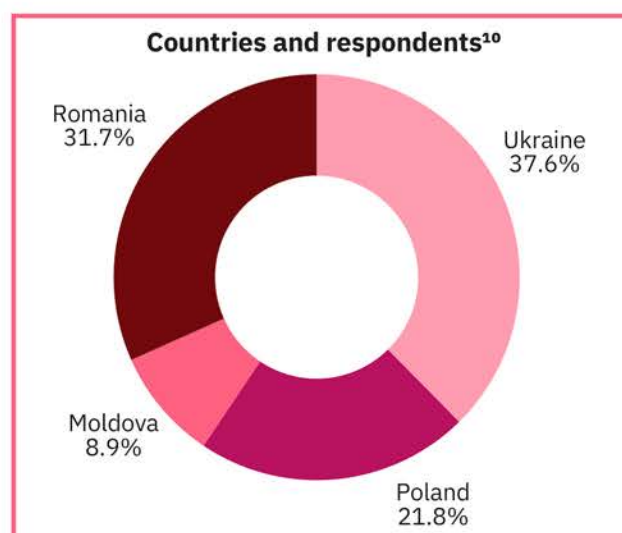
This initial report made key recommendations on the criticality of providing financial support to WROs to ensure that they would be integrated into response design and leadership from the beginning, and to mitigate the GBV

risks and challenges faced by women and girls who were displaced by Russia's invasion of Ukraine. Top priorities from this report included the following, and remain as salient today as on publication:

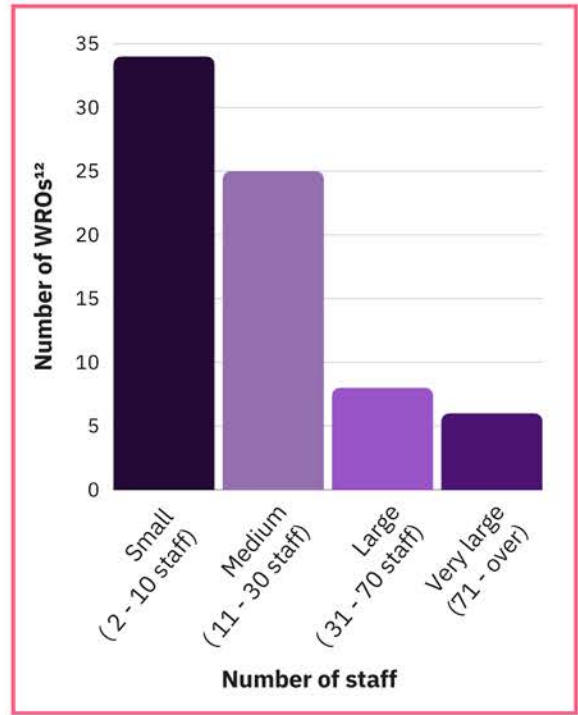
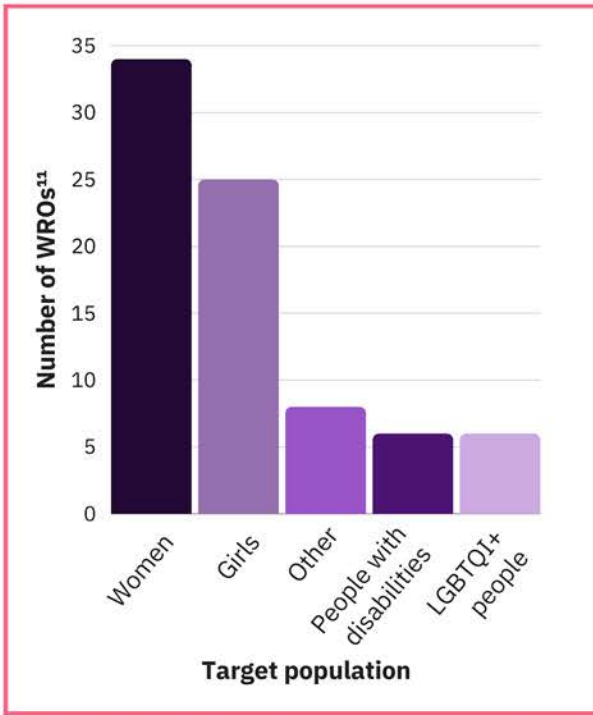
1. Ensure a gender-sensitive humanitarian response by supporting women's movements across the region.
2. Fulfill commitments to localization by shifting power to WLOs.
3. Address gaps in the protection of women and children.
4. Improve access to essential services.

2024 Survey overview

In January 2024, VOICE surveyed WROs to identify and draw attention to their concerns and experiences two years into the crisis, as well as their needs if they are to continue supporting the communities they serve. The survey collected data from WROs that have a focus on supporting FDPs, specifically women and children from Ukraine, across Moldova, Poland, Romania, and Ukraine. It aimed to identify the key issues impacting WRO efforts to support women, girls, and marginalized groups such as the LGBTQI+ community and people with disabilities affected by this humanitarian crisis two years on.

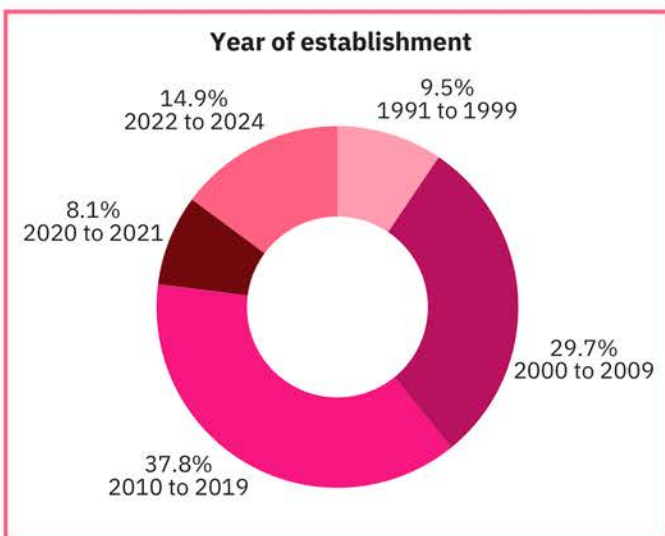


¹⁰ Several organizations work in more than one country.



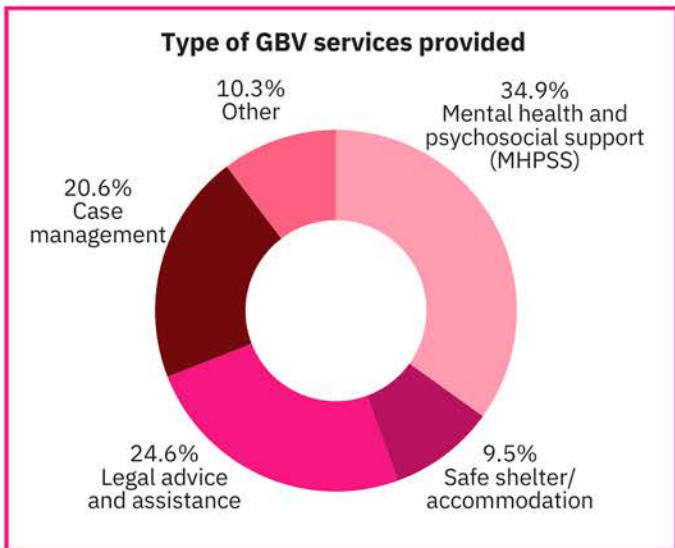
The survey asked WROs their perspectives on their current priority needs, issues impacting displaced women, availability and accessibility of GBV services, and engagement with the humanitarian system. The survey was available in English, Polish, Romanian, and Ukrainian, and was pre-tested in each country for comprehension and the length of time required to complete it. Pre-testing enabled the review of survey questions to ensure they were clear and unbiased.

The survey was open for 10 days and 78 respondents from 74 WROs completed it. Multiple methods were used to corroborate and triangulate the survey findings, including observational data, and secondary data sources. VOICE team members in each country, themselves activists and leaders in women’s rights, also held validation conversations with WROs in their contexts, which provided key contextual information on gaps in the protective environment and on priority needs for promoting women and girls’ safety, protection and rights in each country.



While half of WRO respondents work directly with survivors of GBV, the scope of work varies depending on organizational capabilities, and contains one or several of the following services: counseling and psychosocial support, either in private or group settings, legal advice or assistance, safe shelter and accommodation, and GBV case management services.¹³

¹¹ Most organizations identify more than one target population.
¹² One organization did not provide a response to this question.
¹³ http://www.gbvim.com/wp-content/uploads/Interagency-GBV-Case-Management-Guidelines_Final_2017.pdf



Case management is also an entry point for survivors to receive crisis and longer-term psychosocial support, given the lack of more established health and social support service providers in humanitarian settings. While GBV case management includes the above services, organizations that do not usually work in a humanitarian context may use a different definition; hence, the survey provided different options for the sake of clarity. Other services provided by organizations participating in the survey include safe spaces for women and girls, vocational training, financial support, and mobile counseling and crisis centers where psychologists meet with survivors in remote areas and along the border.

