

MOLDOVA

# Multi-Sector Needs Assessment

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Photo available courtesy of [UN Women](#).

### About REACH

REACH facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT). For more information please visit [our website](#). You can contact us directly at: [geneva@reach-initiative.org](mailto:geneva@reach-initiative.org) and follow us on Twitter @REACH\_info.

## SUMMARY

As of 15 September 2022, more than 7.2 million refugees have reportedly fled Ukraine, with 606,000 refugees arriving in the Republic of Moldova, more than 90,000 of whom are reportedly in the country.<sup>1,2</sup> While 97% of refugees are residing in the host community, limited information is currently available to response actors regarding their demographic profile, household composition, humanitarian needs, movement intentions, or coping capacities.<sup>3</sup> REACH Initiative (REACH), in partnership with UNICEF, ECHO, UNHCR, and in cooperation with the Refugee Coordination Forum, the sectoral working groups and taskforces, conducted a Multi-Sector Needs Assessment (MSNA) to ensure these response actors have the necessary evidence base to effectively respond to the needs of Ukrainian refugee families.

This assessment was implemented through a quantitative approach, in which primary data was collected through a structured, multi-sectoral survey which included questions pertaining to both the individual and family level for all surveyed households. The questionnaire was designed in cooperation with UNICEF and sectoral leads, and the survey was conducted using a purposive sampling for families living inside the community, and randomly selected families for the RAC strata. Data was collected between 16 and 31 May 2022 and covered a total of 664 refugee families in Moldova.

The sampling frame for refugees living inside the community was produced using the numbers of registered refugees as reported by local authorities in Moldova. Notably, the sampling frame excluded settlements with less than 50 registered refugees. This is to account for the potential operational challenges related to the large movement of refugees in and out Moldova observed from other assessments. For the refugees living in RACs, sampling frame was developed based on the number of hosted refugees reported by RACs to the National Agency for Social Protection (ANAS), with RACs with less than 20 refugees excluded from the assessment. For more details on the methodology, please refer to the [Terms of Reference](#).

This report presents findings and analyses across the sectors of demographics, cash and livelihoods, protection, health, education, accommodation and intentions, accountability to affected population and WASH for refugee families living in the host community and RACs in Moldova. Key findings from the MSNA include, but are not limited to, the following:

**Cash and livelihoods:** findings show that the respondents have a high level of education, and most of them have worked in productive sectors in Ukraine before coming to Moldova. Their perception about accessing the labor market in Moldova is positive, as more than half reported that language is not a barrier for finding work. In terms of sources of income, the largest majority of them reported relying on savings or humanitarian assistance, the latter also being a coping strategy signifying a level of socio-economic stress for the family. In the case of protracted displacement, and the depletion of these resources, refugee families in Moldova may experience heightened vulnerability and difficulties to cover for their basic needs may increase.

**Protection:** in general respondents did not report in a high proportion safety or security risks for women and children in their household. Discrimination and persecution were the most-often reported threats towards women, albeit in a relatively low proportion (2%), whereas for children the perception of the threat of violence in the community was reported as a risk for boys (2%) and girls (3%), alike. Gaps in terms of access to extracurricular activities to children

<sup>1</sup> UNHCR - Operational data portal, Ukraine refugee situation. Available [online](#).

<sup>2</sup> UNHCR - Operational data portal, Ukraine refugee situation. Available [online](#).

<sup>3</sup> REACH Area Monitor. Available upon request.

were observed, as only 40% of respondents with children in the community reported the participation of their children to these kinds of activities, compared to 62% of respondents living inside RACs.

**Health and nutrition:** access to healthcare does not appear to be difficult for Ukrainians in Moldova, as virtually all of respondents whose families accessed healthcare services did not report any challenges. However, only two out of ten Ukrainian family members were reported to need healthcare services, mainly for preventive consultations, acute illness or chronic disease. A small, but important, proportion of Ukrainian family members were found not to access healthcare services. While lack of information about healthcare providers or cost of consultation were reported to be reasons for not accessing these services, the largest majority of respondents reported their family members who needed healthcare services but did not go to a healthcare facility due to relying on self-medication. Vaccination of children against poliomyelitis and measles coverage appeared high, however the large amount of non-responses require further investigation. In terms of people at risk of disability, as defined under the Washington Group set of questions, only 4% of Ukrainian family members were found to be in this situation, with the largest majority of them being elders (over 60 years of age).

**Education:** The large proportion of children among family members make education a core-priority of the refugee response. However, respondents with school-aged children reported in a high proportion not enrolling their children to school, due to their attendance of Ukrainian online education classes. While this seem to be generally the case for older minors (6-17 years old), kindergarten age children appeared to be more likely to prefer in-person education in Moldova.

**Accommodation and intentions:** as noted from various sources, the Ukrainian families in Moldova mainly reside in host community, in rented accommodation or with relatives. The majority of respondents, who arrived in March or April, reported that they want to stay in Moldova in the month following the interview. Notably, respondents interviewed in RACs (12%) were more likely to report moving abroad, compared to their counterparts, mainly to Germany.

**Accountability to affected population:** respondents were found to largely benefit from assistance and report a high satisfaction with the behavior of aid workers. The majority of respondents reported benefiting of food, cash or hygiene items assistance; however, need of cash and food still remain high. UN agencies were found to be the main sources of assistance, followed by international NGOs or aid groups. Information needs remain relatively high, as respondents reported still needing information about healthcare services, aid registration or integrating into the labor market in Moldova.

**WASH:** basic WASH needs appear to be satisfied across Moldova, with respondents reporting in relatively low proportion difficulties to accessing WASH services. There were some instances of water access and quality issues as some respondents reported issues with the taste or the schedule of distribution of the water.

As the Ukraine crisis seem to be protracted and Ukrainian refugees experiencing a displacement status over a longer period of time, it becomes important for humanitarian actors to have an understanding of the risks, constraints, and future opportunities that Ukrainian families can develop in order to increase their socio-economic resilience. These findings aim to develop a clearer understanding of these needs and are a first step toward developing a durable solution to alleviate the vulnerabilities of refugees.

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## List of Acronyms

ANAS	Agentia Nationala pentru Asistenta Sociala/ National Agency for Social Assistance
CP	Child Protection
GBV	Gender Based Violence
MSNA	Multi-Sector Needs Assessment
NFI	Non-food Items
RAC	Refugee Accommodation Center
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
WASH	Water, Sanitation and Hygiene

## Geographical Classifications

**Raion:** is a territorial administrative unit made up of villages (communes) and cities united by the territory, economic and social cultural relations.

**Municipality:** is a locality of urban type with a special role in the economic, social-cultural, scientific, political and administrative life of the country, with important industrial, commercial structures and institutions in the field of education, protection of health and culture.

**Village:** is an administrative territorial unit which comprises the rural population united by the territory, geographical conditions, economic, social-cultural relations, traditions and customs. Two or more villages, depending on the economic, social-cultural, geographical and demographical conditions, can be united forming a single administrative territorial unit called commune. The commune is the administrative territorial unit which comprises the rural population united by the community of interests and customs.

**Regions with special status:** two regions with special status (Autonomous Territorial Unit Gagauzia, Territorial administrative units from the left bank of the Nistru river, generically known as Transnistrian region).

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## INTRODUCTION

As of 15 September 2022, more than 7.2 million refugees have reportedly fled Ukraine, with 606,000 refugees arriving in the Republic of Moldova, more than 90,000 of whom are reportedly in the country.<sup>4,5</sup> As the data on the Ukrainian refugee families living in Moldova is limited, there is a high need for rapidly available needs information to inform humanitarian programming and strategy in the immediate and long term interventions. As a result, REACH Moldova, in partnership with UNICEF, ECHO, UNHCR and humanitarian actors, conducted the 2022 MSNA to provide updated data and analysis on multi-sectoral needs and priorities for refugees in Moldova.

The 2022 MSNA aims to provide a comprehensive, evidence-based understanding of the multi-sectoral needs of refugee families living in the Refugee Accommodation Centers (RACs) and in host communities to inform UNICEF, ECHO, UNHCR and partners' on:

- 1) planning interventions that target cash and in-kind assistance to those families found to be most in need, and
- 2) referring refugee families to appropriate service providers, such as job placement and skills training or protection specialists. Data about access to information and preferred means of information dissemination will also support response actors with community engagement, outreach, and improve overall accountability mechanisms.

To achieve this, the following research questions guided the research design:

1. What are the most common demographic profiles comprising Ukrainian refugee households in Moldova?
  - a. What is the average household size?
  - b. What proportion of households contain children (0-17 years)?
  - c. What is the gender and age composition of household's members?
  - d. What proportion of households contain vulnerable groups, including but not limited to children, pregnant or lactating women, elderly members, or people with disabilities?
2. What are households' reported priority needs across the active sectors within the humanitarian response (specified below)?
  - a. Protection (including GBV and CP)
  - b. Health and Nutrition
  - c. Education
  - d. Accommodation and Transport (inclusive of shelter, NFI, and WASH)
  - e. Livelihoods and Inclusion
3. To what extent do Ukrainian refugee households in Moldova possess coping and resilience capacities, in the event of a protracted displacement?
  - a. What are households' current income, expenditure, and debt patterns?
  - b. What are the primary livelihoods sources for adult household members?
  - c. What are the most prevalent education levels attained and labour skills of adult household members?

<sup>4</sup> UNHCR - Operational data portal, Ukraine refugee situation. Available [online](#).

<sup>5</sup> UNHCR - Operational data portal, Ukraine refugee situation. Available [online](#).

- d. What are the movement intentions of households in the next one month and the next three months?
4. To what extent are refugee families able to access information regarding services, assistance, and humanitarian aid?
5. To what extent are households reportedly receiving assistance?
6. Which household profiles, as determined through research question 1, appear to have the highest needs across the assessed sectors?

This report presents main findings of the MSNA and has the following structure: The first part of the report provides a detailed overview of the methodological approach designed and used by REACH for this MSNA, including the challenges and limitations. The second part of the report outlines sector specific assessment findings on demographics of the assessed population, livelihoods, protection, health and nutrition, education, accommodation and intentions, accountability to affected population and WASH of Ukrainian refugees living in community and RACs, which summarizes main findings, provides recommendations for programming and lessons learned for future assessments in the Moldovan context.

