Protection from Sexual Exploitation and Abuse (PSEA)

INTER-AGENCY RISK ASSESSMENT

REPUBLIC OF MOLDOVA

UNITED NATIONS
MOLDOVA

Regional Refugee Response
for the Ukraine Situation

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CONTENTS

FOREWORD

It is with a profound sense of purpose and shared responsibility that we jointly introduce the Moldova Sexual Exploitation and Abuse (SEA) Risk Assessment. This initiative has been led by the PSEA Network and Task Force, with unwavering support, technically, logistically and financially, from the United Nations High Commissioner for Refugees (UNHCR) and the World Health Organization (WHO). The collaboration involved a collective effort from UN agencies, national and international non-governmental organizations (NGOs), and the contributions of participants, aid recipients, and aid workers who have shared their insights and experiences to inform the assessment.

The methodology used by this risk assessment constitutes a global best practice as it employed the UN Inter-Agency Standing Committee (IASC) and OECD-DAC Recommendations as well as the SEARO analytical framework, to provide a comparison of international standards with the existing PSEA architecture at the country level. Innovative methods such as the Safety Assessment of Refugee Accommodation Centres (RACs) through a Safety Index ensured that settings with specific risks were included, risks identified and findings triangulated.

As we read the findings of the Moldova SEA Risk Assessment, let us view this report not merely as an inventory of challenges but as a catalyst for collective action and impact. Preliminary findings of the assessment were already used to prioritize RACs for closure, and we must continue to use the findings to inform decision-making. The evidence presented here will serve as the foundation for the 2024 PSEA Action Plan, leading us towards a more resilient, accountable, and protective humanitarian and development landscape in Moldova. The assessment will support analysis, decision-making and resource allocation for SEA – recognizing that in an overall context of limited funds, donors, UN agencies and partners members need to prioritize and focus resources and support.

Together, we are committed to eradicating sexual exploitation and abuse, fostering an environment of dignity, safety, and respect for all.

Simon Springett, UN Resident Coordinator, Francesca Bonelli, UNHCR Representative and Refugee Coordinator, and Miljana Grbic, WHO Representative

ACRONYMS

AAP TF	Accountability to Affected People Task Force
CAPI	Computer-Assisted Personal Interview
CoE	Council of Europe
CPI	Corruption Perception Index
CSO	Civil Society Organizations
EEAS	European External Action Service
FGDs	Focus Group Discussions
GBV	Gender-Based Violence
GBV SWG	Gender-Based Violence Sub-Working Group
HIV	Human Immunodeficiency Virus
IASC	Inter-Agency Standing Committee
IOM	International Organization for Migration
INGOs	International Non-Governmental Organizations
LGBTIQ+	Lesbian, Gay, Bisexual, Trans, Intersex, Queer +
MPI	Multi-Poverty Index
NNGOs	National Non-Governmental Organizations
PSEA	Protection from Sexual Exploitation and Abuse
RACs	Refugee Accommodation Centers
RCO	Resident Coordinator Office
SEA	Sexual Exploitation and Abuse
SEARO	Sexual Exploitation and Abuse Risk Overview
SOGIESC	Sexual Orientation, Gender Identity, Expression, and Sex Characteristics
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNHCR	United Nations High Commissioner for Refugees
WHO	World Health Organization

EXECUTIVE SUMMARY

The Republic of Moldova (further, Moldova) PSEA Risk Assessment has been a collaborative and complex undertaking by the humanitarian and development community aimed at establishing a national baseline for measuring and describing the level and nature of SEA risks in the country and the requirements for effective and sustainable mitigation and response interventions.

The Moldova SEA Risk Assessment employed the IASC SEARO Framework, classifying the findings based on the four categories of Enabling Environment, Humanitarian and Aid Context, Operational Context, and Protective Environment.

In addition to the SEARO analysis involving secondary data review and in-depth analysis of a wide range of factors influencing SEA risks, the Moldova Risk Assessment extensively incorporated the voices of all stakeholders in the country: refugees and host communities, aid community workers, and leadership, civil society groups, and associations.

Based on the SEARO methodology, the Composite Index of Risk for Moldova is 3.9 out of 10, indicating a low risk of SEA. However, the data and information gathered through secondary data review and primary data collection highlight areas of risk particularly linked to:

- Women's and girls' restricted access to decision-making roles, which can lead to policies and practices that inadequately address or prioritize their needs and rights, including protection from sexual exploitation and abuse. This is especially true for women and girls at higher risk of marginalization, such as Roma, those with disabilities, LGBTIQ+, and older women.
- The national legislation exhibits gaps in procedural safeguards and protective measures for victims of gender-based violence (GBV) who fall outside the scope of the legal framework related to domestic violence. Additionally, issues pertaining to mandatory reporting of GBV and the criminalization of sex work may hinder survivors' access to essential services, and further discouraging them from reporting incidents.
- Limited capacities, particularly of CSOs and small national NGOs, to investigate SEA allegations, as well as inadequate reference checks and vetting procedures.
- Limited awareness among refugees and the host population about reporting steps, support services available to survivors, and how to access these services, contributing to the underreporting of SEA and impeding effective risk mitigation, prevention, and response measures.
- RAC safety, which the assessment shows to vary considerably from one region to another, with increased SEA risk associated with cash and in-kind assistance.

In terms of future perspectives, the Moldova PSEA Risk Assessment provides recommendations and mitigation measures related to each identified risk with clear attribution of responsibilities.

The Risk Assessment also highlights that the PSEA Network and Task Force in Moldova have consistently received support from the UNCT and the RCF, with sufficient resources to complete the activities outlined in the PSEA Inter-Agency Action Plan for 2023. However, the sustainability of established prevention and response systems for PSEA in the context of a reduced humanitarian response requires an evolving architecture with a PSEA Coordination structure with strong civil society participation, a UNCT common basket funding mechanism for PSEA activities, and a national PSEA Coordinator position to support the UNCT to coordinate PSEA activities in development programmes, and coordinate with UNHCR - responsible for leadership and oversight of system-wide PSEA strategies in the refugee response.

PART 1: INTRODUCTION

1.1. PURPOSE OF THE RISK ASSESSMENT

The Moldova Sexual Exploitation and Abuse (SEA) Risk Assessment is part of the 2023 Protection against Sexual Exploitation and Abuse (PSEA) Action Plan for Moldova. It has been led by the PSEA Network and Task Force, with logistic and financial support from World Health Organization (WHO) and the United Nations High Commissioner for Refugees (UNHCR), and realized with the collaboration of UN agencies, national and international non-governmental organizations (NGOs). The purpose of the risk assessment is to provide a national baseline on SEA in Moldova, and to determine the requirements for a relevant, coherent, effective, efficient, and sustainable intervention to prevent SEA in humanitarian and development interventions in the country.

The findings of the risk assessment, which are presented in this report, will be used as the evidence base to inform the development of the 2024 PSEA Action Plan. This will support the planning and implementation of the inter-agency response to mitigating the risk, preventing, and responding to sexual exploitation and abuse in the country.

1.2. METHODOLOGY

The Moldova SEA risk assessment is based on the UN Inter-Agency Standing Committee (IASC)[1], and OECD-DAC Recommendations, standards, and procedures for PSEA. It compares these to the capacities and gaps of the existing country wide PSEA architecture, as well as to the local context and protection environment.