Limitations

There are inherent limitations when using a survey methodology administered online. These include challenges in completing the survey for those with connectivity issues or other limitations on digital access in crisis-affected areas. Despite efforts to make the survey user-friendly to reduce the burden on already overstretched WROs, time constraints and workload pressures are a constant challenge and may have made it difficult for WROs to respond in a manner that communicated all of their concerns. Further, privacy and security issues may have influenced the scope and nature of information shared by respondents. Finally, it is important to recognise that the findings are not representative of all WROs working to respond to the Ukraine crisis, they only reflect the perspectives of those who responded to the survey.



III. Key Findings Across The Region

Organizational needs and concerns

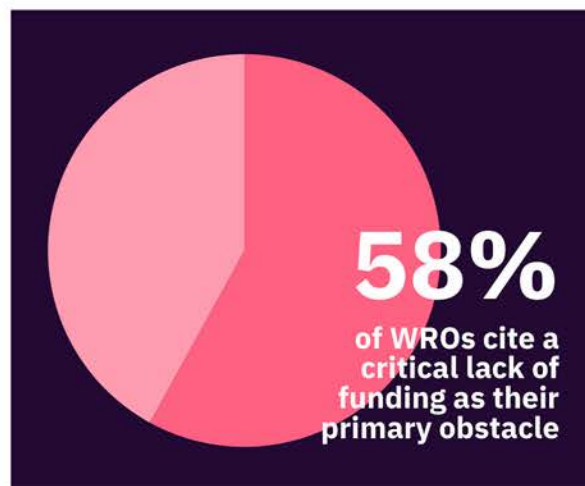
WROs have demonstrated remarkable resilience and adaptability in the face of Russia's invasion, extending their support to meet the escalating needs of forcibly displaced Ukrainians. Currently, a lack of funding and burnout threaten their ability to continue supporting forcibly displaced Ukrainians.

Despite operating under challenging conditions, including navigating the complexities of funding shortages and staff burnout, an overwhelming **78% of responding WROs report that they have successfully aligned their efforts with their organizational missions while expanding services to cater to both local women and those displaced.** As one Ukrainian WRO put it, "Our efforts have escalated, extending support to both local women and internally displaced women." This expansion encompasses a wide array of humanitarian support, from educational offerings like language courses to comprehensive integration activities, marking a significant stride in their commitment to support refugees.

"The mission has remained unchanged. However, the number of refugees we support has increased. Our services have expanded to include Polish language courses and other, less systematic, integration activities." – Polish WRO

Despite this commendable achievement, the specter of financial instability looms large, with 58% of WROs citing a critical lack of funding as their primary obstacle, threatening

the sustainability of their vital programs and services. Responses to the survey highlight an urgent need for enhanced support mechanisms and sustainable funding solutions to empower WROs in their pivotal role of providing aid and combating GBV amidst a backdrop of crisis and displacement.



The results of the survey suggest that there has been little change since the first assessment in terms of funding for WROs to undertake humanitarian response, and specifically targeted support to prevent or respond to GBV. Indeed, as noted in "Waiting for the Sky to Close", from day one of this invasion, WROs reported they were having to rely on their core resources and were not receiving any of the billions of dollars that were being raised by large INGOs and UN agencies. Two years on, just over 1 in 10 (12%) of WROs reported that their organization has sufficient funding to operate and implement their planned program of work for 2024, with only one advising that they were 'very confident' about the availability of funding for their work in 2024.

For other organizations, the lack of access to resources, including funding, is threatening their ability to continue to operate. As one Ukrainian organization put it, "Our existence is threatened. Our biggest concern is that by the end of 2024, there will be no Ukrainian-led

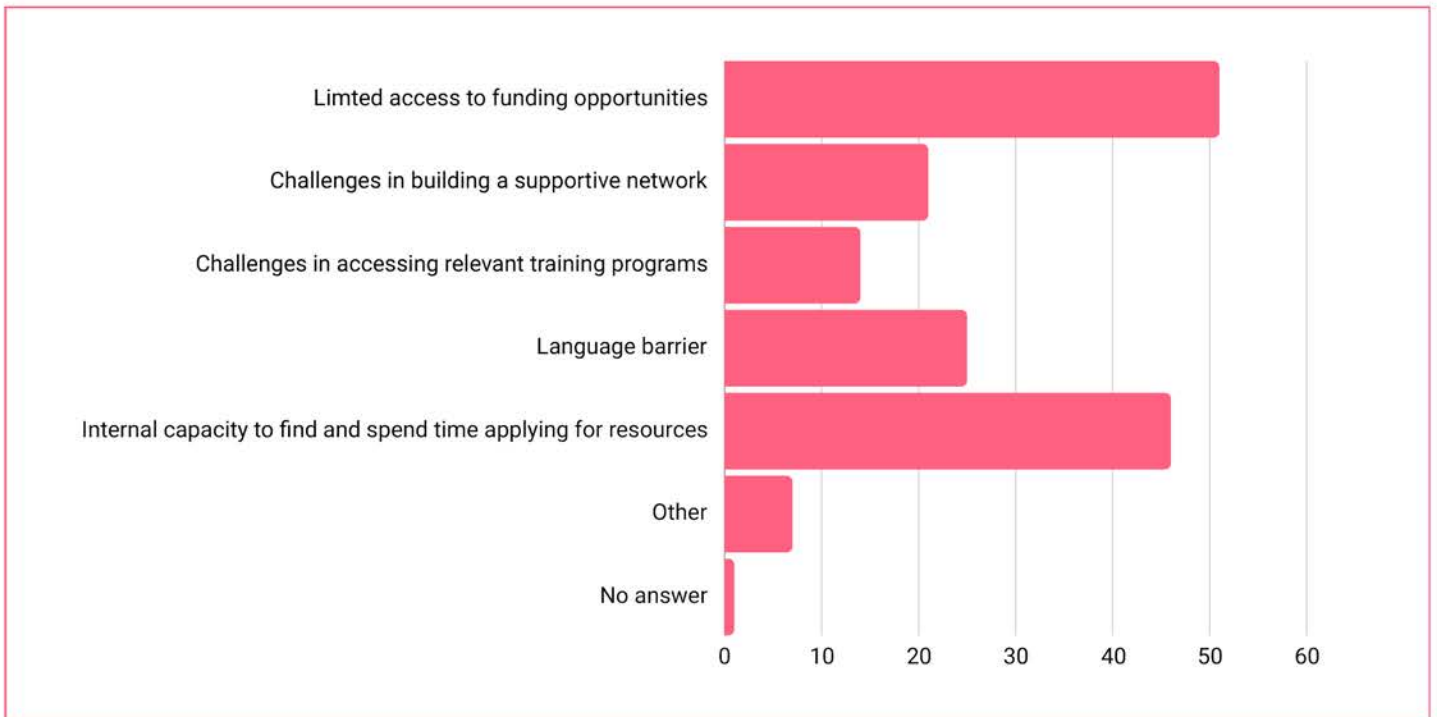


Figure 1: Barriers WROs face accessing resources

organizations providing GBV services. The work that our colleagues are doing is fantastic and critical, but not enough; we have to be in this field together, and the funders keep

ignoring us or offering us small grants. This is not sustainable for our organization and irresponsible for our funders.” Key barriers to obtaining funding include limited access to funding mechanisms and limited internal capacity to apply for funding opportunities. As shown in Figure 1, other barriers WROs face include a lack of supportive networks, challenges in accessing relevant training programs, and language barriers.

“There is a pressing need to establish an emergency fund specifically dedicated to organizations addressing women's issues, particularly those combating GBV. Often, the lack of resources prevents us from effectively addressing this problem. Even when resources do become available, they may come too late, rendering the problem obsolete or causing survivors to withdraw, lose hope, and cease engaging in dialogue. The situation is complex, underscoring the significance of consistent and sustainable support in reshaping survivors' behaviors and fostering their sense of security and trust. Irregular assistance only breeds suspicion.”

- Moldovan WRO

For around one-fifth of WROs, the priority concern is staff burnout due to the double burden of an increase in workload and the high-risk context in which they are working. As a Ukrainian WRO put it, “Yes, the workload has increased, and we are operating under perilous conditions in a front-line city.” WROs across all four countries, particularly those operating in insecure areas, reported that they are worried about their staff, both from a physical safety perspective (especially those operating in Ukraine or near the border) and from a mental health perspective due to the onslaught of work since the beginning of the war, with no clear end in sight.