## METHODOLOGY

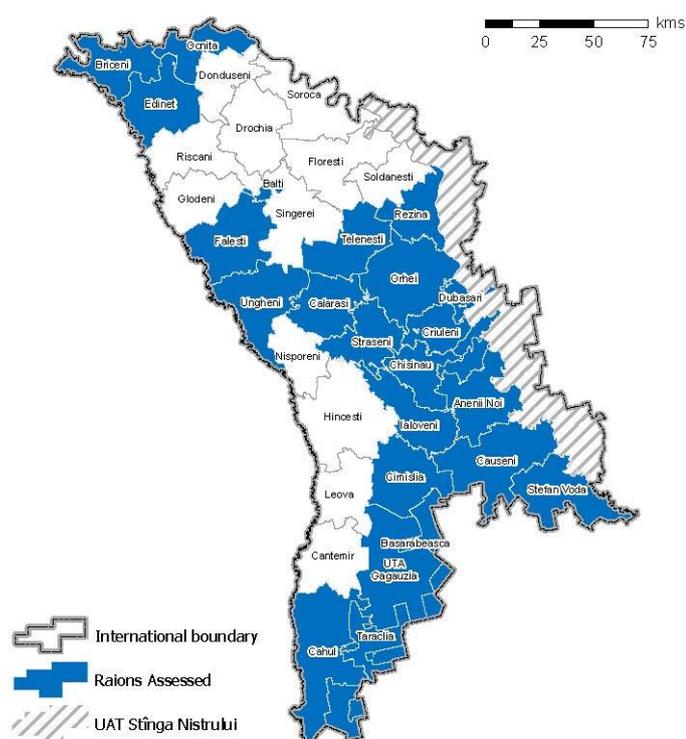
The MSNA in Moldova was implemented through a quantitative approach, in which primary data was collected through a structured, multi-sectoral survey which included questions pertaining to both the individual and family level for all surveyed refugee families.<sup>6</sup> The questionnaire was designed in cooperation with UNICEF, and sectoral leads, and the survey was conducted using a purposive sampling for families living inside the community, and randomly selected families for the RAC strata. Data collection took place between 16 and 31 May 2022. The assessment covered a total of 664 refugee families in Moldova. Preliminary findings were shared with the sectoral and cross-cutting working groups which provided their feedback and formally endorsed the findings. Following the presentation of preliminary findings, sectoral and cross-cutting working groups provided feedback, which was included in the current report.

### Coverage and sampling<sup>7</sup>

The population of interest included all Ukrainian refugee families who have displaced to Moldova, and the sample includes two distinct population strata: refugees living in RACs and refugees living outside of RACs. Refugees living outside of RACs (*community* strata) covered a variety of accommodation types, including private accommodation, being hosted by family, friends, or volunteer Moldovan families, or in non-accredited (informal) collective centers. The unit of measurement was primarily the refugee-family, with specific indicators measured at the individual level through a roster approach.<sup>8</sup> This assessment employed a stratified random sampling methodology for Ukrainian refugee families living

inside RACs and a multi-stage purposive sampling for refugees living in the community. The sampling frame for the Ukrainian families was produced using the Moldovan National Agency's for Social Assistance (Agentia Nationala de Asistenta Sociala, ANAS) data based on a list of RACs and the number of individuals living inside the RAC's, two weeks before the start of data collection. RACs with a reported population of less than 20 refugees were excluded from the sampling, in order to reduce the nonresponse rate for data collection. For the refugees living

Map 1: Map of assessed areas



<sup>6</sup> Term “family” will be defined as the Ukrainian refugee respondent plus all individuals, including family or close acquaintances who travelled with her/him to Moldova and are living with the respondent at the time of interview. “Household” will only be used in the context of the host community population. The household will be defined as both the Ukrainian family being hosted and the Moldovan family who is hosting. The survey will include only a limited number of questions related to the household due to the sensitivity of the topic.

<sup>7</sup> Transnistrian region is an administrative-territorial unit located on the left bank of the Dniester River, along the border with Ukraine. Due to political sensitivities and potential security and access constraints, REACH will not be able to implement quantitative component of the MSNA, i.e. household survey.

<sup>8</sup> The roster approach implies that one adult member of the family (usually the head of family) reports on the status of each family member.

in community, REACH contacted the rational local administration and asked about information about the number of registered refugees in each settlement. In order to ensure sufficient families for data collection, as a means to filter locations with no refugees, settlements with less than 50 registered refugees were excluded from the sampling. As a result, the assessment covered only the raions in Moldova where refugees were registered with local authorities.

**Table 1: Sampling frame for the MSNA Moldova**

Strata	Estimated number of reachable individuals <sup>9</sup>	Estimated number of reachable families	Minimum sampling frame	Minimum sampling frame + buffer	Achieved sample
Community	44,363	12,675	373	559	534
RAC	3,198	914	89	99	130
<b>Total</b>	<b>47,561</b>	<b>13,589</b>	<b>462</b>	<b>658</b>	<b>664</b>

## Data collection

Quantitative data collection consisted of a multi-sectoral family-level survey conducted using the computer-assisted personal interviewing (CAPI) method. All interviews were conducted at the family level (featuring individual loop questions per family member reported by the respondent on behalf of the household members). Findings are representative at the RAC level (at least 95% level of confidence and 10%) and indicative only for families interviewed in locations in the community. Enumerators interviewed only adult members of the family. The respondent was asked questions to reflect the socio-economic status about the entire family, which in the case of refugee families included answering on behalf of any non-family members or members of other individuals living under the same roof with the respondent and shared resources. This practice was adopted due to frequent resource and expenditure sharing between individuals living in the same household, such as pooling funds to buy food or pay rent. For certain indicators, such as health, education and disability, data was collected at the individual level, by means of asking the respondent on behalf of all other family members. For the analysis, these indicators were largely aggregated at the family level.

**Ethical considerations:** throughout all stages of the research cycle, the assessment team took all necessary measures stipulated in the global [IMPACT Data Protection Policy](#) in order to protect and safeguard personal data and to minimize the risk of attributing findings to specific individuals or households. In addition to personal data protection, the assessment team upheld data responsibility: the safe, ethical and effective management of data as outlined in the IASC Operational Guidance on Data Responsibility in Humanitarian Action. This included asking for informed consent and taking measures to prevent the exposure of sensitive non-personal data, ensuring data protection and security in line with the principles for data responsibility in humanitarian action.

## Analysis

Data quality was ensured through daily data cleaning carried out daily by the Data Officer. Issues such as logic checks, interview lengths and outliers were flagged and addressed with the field teams. The number of completed interviews was tracked daily. Upon completing data collection and processing the data, preliminary analysis was performed using SPSS in accordance with the Data Analysis Plan which clearly links overarching research questions with

<sup>9</sup> Primary preliminary data on the number of refugees was obtained from the raion authorities. The final number excludes settlements with less than 50 registered refugees and RACs with less than 20 registered refugees.

the relevant indicators and interview questions, and which lists all variables used for aggregation and disaggregation of findings. This report serves as a selective deep dive into some of the findings and main indicators per sector. Further disaggregation based on relevant topics such as type of reported residency, date of arrival, families with children and others were completed and included in the existing report or other outputs.

## Challenges and Limitations

**Sampling frame:** As the sampling frame was nonrandomized and based on the number of registered refugees in the local communities, results can be considered only indicative of the refugees living in the community.

**Perceptions:** Indicators related to service provision are based on respondent's perception and may not directly reflect the realities of service provision in the host community or RAC's.

**Timing of assessment:** When interpreting findings, users are informed that data collection was conducted in the second half of May 2022. Due to the volatility of the situation and high level of movement, findings should be interpreted as a snapshot of the situation of refugees at that point in time.

**Reporting bias:** Due to a technical error in the questionnaire tool, 40 surveys had to be removed due to inconsistencies between the location of the interview and the reported type of residence of the respondent. The number of removed surveys did not amount for more than 5% of the total sample. After the revision of calculations, initial preliminary findings did not express a variation larger than 1% for certain indicators for which the number of observations was low. Findings in this report express indicators calculated following the exclusion of the 40 surveys.

## FINDINGS

### Household demographics

This section discusses the main demographics of the Ukrainian families living in Moldova, such as the average family size, gender and composition of the family, including the proportion of family members by age group and different levels of vulnerability among the Ukrainian family members.

#### Average household composition

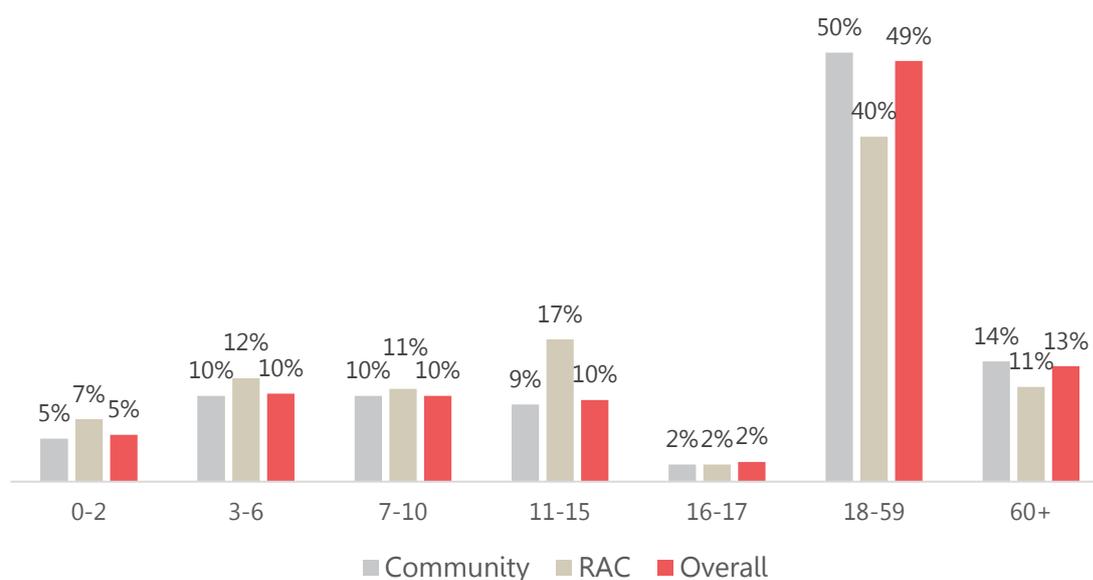
The average reported Ukrainian family size was found to be 2.9 family members, with a slightly higher calculated average for families living inside the RACs (3 members) compared to families living in the community (2.8 members).

**Table 2: Calculation of the average, median and mode of the family size, by strata**

Calculation	Community	RAC	Overall
Average	2,80	3.06	2.85
Median	2	3	3
Mode	2	2	2

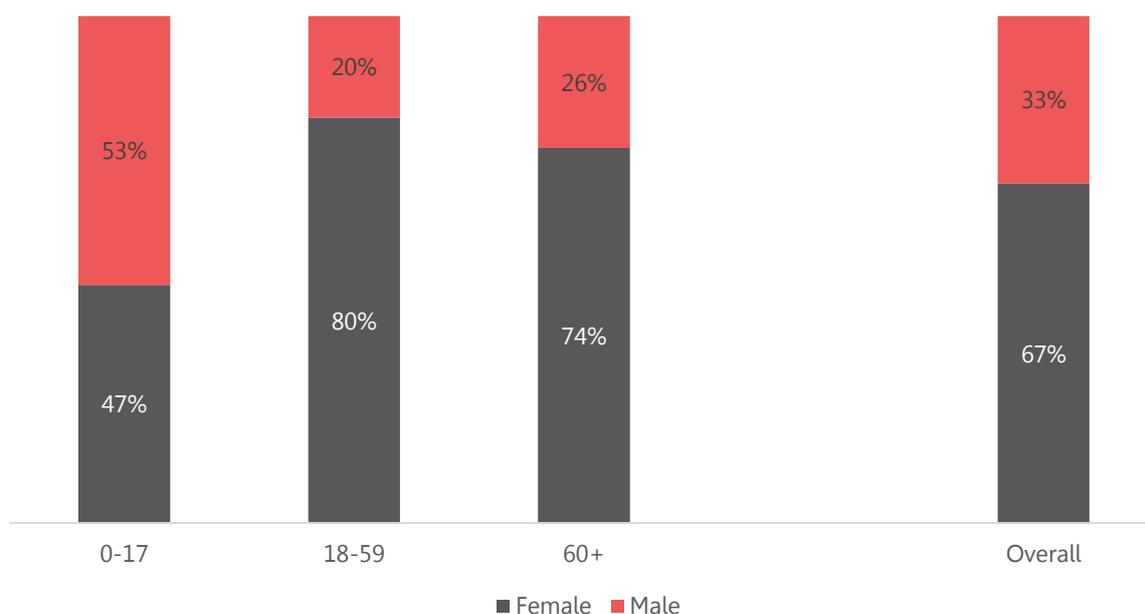
Among all Ukrainian refugee family members, 49% of the individuals were reported being between 18-59 years. However, minors and adult members over the age of 60 years old comprised the majority of refugee family members, in a higher proportion for refugee family members living inside the RACs (60%), compared to refugee family members living inside the community (50%).