The analytical framework used follows the Sexual Exploitation and Abuse Risk Overview (SEARO) methodology[2] for the collection and analysis of data. The SEARO is a composite index that brings together indicators on a range of different factors that can influence the risk of SEA. The SEARO methodology is based on four dimensions:

- o **Enabling Environment**: This dimension assesses the social, political, and legal context that can create an enabling environment for SEA perpetrators and increase the vulnerability of women and children. It includes laws and policies, societal norms and practices, and the prevalence of underlying factors such as human rights violations and gender inequalities.

- o **Humanitarian and Aid Context**: This dimension assesses the risk of SEA in humanitarian crises, considering the scale and intensity of the crisis, the people affected, and the severity of needs. It also assumes that humanitarian crises increase the risk of SEA due to the insecurity and vulnerability of affected populations.

- o **Operational Context**: This dimension assesses the risk of SEA in humanitarian response operations, considering the design and management of the operation, the types of assistance provided, and the awareness and commitment of aid workers to prevent and respond to SEA. It assumes that aid agencies that are aware of and committed to preventing SEA are less likely to engage in or tolerate SEA. The dimension also considers the type of assistance provided, as some types of assistance, such as the distribution of goods, have been shown to increase the risk of SEA.

- o **Protective Environment**: This dimension assesses the capacities and measures in place to prevent and respond to SEA. It assumes that higher capacities and stronger protective measures reduce the risk of SEA. The dimension includes factors such as the existence of a PSEA policy and procedures, the capacity of staff to implement the PSEA policy and procedures, the availability of reporting mechanisms and support services, and the accountability of staff and organizations for SEA prevention and response.

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1   https://psea.interagencystandingcommittee.org/resources/joint-sea-risk-assessment-technical-note
2   https://psea.interagencystandingcommittee.org/iasc-sea-risk-overview-index

RISK OF SEXUAL EXPLOITATION & ABUSE

Dimension	Enabling Environment				Humanitarian Context				Operational Context				Protective Environment			
Category	Policy & Societal Norms		Human Rights & Gender Equality		Crisis Scope & Intensity		Response Scale & Complexity		Response Modalities		Response Institutions		Capacity & Resources		Mechanisms & Accountability	
Component	Laws, Policies & Practices	Institutions & Services	Violence Against Women & Children	Gender Inequalities	Crisis Scope & Intensity	Crisis Severity	Operational Size	Operational Complexity	Operational design & Management	Operational Reach	Leadership & Staffing	Institutional Culture & Practices	Funding & Resources	Coordinating & Programming	Reporting & Accountability	Survivor Assistance

In addition to the analytical analysis of institutional capacities against inter-agency procedures and policies, the risk assessment also adopts a strong people-centered approach, giving space to the voices of refugees and the host community, their organized groups and associations. This aims to understand the multiplicity of enabling factors and barriers that can influence access to information, reporting channels, services, and aid community capacity to disseminate messages or to have the trust of the communities served.

The risk assessment adopted an innovative methodology consisting of six methodological elements. This methodology allowed the assessment team to identify and address gaps in information, collect data from a variety of sources, and triangulate data and findings.

The methodological steps that comprise this Joint SEA Risk Assessment are:

1. **Secondary Data Review**: The literature review was based on credible and publicly available sources, such as UN agencies, governments and multilateral organizations reports and assessments. Sources are included throughout the document.

2. **Face-to-face interviews:** Between 6 and 12 June 2023, 113 face-to-face interviews were conducted with adults receiving aid in Moldova. The Computer-Assisted Personal Interview (CAPI) method was used to explore participants' experiences and perspectives on barriers to accessing aid, risks related to SEA, understanding and awareness of services and complaint and feedback mechanisms, and barriers to reporting. Interviews were conducted in a variety of locations (e.g., refugee accommodation centers, cash assistance distribution sites, community centers) across all regions of Moldova (North, Center, Chisinau, South). Respondents were selected randomly, with every other third person invited to participate in the study.

3. **Focus Group Discussions (FGDs)**: a total of 14 FGDs were conducted. Of these, 8 FGDs were conducted between 22 May and 25 August 2023 of which 2 with adult refugees living in RACs, 3 with those living in host communities, 1 each with women-led organizations, people with disabilities and Roma refugees. These FGDs focused on barriers to accessing humanitarian assistance, SEA risk, and understanding of reporting and complaints mechanisms. 6 FGDs were conducted with respondents under 18, including 27 respondents aged 14-17 and 21 respondents aged 10-13, both Ukrainian refugees and Moldovan. These FGDs focused on interaction with humanitarian workers, reporting channels for abuse, and access to information.

4. **Leadership survey:** A leadership survey was conducted with 32 respondents, representing the most senior staff members of 32 organizations (11 UN agencies, 11 INGOs, 9 NNGOs, and 1 faith-based organization) in Moldova. The survey, which was available in English, Romanian, and Russian, included 38 questions about PSEA minimum operational standards (MOS) including organizational structures, training, and systems to prevent and respond to SEA.

5. **Perception Survey with aid workers:** In May 2023, a Perception Survey was conducted with 353 aid workers (humanitarian and development) in the country. The survey was self-administered through an online form, and responses were anonymous. The survey assessed aid workers' awareness of key PSEA principles, understanding of their own organization's PSEA practices, and attitudes related to PSEA.

6. **Safety Assessment of Refugee Accommodation Centers (RACs):** Thirty-nine RACs were assessed using 69 indicators covering nine thematic areas, including information availability, safe disclosure and reporting procedures, and staffing protocols (see Annex 1). Each indicator was assigned a weight between 1 and 3 based on its importance to the overall safety of the facility. A Safety Index was calculated by summing the scores for each indicator and the weighted scores for each area, and then converting the sum to a percentage relative to the highest possible score.

WHO and UNHCR commissioned this report on behalf of all aid community working in Moldova. The assessment team consisted of Diego Nardi (UNHCR Inter-Agency PSEA Coordinator), Maria Scicchitano (WHO PSEAH Technical Specialist), Giulia di Porcia (WHO PSEAH Technical Specialist), and Catalina Birsanu (UNHCR Inter-Agency Coordination Associate). Vanessa Bordin (UNHCR GBV Officer and GBV SWG Coordinator), Ersilia Apreda (IOM GBV Officer) and Doina Marzuolo (IOM PSEA Officer) provided valuable input to the report's content. Primary research was conducted by PSEA Network partners, with significant contributions from UNHCR, WHO, Plan International (Ilenia de Marino, CPiE Specialist), Church World Service (Casey O'Neill, Protection Programme Manager), and Oxfam (Serena Zanella, Safeguarding Consultant). The Refugee Coordination Forum Child Protection Sub-Working Group also provided valuable inputs during the review of assessment tools. The research company S.C. Magenta Consulting S.R.L. was hired to partially support primary data collection and analysis.

1.3 ETHICAL CONSIDERATIONS

Given the highly sensitive nature of the subject matter and the potential operational risks involved, the Moldova Risk Assessment was conducted with robust safeguarding considerations. The assessment emphasized rigorous ethical standards and implemented various risk mitigation strategies. Key components of these measures included:

- **In-depth Training for Enumerators**: Before undertaking their responsibilities, all enumerators underwent comprehensive training sessions. These covered:
  o Principles of PSEA.
  o The "Do No Harm" principle to ensure the safety and well-being of participants.
  o Essential ethical guidelines and the importance of maintaining confidentiality.
  o A victim/survivor-centered approach to prioritize the wishes and rights of those who have experienced trauma.
  o Proper procedures on how to respond if a participant discloses any sensitive or concerning information during the course of an interview.
- **Code of Conduct and Confidentiality Agreement:** To further safeguard participants' privacy and safety, and promote high ethical standards, all enumerators were required to sign a code of conduct and a confidentiality agreement. The code of conduct outlined the enumerators' responsibilities and expected behavior, while the confidentiality agreement required them to keep all participant data confidential, even after the assessment was completed.
- **Anonymized Data Collection**: All primary data obtained during the assessment was collected in an anonymized manner to protect the identities of participants. This meant that no personal identifying information, nor any information that could lead to the identification of respondents, was collected. Additionally, focus group discussions were not recorded as an extra layer of confidentiality.