Priority service gaps for women and girls

The service gaps for displaced and war-affected women and girls remain a critical concern across surveyed countries, **with the most significant deficits identified in adequate housing and accommodation, economic and livelihood supports, and GBV prevention and response services.**

As shown in Figure 2, two in five WROs reported that psychosocial support, counseling and legal assistance are critical service gaps for many displaced and other vulnerable women and girls in Ukraine, Poland, Romania, and Moldova despite a growing need for such services. As one respondent in Ukraine reported:

The need for psychosocial support services for survivors is growing, especially for women affected by armed conflict. This category of women and children is the most challenging to work with due to the effects of post-traumatic stress syndrome resulting from wartime

activities. Handling cases of violence against women affected by armed conflict requires specialized knowledge and skills, which are insufficient among our organization's staff. Psychologists are highly engaged and in demand, and there is a growing need for psychotherapeutic services. Children require special attention and group sessions should be organized for them. It is crucial to involve medical professionals who can monitor health and development issues. Many children affected by armed conflict experience educational neglect, so they need social support during schooling, and sometimes inclusion is necessary.

Similarly, in border countries, there are too few and too few free support services available, including legal assistance and psychological care. The lack of access is compounded by barriers such as cultural norms ('only crazy people go to a psychologist'), the pressure of expectations ('I can't fall apart, who will take care of the children'), or simple shame ('I was

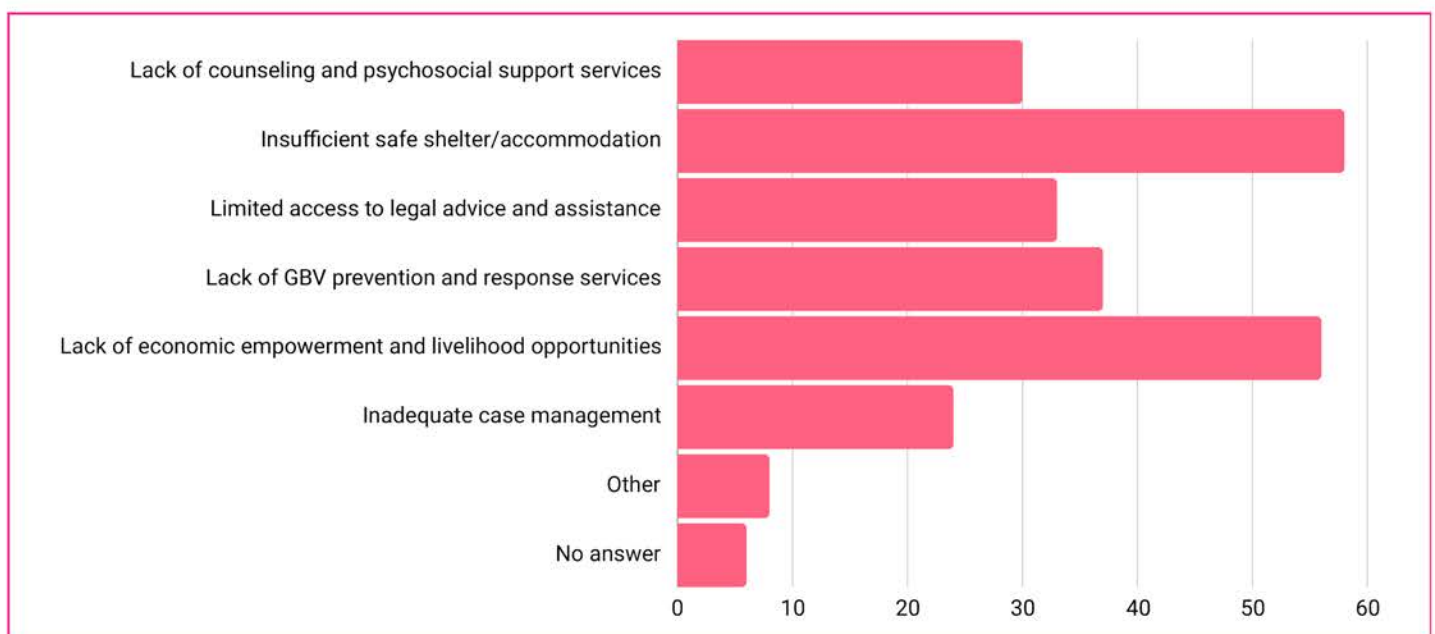


Figure 2. Priority service gaps for forcibly displaced women across countries

independent at home, I didn't have to beg'). However, insufficient access to these services is impacting women's well-being and resilience, compounding the trauma caused by the war.

“There is uncertainty, complete lack of stability both related to the war in Ukraine and the availability of services and support in Poland. This double uncertainty, combined with chronic fatigue and chronic trauma, significantly reduces the ability to use one's own resources and rebuild a sense of control.” - Polish WRO

Lack of legal services and advice is not only an issue itself; it has a knock-on effect of creating additional vulnerabilities for women, such as the risk of discrimination or exploitation in the labor market. In Moldova, for example, “The lack of awareness regarding legal matters across all sectors, leads to manipulation and fraud. Discrimination in employment is also prevalent.”

Gaps in GBV prevention and response

The landscape of GBV prevention and response across the region remains fraught with significant gaps. While strides have been made in making case management and psychosocial support more accessible, with over two-thirds (71%) of respondents noting that these services are now more readily available, two-thirds of WROs also highlight a critical shortfall in GBV-specific healthcare services, including clinical management of rape, for forcibly displaced women and girls. The pervasive lack of economic opportunities further exacerbates GBV risks, underscoring

the urgent need for investment in continued awareness-raising and recognition of GBV signs.

Despite over half of WROs providing GBV services, and a strong willingness to expand these services if resources permit, demand far outstrips the supply. Organizations express a dire need for increased funding to enhance service availability and outreach, particularly in rural areas where services are scant. Unfortunately, compared to the onset of the crisis two years ago, the situation has seen little improvement, with safe shelter, legal assistance, and livelihood opportunities for survivors still severely lacking, mirroring concerns raised in previous assessments and highlighting a persistent, unmet need for comprehensive GBV support services.



Nearly three-quarters (73%) reported that if resources were available, their organization would expand their GBV services to enable more women and girls to access support. The rationale and priorities for the expansion of GBV services vary depending on the organization, with some indicating they would expand availability to cater to increased demand for GBV services in their current locations, while others would extend their current geographical coverage. Building staff capacity and providing enhanced staff training and increasing GBV outreach and awareness-

efforts were priorities for other organizations. One survey respondent from Moldova expressed why additional funding and expansion is needed, sharing that, “GBV services, if any, are not accessible to all categories of women/girls. In rural areas, medical/health services, psychosocial support, and legal services for GBV victims are poorly developed due to the lack of specialists in the field.”

These gaps have not improved since the onset of the crisis two years ago. The WROs surveyed still report significant concerns across the region about insufficient safe shelter and accommodation, limited access to legal service and assistance, a lack of economic improvement and livelihood opportunities, and a lack of GBV prevention and response services, such as counseling or psychosocial support services for any woman seeking help. These concerns were identified as service gaps in VOICE’s 2022 report, and organizations still report them as needed today, despite changes in the levels of attention and funding coming into the region in the interim.

Engagement with the humanitarian system

The interaction between WROs and the humanitarian system in response to the Ukrainian crisis reveals a landscape rife with challenges and unmet expectations.

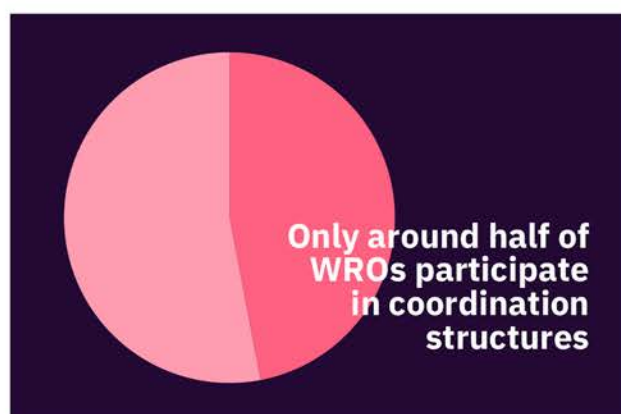
Despite increased international attention, around one-third of WROs report stagnation or deterioration in their relationships with donors and international humanitarian actors, with only a modest improvement for others. Limited participation in coordination structures, coupled with frustrations over burdensome reporting requirements, inadequate funding, and a lack of meaningful engagement in decision-making processes, highlights a disconnect. These issues underscore the pressing need for a more inclusive, responsive, and supportive humanitarian ecosystem that genuinely values and leverages the critical role of WROs and local actors in addressing the complex needs of affected populations, moving beyond superficial interventions to ensure impactful, sustainable support.