**Figure 1: Nationwide reported age distribution for individuals from Ukrainian refugee families, by strata**



Women remained the gender group the most represented among all Ukrainian refugee family members, as 67% of all refugee family members were found to be female, while 33% were found to be male. Notably, eight out of ten (80%) of all adult (18-59 years old) family members were female, while only 20% of all adult family members were found to be male. Of all families, 62% of them were found to include at least one minor in their composition. The average age of all family members was found to be 31 years old, slightly lower for families interviewed in RACs (27 years old) compared to families interviewed inside the community (31 years old).

**Figure 2: Reported age and gender distribution for individuals from Ukrainian refugee families**



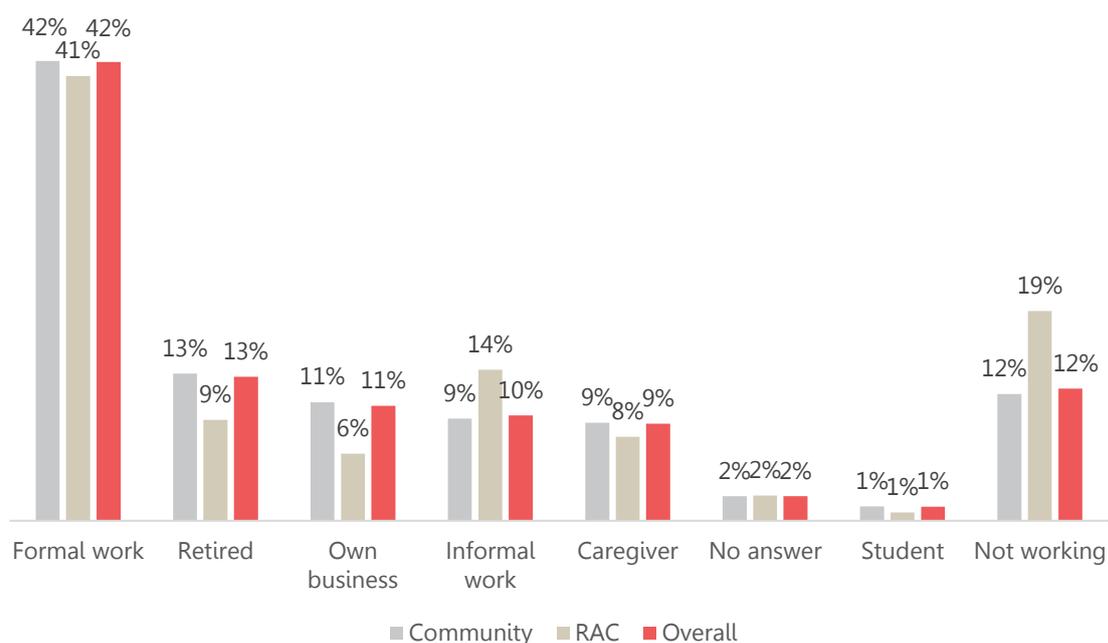
Respondent were also asked about each female Ukrainian refugee family member aged between 15 to 49 years if this person is either pregnant, breastfeeding or both. Only 4% (28 members) of individual (female) Ukrainian refugee family members were found to be breastfeeding, while 1% (7 members) were reported to be pregnant. Only 1 individual was found to be both pregnant or breastfeeding.

**Table 3: Proportion of Ukrainian (female) refugee family members reported being pregnant and/or breastfeeding, by strata**

	Community		RAC		Overall	
	Number	%	Number	%	Number	%
<b>Breastfeeding</b>	19	4%	9	7%	28	4%
<b>Pregnant</b>	7	1%	0	0%	0	0%
<b>Both</b>	1	0%	0	0%	1	0%

The majority of respondents (42%) were found to be employed in formal work before the start of the war, mainly in government or public sector (15%), education (14%), or healthcare (13%). Only 12% of head of households did not report any income generating activity before moving to Moldova, with a slightly larger proportion for families residing in RACs (19%), compared to 11% of families residing inside the community.

Figure 3: Reported occupation before the conflict of the respondents, by strata

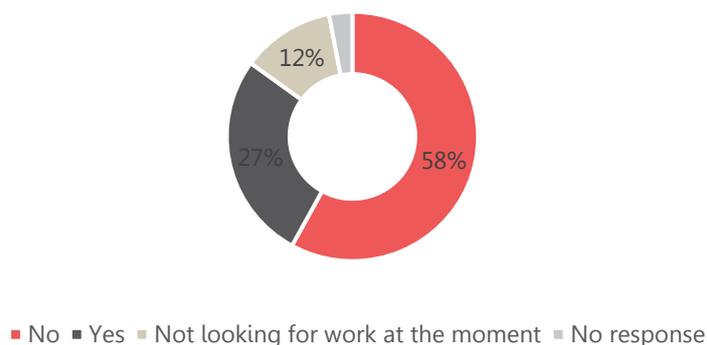


### Cash and livelihoods

Data collection was conducted roughly three months after the start of the conflict, with the majority of arrivals happening in March and April. This aspect could explain the high proportion of respondents reporting not to be engaged in any form of work (72%), compared to the time they were in Ukraine (12%). However, as the crises becomes protracted and the possibility to return to Ukraine remains low, access to livelihoods could become a priority for the active Ukrainian population living in Moldova.

Access to labor market in Moldova did not seem to pose major challenges for respondents, as more than half reported not having to learn a new language in Moldova (58%). Notably, while answering the same question, 12% of respondents added that they were not interested in working in Moldova at the moment of the interview. Furthermore, eight out of ten respondents (80%) reported not having to certify their graduation diploma in order to access Moldovan labor market.

Figure 4: Respondents reporting having to learn a new language in order to integrate in the labor market in Moldova



Notably, respondents were found to have a good level of education, with the highest proportion of them reporting having completed a complete higher education level (37%), a

complete secondary vocational (31%) or general higher education (22%).<sup>10</sup> This could translate into a high level of employability in key sectors of the Moldovan economy, where gaps may exist. In fact, the majority of respondents reported they were working in high-skilled sectors while in Ukraine, such as government or public sector (15%), education (14%), or commerce (13%).

**Table 4: Proportion of respondents reporting being engaged in formal work, by the sector of employment, by strata (n=284)**

Sector	Community	RAC	Overall
Government or public services	15%	16%	15%
Education	14%	18%	14%
Commerce	13%	10%	13%
Financial services	11%	8%	10%
Healthcare	10%	14%	10%
Transportation (drivers)	6%	10%	6%
Hotels and catering	4%	2%	4%
Media production	4%	0%	3%
Beauty and care	3%	2%	3%
Mechanical engineering	3%	6%	3%
Food or tobacco production	3%	2%	3%

The main three sources of income reported by respondents about their families in the 30 days prior to data collection were savings or pension (64%), humanitarian assistance (62%) and remittances (13%). While these sources of income seem to provide some level of support, over the long term as the crisis becomes protracted, these resources may deplete, leading to an increase in vulnerability of the Ukrainian families in Moldova. These dynamics seem to be applicable for both strata, with slight differences between families living in the community who are more likely to report in a higher proportion income from savings (65%) compared to families interviewed in RACs (52%).

**Table 5: Proportion of income sources and their corresponding averages (in MDL), by strata:<sup>11</sup>**

Sources of income	Community		RAC		Overall	
	%	Average monthly amount (MDL)	%	Average monthly amount (MDL)	%	Average monthly amount (MDL)
Savings or pension	65%	14,913	52%	4,650	64%	14,482
Humanitarian assistance	62%	5,255	59%	5,564	62%	5,367
Remittances	13%	7,708	5%	5,333	13%	7,666
Government assistance	11%	4,751	15%	4,320	11%	4,731
Salaried work	7%	8,425	12%	4,416	7%	8,099
Charitable donations (excluding aid)	6%	2,828	5%	1,000	6%	2,778
Support from family and friends (excluding remittances)	5%	5,432	2%	8,800	5%	5,414
Own business	3%	12,250	2%	15,000	3%	12,378
Informal work	2%	3,333	0%	-	1%	3,333
Other kinds of income	0%	3,000	0%	11,000	0%	4,095

Overall, the main destination of families' expenses was for food (63%), communications (56%)

<sup>10</sup> The Ukrainian educational system is organized into five levels: preschool, primary, secondary, upper secondary and postgraduate education.

<sup>11</sup> Multiple choices could be selected therefore findings may exceed 100%. 160 out of 664 respondents did not want to report any source of income.

and transportation (49%). While food is the most-often reported expense, the highest amount of expenses was dedicated to rent (MDL 4,873), reported only for families who live in the community. However, food (MDL 3,938) remains only the primary expense in terms of amount spent by the families, followed by rent. Fuel came in third as the highest amount of expense, with an average amount of MDL 2,095.