- **Informed Consent**: Before participating, each individual was given a thorough explanation about:
    - o The objective of the interview or discussion.
    - o The mandatory reporting guidelines that would apply.
    - o Their right to pause, interrupt, or end the interview at any moment.

    As an extra layer of confidentiality, oral consent was sought instead of written consent, ensuring that no paper trail linked to their identities was created.

- **Child Protection**: Focus Group Discussions involving participants below the age of 18 were facilitated exclusively by organizations with specialization in child-centric methods and child protection mechanisms, with the experience necessary to conduct sensitive research with children and to address instances of violence and abuse against children, should they be disclosed.

- **Provision of Information**: Each participant was handed a compact information card detailing the procedures on how to report any concerns and where to seek support and assistance. These cards were translated into multiple languages to ensure that all participants had access to the information they needed.

- **Data Security**: To guarantee the utmost security of collected data, only platforms hosted at UNHCR servers were used for data collection. There were no physical or hardcopy versions of the data, further reducing the risk of unauthorized access.

1.4 LIMITATIONS OF THE ASSESSMENT

The assessment had some limitations. In particular:

- **Organizational coverage:** Although the perception survey received widespread participation from aid workers representing diverse organizational backgrounds, there were gaps in participation from certain organizations such as the Red Cross and Red Crescent movement, government, and among volunteers. This means that the assessment does not identify risks connected with these organizations and is not representative of the views of all stakeholders involved in the humanitarian response. Additionally, the organizational leadership survey was only conducted with organizations that are either members of the UN Country Team or partners of the Refugee Response Plan. This means that the responses may not reflect the views of civil society organizations and of major faith-based organizations and churches that are involved with the humanitarian response but do not participate in coordination structures.

- **Data collection methods:** Notes were taken during the focus group discussions, rather than transcribing the exact statements of every participant or recording the interview to ensure confidentiality and ensure participants felt at ease in sharing any concern (see the section Ethical Considerations). This means that some information may have been lost or misinterpreted.

- **Timing of the assessment:** The inter-agency risk assessment was conducted at the peak of the response, when human resources and humanitarian capacity were at their highest. As the response scales down and humanitarian capacity is reduced, assistance is also reduced, and systems for prevention and response to PSEA are likely to be weakened, increasing the risk of sexual exploitation and abuse.

PART 2:
OVERVIEW OF SEA RISKS, RISK MITIGATION AND PREVENTION MEASURES

1. Enabling Environment		
Policy & Societal Norms		
Law, Policies & Practices		
Risk	**Risk Mitigation and Prevention Measure**	**Relevant Sectors**
Underreporting of gender-based violence due to reconciliation in criminal proceedings for some cases of violence against women	Advocate for changes in legal definitions and process to ensure that all forms of violence against women are excluded from the scope of reconciliation procedures.	GBV SWG Results Group 1, UNCT
Inadequate legal protection for Victims of certain forms of gender-based violence due to limitations in the current legislation (acts of sexual violence occurring in public spaces or outside personal relationships), and burden of proof on victims, also leading to underreporting.	Advocate for legal reforms to ensure adequate legal protection for all victims of gender-based violence, and promote a more victim-centered approach in legal proceedings. Training for Legal and Law Enforcement Personnel to sensitize them to the issues surrounding gender-based violence, including SEA, and victim-centered approach.	GBV SWG Results Group 1, UNCT
Mandatory reporting of sexual crimes to police authorities under Law No. 45/2007 and other legal provisions may deter GBV disclosure and create barriers for accessing justice and services.	Advocate for improvement of mandatory reporting laws to balance the need for legal intervention with the protection of victims' rights and willingness to seek help. Enhance the capacity of all relevant professionals regarding mandatory reporting requirements and a victim-centered approach to guarantee a restrictive interpretation and application of mandatory reporting obligations. Raise awareness among service providers, including law enforcement and health officers, of the potential deterrent effect of mandatory reporting to law enforcement authorities.	PSEA Network and PSEA Task Force GBV SWG Results Group 1, UNCT
Confidentiality and Reporting Barriers in Decentralized Systems: Decentralized systems for handling GBV incidents could lead to breaches in confidentiality, potentially endangering victims and also creating barriers for reporting and access to services.	Advocate for improvement on information management systems for GBV, and develop confidentiality protocols to protect victim and perpetrator information, promoting safety and legal integrity.	GBV SWG Results Group 1
Impact of Legal Treatment on Reporting GBV, including SEA, in Sex Work: The legal treatment of sex work under the Contravention Code disincentivizes these individuals from reporting GBV, increasing their risk of violence and limiting access to support.	Advocate for legal reforms that provide protection to sex workers, enabling them to report GBV without fear of legal repercussions or stigmatization.	GBV SWG Results Group 1 Joint Team on HIV/AIDS, UNCT
Continued Reliance on Residential Institutions and Vulnerability for Women with Disabilities: Despite programs promoting deinstitutionalization, the lack of a moratorium on new entries into residential institutions suggests a continued reliance on these settings, which can be isolating and may increase vulnerability to abuse, especially for women with disabilities.	Advocate for the approval of a moratorium on new entries into residential institutions and develop alternative community-based care services that offer greater autonomy and protection for individuals with disabilities.	GBV SWG Disability Task Force, UNCT

Human Rights & Inequality

Violence against Women & Children and Gender Inequality

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Limited Participation in Decision-Making: Women's and girls' restricted access to decision-making roles can lead to policies and practices that do not adequately address or prioritize their needs and rights, including protection from sexual exploitation and abuse (SEA). This is especially true for women and girls at higher risk of marginalization, such as Roma, those with disabilities, LGBTIQ+, and older women.	Promote the inclusion of women in leadership and decision-making roles at all levels, ensuring that their perspectives and needs are represented in policy-making. This shall include enhancing participation of women-led organizations in the PSEA network activities, while actively engaging women and girls in PSEA activities.	PSEA Network and PSEA Task Force Gender Task Force (and UNCT GTG) Disability Task Force (and UNCT DITF) Roma Task Force Child Protection SWG GBV SWG Results Group 1
Increased socio-economic vulnerability: higher poverty rates, especially among female-headed households, as well as gap in income-earning opportunities for women in rural areas compared to urban areas, and discrimination against certain profiles (Roma, divorce or separated women) increases their susceptibility to SEA.	Develop programs that enhance women's human capital, focusing on education, vocational training, and skill development to improve their economic independence and resilience. Implement targeted poverty alleviation strategies that focus on women, especially in female-headed households, to reduce their economic vulnerabilities. Create specific initiatives to improve income-earning opportunities for women in rural areas, such as access to credit, training, and markets. Develop and provide dedicated support services for divorced and separated women, as well as Roma women, including legal aid, financial support, and counseling.	Livelihoods and Socioeconomic WG GBV SWG Gender Task Force (and UNCT GTG) Disability Task Force (and UNCT DITF) Roma Task Force Joint Team on HIV/AIDS
Increased GBV Risks in Conflict and Refugee Settings: Women and girls, particularly Ukrainian refugees, face heightened risks of GBV during all stages of displacement.	Ensure that refugee women and girls have equal access to existing services and resources, tailored to their unique needs and challenges stemming from forced displacement. Empower refugee women through skills training, employment opportunities, and financial assistance, enhancing their self-reliance and reducing their vulnerability to exploitation and abuse.	GBV SWG Child Protection SWG
Cultural Norms Perpetuating Violence: Harmful cultural gender norms within both refugee and host communities contribute to the perpetuation and acceptance of GBV, including SEA.	Implement comprehensive education and awareness campaigns to challenge and change harmful gender norms and the normalization of violence. Engage with communities to raise awareness about GBV, including SEA, and the importance of reporting and intervening in such cases.	PSEA Network and PSEA Taskforce GBV SWG AAP Task Force Results Group 1
Increased Vulnerability of Marginalized Groups: Women in rural areas, older women, Roma women, LGBTIQ+ individuals, and persons with disabilities face heightened risks of GBV due to stereotypes, discrimination, and limited access to financial/material resources and support services.	Ensure that vulnerable marginalized groups have equal access to existing services and resources, tailored to their specific needs. Implement initiatives to improve employment and educational opportunities for women, especially in rural areas and among marginalized groups. Provide training for public institutions and aid organizations to foster inclusivity and understanding of the rights of LGBTIQ+ people, older adults, persons with disabilities, Romani people, people living with HIV, and sex workers.	Livelihoods and Socioeconomic WG GBV SWG Gender Task Force (and UNCT GTG) Disability Task Force (and UNCT DITF) Roma Task Force Joint Team on HIV/AIDS