While the relationships between some WROs and donors have evolved over the last two years, primarily due to the significant attention and focus directed by the international community towards the region in the aftermath of the full-scale invasion, there is much progress still to be made. The increased attention has heightened awareness of the humanitarian situation of women, children, and others and has catalyzed some increased collaboration and cooperation between diverse donors and WROs, leading to constructive relationships and outcomes for half of the survey respondents. However one quarter of organizations surveyed reported that their relationships with donors were no different from before the war, and 10% said that they had worsened.



The findings were similar with regards to WROs' engagement with international humanitarian actors, including UN agencies and INGOs, with just over half reporting that their contact with these stakeholders had improved over two years, and 31% indicating that these relationships were largely unchanged. For many organizations, this improvement came in the form of funding or relationships that did not exist prior, as international humanitarian actors were not operating in border countries and had a limited presence in Ukraine.

Just over half of the organizations surveyed (53%) reported that they participate in humanitarian coordination structures in their country. Of those who do participate, over half feel that their engagement in coordination mechanisms has improved since the current humanitarian response commenced in 2022. Those organizations that attend coordination meetings do so because they perceive the meetings as providing valuable information and insights about the humanitarian situation and response, and a good opportunity for networking and professional development. However, some organizations advised that they do not find these meetings useful, and felt that being actively involved in coordination mechanisms "took up all of the space" that their teams needed to focus on their priorities and ongoing programming.



¹⁴ The remaining 15% did not respond to this question.

One-third (32%) of respondents shared that their organization does not attend coordination meetings¹⁴ for several reasons. These include a lack of awareness about the timing and purpose of coordination meetings, inconvenient meeting times, meetings conducted in a language they do not understand, and not considering the meetings beneficial to their work.

The international community, stepping in to respond to the crisis in Ukraine and bordering countries was presented with a unique chance to innovate and reimagine coordination of stakeholder efforts. Based on information provided by WROs in the survey and on the perspectives and analysis of those in VOICE's network, this chance however has largely gone unseized. **Despite pledges towards localization, WROs continue to find themselves on the outside looking in.** The presence of a dynamic women's sector offered a golden opportunity for the UN and international bodies to shift away from traditional methods. It appears they have defaulted to the same old top-down strategies that tend to be replicated crisis after crisis.

As for collaboration and partnerships with international humanitarian actors outside of coordination meetings, financial support and other resourcing assistance are considered the most beneficial aspects of collaboration by WROs, followed by training and capacity building, and the opportunity to advocate for gender-inclusive policies. At the same time, many WROs find that UN agencies and INGOs have extremely burdensome and time-consuming reporting requirements (43%) and pay insufficient attention to WROs needs and concerns (41%). Other frustrations include inadequate funding (29%), overwhelming meeting schedules (19%), and limited communication of capacity-building and training opportunities (17%).

“I understand that a sudden crisis can capture donors' attention more than the ongoing, laborious daily efforts, but both are equally essential. It's crucial to educate your donors.”

– Polish WRO

WROs implored international humanitarian organizations and donors to “move beyond just humanitarian interventions” and increase the participation of WROs in decision-making, determining advocacy and activity priorities, building partnerships, supporting organizational development, and combating staff burnout. As one respondent from Poland put it, “I understand that a sudden crisis can capture donors' attention more than the ongoing, laborious daily efforts, but both are equally essential. It's crucial to educate your donors.” In terms of where the money is going, another respondent in Ukraine called on donors to “Give money not to large organizations, but directly to grassroots local organizations with simplified reporting. Give grassroots organizations flexible grants for support and wages, not just for project costs. Grassroots organizations do most of the actual work, but cannot meet bureaucratic processes and are forced to close when people burn out and tire of working for free.”

WROs flagged several other inadequacies within humanitarian governance, coordination, financing, and response which must be addressed if the humanitarian system is to live up to its commitments on Accountability to Affected Populations (AAP), gender equality, and localization to better engage and support local actors to participate and lead humanitarian response.

These include:

- Recognizing the pivotal role of women in crisis management and developing and implementing effective emergency response strategies;
- Making visible and addressing the needs and voices of women and girls in all of their diversity, including LGBTQI+ women and girls;
- Recognizing the expertise of local actors and their deep connections and understanding of local context;
- Principled partnerships between international actors and local WROs.

“We need continuous work in the field. The challenges that refugees face have not ended; new ones are still emerging. We also need organizations to fulfill their financial commitments and promises.”

– Polish WRO

IV. Country- Specific Findings

Ukraine

The context and priority needs of WROs

In the heart of a relentless conflict, Ukrainian WROs are navigating the challenges amidst ongoing war, striving to support an estimated 3.7 million IDPs and others affected by the hostilities. Amid economic and social upheaval, these organizations face the daunting task of providing aid in high-risk areas as humanitarian assistance dwindles. Despite these challenges, Ukrainian WROs have shown remarkable resilience, redefining their operations to address the evolving needs of their communities, including military personnel and families, torture survivors, and those previously under occupation. Yet, as their workload intensifies amidst dangerous conditions, the specter of insufficient funding looms large. With most efforts concentrated on immediate humanitarian aid and psychological support, the stark reality of operating with limited resources and staff underpins a critical narrative of resilience. The uneven distribution of funding exacerbates the struggle, leaving grassroots organizations in dire need of sustainable financial support to maintain their work. This situation calls for a more nuanced, localized approach to humanitarian funding that respects and leverages the deep-rooted expertise of Ukrainian NGOs.

Many displaced people have been forced to return to Ukraine to insecure areas from safer neighboring countries due to not being able to find adequate employment or housing. Many cities in Ukraine are now a hub for IDPs, although some, especially in the central, western, and northern parts of the country, now face dwindling humanitarian assistance

¹⁵ https://dtm.iom.int/sites/g/files/tmzbd11461/files/reports/IOM_Gen%20Pop%20Report_R14_Displacement_Final.pdf, Oct 14, 2023

even though many IDPs have not been able to find work. In fact, 50% of IDPs in Ukraine are unemployed and rely on cash assistance for survival.¹⁵ Most INGOs are focusing their efforts in the eastern and southern parts of Ukraine, but are unable to access hard-to-reach areas. Government services are insufficient, with a lack of staff and funding most apparent in rural areas. As such, most of the humanitarian burden is falling on small, local NGOs and community-based organizations (CBOs) with little to no access to funding. Some organizations have been and continue to work on a volunteer basis.

Since February 2022, Ukrainian WROs have overhauled their activities to survive and operate in a wartime environment.

“We have adapted to the new wartime realities, reevaluating vulnerable population categories and taking into account a significant number of internally displaced persons and refugees. In addition to the vulnerable groups already covered by the organization, military personnel, families of military personnel, individuals who have experienced torture, and those who were under occupation have now been included in our activities.” – Ukrainian WRO

Most organizations have not changed their mission but have expanded their range of services and target groups, despite not being able to increase their budgets commensurately. The bulk of their work exists to support the stability of their communities through providing humanitarian aid to meet basic needs, such as shelter and housing; psychological support services to those suffering from the impact of the war;

advocating for social and economic protection for vulnerable groups; and providing counseling and support for employment. WROs say their work has “intensified” without abating, as they now provide assistance not only to local women and girls but to women and girls who count among the internally displaced.

“Ukrainian WROs not only have increased workloads but are operating under perilous conditions.”

– Ukrainian WRO

Complex security situations in some cities have compelled a significant number of NGO staff, especially those with young children, to relocate to safer areas. As a result, WROs are forced to carry out crucial work with limited staff under challenging conditions, including psychological burnout. This is especially discernible for WROs working in cities under siege. As one respondent in Ukraine shared:

After the start of the full-scale invasion, our organization directed all its efforts towards providing humanitarian assistance to the affected population, primarily focusing on women with children, large families, internally displaced women, and other women who are vulnerable and suffer the most from active combat operations. Our city, Kharkiv, is at this time subjected almost daily to enemy shelling, and active combat operations are taking place in the region. Currently, the regional center has over 350,000 IDPs, the majority of whom are women with

various vulnerabilities, requiring continuous humanitarian support. Due to constant shelling, there are few functioning businesses in the city, high unemployment rates, and kindergartens and schools are not operational. Therefore, women find it difficult to secure employment and independently provide for themselves and their dependents under their care.