**Table 6: Proportion of expenses and their corresponding averages (in MDL), by strata:<sup>12</sup>**

Reported expenses	Community		RAC		Overall	
	%	Average monthly amount	%	Average monthly amount	%	Average monthly amount
<b>Food</b>	64%	3,938	56%	3,204	63%	3,894
<b>Rent</b>	24%	4,873	-	-	24%	4,871
<b>Water</b>	22%	525	17%	358	21%	516
<b>Household items</b>	24%	1,379	25%	1,460	24%	1,385
<b>Utilities</b>	32%	1,313	2%	1,950	26%	1,315
<b>Fuel</b>	8%	2,095	5%	1,456	8%	2,067
<b>Transportation</b>	41%	545	32%	503	49%	543
<b>Communication</b>	57%	264	52%	251	56%	263
<b>All other expenditures</b>	2%	1,279	8%	1,740	3%	1,370

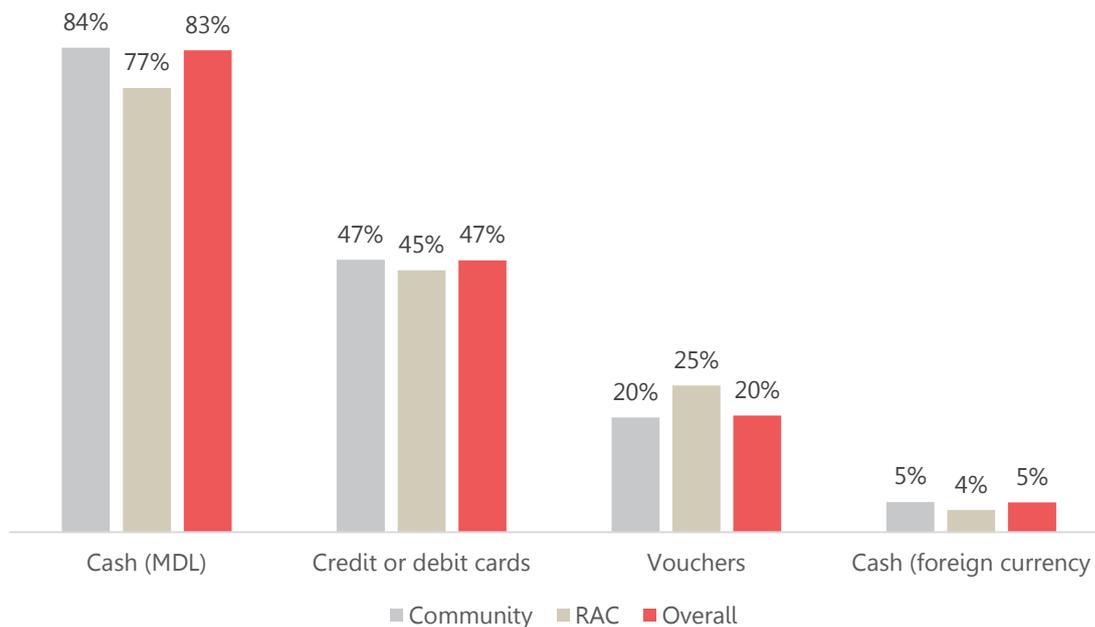
The average monthly expense per capita was MDL 2,624, almost double than the average income per capita (MDL 4,156) reported by the refugee families. Overall, the families living in the community have expressed a better access to livelihoods emphasised through the relatively higher level of income compared to families living inside the RACs. However, for the latter group, the lower amount of average income per capita is matched by a lower average expense per capita.

**Table 7: Corresponding averages of income per capita and expenses per capita and the income-expenses gap (in MDL) by strata:**

Location	Average income per capita	Average expense per capita	Difference
Community	4,541	2,885	1,656
RAC	2,262	1,449	813
Overall	4,156	2,624	1,533

Cash in local currency has remained the main method of paying for family's expenses in the 30 days prior of data collection, as it was reported by 83% of respondents (respectively 84% in community strata and 77% in RACs). The second most-often reported payment method was by a debit or credit card, preferred by about half of respondents. However, the third most often reported payment method (vouchers) was used in a higher proportion of respondents living inside RACs (25%) compared to respondents living inside community. Figure 6 presents an overview of the main method of paying for family's expenses.

<sup>12</sup> Multiple choices could be selected therefore findings may exceed 100%. 175 out of 664 respondents did not want to report any expenses.

**Figure 5: Main methods of paying for expenses, in the 30 days prior to data collection, by strata:<sup>13</sup>**

Refugee families in Moldova appear to not experience any issues with access to financial services in their area, as 87% of respondents confirmed the presence of a bank in the area. Only 11% reported no financial service provider in their immediate vicinity, with a higher proportion of respondents residing in RACs (22%) compared to respondents interviewed in the community. The presence of a money transfer service was reported by 6% of respondents. Respondents interviewed in RACs were equally likely to report the presence of an informal member in the community providing financial support (2%) compared to respondents interviewed in the community.

**Table 8: Presence of financial services in the area of respondent, by strata:<sup>14</sup>**

Type of financial service	Community	RAC	Overall
Banks	88%	76%	87%
Money transfer services	7%	5%	6%
Credit unions	1%	3%	1%
Informal members savings group	1%	2%	1%
Financial services provided by members in the community	1%	1%	1%
<b>None</b>	<b>11%</b>	<b>22%</b>	<b>11%</b>

### Livelihood coping strategies

The assessment found a relatively widespread use of coping strategies in order to cover for the lack of cash, including using savings, reducing essential healthcare expenditures, entire household migrating or reducing essential education expenditures. Almost three-quarters of all households reported spending their savings in the 30 days prior to data collection. This finding suggest a relatively low current level of vulnerability at the moment of the interview, which nevertheless, can turn into a higher risk of economic insecurity in case the crisis becomes protracted.

<sup>13</sup> Multiple choices could be selected therefore findings may exceed 100%.

<sup>14</sup> (Ibid.)

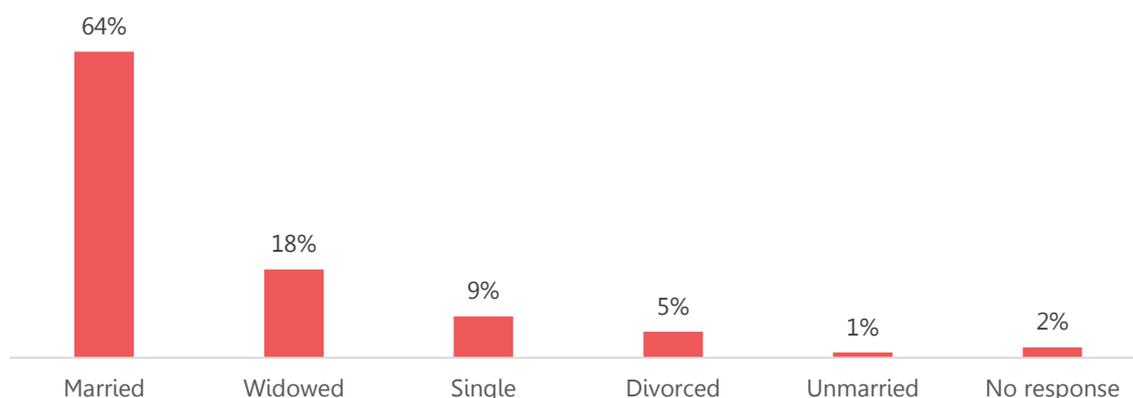
**Table 9: Reported coping strategies used to overcome lack of livelihoods since arriving to Moldova**

Reported coping strategy	Community	RAC	Overall
Sold household assets	6%	5%	6%
Spent savings	76%	72%	76%
Purchased food on credit	6%	5%	6%
Send household members to eat away	3%	6%	3%
Sold productive assets	1%	2%	1%
Withdrew children from education	15%	15%	15%
Reduce essential health expenditure	31%	21%	30%
Reduce essential education expenditure	17%	15%	17%
Sold house or land	1%	2%	1%
Entire household displaced	18%	22%	18%
Household member moved elsewhere in search of work	3%	5%	3%
Used degrading sources of income	0%	1%	0%

### Host-family socio-economic status

Respondents reporting being hosted by a Moldovan family were also asked questions about the socio-economic status of their hosts. In total, 92 respondents provided information about their host families.

The majority of head of host households were found to be married (64%), completed higher education (35%) and retired (41%). Of the head of host-households reported paid work (39%) as main activity in the 30 days prior to data collection, the majority of them were found to be engaged in the commerce sector (17%) or financial services sector (17%).

**Figure 6: Marital status of the head of host household (n=92)**

**Table 10: Education status of the head of host household (n=92)**

Reported education	%
Complete higher education	35%
General higher education	28%
Complete secondary vocational	15%
No education	7%
General secondary education	4%
No response	11%

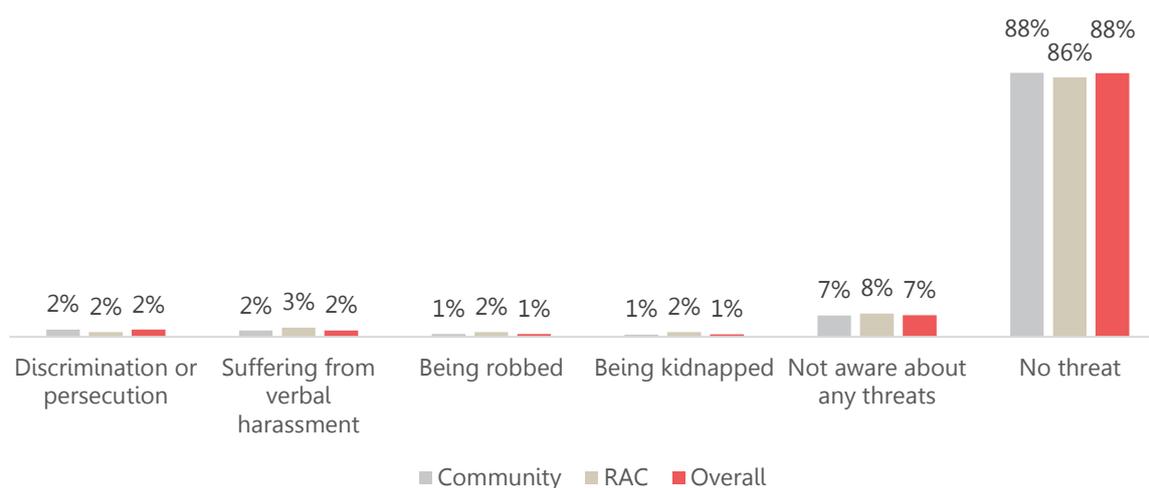
**Table 11: Occupational status of the head of host household in the 30 days prior to data collection (n=92)**

Reported occupation	%
Retired	41%
Formal work	39%
Own business	8%
Not working	2%
Student	2%
No response	8%

## Protection

This section discusses various protection issues, ranging from the perception about security of women and children to perception about accessibility to reporting mechanisms in case of threat and access of children to recreational activities. Given the sensitive nature of topics discussed in the Protection section of the questionnaire, the reader should keep in mind the possibility of underreporting by respondents.

Overall, the assessment found that 88% of respondents reported no safety and security concerns for women in their area, while 7% of respondents reported not being aware of any safety or security concerns for women. Only 2% of respondents (or 17 respondents) reported discrimination as a security concern and 2% (or 16 respondents) reported verbal harassment as a security risk.