2. Humanitarian Context

Crisis Scope & Intensity

Scope & Intensity

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Vulnerability of Children: With a high percentage of the refugee population being children, there is a risk of exploitation and abuse, particularly for unaccompanied minors or those separated from their families.	Strengthen PSEA measures in child protection activities, including child-friendly spaces, and support the capacity building of aid workers working in RACs on Child Protection and PSEA integration with a focus on child protection Strengthen the capacity of aid workers and community members to identify, report, and address child protection concerns, including SEA.	PSEA Network and Taskforce Child Protection SWG Basic Needs WG
Challenges Faced by Persons with Disabilities: Refugees with disabilities might experience difficulties accessing services and depend on care-takers, making them more susceptible to exploitation and abuse.	Expand disability inclusion and accessibility in Refugee Accommodation Centers. Develop, adapt and widely disseminate accessible and inclusive awareness raising methodologies and information materials to ensure that persons with disabilities are aware of their rights and protection mechanisms.	Disability and Age Task Force Basic Needs Task Force AAP Task Force
Older Refugees at Risk: Older refugees may face challenges in accessing healthcare, social services, and protection, increasing their vulnerability, and the risk of being victims of SEA.	Scale up and establish accessible and inclusive awareness raising methodologies to ensure that older refugees are aware of their rights and protection mechanisms. Empower older refugees through participation in community activities and decision-making processes. Collaborate with relevant stakeholders to foster age and disability inclusion across humanitarian and development initiatives, as well as within government services.	Disability & Age Task Force (and UNCT DITF) AAP Task Force

Crisis Severity

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Reliance on Unsustainable Income Sources: The dependency of a high percentage of refugees on unsustainable income sources like aid, savings, or loans indicates a precarious economic situation that can lead to increased risks of SEA.	Create opportunities for sustainable income generation, such as job placement programs and vocational training, especially for those reliant on aid and savings.	Livelihoods and Socioeconomic WG

Needs Scale & Complexity

Humanitarian Access

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
SEA Risk in Transnistrian Region: Limited participation of local organizations in the PSEA Network, and economic hardship in Transnistrian Region, coupled with the need for refugees to travel for aid, significantly increase their vulnerability to SEA.	Improve direct access to humanitarian assistance within the Transnistrian Region reducing the need for refugees to travel long distances. Expand participation of organizations in the Transnistrian Region in the PSEA Network.	PSEA Network and Task Force Local Refugee Coordination Forum - Transnistrian Region, UNCT

3. Operational Context

Response Institutions

Leadership & Staffing

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Limited Capacity for SEA Investigations: national and local organizations often lack the resources to conduct thorough investigations of SEA cases.	Provide support and resources to smaller organizations to develop their capacity to investigate SEA cases. This could include training, shared resources (pool of local investigators), or collaborative investigation mechanisms.	PSEA Network and Taskforce
Inadequate Reference Checks and Vetting Procedures: A significant number of organizations, especially Moldovan NGOs, do not sufficiently implement reference checks and vetting, increasing the risk of hiring individuals with a history of SEA or harassment.	Encourage and assist all organizations in implementing comprehensive reference checks and vetting procedures, ensuring they align with the "clear-check" or Misconduct Disclosure Scheme. Promote universal roll out of Misconduct Disclosure Scheme	PSEA Network and Taskforce UNCT Operations Management Team (OMT)
Limited Accessibility of Reporting Channels: Many organizations have not adequately established safe, confidential, and context-specific reporting channels, particularly smaller organizations.	Work to make reporting channels more accessible, especially in smaller organizations, ensuring they are safe, confidential, and culturally appropriate.	PSEA Network and Taskforce AAP Task Force
Variability in PSEA Policy Implementation: There is a disparity in the adoption of PSEA policies, with local CSOs less likely to have such policies compared to larger organizations.	Increase efforts to ensure all organizations, particularly local CSOs, adopt and implement effective PSEA policies. This can involve training, sharing best practices, and providing templates or guidance. Continue to support UN Agencies to implement the UN Implementing Partner PSEA Capacity Assessment in a coordinated manner, and usage of the UNPP PSEA Module.	PSEA Network and Taskforce Gender Task Force (and UNCT GTG)
Inconsistencies in Code of Conduct Translation and Availability: Codes of Conduct are not always translated or made available to individuals receiving aid, limiting their awareness of rights and reporting channels.	Ensure that Codes of Conduct are translated into relevant languages and are readily available to all individuals receiving aid, enhancing their awareness of their rights and available reporting mechanisms.	PSEA Network and Taskforce

Organizational Culture & Practices

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Responsibility for Reporting in Other Organizations: 6% of respondents of the Perception Survey with Aid Workers believed it was not their responsibility to report SEA in other organizations, indicating a gap in understanding of universal reporting obligations.	Emphasize through training and communication that all staff, regardless of their organization, have a responsibility to report SEA incidents.	PSEA Network and Taskforce
Conditional Assistance for Victims: 5% of respondents believed that victims of SEA are only eligible for assistance if they cooperate with investigations.	Reinforce the principle that assistance to SEA victims should never be conditional on their participation in investigations.	PSEA Network and Taskforce
Uncertainty in Reporting Steps: 5% of respondents were not aware of the steps they need to take if they hear a rumor of SEA or become aware of a risk. Additionally, 8% stated their organization does not provide clear information on how to report SEA.	Improve internal communication to ensure all staff are aware of the steps to report SEA and understand the available reporting mechanisms.	PSEA Network and Taskforce
Lack of Awareness in Referring Victims: 14% of respondents were not aware of where to direct or refer victims of SEA.	Provide detailed training and resources on how to safely and confidentially refer victims to appropriate services using established GBV referral pathways.	PSEA Network and Taskforce GBV SWG
Fear of Retaliation in Reporting: 5% of respondents felt they could not report an instance of SEA without fear of retaliation.	Implement and promote whistleblower protection mechanisms to create a safe environment for reporting SEA without fear of retaliation.	PSEA Network and Taskforce UNCT RCF