While there have been varying experiences among the WROs surveyed regarding funding, one thing is clear: there is not enough of it. Some organizations have relied on the Ukrainian diaspora for funding, others from community members and local businesses, or the redistribution of their resources from other projects. Others have relied on volunteers to carry out their activities. National NGOs have received more attention and funding opportunities than smaller, regional and community-based grassroots organizations. As noted by one Ukrainian WRO, “At the very beginning of the war, funding was often made up of the organization's members' own funds, private donations from western Ukraine and other countries. Then came funds from donors from international charitable organizations. Currently, private donations have ended and we only have periodic donor support in very limited amounts.”

Where small amounts of funding are still available, WROs in Ukraine may struggle to access it due to the high level of competition with other organizations for donors' funds and attention. While the Ukraine Humanitarian Fund¹⁶ was established to support localization efforts, grassroots WROs report that the current system could be more efficient at localizing the humanitarian response, reacting to emergencies, and moving funds into the field. Examples of when this occurred include the destruction of the Kherson Dam, where responders were composed of local NGOs,

¹⁶ <https://www.unocha.org/ukraine/about-ukraine-humanitarian-fund>

local government, and local volunteers and no INGOs were present due to security risks. Ukrainian NGOs are frustrated, and as one expressed, “It would be good if international organizations understood the context and respected the experience and expertise of Ukrainian NGOs. We need more long-term financial support to maintain the stability of the NGO's work, in particular, maintenance of staff, our offices, etc.”

WROs providing crucial GBV services share that they have inadequate funding to meet immediate needs, especially in the Kherson and Mykolaiv regions. Despite this, one organization shared that although they don't have enough resources, they will never turn anyone away.

“It would be good if international organizations understood the context and respected the experience and expertise of Ukrainian NGOs. We need more long-term financial support to maintain the stability of the NGO's work, in particular, maintenance of staff, our offices, etc. “
– Ukrainian WRO

Realities for women, girls and other vulnerable groups

The harsh realities facing Ukrainian women, girls, and other vulnerable groups amid the ongoing conflict are both dire and multifaceted. With shelters and temporary housing often uninhabitable, a glaring absence of medical services, and a critical shortage of basic necessities like seasonal clothing and hygiene items, the situation is grim. Financial support becomes a lifeline for families displaced by the destruction of their homes, yet many are unable to work due to health

issues or caregiving responsibilities. The constant threat of shelling has shuttered educational institutions, further straining the livelihoods of those affected, particularly women.

Discrimination exacerbates these challenges for Roma women and LGBTQI+ IDPs, who face barriers in accessing housing, healthcare, and support services.

In conflict zones and occupied territories, the devastation of infrastructure severely limits access to essential health services, including maternity care, making the pursuit of medical assistance a perilous journey.

Moreover, the devaluation of GBV experiences in relatively peaceful areas compounds the difficulty of seeking help, highlighting a critical need for enhanced counseling, psychosocial support, and public awareness to address GBV comprehensively.

One Ukrainian WRO shared that even when GBV services are available for survivors, “there is a devaluation of the experiences of those affected by gender-based violence in conditionally peaceful territories, compared to violence perpetrated by occupiers,” exacerbating the challenges that women face when seeking help. This discrepancy undermines recognition of the trauma endured by GBV survivors while also creating a barrier to accessing support and services where they do exist, perpetuating a cycle of silence and suffering.

This bleak tableau underscores the urgent necessity for targeted interventions to improve the well-being and resilience of Ukraine's most vulnerable populations, ensuring their access to support and services amidst the cascading effects of prolonged conflict.

As expected, in occupied territories and conflict zones, where shelling is ongoing and infrastructure continues to be destroyed, there is little access to health and medical services, including services for survivors of GBV.

So although all women and girls, including IDPs, have a legal right to medical care from a general practitioner and gynecologist-obstetrician in Ukraine, this isn't always possible. For example, within the Volnovakha district, there is no reported access to maternity care, and gynecological services at all. Women needing these services must travel at least 100 km away, often having to travel to the neighboring Dnipropetrovsk region. General medical services are provided by two general practitioners for every 4,000 people. Elderly women in rural areas across Ukraine are rarely able to travel outside of their village or town as there is little to no public transportation and the roads are poor.

Organizations focused on human rights are also concerned about the long-term impact of the protracted conflict on the mental health and psychological well-being of their communities. Addressing the mental health needs of survivors – whether due to the broader war or ongoing instances of GBV - must be a priority, as it is essential for fostering recovery and rebuilding communities, giving Ukrainians the opportunity to recover, cope, and thrive.

“The biggest problem is the insufficient number of counseling and psychosocial support services for survivors and awareness among the general public on these issues. It is necessary to scale up services to counter GBV in Ukraine. “

– Ukrainian WRO



Poland

The context and priority needs of WROs

Since February 24, 2022, Poland has become one of the countries hosting the highest number of refugees in the world, and this number continues to increase as the number of people coming to Poland from Ukraine remains higher than the number leaving Poland to return to Ukraine. Recent numbers show over 90% of refugees from Ukraine in Poland as women, children, and older persons, and 63% as female.¹⁷

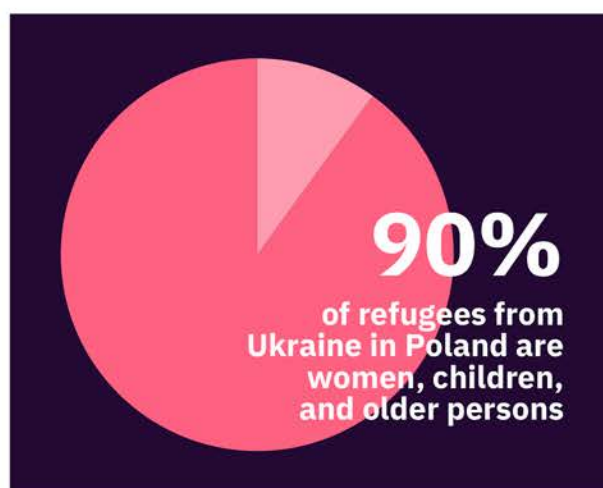
Along with the refugee crisis, Poland is also facing an economic crisis, experiencing the highest inflation in the last three decades, as well as a political crisis, which is contributing to several setbacks in terms of access to basic social services and human rights. Women's rights and LGBTQI+ organizations in Poland have been confronted with an anti-gender agenda at the hands of the powerful conservative, far-right, ultra-religious movement. This has led to direct budget cuts for centers for survivors of domestic violence and the weakening of institutions responsible for gender equality. There has also been a severe weakening of access to essential social services such as access to abortion and wider reproductive health - severe restrictions on abortion, with few hospitals and doctors performing abortions. This also means that WROs who seek to provide sexual and reproductive health services are also operating in an environment that is hostile to their missions.

As in Ukraine and all countries responding to the war, Polish WROs have risen to the challenge to grow and expand their services

¹⁷ <https://reliefweb.int/report/poland/regional-refugee-response-ukraine-situation-2024-poland-chapter-enpl#:~:text=The%20demographic%20composition%20underscores%20the,63%20per%20cent%20are%20females.>

over the last two years. Adapting to the needs of new arrivals requiring support, WROs created new projects and brought Ukrainian-speaking volunteers and colleagues onto their teams to address language and cultural barriers. One Polish WRO expressed a sentiment that resonates across many organizations in the country: "We intensified our focus on refugee and migrant individuals, initiating collaboration with them in their languages. We expanded workshops to include issues related to sexual, reproductive, and gynecological health. We began providing tangible, interventionist, humanitarian assistance."

With insufficient government aid, WROs are struggling to meet refugees' basic needs, let alone ensure a safe environment for women and children, including protection from and response to GBV and SEA. The dependency of WROs on short-term, project-based assistance



creates a vicious cycle, leaving GBV survivors and other vulnerable women and girls with intermittent support that fails to address ongoing safety and protection needs as well as the persistent and long-term effects of violence. To improve the GBV support landscape, there is a critical need for standardized, sustained, and comprehensive assistance that encompasses both psychological and medical aspects, ensuring survivors receive the care they require and deserve.

Organizations are expressing frustration and fears over a severe lack of long-term funding options, despite the knowledge that their projects and priorities are also high priorities for donors and INGOs.

“We need to be able to continue our work. The challenges faced by refugees have not ended. New ones continue to emerge. We need organizations to fulfill their financial commitments.”

– Poland WRO

still have acute protection needs, as most (9 out of 10) households are composed of women, children, and older persons who are more vulnerable to abuse and exploitation. Many refugees remain dependent and reside in collective shelters for extended periods – with one-quarter of Ukrainians reporting problems with access to housing as one of their top three priority needs. A lack of sufficient income and problems with access to employment are most frequently mentioned as a need (32%) followed by limited access to health care (27%), and problems with access to housing.¹⁸

Even those with jobs struggle to meet their basic needs. Of those employed, 82% reported having urgent unmet needs, mostly for material assistance (47%), food (27%), and a higher level of employment (30%).¹⁹ Language barriers, lack of childcare, and lack of decent work opportunities for refugees who are unable to have their qualifications recognized are all impediments to employment for refugee women. Refugees have also reported practices that may amount to labor exploitation. Exploitative working arrangements and informal employment present risks to refugee women’s safety, well-being, and rights, especially if they are not able to access advice and avenues for complaint should they experience challenges.