**Figure 7: Main threats towards women in the area, by strata<sup>15</sup>**

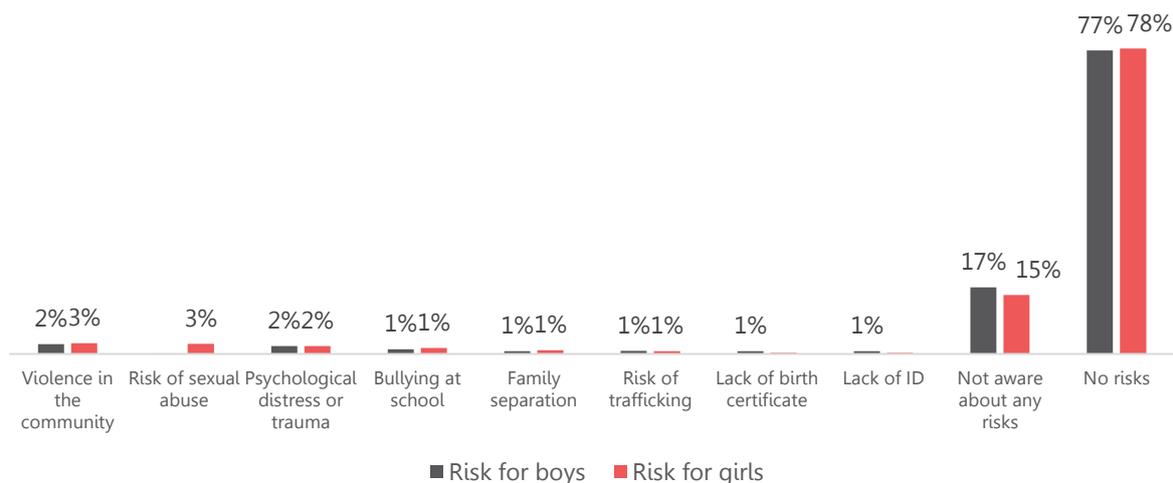
Respondents were also asked to whom they would address to request if a woman or a girl experience any form of violence. Findings revealed that the respondents have a relatively high trust in the public safety institutions as police (83%) was the most-often reported organisation to request support, followed by government hotline (14%), or NGO hotline (3%). Notably, 11%

<sup>15</sup> Not listed, three respondents reported on the risk of suffering from sexual physical harassment or violence, two reported on the risk from suffering from non-sexual harassment or violence, two reported on risk of being threatened with violence, two reported threat of exploitation, while one reported on the risk of trafficking for sexual exploitation.

of respondents they would not know to whom to request support, in a similar proportion being reported by family residing in community (12%) and RACs (11%).

When asked about security concerns about boys or girls in the area, 77% of respondents reported no security concern for boys in the area (78% reported similarly concerning girls), whereas 17% of respondents reported not being aware about any risk for boys in the area (for girls, the proportion was 15%). Violence in the community appears to be the main security risks for boys (2%) or girls (3%), while risk for sexual abuse of girls was reported by 2% of respondents.

**Figure 8: Main threats towards boys and girls in the area<sup>16</sup>**



Discrimination does not appear to be a widespread issue for families residing in Moldova as 89% of respondents reporting not experiencing any form of discrimination since arriving in the country, in a similar proportion for respondents interviewed in community (89%) and in RACs (89%). Of the families who confirmed experiencing a form of discrimination (10%), eight percent (8%) of them were in RACs, whereas 10% were interviewed in the community.

The awareness about the presence of psychosocial support services appears to be an issue for respondents interviewed in the community, as only four out of ten respondents (43%) could confirm such a service actually exists in their community, compared to 62% of respondents interviewed in the RACs. Overall, 43% of respondents could confirm the existence of a psychosocial service in their communities. Thirty-three (33%) of respondents did not confirm such services exist, whereas 21% were not aware at all about these kind of services.

Respondents were also asked if their children benefited from support to participate to extracurricular activities, such as access to safe spaces or recreational areas. Six-out-of-ten (62%) respondents interviewed in RACs confirmed it was the case, compared to only 40% of respondents reporting the participation to extracurricular activities of their children of respondents in the community strata.

Conflict in Ukraine could have led to the separation of families, with minors often being left in the care of people other than their immediate relatives. The assessment found that 5% (or 27 respondents) of the families are providing care for a child for whom care was not provided while they were in Ukraine. Findings revealed that the proportion of respondents taking care of unrelated minors was slightly higher for respondents interviewed in RACs 10% (or 10 families), compared to respondents interviewed in the community (5%, or 17 families). Overall,

<sup>16</sup> Multiple choices could be selected therefore findings may exceed 100%.

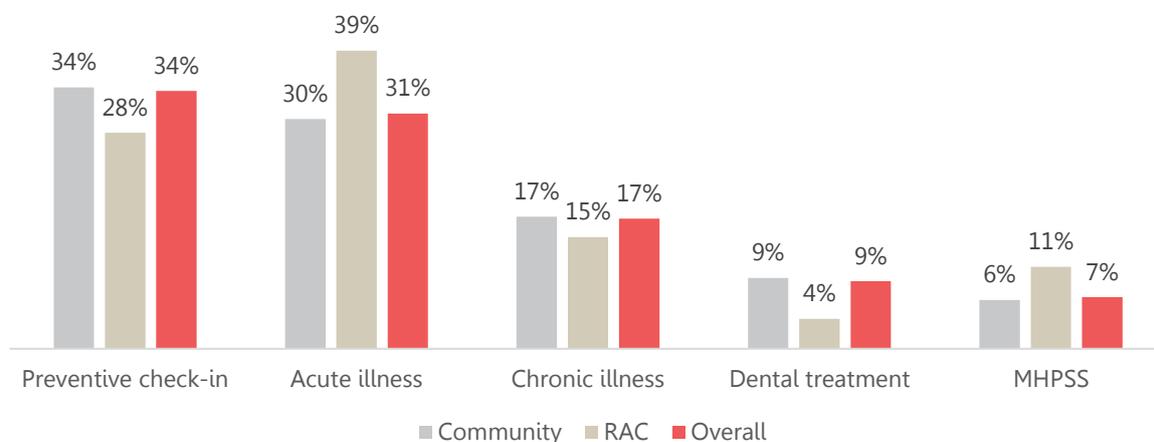
93% (or 25 respondents) confirmed that these children are in contact with their parents or caregiver in Ukraine. Only two respondents, one in RAC and one in community, reported that the unrelated children part of their families are currently not in contact with their parents or caregiver in Ukraine.

## Health and Nutrition

This section gives an overview of the health needs of Ukrainian families living in Moldova, including access and barriers to healthcare, and Ukrainian family members capacity to access healthcare services since arriving to Moldova as well as knowledge about mental healthcare services. Respondents were asked a set of questions about the health status of each of their household members, with questions about needing to access healthcare services since arriving to Moldova, and their ability to access these services, including any potential barriers

Approximately two in ten Ukrainian family members (22%) reported a need to access healthcare services since arriving to Moldova. Of the individuals who reported having any healthcare need, the most often-reported healthcare needs were visits for preventive services (34%), acute illness (31%) or a medical visit due to a chronic condition (17%). Ukrainian family members living in RACs were more likely to have a medical visit due to an acute illness (39%), compared to Ukrainian family members living in the community (30%), whereas preventive check-in was the most-often reported reason for accessing healthcare services by Ukrainian family members living in the community (34%) compared to family members living inside the RACs.

**Figure 9: Proportion of individuals by the healthcare need (n=420)<sup>17</sup>**



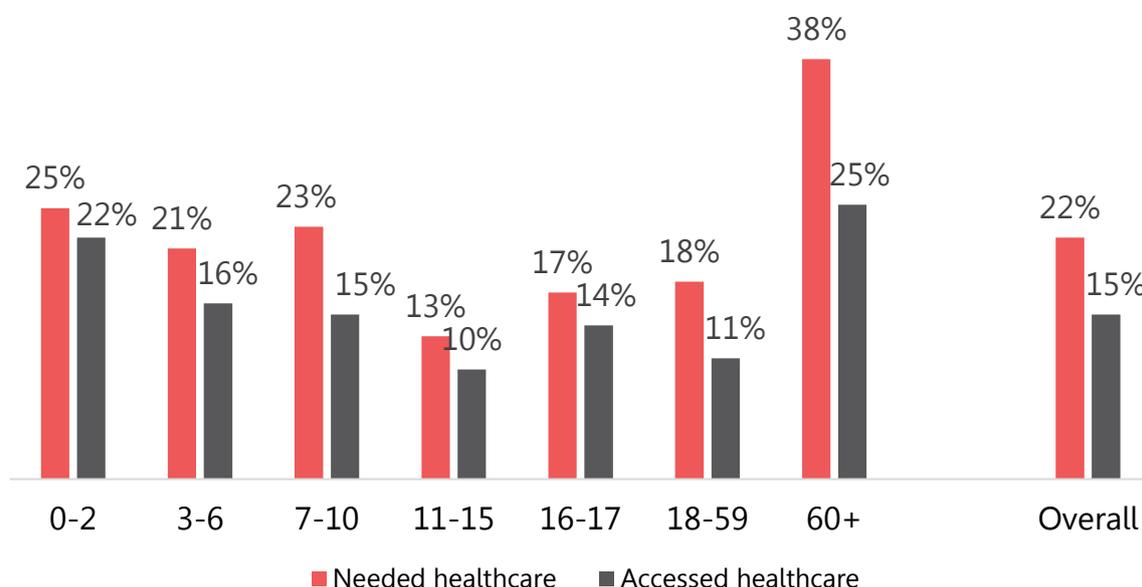
Of the 21% of Ukraine family members reporting needing to access healthcare services, 65% of them reported having accessed these healthcare services (or 15% of the total population).

Of the remaining 35% of Ukrainian family members not accessing healthcare services, the largest majority of them (31%) reported relying on self-medication to treat their healthcare issues. Notably, 19% of family members did not know where to go to get healthcare services, while 16% waited to see if the problem will solve on its own. The reluctance to access healthcare services could be linked to a series of probable perceived barriers that need further investigation. However, differences across the strata do exist: while 20% of Ukrainian family

<sup>17</sup> Multiple choices could be selected therefore findings may exceed 100%.

members reported as a reason for not accessing healthcare services the lack of information about the healthcare providers, only 9% of Ukrainian family members reported this aspect.

**Figure 10: Proportion of all individual members needing healthcare and accessing healthcare, since arriving to Moldova**



**Table 12: Reasons of individuals for not accessing healthcare while needing it, since arriving to Moldova, by strata (n=1,470)<sup>18</sup>**

Reason for not accessing healthcare services	Community	RAC	Overall
Relied on self-medication	31%	36%	31%
Did not know where to go	20%	9%	19%
Waited to get better	16%	14%	16%
Could not afford the cost of treatment	15%	18%	15%
Could not afford the cost of consultation	7%	5%	7%

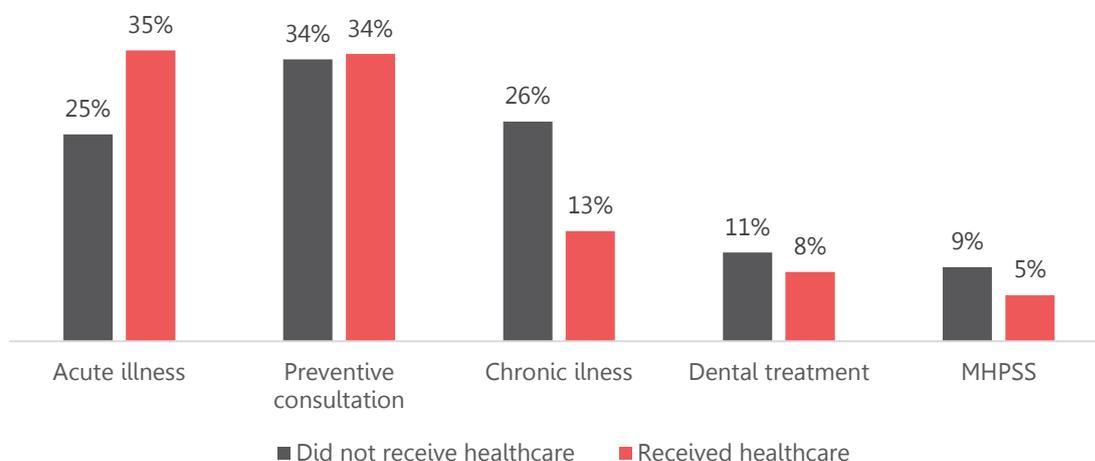
**A very low proportion of Ukrainian family members experienced any kind of barriers when accessed healthcare services**, as 91% of Ukrainian family members reported experiencing no barrier when they accessed healthcare services. The most often-reported issue, albeit in a very low proportion, was absence of specific medicine or treatment (4%/9 family members), long waiting time for the service (2% or 5 family members), or lack of a functional healthcare service (1% or 3 family members). One percent (1% or 3 family members) also were found to have denied healthcare service).