Response Modalities

Operational Design & Management

Risk	Risk Mitigation and Prevention Measures	Relevant Sectors
Increased SEA Risk with Cash and In- Kind Assistance: The distribution of multi-purpose cash (MPCA) and in kind assistance (food and non-food items) which constitutes a significant portion of the RRP budget, is associated with a higher incidence of SEA.	Continue to implement PSEA protocols in the distribution of MPCA and commodities, including monitoring and reporting mechanisms.	Basic Needs WG Cash WG
Accessibility Issues at Cash Enrollment Centers: Cash enrollment centers have challenges with physical accessibility and providing information in formats accessible to persons with disabilities.	Improve physical accessibility and information formats in cash enrollment centers.	Disability & Age Task Force (and UNCT DITF) Cash WG

Refugee Accommodation Centers

Risk	Risk Mitigation and Prevention Measures	Relevant Sectors
Elevated SEA Risk in Refugee Accommodation Centers: The distribution of in-kind food and non-food items (NFIs) in RACs, which host vulnerable refugee populations, presents an elevated risk of SEA.	Intensify SEA monitoring and reporting mechanisms in RACs, particularly during the distribution of NFIs and food.	Basic Needs WG
Regional Disparities in Safety Levels of RACs: Variations in compliance with PSEA safety measures across regions, with the Central region scoring the lowest.	Focus on improving PSEA safety measures in RACs with lower safety scores, particularly in the Central region.	Basic Needs WG
Weaknesses in Staffing and Child Protection: Certain RACs, especially in the Central region, have weaknesses in staffing, including reference checks, onboarding, training, and child protection measures.	Expand capacity building activities on PSEA for RAC managers and RAC staff. Support RAC managers to integrate PSEA to RAC management to ensure compliance with operational standards	Basic Needs WG Child Protection SWG
Low Levels of Disability Inclusion: Inadequate inclusion of persons with disabilities in RACs, leading to potential marginalization and increased vulnerability.	Develop and integrate disability inclusion strategies in all RACs to provide accessible services and protection.	Disability & Age Task Force (and UNCT DITF) Basic Need WG

Operational Reach

Gaps in Funding and Activities

Risk	Risk Mitigation and Prevention Measures	Relevant Sectors
Decrease in Funding for 2024: The expected decline in funding and assistance in 2024 could lead to reduced support for refugees and host communities, potentially increasing their vulnerability to SEA.	Prioritize and allocate available resources efficiently to ensure that the most vulnerable groups continue to receive essential support despite funding cuts. Intensify SEA monitoring and reporting mechanisms, particularly in areas or among groups where assistance is reduced, to quickly identify and address potential SEA incidents. Continue to strengthen the capacity of local NGOs and community-based organizations to respond to SEA risks and provide assistance, especially as international presence diminishes.	PSEA Network and Taskforce Basic Needs WG Cash WG Protection WG
Challenges in Targeting Vulnerable Groups: As funding decreases, the challenge of properly identifying and assisting those facing acute socio-economic vulnerabilities and at higher risk of marginalization increases, also contributing to increased SEA risks.	Strengthen identification of individuals at acute socio-economic risk or those more likely to be marginalized, ensuring they are prioritized for assistance.	Basic Needs WG Cash WG Protection WG

4. Protective Environment

Capacity & Resources

Coordination & Leadership

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Dual Role of PSEA Coordinator: The PSEA Coordinator, also serving as the Inter-Agency Coordination Officer, may face challenges due to the dual responsibilities. The effectiveness of PSEA initiatives heavily relies on the commitment of the current position incumbent and support from other agencies, posing risks if these are not consistently strong.	Consider establishing a fully dedicated PSEA Coordinator position.	UNHCR UNCT
Potential Challenges in Sustaining PSEA Momentum: As the refugee situation stabilizes or decreases, there is a risk that PSEA might not be prioritized, especially if responsibilities are not clearly defined in a scaled-down response.	Prepare for a transition to the UNCT-led PSEA Coordination structure, with dedicated funding from a UNCT common basket for both the PSEA Coordinator position and annual action plan activities. In the perspective of a stable or decreasing refugees' presence and consequent scale-down of the response, it would be recommended to plan for a UNCT-led PSEA Coordination structure. This structure would be funded by a UNCT common basket and would support both the dedicated PSEA Coordinator position, which would maintain a dual reporting line to the RC and UNHCR Representative, and PSEA annual Action Plan activities.	UNHCR UNCT
Limited Integration of Faith-based organizations (**FBOs) in PSEA Network:** FBOs, despite their significant role in aid distribution, are not actively integrated into the PSEA Network.	Actively involve FBOs and religious leaders in the PSEA Network, providing them with training and resources to integrate PSEA measures into their assistance programs.	PSEA Network and Taskforce

Mechanisms & Accountability

Survivor Assistance

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Limited Awareness of Support Services: The fact that only 43% of respondents participating in the Perception Survey with Individuals receiving Aid were aware of services to support victims of inappropriate behavior by humanitarian workers highlights a gap in awareness.	Conduct targeted awareness campaigns to inform both aid workers and beneficiaries about available support services for SEA survivors.	PSEA Network and Taskforce GBV SWG AAP Task Force
Limited Service Accessibility: The availability and accessibility of specialized services for GBV survivors, including SEA, vary across regions, especially in rural areas.	Collaborate with relevant stakeholders, including government institutions, to enhance the capacity of local actors to provide specialized services for GBV survivors. Partner with organizations to strengthen the capacity of social assistants and local CSOs in identifying, referring, and providing specialized services for GBV survivors. Deploy mobile teams to provide services in areas with limited service coverage, particularly rural areas, ensuring accessibility for individuals facing challenges in accessing services for various reasons.	Results Group 1 GBV SWG CP SWG Gender Taskforce PSEA Network and Task Force
Understaffing and Overburden in Social Services: The social welfare system is understaffed and faces a high caseload, particularly in rural areas.	Advocate for increased funding and resources for social services, and support inclusion of refugees.	Results Group 1 Protection WG GBV SWG CP SWG

Barriers in Healthcare Access for Victims: Victims often lack medical insurance and face barriers in accessing quality healthcare.	Collaborate with the healthcare sector to ensure that victims of SEA receive necessary medical support regardless of their insurance status. Train healthcare professionals in identifying and referring victims of violence to appropriate services.	Results Group 1 Protection WG GBV SWG CP SWG Health and Nutrition WG
Knowledge Gap Among Healthcare Professionals: There is a lack of knowledge about specialized services for victims of violence, hindering effective referrals.	Implement targeted training programs for healthcare workers on SEA and GBV. Develop and distribute resource guides detailing referral pathways and support services available for victims.	GBV SWG CP SWG Health and Nutrition WG