While women refugees in Poland officially have access to medical care, language barriers, extremely long wait times, and lack of means to pay for a visit to a clinic are among the most commonly reported reasons for not receiving proper medical care. There remains limited access to reliable information on health care, as well as other medical services and GBV services.

WROs report high levels of loneliness and a lack of confidence among Ukrainian women refugees. Efforts are underway to establish a

Realities for women, girls and other vulnerable groups

WROs in Poland shared that Ukrainian women in Poland are reporting that they are experiencing verbal hostility, due to rising sentiments being fomented by the far right that as foreigners, they receive a “free ride” from the government. Newly arrived refugees

¹⁸ <https://reliefweb.int/report/poland/jobs-healthcare-and-housing-among-main-concerns-refugees-ukraine-survey-finds-enpl> Nov 2, 2023.

¹⁹ <https://reliefweb.int/report/poland/protection-monitoring-report-poland-february-march-2023>

supportive ecosystem for individuals who lack local connections. While psychological support is not considered a primary need by refugees, organizations argue that it remains crucial, highlighting the necessity for mental health resources.

As for access to GBV response services, one glaring gap in the support system is the absence of a 24-hour local helpline, leaving survivors without continuous access to immediate assistance and information. The existing psychological support, while present, is deemed inadequate. Psychosocial and specialized support services are not always in line with good practice, which requires being trauma-informed and avoiding victim-blaming. One Polish respondent shared that they often encounter cultural barriers that “significantly limit the possibility” of providing options to GBV survivors, because “refugee women are often completely economically dependent on their persecutors. So, even if the pressure from their family to stay with him does not work (although it often does), the thought of a lack of food for the children will certainly have an impact.”

Many Ukrainian women continue to live with a sense of guilt for leaving their families behind in a country at war. They not only initially grappled with guilt due to leaving during the early phases of migration, but this feeling persists till now. Additionally, Ukrainian women often find themselves working in jobs for which they are overqualified, grappling with legal restrictions that limit their right to work. Supporting their children to adjust to school or secure childcare in a new environment adds another layer of complexity while seeking employment.

Organizations strive to support displaced Ukrainians during job recruitment processes, recognizing the need for assistance during crucial stages of relocation. One Polish WRO providing support for job-seeking Ukrainian women reported that they “recommend implementing solutions that enable women to work from home” as a way that women might gain economic independence, be able to be present for their children, and mitigate GBV risks that accompany unsafe or exploitative working conditions. For many refugee women, their children are an absolute priority, and they cannot imagine a situation where a child returns from school to an empty home because the mom is at work. Moreover, women need secure accommodation options for themselves and their families.

Challenges persist in finding longer-term, affordable housing, and collective shelters are becoming less accessible. Due to funding decreases, some shelters have needed to initiate payment schemes, although employment is still elusive for many women who are also full-time caregivers. The existing shelters for Ukrainian refugees are still running in “emergency” mode, without proper protection services - most vulnerable persons stay there, yet the humanitarian standards are not met.

Services are less widespread for LGBTQI+ refugees, and the Roma community in Poland experiences exclusion, discrimination, and prejudice-motivated violence. LGBTQI+ refugees are also more susceptible to homelessness and have shared concerns about needing to potentially return to their home countries due to the discriminatory climate in Poland, particularly in the aftermath of “LGBT-free zones.”²⁰

²⁰ <https://www.cnn.com/interactive/2020/10/world/lgbt-free-poland-intl-scli-cnnphotos/>

Moldova

The context and priority needs of WROs

As in the other countries surveyed, Moldovan WROs have adjusted their services to accommodate refugee arrivals from Ukraine. However, bilateral funding priorities have unfortunately not always aligned with local needs and expertise, resulting in inadequate investment in women's organizations from the onset of the humanitarian response. As always, WROs have risen to the occasion despite these immense challenges, some have adapted their focus away from their communities, providing psychosocial and legal assistance and counseling to refugees seeking safety in Moldova. However, other WROs have found ways to do both – although this has necessitated a massive scale-up. As one Moldovan WRO shared, “Our mission has not changed [since before the war]. Only the number of assisted victims has increased enormously. From 300-400 to about 3000 people/year.”

In Moldova, WROs have been able to access different sources of funding, including through international and national organizations, and emergency humanitarian funds. Some respondents had existing programs for assisting refugees and survivors of war before the influx of Ukrainian refugees after February 2022. However, according to survey respondents, few donors provide financial support for direct rehabilitation services, especially for medical services or medicines. Donor requirements for project writing, implementation, and reporting have become

more sophisticated and time-consuming, while the rate of administrative support is low.

In addition to funding priorities not aligning with local needs, WROs in Moldova also shared that they have limited internal capacity to spend time applying for resources, and sustained challenging working conditions mean that their teams are enduring high stress, low salaries, and burnout.

Realities for women, girls and other vulnerable groups

The priority needs for displaced women and girls in Moldova have been and remain access to essential resources and services including food security, medical care, and information about protection services. Concerns have been raised about the stability of accommodation due to conflicts within Refugee Placement Centers, and the closure of other collective shelters.²¹ Counseling, employment support, and legal advice services are still not easily accessible and refugee women consistently report that they do not have this information. Inadequate access to resources, services, and information has further exacerbated GBV risks for displaced women and girls.



²¹ In March 2023, the Moldovan Government's Temporary Protection (TP) replaced previous provisions for Ukrainian refugees, and grants protection, work rights, and services based on eligibility, although there are challenges for refugees to attain this status, such as needing to present proof of residence documentation. The Moldova State Strategy for 2024 has established TP status as a priority need for refugees, as well as promoting integration and social cohesion into the community; however one effect of this priority has been closing collective shelters.

General health services, including maternity care and gynecological care, are usually not available in villages in Moldova, where many displaced women are residing. In some instances, services do exist but women and girls do not trust their quality. In Moldova, there are medical services to which all Ukrainian refugee women and girls, Roma women and girls, and non-Ukrainian refugee women and girls are also entitled. In cases when someone visits an organization for medical or social help, they would be referred to existing specialized services. However, existing resources (human and financial) are not sufficient to cater for the enormous number of refugees.

Family doctors sometimes refuse to register cases because they are overloaded. Access to medical services, including medicines and diagnostic investigations, is limited. According to one WRO in Moldova, “the availability of services depends on the financial resources allocated to direct services, especially medical, social and mental health services, bearing in mind that most victims have experienced or are still experiencing deep trauma. Many professionals do not have the necessary training in trauma.”

GBV and fragmented psychosocial support services are concentrated in specific areas and are severely limited in villages. Mobile teams are trying to provide geographic coverage, but have had issues with coordination to ensure continuity. Furthermore, respondents reported that survivors often don’t know about the availability of these services, turning first to police or social workers, who often do not have

training in providing quality GBV case management.

“Victims lack knowledge about whom to approach for help, with the initial points of contact typically being the police and social workers, and these officials are often ill-equipped to deliver quality response or case management services.”

– Moldovan WRO

Various organizations offer economic support services, yet the scarcity of jobs in rural areas remains challenging, as does the lack of employment opportunities and training for Moldovan women themselves, which further underscores the gaps faced by refugee women.

²¹ In March 2023, the Moldovan Government’s Temporary Protection (TP) replaced previous provisions for Ukrainian refugees, and grants protection, work rights, and services based on eligibility, although there are challenges for refugees to attain this status, such as needing to present proof of residence documentation. The Moldova State Strategy for 2024 has established TP status as a priority need for refugees, as well as promoting integration and social cohesion into the community; however one effect of this priority has been closing collective shelters.

Romania

The context and priority needs of WROs

Romania is sheltering the largest number of refugees in the country's history. Like Poland, Romania is also facing an economic crisis, experiencing its highest inflation rate in three decades, and a political crisis, with women's rights and LGBTQI+ organizations confronted with an anti-gender agenda at the hands of the powerful conservative, far-right, ultra-religious movement. This has led to direct budget cuts for centers for survivors of domestic violence and the weakening of institutions responsible for gender equality. At the same time, there has been a severe weakening of access to essential social services such as access to abortion and wider reproductive health – although abortion is legal, it has been severely restricted in the past years with more than half of public hospitals no longer performing abortions.