Further disaggregation of the individuals found not to be able to access healthcare services revealed that individuals seeking treatment for chronic illnesses (16%) or MHPSS (7%) were more likely not to be able to access healthcare services, compared to those reporting being able to access healthcare. The reader should note that due to the low sampling size, findings

<sup>18</sup> Choices with less than 5% of responses were excluded. Multiple choices could have been selected, therefore findings may exceed 100%

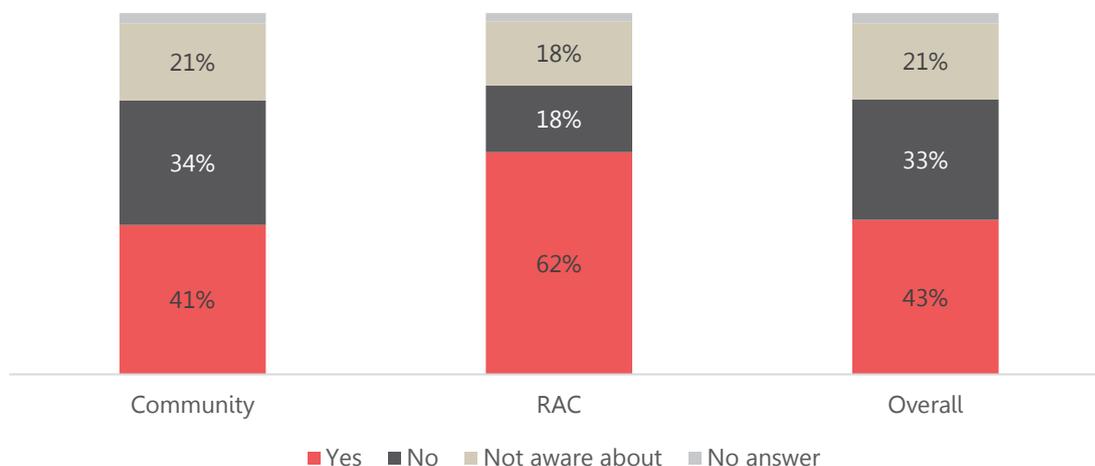
are indicative only and further investigation of the reasons of low access to healthcare is needed.

**Figure 11: Proportion of all family members not accessing healthcare, by healthcare services attempted to reach (n=420)**



Roughly 43% of respondents reported being unaware about the existence of services for psychosocial support, in a higher proportion for respondents living in RACs (62%) compared to refugees living in the community (41%). This could be in part due to a lack of interest on the topic or simply lack of awareness about the existence of these services.

**Figure 12: Proportion of respondents being aware about the existence of services of psychosocial support in their area, by strata**



Of the 16 respondents who reported having an infant in their care, all but four of them reported any issues with accessing food for the infant. Of these, two families reported issues with breastfeeding and two with the high cost of the food for the infant.

### Vaccination

Each respondent who reported having a minor (0 – 18 years old) in their family composition was asked if the minor was vaccinated against measles and polio virus, the location of the vaccine and if a certificate was available. Reader should note that the interviews were done

face-to-face in public locations in which verification of responses was difficult. As a result, findings are indicative only and based solely on respondents' responses.

**Table 13: Vaccination status for measles or polio of children under 16, by age (n=310):**

Vaccination status	Measles 0-6	Measles 7-15	Polio 0-6	Polio 7-15
Yes, in Ukraine	74%	81%	72%	81%
Yes, in Moldova with records	3%	1%	2%	1%
No	1%	0%	2%	0%
Yes, in Moldova without records	1%	0%	2%	0%
Does not know	18%	16%	20%	15%
No response	2%	2%	2%	2%

### Persons having a disability

This assessment aimed to identify people with functional limitations which are at risk due to disability. Each respondent was asked the Washington Group short set of questions about each reported family member older than twelve years old. The questions are:

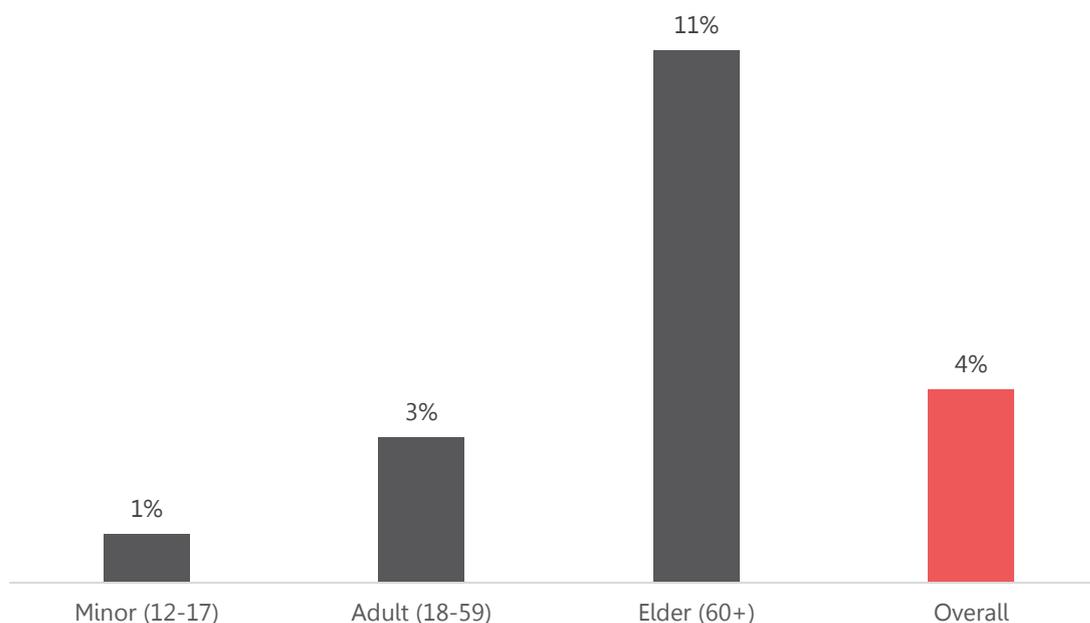
1. Do you have difficulty seeing, even if wearing glasses?
2. Do you have difficulty hearing, even if using a hearing aid?
3. Do you have difficulty walking or climbing steps?
4. Do you have difficulty remembering or concentrating?
5. Do you have difficulty with self-care such as washing all over or dressing?
6. Using your usual (customary) language, do you have difficulty communicating, for example understanding or being understood?

#### Answers

No - no difficulty  
 Yes – some difficulty  
 Yes – a lot of difficulty  
 Cannot do at all

In order to create an indicator reflective for the persons with disability, for every household member about whom was reported having "a lot of difficulty" or "cannot do it at all" any of before-mentioned activities, he or she was listed as having a disability. This decision was to avoid overestimating the proportion of family members potentially having a disability, while acknowledging that the responses on the disability of family members is purely subjective. Therefore, findings related to disability are indicative only.

The analysis revealed that the highest proportion of individuals with disability is among the elders (11%) (individuals over the age of 60 years old). Overall, 4%, or 66 individuals part of the total sampling were found to have a disability.

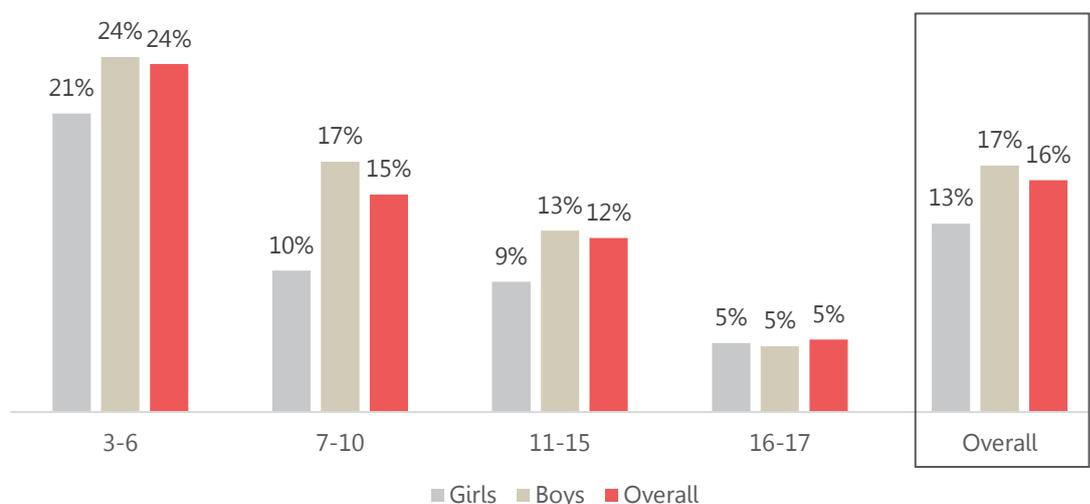
**Figure 13: Proportion of individual Ukrainian family members with a disability (n=1643):**

## Education

This section gives an overview of the education needs of Ukrainian refugee school-aged minor family members (3-17 years old), by first providing school enrollment levels, reasons for not being in (formal) education, as well as barriers in accessing education.

### Enrollment rate for school-aged children

Overall, only 16% of school-aged children family members were found to be attempted to be enrolled in school at the moment of the interview. Across the sampling, 10% of all family members were of kindergarten age (3-6 years old), 10% primary school age (7-10 years old) and 10% were of secondary-school age (11-15 years old). The remaining groups, 16-17 years old comprised 2% of all family members. Across all Ukraine family members, kindergarten-age children (24%) were the group age which comprised the highest proportion of minors attempted to be enrolled in formal education. The lowest rates of school attendance were found to be for older school-aged children. Overall, enrollment rates for boys were slightly higher across than attendance for girls, with 13% of school-aged girls found to have been enrolled to school, compared to 17% of the boys, at the moment of the interview.

**Figure 14: Proportion of school-aged children enrolled in school in Moldova at the moment of interview, by age and gender**

Findings suggest that preference attendance of online classes in Ukraine was the most often reported reason for not enrolling children to school in Moldovan educational system (62%). While the subset of children not attending school was rather small, about 7% of school-aged children was reported that the caregiver or the child did not want to, 5% reported an intention to move soon, while 3% reported some language barriers. It appears that children aged between 7-10 were more likely to report as a reason attendance to online education, whereas kindergarten-age children were less likely and report as a reason not wanting to enroll to school.