Reporting & Accountability

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Limited Accessibility of Complaint Mechanisms: Challenges in accessibility of complaint channels, especially for vulnerable groups like the Roma, persons with disabilities, and children, contributing to underreporting.	Ensure reporting mechanisms are easily accessible to all, including options for anonymous reporting, and are communicated effectively to all groups. Collaborate with community leaders, caregivers, and teachers to promote understanding and participation in reporting mechanisms. Provide regular training for staff and community actors on identifying and safely reporting SEA, with a focus on understanding the specific needs and challenges of diverse groups.	PSEA Network and Task Force AAP Task Force Disability & Age Task Force (and UNCT DITF) Roma Task Force Education WG Child Protection SWG
Hesitancy in Providing Feedback/ Complaints: Reluctance among individuals to provide feedback due to fears of being perceived as ungrateful, and skepticism about the effectiveness of reporting, which may contribute to underreporting.	Engage in community dialogue and education to challenge negative perceptions around reporting and the normalization of violence. Work to build trust in the reporting process by demonstrating transparency, confidentiality, and effective response to complaints. Collaborate with community leaders, caregivers, and teachers to promote understanding and participation in reporting mechanisms. Recognize and address cultural sensitivities in communication and feedback processes, particularly in diverse communities.	PSEA Network and Task Force GBV SWG AAP Task Force Disability & Age Task Force (and UNCT DITF) Roma Task Force Education WG Child Protection SWG
Insufficient Information on Reporting Misconduct: Although respondents of the Perception Survey with Individuals receiving aid were generally aware of humanitarian codes of conduct and the fact that aid should be free, many lacked specific information on how to report misconduct, contributing to underreporting.	Enhance awareness and accessibility of reporting channels for SEA to encourage formal reporting among aid workers and address the issue of underreporting. Provide clear and detailed information about the steps to report misconduct, ensuring it is easily accessible and understandable to all individuals receiving aid. Address the specific needs of different groups (e.g., Roma, older people, children) by diversifying communication methods and ensuring information is accessible in various formats. Expand collaboration with health service providers and community-based organizations to address underreporting by increasing reporting channels, eliminating barriers to disclosure, and raising awareness among communities about their rights and reporting procedures, ensuring the use of culturally sensitive approaches.	PSEA Network and Task Force GBV SWG AAP Task Force Disability & Age Task Force (and UNCT DITF) Roma Task Force Education WG Child Protection SWG Health and Nutrition SWG

PART 3:
SEXUAL EXPLOITATION AND ABUSE RISK OVERVIEW IN MOLDOVA

To guide the analysis of data and information informing the overall risk of PSEA in Moldova, the assessment team employed the IASC SEARO methodological framework. Based on the SEARO Methodology, the **Composite Index of Risk for Moldova is 3.9 out of 9.9[3]**, indicating a low risk of SEA. In the subsequent sections, data and information gathered through secondary data review and primary data collection are presented according to each dimension informing the SEARO framework.

RISK	3.9
ENABLING	3.7
Policy & Societal Norms	4.4
Laws, Policies & Practices	3.7
Institutions & Services	5.1
Human Rights & Inequality	3.1
Violence v Women & Children	4.1
Gender Inequality	2.1
HUMANITARIAN	1.8
Crisis Scope & Intensity	1.7
Scope & Intensity	2
Crisis Severity	1.3
Needs Scale & Complexity	2
Operation Size	3.6
Operation Complexity	0.4
OPERATIONAL	5.2
Response Institutions	5.6
Leadership & Staffing	4.7
Organizational Culture	6.5
Response Modalities	4.9
Operational Design	5.1
Operational Reach	4.7
PROTECTIVE	5
Capacity & Resources	5
Coordination & Leadership	4.4
Funding & Resources	5.5
Mechanisms & Accountability	5
Survivor Assistance	5
Reporting & Accountability	4.9

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3   SEARO scores and ranks the overall risk of SEA for countries with humanitarian response operations. It also individually scores each dimension, category and component in the analytical framework. Because the underlying data have huge variations and different formats, the score for each component is "normalized" to a common scale between 1.0 and 9.9, with a higher number denoting higher risk. This provides a consistent way to understand each component and also enables comparisons among components and countries (SEARO, 2022). For more information, please visit: https://psea.interagencystandingcommittee.org/iasc-sea-risk-overview-index

1. ENABLING ENVIRONMENT

This dimension reflects factors that exist in every country, whether there is a humanitarian response or not. They are the laws, policies, societal norms and practices that can create an enabling environment for the perpetrators of SEA, increase the vulnerability of women and children to perpetrators, and affect how the society and its institutions and services influence the risk of SEA. The dimension also includes information on the prevalence of underlying factors contributing to SEA such as human rights violations and gender inequalities (SEARO, 2022).

Indicator	Value	Year	Source
1.1. Policy & Societal Norms	4.4	2023	
1.1.1. Law, Policies & Practices	2	2023	
1.1.1.1. Laws and Policies	2.0		
There is legislation specifically addressing domestic violence	Yes	2023	UN Women
Is there legislation on sexual harassment in employment?	Yes	2023	UN Women
Criminal penalties for sexual harassment in employment?	Yes	2023	UN Women
There is legislation specifically addressing sexual violence?	Yes	2023	UN Women
1.1.1.2. Social Practices	5.4		
Percentage of women (15-49 years) who consider a husband to be justified in hitting or beating his wife	11.2%	2012	Multiple Indicator Cluster Survey 2021
1.1.2. Institutions & Services	5.1	2023	
1.1.2.1. Corruption Perception	3.4		
Corruption Perception Index	39 (out of 100)	2022	Transparency International
1.1.2.2. Rule of Law	2.9		
Rule of Law (WGI)	42 (out of 100)	2021	World Bank
Rule of Law (BTI)	5 (out of 10)	2022	Bertelsmann Stiftung
1.2. Human Rights and Inequality	4.4	2023	
1.2.1. Violence against Women & Children	4.1	2023	
1.2.1.1. Violence against women and children	4.1		
Percentage of ever-partnered women and girls aged 15 years and older who have experienced physical, sexual or psychological violence by a current or former intimate partner, in the previous 12 months	9.40%	2019	OSCE
Percentage of women (aged 20-24 years) married or in union before age 18	12.20%	2021	UNICEF
Proportion of ever-married/partnered women who reported that they had been subjected to one or more acts of physical or sexual violence, or both, by a current or former husband or male intimate partner in their lifetime	34%	2019	OSCE
1.2.2. Gender Inequality	2.1		
1.2.2.1 Gender Inequality	2.1		
Gender inequality index (GII)	0.205	2021	United Nations Development Programme

MOLDOVA ECONOMIC COUNTRY PROFILE

Moldova has seen consistent economic growth since 1998, with a Human Development Index for 2021 classified as High (UNDP, 2022), average monthly Gross earnings of 12 175 lei (685 USD) (NBS 2023), and a life expectancy at birth of 71.4 (NBS, 2022). However, the COVID-19 pandemic and the war in Ukraine have led to a decline in economic activity and impacted recent progress in terms of human development (World Bank, 2023; UNDP, 2023). Moldova is one of the countries most affected by the global cost-of-living crisis triggered by the war in Ukraine (UNDP, 2023). With an official population of 2.5 million in 2023 (NBS, 2023), the country has experienced the impacts of the war driven mainly by its natural gas import dependency and disruptions in international trade, wheat imports, and income from remittances (UNDP, 2023). With the level of inflation at 34.6% recorded in October 2022, the number of people living in poverty is estimated to reach 21% of the population, with those living on less than $5.50 a day being the most affected (UNDP, 2023).

The Multidimensional Poverty Index (MPI) value for the Republic of Moldova is 0.004, according to the latest available data from 2021 (UNDP, 2023). The absolute poverty rate in the country is 24.5% (2021), with most of the poor residing in rural areas (32.8%) versus urban areas (11.9%). Women are at higher risk of poverty in Moldova, with 26.3% of women living in absolute poverty, compared to 23.6% of men. The highest rate of absolute poverty is registered in households with three or more children (36.9%) (UNDP, 2023). Moldova is one of the countries facing the most severe impacts of the global cost-of-living crisis caused by the war in Ukraine (UNDP, 2022).