Like their counterparts elsewhere in the region, WROs in Romania providing humanitarian assistance are struggling with a lack of funding. One respondent stated “After the war, we survived mostly on donations, and we still have not recovered these funds.” Another wrote, “We didn't need to use our core resources, but only because we were putting in voluntary work.” For those who have been able to access increased funding, there have been concerns about how their work is viewed by donors and other humanitarian stakeholders.

“Local expertise is often better suited to understanding the needs faced by communities, and international humanitarian actors should take more account of this specificity.”

– Romanian WRO

Another organization shared a frustration with the system and recommended, “We need less bureaucracy in reporting, and to have procedures established at the beginning of the funding, rather than being introduced incrementally along the way.”

Realities for women, girls and other vulnerable groups

The main needs of refugees in Romania still revolve around access to basic necessities and social services. Health services remain highly inaccessible to refugees due to long-term structural issues within the health system as well as to a lack of adjustments (e.g. translation, mediation, etc.) needed to ensure accessibility for displaced people. Social security, employment (as in other countries, refugees in Romania cannot find employment in their areas of professional expertise), child care services, education, safe housing, MHPSS, and GBV services all fall short. As one Romanian WRO shared, “The existing GBV services are insufficient even for the local population. Some NGOs are providing such services but they should be granted and organized at state level.”

GBV has been a central theme concerning WROs in Romania for many years, and while WROs are shouldering a huge load, resources for GBV and other refugee-focused programs have significantly decreased as 2023 drew to a

close, with many of the previous funds and humanitarian response interventions disappearing once the conflict in Ukraine persisted past its initial stages.

“It is also essential that GBV interventions be carried out to ensure access for all victims of gender violence - especially those of Roma ethnicity and other vulnerable groups (LGBTQI+, Roma women, sex workers, women from rural environment, migrant women, women with disabilities, etc.) - to services and justice.”

– Romanian WRO

Activists working with Roma communities have shared a need for specific multidimensional, collaborative GBV programs from several actors working in partnership, such as state institutions, NGOs, and specialized staff trained on gender violence, gender equality, equal opportunities, human rights, and non-discrimination.

One respondent from Romania conveyed that when it comes to the availability and quality of GBV services in Romania, “There is very little concern at the local level for projects/programs/campaigns to inform, raise awareness, prevent and combat gender-based violence.

There is a lack of commitment from the authorities regarding gender-based violence, which is reflected in the under-reporting, no reporting, or even faulty management of GBV cases. There is a lack of budgetary allocation for violence-related services, projects or programs, and awareness-raising campaigns on the subject.”

Many refugees report feeling forced into ‘integrating’ while many of their basic needs are not met. Refugees from Ukraine have limited financial resources to ensure a decent standard of living, including housing, especially for people who are unable to work or cannot find a job due to factors such as language, education, and cultural barriers, and for many women, childcare and elder care responsibilities. These vulnerabilities are shared by refugees from elsewhere than Ukraine, as well as members of the Roma community, especially women and children.

Governmental support for refugees has shifted into a new paradigm that is ultimately more restrictive. One example is the 50/20 humanitarian support program. Despite its initial utility, this program implemented by the Government of Romania has been controversial as it has been unmonitored, creating serious GBV risks, including putting vulnerable refugee women at the mercy of landlords who have profited from the program in the absence of effective monitoring.²² Further, procedures are unclear, and women encounter difficulties accessing information in a timely manner or navigating bureaucratic procedures due to language barriers. Refugees have unofficially reported delays in reimbursements under the 50/20 program, citing that payments remain outstanding since May 2023 due to a shortage of funds.

²² As of May 1, 2023, the ‘50/20 program’ in Romania changed and now refugees receive only 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.

V. Conclusion and Recommendations

WROs responding to the Ukrainian refugee crisis have taken on an extraordinary weight over the past two years, and have risen to the challenge and to new heights. They have broadened their scope, built new teams, adapted their programming, and learned the requirements of working within a bureaucratic humanitarian system that is not living up to localization commitments. They have provided critical, life-saving services for Ukrainian women and children, many without ceasing their long-term missions in their communities.

WROs across all four countries are worried about their staff – both from a physical safety perspective (especially for those operating in Ukraine or near the border) and from a mental health perspective due to the onslaught of work since the beginning of the war, with no clear end in sight.

Even now, as funding opportunities are becoming more scarce and team sizes have to be reduced, WROs are acutely aware that their critical, life-saving work is still needed: basic needs are still not met, comprehensive GBV services are required to reach a greater number of women and girls to reduce their vulnerability, survivors still need support, and women and children need help preparing for eventual returns to Ukraine and family reunification, as families make the difficult choice whether to return in the face of protracted instability.

Returning to VOICE's priority recommendations from the first report, it is clear that not enough has been done and not enough has changed. There is still a pressing need, despite huge investment and two years passing to:

- support women's movements across the region to lead in the response;

- fulfill commitments to localization by shifting power and resources to WROs;
- address gaps in the protection of women and children and ensure essential life-saving protection interventions, including GBV services; and
- improve access to essential services, particularly safe accommodation and livelihood support.

Recommendations

VOICE and our WRO partners in Ukraine, Poland, Romania, and Moldova are calling on governments, UN agencies, and INGOs to step up to fulfill their promises and obligations to WROs - the local humanitarians shouldering the burden of providing care, support and protection to women and children displaced by Russia's war on Ukraine - and to fulfill their responsibilities as duty-bearers to those women and children.

Specifically, we are calling for the following:

To **enable WROs to continue and expand their life-saving humanitarian and women's rights work**, donors and UN agencies must:

- Make a significant investment of flexible, multi-year funding dedicated to supporting WROs to deliver essential care, support, and protection services for displaced and other vulnerable women and girls and also continue their work to advance women's rights within each country and across the region.
- Reduce burdensome, bureaucratic and unnecessary administrative and reporting requirements for small organizations.
- Provide greater information and practical support to WROs to access humanitarian funding opportunities and mechanisms.

To **ensure access to basic and lifesaving essential services and promote safety, protection and fundamental human rights** of displaced and other vulnerable women and girls, national and local governments, UN agencies and INGOs must:

- As a matter of urgency, assess and address critical gaps in housing and accommodation and economic and livelihood supports for displaced women and girls.
- Scale-up GBV prevention and response for displaced and other vulnerable women and girls as a priority. Under the leadership of WROs in each country:
 - Increase investment in context-specific GBV prevention campaigns and capacity-building of local government stakeholders.
 - Increase investment in WROs to improve availability and quality of standardized, sustainable and comprehensive assistance for GBV survivors, including case management, psychological and medical services for survivors of all forms of GBV.
 - Enhance information dissemination and support more diverse service delivery modes, including through digital services to increase access to GBV services for survivors of all forms of GBV.
 - Expand access to reproductive health care for women and girls.

To **empower WROs as leaders, change-makers and active stakeholders in humanitarian decision-making platforms, governance, coordination structures and assistance** in line with the localization agenda, UN agencies and INGOs must:

- Deliver against localization commitments and promote WROs leadership in humanitarian governance and assistance to center their perspectives and skills in the design of response strategies and implementation.
- Increase inclusivity within humanitarian response and pay greater attention to the voices of diverse women and girls, such as those from Roma and LGBTQI+ communities to ensure equality of access and rights and to contribute to sustainable recovery.
- Invest in strengthening local women’s organizations that already have deep connections and understanding of the local context and needs to ensure that humanitarian assistance is more effective and community-centered.
- Engage in principled partnerships²³ and collaboration with local WROs in line with localization commitments to improve the quality and sustainability of humanitarian response.



²³ Partnerships that are equal, transparent, results-oriented, responsible, complementary, and long-term amongst local/national and international actors. For more information on principled partnerships, see <https://www.icvanetwork.org/transforming-our-network-for-impact/principles-of-partnership/>

VI. Annex



About VOICE

VOICE believes that the humanitarian sector must deliver on its promise to protect women and girls—and that women and girls themselves must lead that revolution. We are confronting one of the world’s oldest and most widespread human rights abuses: violence against women and girls. We challenge traditional, ineffectual 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 and necessary 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. Ultimately, VOICE’s goal is greater direct resourcing of local women’s organizations and their solutions to address violence.

We have helped meet the needs of women- and girl-led organizations in a growing number of countries, including Afghanistan, Bangladesh, Colombia, Hungary, Iraq, Moldova, Myanmar, Pakistan, Poland, Romania, Slovakia, South Sudan, Syria, Ukraine, the United States, Venezuela, and Yemen.