**Table 14: Main reasons for children not being enrolled to school at the moment of the interview (n=422):**

Reason for not enrolment	3-6	7-10	11-15	16-17	Overall
<b>Preference for Ukrainian online platform</b>	14%	81%	82%	75%	62%
<b>No response</b>	33%	10%	12%	7%	17%
<b>Did not want to</b>	20%	1%	1%	4%	7%
<b>Intends to move soon</b>	13%	3%	1%	0%	5%
<b>Language barrier</b>	4%	3%	2%	0%	3%

Of the 16% of school aged children who were enrolled in school in Moldova at the moment of the interview, 79% of the children had already started attending classes. School enrollment for the caregivers who chose to do so did not pose too many difficulties for families living in Moldova. Eighty-seven (87%) of all school-aged children who were enrolled to school in Moldova did not experience any barrier when they enrolled their children to school. Two percent (2% or 3 children) were found to experience issues related to the language barrier, 2%/2 children expressed a preference to learn in their mother tongue, while for 9% of the children no barrier could be named when they enrolled their children to school in Moldova.

## Accommodation and intentions

Moldova's response for the accommodation needs of refugees was to set up a series of collective

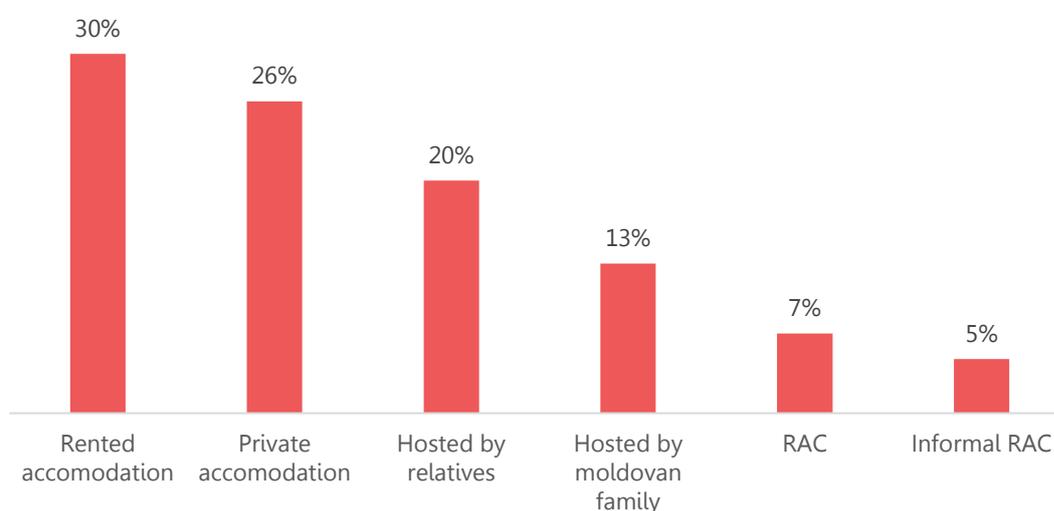
settlements called RACs, in which the refugees would be able to benefit of shelter and other kind of emergency services. At the moment of the interview, about 4% of the total population of the refugees were residing in RACs, whereas the majority of refugees were living in the host community.<sup>19</sup>

Interviews with respondents confirmed the assumption that the majority of the refugees are residents in the host community, with a majority of them residing in rented accommodation (30%). Possibly due to historical personal links between Moldova and Ukraine, the second most-often reported type of accommodation was hosted by relatives (26%), followed by hosted by relatives (20%). Notably, a small number of respondents reported being residents of Informal RACs (5%), which is a collective center which is not under the authority or oversight of the National Agency of Social Assistance (ANAS).

**Table 15: Main reported oblast of origin**

Oblast	Community	RAC	Overall
Odessa	55%	59%	55%
Mykolaiv	13%	22%	13%
Kyiv city	11%	3%	11%
Kharkiv	6%	4%	6%
Dnipropetrovsk	3%	2%	3%
Kyiv oblast	3%	2%	3%

**Figure 15: Reported type of accommodation<sup>20</sup>**

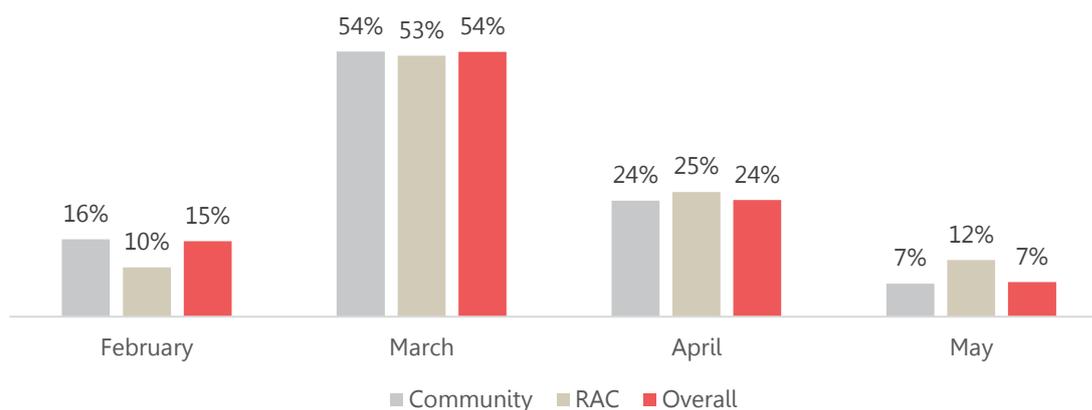


The majority of respondents reported arriving in March (54%) and April (24%) 2022 and have spent, on average, 62 days in country, with slightly less number of days for residents in RACs (58 days) compared to families renting a private accommodation (64 days) or being hosted by relatives (64 days). The differences in terms of the number of days spent in the country between some accommodation types and RACs could be due to the fact that some RACs are only transit centers for Ukrainian families, who only stay for a few days and then move outward, either to another location in Moldova or abroad.

<sup>19</sup> REACH RAC Monitoring Factsheet. Available [online](#).

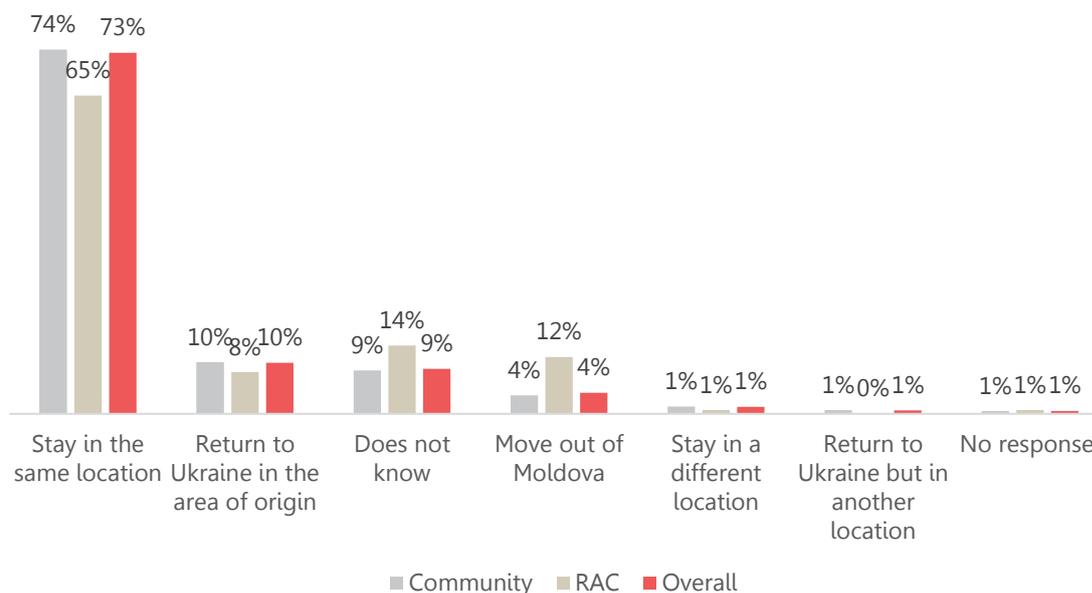
<sup>20</sup> An informal RAC is a collective center which is not under the oversight and management of ANAS.

Figure 16: Reported month of arrival, by strata



The majority of respondents intended to stay in Moldova in the next 30 days after data collection (73%), with a slight variation for respondents interviewed inside RACs compared to respondents in the community. This could be due to the fact that a number of RACs are a transit point for Ukrainians continuing further to Europe, as possibly linked to 12% of respondents interviewed in RACs reporting moving further out of Moldova compared to 4% of respondents interviewed in the community reporting similarly. A small proportion of families (8%) experienced secondary displacement before coming to Moldova, which means having to move to another 'oblast' before settling in a new country.

Figure 17: Reported intentions of the families living in Moldova, by strata



The assessment also investigated whether the type of accommodation influences the primary needs of the respondents. Respondents living inside rented accommodation reported food as a primary need, whereas cash assistance was consistently reported as the main need for all other categories of accommodation. Notably, residents in RACs reported healthcare and food (52%).

**Table 16: Main reported primary needs by type of accommodation**

Primary need	Rented accommodation	Private accommodation	Hosted by relatives	Hosted by Moldovan family	RAC	Informal RAC	Overall
Food	72%	66%	65%	57%	52%	48%	66%
Cash assistance	66%	70%	79%	72%	67%	76%	71%
Shelter	52%	35%	29%	44%	40%	44%	43%
Healthcare	38%	45%	40%	42%	52%	36%	43%
Employment	15%	14%	16%	11%	14%	12%	14%
Hygiene NFI	8%	8%	6%	7%	6%	0%	7%
Education for children under 18	7%	7%	1%	8%	8%	8%	6%
Language courses	5%	2%	8%	6%	7%	4%	5%
Livelihood support	4%	1%	2%	7%	8%	4%	3%
Psychological support	4%	5%	1%	0%	3%	4%	3%
Sanitation	2%	2%	1%	1%	1%	0%	1%
Debt repayment	1%	1%	0%	1%	2%	0%	1%
None	5%	9%	8%	7%	10%	4%	7%

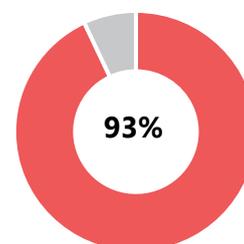
## Accountability to affected population

Almost all respondents interviewed reported having received humanitarian assistance since arriving to Moldova (93%). Of these, roughly all respondents (97%) reported being satisfied with the behavior of the aid workers in their area.