1.1.1.1 Laws and policies - Moldova legal framework on sexual violence and sexual misconduct

Moldova's legal framework and recent legislative amendments, such as the ratification of the Istanbul Convention, demonstrate a commitment to aligning with international standards. However, several risks persist in addressing sexual violence and misconduct.

Reconciliation procedures hamper reporting and access to justice. The limited scope of Moldova's domestic violence law, which confines violations to private spaces, raises concerns about overlooking gender-based violence outside the home. Mandatory reporting requirements pose barriers to accessing services for survivors, potentially deterring disclosure and hindering entry points for reporting gender-based violence. The decentralized approach to handling family violence may compromise victim confidentiality.

Moreover, the lack of support services for victims with disabilities, including substance abuse issues, highlights broader challenges in addressing gender-based violence against persons with disabilities. The legal framework around sex work disincentivizes reporting of incidents among sex workers, leaving them vulnerable. Additionally, the legislation falls short in ensuring protection for women with psychosocial and intellectual disabilities, particularly within institutional settings.

Moldova has made significant progress in advancing gender equality, women's empowerment, and preventing violence against women in the last years. The country has committed to and adopted a number of international and national legal instruments, including the Convention on the Political Rights of Women, the International Covenant on Economic, Social and Cultural Rights, the Convention on the Elimination of All Forms of Discrimination against Women, the Beijing Platform and Action Plan, and the Millennium Declaration. In 2017, Moldova signed the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) and ratified it in 2021.

Moldova has a comprehensive legal framework to address sexual violence, harassment, and discrimination. The Criminal Code includes a chapter on sexual crimes, such as rape and sexual misconduct. The Labour Code outlines employer and employee responsibilities for creating a respectful workplace and specifically

addresses sexual harassment as any form of physical, verbal or nonverbal behavior, of a sexual nature, which harms the dignity of the person or creates an unpleasant, hostile, degrading, humiliating or insulting atmosphere. Other laws ensure equal opportunities regardless of gender, such as Law No. 5/2006 and Law No. 121/2012 on equal opportunities and combating gender-based discrimination. Additionally, Law No. 45/2007 and Law No. 241/2005 address domestic violence and human trafficking, respectively. Various regulations and orders also exist for civil servants concerning ethical conduct, although a standardized code of conduct across all state departments is lacking. For example, an ordinance issued by the Ministry of Education, which establishes the Code of Ethics for the teaching staff, clearly prohibits sexual harassment and sexual relations with students, irrespective of any perceived consent.

In 2022, Law No. 316 brought important legal changes to further align Moldova's criminal legislation with international and regional standards, including:

- **Non-admission of the removal of criminal liability as a result of the victim's reconciliation with the offender**
- **Redefining the concept of rape in line with the Istanbul Convention**: The new definition of rape is broader and more inclusive, and it recognizes that rape can occur even if there is no physical violence or coercion.
- **Redefining non-consensual sexual acts and actions of a sexual nature**: The new definition clarifies that coercion or taking advantage of a person's inability to defend themselves is considered non-consensual.
- **Improving the definition of sexual harassment in the criminal code.**
- **Strengthening procedural rights of victims of sexual violence,** including the right for minors to be interviewed in special settings in accordance with international standards during investigations of cases of sexual abuse or exploitation of children.
- **Exclusion of sexual offenses against sexual freedom from the scope of reconciliation procedure**, in addition to domestic violence (article 201 of the Criminal Code) and "intentional murder of a family member" (Article 145, paragraph e of the Criminal Code).
- **Expanding the definition of actions of a sexual nature to also include sexual violence in the digital realm, including dissemination of sexual content violating the inviolability of personal life**: This means that crimes such as revenge porn are now punishable under the law.

Despite this overall positive legal framework, Moldova's legislation presents specific risks in addressing sexual violence and sexual misconduct.

GREVIO, the independent expert body responsible for monitoring the implementation of the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence, Baseline Report for Moldova (2023) highlights that several general offenses related to violence against women remain within the scope of alternative dispute resolution mechanisms, encompassing acts as severe as murder and causing grievous bodily harm. As the GREVIO Report states, *"'GREVIO notes that the specific domestic violence offense set out in Article 2011 applies to "violent actions resulting in slight injury to bodily integrity or health," whereas other forms of violence against women (including those that are not committed by family members, partners or former partners) or domestic violence causing more serious injuries will be qualified as causing bodily harm, thus falling within the scope of reconciliation."'* This directly affects the willingness of victims of gender-based violence to report and seek support, hampering access to justice.

Moldova's Law no. 45 - aimed at preventing and combating domestic violence - defines various forms of violence but confines them to private spaces or interpersonal relationships. This limitation in the legislation may lead to an oversight of acts of sexual violence that occur outside these defined settings. It also requires that victims prove they were subjected to violence, while establishing mandatory reporting requirements.

Although victims of sexual crimes are protected by Law No. 137, the requirement to mandatorily report survivors to police authorities under this law may deter GBV disclosure and therefore create a barrier for accessing services. This may result in reluctance by survivors to access services and a lack of potential entry points for reporting gender-

based violence and sexual exploitation and abuse. While preparing their Baseline Report for Moldova, GREVIO (2023) noted a concerning lack of awareness among relevant professionals about the practical application of their obligations to report violence against women to the police. During the evaluation visit, all professionals met by the delegation stated that they are mandated to report all incidents of violence against women, including domestic and sexual violence, regardless of the victim's consent. This was especially true among healthcare staff.

The decentralized approach to handling family violence, GBV, and trafficking cases could compromise victim and perpetrator confidentiality, potentially protecting perpetrators and exposing victims to retaliation. Notably, centers don't accommodate victims with certain disabilities or substance abuse issues, reflecting a broader national negligence toward GBV against persons with disabilities. Furthermore, the legal framework around sex work, as defined by the Contravention Code, disincentivizes reporting of GBV incidents among sex workers further exposing them to violence and abuse, while limiting their ability to seek support when needed.

The legislation also falls short in ensuring the protection and independent living of women with psychosocial and/or intellectual disabilities, who are subjected to various forms of abuse within institutional settings.

The legal framework in Moldova endorses the deinstitutionalization of persons with psychosocial and intellectual disabilities, as evidenced by the National Program on social inclusion of persons with disabilities (2018 - 2022) and the National Program on deinstitutionalization of persons with disabilities (2018-2026). However, the government has yet to approve a moratorium on the entries of these individuals into residential institutions, thereby continuing to regard these institutions as specialized social care services. Government Decision No. 44 (3 March 2016) outlines an action plan for implementing reforms concerning deinstitutionalization. The Committee on the Rights of Persons with Disabilities, in its Concluding Observation on Moldova's initial report (May 2017), has recommended several measures. These include ensuring equal rights to sexual and reproductive health for women with disabilities and incorporating a disability perspective in policies and strategies targeting gender-based violence. Moreover, the National Programme on preventing and combating violence against Women and Domestic Violence for the years 2023-2027 aims to broaden awareness and reporting of violence, especially among women with multiple vulnerabilities.