A key element of VOICE’s work, including but not limited to the Ukraine crisis, is building a global network of local expert practitioners ready to lead and drive humanitarian response in their communities. Our work with these actors will amplify their voices and leadership, promote their efforts to advocate with humanitarian actors and bolster their efforts to get the visibility and respect they deserve. VOICE creates lasting relationships with the groups we work with; these relationships do not end once a situation is no longer identified as a crisis context. We were working in the region before the crisis, and we will continue to be in the region long-term to address the protection needs of FDPs from Ukraine, to accompany frontline women’s rights and LGBTQI+ organizations, and to create structural change for women and girls.

What we've done in the region

Since the beginning of the crisis, VOICE has worked in Ukraine, Hungary, Moldova, Poland, Romania, and Slovakia centering the needs of women and girls by providing direct support to hundreds of WROs, women's groups, networks, and collectives to participate in and lead the humanitarian response, recognizing the unique impact of humanitarian emergencies on women, girls, and other at-risk groups in all their diversity.

VOICE believes it is critical that humanitarian actions—both within Ukraine and regionally—continue to build upon the advances in gender equality and women's empowerment made by Ukrainian and regional women's rights activists, women-led groups, and CSOs.

About HIAS

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

HIAS believes that forcibly displaced women, girls and individuals identifying as LGBTQI+ have the right to pursue their potential and fully access their human and legal rights, free from violence and oppression. Using a survivor-centered approach, HIAS prioritizes the voices and

needs of survivors and those disproportionately impacted by GBV: women and girls. HIAS' funding in support of this assessment and partnership is just one way of acting on its commitment to localization, women, girls, and the leadership of women's rights and CSOs.



Key terms

- ▶ **Case Management** – GBV case management, which is based on social work case management, is a structured method for providing help to a survivor. It involves one organization, usually a psychosocial support or social services actor, taking responsibility for making sure that survivors are informed of all the options available to them; that issues and problems facing a survivor and her/his family are identified and followed up in a coordinated way; and providing the survivor with emotional support throughout the process.
- ▶ **Conflict-related sexual violence** – Conflict-related sexual violence includes “rape, sexual slavery, forced prostitution, forced pregnancy, enforced sterilization, or any other form of sexual violence... against women, men, girls or boys. Such incidents or patterns occur in conflict or post-conflict settings or other situations of concern (e.g. political strife). They also have a direct or indirect nexus with the conflict or political strife itself, i.e. a temporal, geographical and/or causal link.”²⁴ Sexual violence is perpetrated in the context of men’s power over women, and is perpetrated primarily by men against women and girls. In conflict, however, boys and men are also targeted. Sexual violence may be commanded or condoned as a tactic of war.
- ▶ **Decent work** – The International Labor Organization defines “decent work” as work that sums up the aspirations of people in their working lives. Decent work is productive and delivers a fair income; security in the workplace; social protection for families; better prospects for personal development and social integration; freedom for people to express their concerns, organize and participate in the decisions that affect their lives; and equality of opportunity and treatment for all women and men.²⁵
- ▶ **Discrimination** – Actions taken to exclude or treat others differently because of their race, ethnicity, gender, sexual orientation, disability, or other identifying factor.²⁶
- ▶ **Domestic violence (DV)** – Violence that takes place within the home or family (between intimate partners or other family members).
- ▶ **Empowerment** – A process through which people gain greater control over decisions and actions affecting their health and well-being. Empowerment may be a social, cultural, psychological, or political process through which individuals and social groups are able to express their needs, present their concerns, devise strategies for involvement in decision-making, and achieve political, social and cultural action to meet those needs.²⁷
- ▶ **Forcibly displaced persons (FDPs)** – Forced displacement (also forced migration) is an involuntary or coerced movement of a person or people away from their home or home region. UNHCR defines 'forced displacement' as being displaced "as a result of persecution, conflict,

²⁴ UN Action against Sexual Violence in Conflict. Analytical and conceptual framing of conflict-related sexual violence, p. 3.

²⁵ <https://www.ilo.org/global/topics/decent-work/lang--en/index.htm>.

²⁶ Rychetnik L & Todd A. (2004). VicHealth mental health promotion evidence review: A literature review focusing on the VicHealth 1999-2002 Mental Health Promotion Framework. Victoria, VicHealth.

²⁷ WHO. (1998). Health Promotion Glossary, p:6. Geneva:World Health Organization.

generalized violence or human rights violations." A forcibly displaced person may also be referred to as a 'forced migrant,' a 'displaced person' (DP), or, if displaced within the home country, an 'internally displaced person' (IDP). While some displaced persons may be considered as refugees, the latter term specifically refers to such displaced persons who are receiving legally-defined protection and are recognized as such by their country of residence and/or international organizations.

- ▶ **Gender-based violence (GBV)** – An umbrella term for any harmful act that is perpetrated against a person's will and that is based on socially ascribed differences between males and females (i.e., gender). GBV includes acts that inflict physical, sexual, or mental harm or suffering; threats of such acts; coercion; and other deprivations of liberty. Women and girls disproportionately experience GBV due to their subordinate position in relation to men.
- ▶ **Intimate-partner violence (IPV)** – Refers to behaviour within an intimate relationship that causes physical, sexual or psychological harm, including acts of physical aggression, sexual coercion, psychological abuse and controlling behaviors. This definition covers violence by both current and former spouses and partners.
- ▶ **Mental health** – A state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community. MHPSS are essential components of the comprehensive package of care and aim to protect or promote psychosocial well-being and/or prevent or treat mental disorders among survivors of sexual violence.
- ▶ **Mental health and psychosocial support (MHPSS)** – A term used to emphasize the interaction between the psychological aspects of human beings and their environment or social surroundings. The term 'psychosocial' is used in place of 'psychological' to recognize that a person's mental well-being is not just determined by her/his psychological makeup, but also social factors. The 'social' and 'psychological' factors also influence each other. In humanitarian settings, the composite term 'mental health and psychosocial support' (MHPSS) is often used to describe any type of support that aims to protect or promote psychosocial well-being and/or prevent or treat mental disorders. MHPSS interventions in humanitarian settings are categorized according to a layered system of complementary support that can meet the needs of people affected by crises.²⁸
- ▶ **Protection from sexual exploitation and abuse (PSEA)** – A term used by the UN and NGO community to refer to measures taken to protect vulnerable people from sexual exploitation and abuse by UN/NGO staff and associated personnel.
- ▶ **Rape** – Physically forced or otherwise coerced penetration – even if slight – of the vagina, anus, or mouth with a penis or other body part. It also includes penetration of the vagina or anus with an object. Rape includes marital rape and anal rape/sodomy. The attempt to do so is known as attempted rape. Rape of a person by two or more perpetrators is known as gang rape.

²⁸ Interagency Standing Committee. (2007). IASC guidelines on mental health and psychosocial support in emergency settings. Geneva: IASC. <http://mhpps.net/iasc-guidelines-on-mental-health-and-psychosocial-support-in-emergency-settings/>.

- ▶ **Sexual exploitation** – Any actual or attempted abuse of a position of vulnerability, differential power, or trust for sexual purposes, including but not limited to profiting monetarily, socially or politically from the sexual exploitation of another.

- ▶ **Sexual harassment** – Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature.

- ▶ **Survivor or victim** – A person who is, or has been, experiencing violence, exploitation or abuse. The term ‘survivor’ implies strength, resilience, and the capacity to survive. This document mostly uses the term ‘victim’ to mean the victim of the alleged perpetrator’s actions. However this is not intended to negate that person’s dignity and agency as an individual.

- ▶ **Sexual violence** – Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic a person’s sexuality, using coercion, threats of harm, or physical force, by any person, regardless of relationship to the victim, in any setting, including but not limited to home and work. This is an umbrella term that takes many forms, including rape, sexual slavery and/ or trafficking, sexual harassment, sexual exploitation and/or abuse, and forced abortion.

- ▶ **Trauma** – Traumatic experiences usually accompany a serious threat or harm to an individual’s life or well-being and/or a serious threat or harm to the life or well-being of the individual’s child, spouse, relative or close friend. When people experience a disturbance to their basic psychological needs (safety, trust, independence, power, intimacy and esteem), they experience psychological trauma.²⁹

- ▶ **Women’s Rights Organization (WROs)** – At VOICE we define WROs as feminist groups, collectives, formal organizations, informal groups, and registered and unregistered organizations that are committed to gender equality and explicitly work towards the well-being of women and gender minorities. While not all groups or organizations may want to identify as feminist for a plethora of reasons, we acknowledge organizations that uphold and embody feminist values and principles in their work and their aspirations. These organizations are working on and are led by people from various intersecting identities LGBTQI+, migrants, and refugees for example.

²⁹ Herman, J. Trauma and Recovery: The Aftermath of Violence from Domestic Abuse to Political Terror, Basic Books, New York, 1992, p. 7.



AMPLIFYING WOMEN AND GIRLS IN CRISES
VOICE

HIAS
Welcome the stranger.
Protect the refugee.