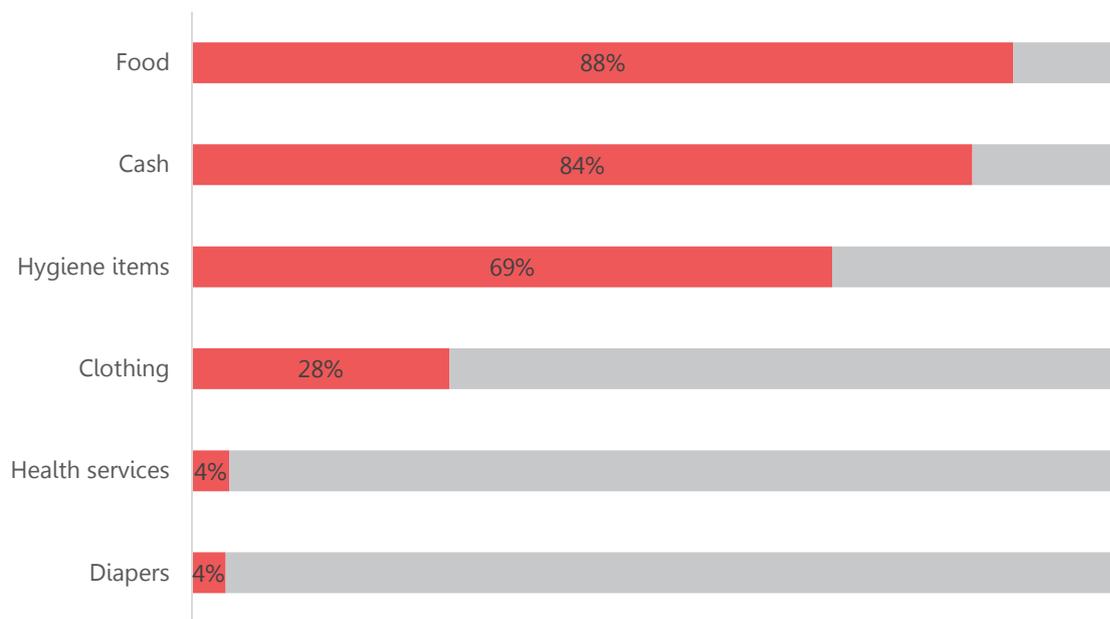
The majority of respondents reported having received food (88%), cash (84%), or hygiene items (69%) since arriving to Moldova. However, cash (71%) and food (66%) still remain the two priority needs most often listed by respondents signaling a possible perception the aid distributed being insufficient to cover their priority needs.

UN Agencies were the actor reported by the largest proportion of respondents who have received aid since arriving to Moldova, followed by international NGOs (21%), faith based groups (16%), government (11%), local NGOs (11%), and Moldova Red Cross (5%). Notably, 21% of respondents reported they do not know from whom they received humanitarian aid.<sup>21</sup>

**Figure 18: Respondents reporting receiving humanitarian aid in Moldova**



<sup>21</sup> Faith based groups are also known as religious organisations.

**Figure 19: Main types of aid received by respondents since date of arrival<sup>22</sup>**

Respondents were also asked about the specific needs they may have such as specific items, clothes, household items, etc. It was observed that a majority of respondents reported a need for clothing, possibly due to the sudden displacement from Ukraine, which may have left them without their personal belongings. Basic hygiene items was also listed as a need, which could be linked to the fact that a relatively lower proportion of respondents reported receiving basic hygiene items since arriving to Moldova. Notably, a higher proportion of respondents residing in RACs reported children clothing as a need, compared to respondents living inside the host community.

**Table 17: Main item needs of respondents since arriving to Moldova**

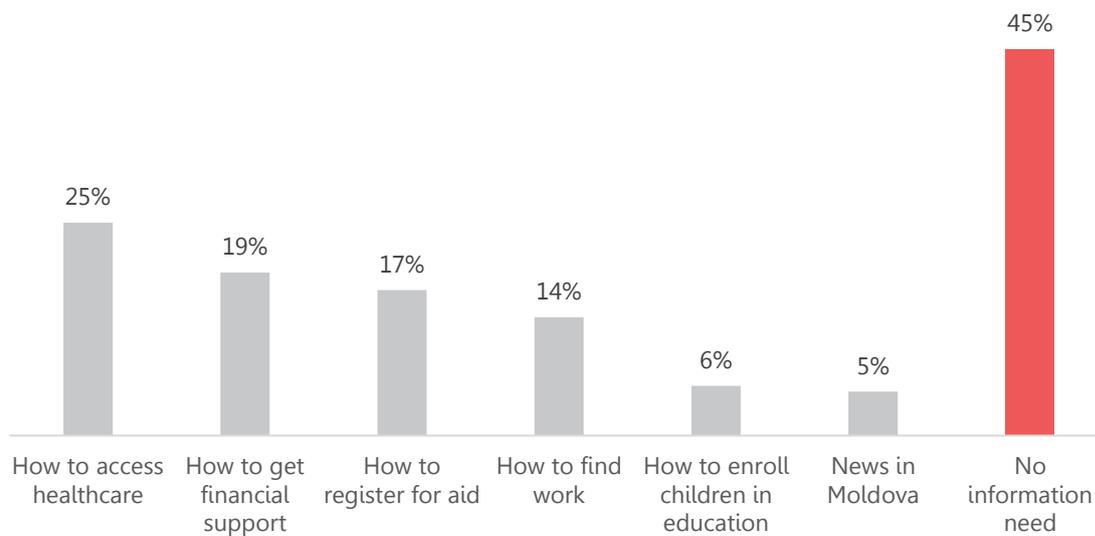
Reported item needs	Community	RAC	Overall
Adult clothing items	16%	27%	17%
Basic hygiene items	14%	15%	14%
Kitchen sets-household cooking items	13%	5%	13%
Children clothing items	12%	22%	12%
Mattresses	10%	5%	10%
Menstrual materials (eg sanitary pad-towel)	8%	11%	8%
Temperature regulating devices (heater or cooler)	6%	9%	6%
Diapers	3%	2%	3%
Everything is available	58%	54%	58%

Respondents inside the community were also asked if they have any information needs. More than half of respondents (55%) reported having at least one information need, with the majority reporting gaps in information about access to healthcare services (25%), how to get more cash assistance (19%), how to register for aid (17%), or how to find work (14%).

The high level of phone penetration among Ukrainian refugees was also reflected in their preferences of means to receive information about assistance, as the majority of them reported preferring receiving information through phone call (28%).

<sup>22</sup> 3% of respondents reported transportation, 2% psychological support, 1% baby formula, 1% medication, 1% education services, and less than 1% reported support with obtaining the documentation. Multiple choices could have been selected therefore findings may exceed 100%.

Figure 20: Main information needs expressed by respondents



## WASH

The following section discusses households experiences in regards to needs of and access to WASH services such as drinking water, water treatment, waste disposal, sanitation and hygiene. Findings indicate that access to WASH services was not perceived to be a major challenge for respondents.

Almost all respondents (96%) reported that they do not experience any issue related to sanitation facilities (latrines or toilets). However, in a very small proportion (5%, or six respondents) of respondents residing in RACs reported that sanitation facilities are not hygienic (5%), 3% (or four respondents) reported that there are no sanitation facilities in their site, and 1% (or three respondents) reported that the sanitation facilities are difficult to reach. The most often reported issue by the respondents interviewed in the community was lack of sanitation facilities (1% or 6 respondents).

**Table 18: Issues with the sanitation facilities expressed by respondents**

Reported issues with the sanitation facilities	Community	RAC	Overall
Lack of sanitation facilities	1%	3%	1%
Sanitation facilities are unhygienic	1%	5%	1%
Persons with special needs cannot access the toilet	1%	0%	1%
Sanitation facilities are too far	1%	1%	1%
Sanitation facilities are not private	0%	2%	0%
Some groups do not have access to sanitation facilities	0%	0%	0%
Sanitation facilities are far	0%	2%	0%
Sanitation facilities are not functional	0%	2%	0%
Sanitation facilities are not segregated	0%	1%	0%
No problem	97%	91%	96%

Ninety-six (96%) of respondents did not report any issue with access to sufficient quantity of safe water for drinking and domestic needs. However, differences in terms of reports from community respondents and respondents from interviews in RACs do appear, as a relatively lower proportion of respondents in RACs (87%) reported no issues with access to a sufficient quantity of safe water for drinking and domestic needs, compared to respondents in community (95%).

Ninety-five percent (95%) of respondents did not report any issue with access of sufficient quantity of safe water for domestic needs. Differences in terms of reports from community respondents and respondents from interviews in RACs do appear, as a relatively lower proportion of respondents in RACs (87%) reported no issues with access to a sufficient quantity of safe water for drinking and domestic needs, compared to respondents in community (95%). Frequent water interruptions were reported only by a small proportion of respondents. However, respondents interviewed in RACs (5%) were more likely to report water interruptions compared to their counterparts (2%).

Nationwide, respondents reported that solid waste was primarily collected by the municipality (93%), left in the street (4%) or buried (1%). Two percent (2%) of families could not mention how their waste is disposed.

## CONCLUSION

The MSNA in Moldova aimed to advise on the key humanitarian needs of Ukrainian refugee families living in the host community and RACs in Moldova. As the situation in Ukraine is still under development, this assessment provides a snapshot on the needs and challenges faced by these families

Findings from the MSNA revealed that the majority of Ukrainian refugee family members were female, whereas children comprised almost 40% of the overall population of these families, with the later group being more likely to live in RACs than in the host community.

Findings revealed that, at the moment of the interview, the majority of refugees relied on their savings and humanitarian assistance. However, with the existing resources depleting, these families may face increased vulnerabilities. Access to livelihood solutions becomes, therefore, important for these families and it was noted by the majority of respondents barriers to work are minimal, as their set of skills make them a good resource to fill the gap in the labor ecosystem in Moldova.

Refugees living in Moldova did not note any major protection risks at the moment of the interview, as the majority of them reported almost no risks for women, boys or girls in their family. However, cases of discrimination were mentioned by a minority of respondents. In the case of protracted crisis, these cases may increase in number, as the tension in the community may increase.

MSNA findings did not indicate persistent health needs as only about two in ten Ukrainian family members were found to have a health need since arriving to Moldova. Yet, only 15% of the overall population was confirmed accessing health services, mainly due to reliance of self-medication, lack of awareness about the available healthcare facilities or high costs.

While accessing education was not found to be challenging for respondents who had children under their care, this could be due to the low enrollment rates of Ukrainian children in the Moldovan educational system. While other reasons may become more pregnant over the time, it appeared that the low enrollment numbers were due to a high attendance of online educational system in Ukraine. However, in the case of a prolonged crisis, this attitude may change and education will become a priority for these families.

With the majority of refugees in Moldova living inside the community, findings related to accomodation revealed that the largest majority of respondents reported living in a rented accomodation, followed by private accomodation and hosted in another family. This could pose additional challenges for Ukrainian, with the increase in costs of rent and energy costs could increase their vulnerability status over the medium and longer term. As the movement intentions suggest, the majority of family members do not intend to move out of Moldova soon, as the main concern for them remained the security situation in Ukraine.

Based on the findings of this round of MSNA, the main priority needs sectors of the respondents were cash, food and healthcare. These priority needs were reflected in the high proportion of respondents living both in RACs and host community. However, this could reflect an idequancy of the amount of aid provided since virtually all respondents reported receiving aid since arriving to Moldova and a satisfaction with the aid received. Needs still remain high in terms of adult and children clothing and NFI. While the assessment was done in spring, these needs may increase with the start of the winter. In terms of WASH needs, respondents reported being overall satisfied with the access to these services.

Considering the dynamic nature of the displacement situation, continuous situation monitoring might help ensuring visibility on the evolving needs of affected communities, including potential new arrivals, and the prevention of potential future tensions between hosting communities and Ukrainian families. With the end of conflict not anywhere in sight, the arrival of winter may increase pre-existing vulnerabilities and require action from humanitarian actors.