PSEA RISKS RELATE TO LAW, POLICIES AND PRACTICES IN MOLDOVA

Law, Policies & Practices		
Risk	**Risk Mitigation and Prevention Measure**	**Relevant Sectors**
Underreporting of gender-based violence due to reconciliation in criminal proceedings for some cases of violence against women	Advocate for changes in legal definitions and process to ensure that all forms of violence against women are excluded from the scope of reconciliation procedures.	GBV SWG Results Group 1, UNCT
Inadequate legal protection for Victims of certain forms of gender-based violence due to limitations in the current legislation (acts of sexual violence occurring in public spaces or outside personal relationships), and burden of proof on victims, also leading to underreporting.	Advocate for legal reforms to ensure adequate legal protection for all victims of gender-based violence, and promote a more victim-centered approach in legal proceedings. Training for Legal and Law Enforcement Personnel to sensitize them to the issues surrounding gender-based violence, including SEA, and victim-centered approach.	GBV SWG Results Group 1, UNCT
Mandatory reporting of sexual crimes to police authorities under Law No. 45/2007 and other legal provisions may deter GBV disclosure and create barriers for accessing justice and services.	Advocate for improvement of mandatory reporting laws to balance the need for legal intervention with the protection of victims' rights and willingness to seek help. Enhance the capacity of all relevant professionals regarding mandatory reporting requirements and a victim-centered approach to guarantee a restrictive interpretation and application of mandatory reporting obligations. Raise awareness among service providers, including law enforcement and health officers, of the potential deterrent effect of mandatory reporting to law enforcement authorities.	PSEA Network and PSEA Task Force GBV SWG Results Group 1, UNCT
Confidentiality and Reporting Barriers in Decentralized Systems: Decentralized systems for handling GBV incidents could lead to breaches in confidentiality, potentially endangering victims and also creating barriers for reporting and access to services.	Advocate for improvement on information management systems for GBV, and develop confidentiality protocols to protect victim and perpetrator information, promoting safety and legal integrity.	GBV SWG Results Group 1
Impact of Legal Treatment on Reporting GBV, including SEA, in Sex Work: The legal treatment of sex work under the Contravention Code disincentivizes these individuals from reporting GBV, increasing their risk of violence and limiting access to support.	Advocate for legal reforms that provide protection to sex workers, enabling them to report GBV without fear of legal repercussions or stigmatization.	GBV SWG Results Group 1 Joint Team on HIV/AIDS, UNCT
Continued Reliance on Residential Institutions and Vulnerability for Women with Disabilities: Despite programs promoting deinstitutionalization, the lack of a moratorium on new entries into residential institutions suggests a continued reliance on these settings, which can be isolating and may increase vulnerability to abuse, especially for women with disabilities.	Advocate for the approval of a moratorium on new entries into residential institutions and develop alternative community-based care services that offer greater autonomy and protection for individuals with disabilities.	GBV SWG Disability Task Force, UNCT

1.1.1.2 Social practices, gender norms and inequality and 1.2.1.1 violence against women and children

Despite progress in recent years, gender inequality remains a significant challenge in Moldova. Women and girls continue to face discrimination and violence in many areas of life, including the workplace, the home, and the community. Women are less likely to be employed than men, and those who are employed are more likely to be in low-wage, informal sector jobs. They are also more likely to live in poverty, especially in rural areas. Gender-based violence is a major concern: 34% of women have experienced physical, or sexual abuse from their partners. This violence is often rooted in harmful gender stereotypes and norms.

In the Republic of Moldova, considerable progress has been made in recent years to advance gender equality. In 2022, Moldova ranked 16th in the Global Gender Gap Index (World Economic Forum, 2022), which measures progress toward gender parity across four dimensions: economic opportunities, education, health, and political leadership. However, the Gender Inequality Index (UNDP, 2022) remains high, with significant indicators in terms of empowerment (36.9% of female seats in Parliament) and economics (only 33.9% female labor force participation rate).

Despite progress, gender inequalities persist, including those related to gender-based violence and social norms that impact women and girls, limited meaningful participation and decision-making, and untapped gains in women's human capital (World Bank, 2023). The Human Development Index value for women is 0.771 in contrast with 0.763 for men (UNDP, 2022). The level of poverty among women in 2019 was 25.6%, compared to 24.8% among men, and the poverty rate among female-headed households is higher than male-headed households (EEAS, 2021).

There is a significant discrepancy in the opportunities for women to earn income in rural areas in comparison to urban areas, with poverty among women in rural areas at 15.6%, compared to 4.8% for women from urban areas. Divorced and separated women are particularly at risk of poverty (EEAS, 2022).

The prevalence of gender-based violence (GBV) in Moldova remains high, with 73% of women having experienced some form of partner abuse, 71% of women having been victims of psychological abuse, and 21% of women having been victims of sexual violence (EEAS, 2021). The GBV Safety Audit realized in August 2022 by the Refugee Coordination Forum Gender Sub-Working Group states that "It is known that risks of multiple forms of GBV increase in conflict and refugee settings, with women and girls being at significant risk. Ukrainian refugees face multiple risks of GBV at all stages of displacement, prior to fleeing their home country, during flight, and while seeking refuge" (Moldova GBV SWG, 2022).

High levels of intimate partner violence have been documented in the region, including in both Ukraine and Moldova. Such violence is very much related to harmful cultural gendered norms (Moldova Gender Task Force, 2023). According to a 2019 survey by the Organization for Security and Co-operation in Europe (OSCE 2019), a significant proportion of ever-partnered women aged 18–74 in Moldova have experienced intimate partner physical and/or sexual violence at least once in their lifetime since the age of 15. Additionally, a substantial proportion have experienced such violence in the last 12 months, and many have faced sexual violence by someone other than an intimate partner at least once since the age of 15.

Incidents of conflict-related sexual violence have been reported in locations under military control in Ukraine (OHCHR, 2023). Risks of trafficking in persons for the purpose of sexual exploitation have also been reported by those fleeing Ukraine, including at border points, and at other times during their journey.

Social norms contribute to this context. According to an OSCE-led survey on violence against women, nearly half of women (45%) agree that "violence against women is often provoked by the victim". In

comparison, only 15% of women across the EU agree with this statement. Moreover, two in five women in Moldova (40%) agree that "women who say they were abused often make up or exaggerate claims of abuse or rape". Only 59% totally disagreed that non-consensual sex could be justified (OSCE 2019).

Although progress was made in the areas of gender equality and violence against women, several needs hamper access to justice and support to GBV survivors. The inconsistent application of the law along with the failure to identify low-level injuries as signs of violence is a concerning element.

In 2017, Moldova signed the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention), but its ratification was met with reluctance due to the use of the word "gender" throughout the document and the perception of the potential impacts of this approach on traditional and family values (EEAS, 2021). This context highlights the strong gender bias and stereotypes that hinder the understanding of gender-based violence as a severe violation of human rights, as well as the impact it has on women.

Furthermore, the different manifestations of gender-based violence are neglected in Moldova. Although the country has seen an increase in the number of complaints of domestic violence, access to justice is minimal. There are multiple factors impacting survivors' access to specialized services, and potentially their willingness and ability to disclose incidents, including lack of appropriate infrastructure in the courts, which do not provide sufficient protection against intimidation by other participants in the process; long periods for consideration of cases; and mild punishment applied to perpetrators (EEAS, 2021).

One of the primary obstacles confronting victims of domestic violence in Moldova is deeply ingrained cultural attitudes that pervade both the police force and society as a whole, significantly hindering reporting, investigation, and prosecution (GREVIO, 2023). GREVIO's Report on the Implementation of the Istanbul Convention in Moldova identifies these cultural attitudes as encompassing generalized views that women should endure violence, that they are inferior to men, and that they will face judgment if they report violence against them. GREVIO further raises concerns regarding victimization, harassment, and retraumatization of victims of gender-based violence by law enforcement authorities.

Women living in rural areas, Roma women, LGBTIQ+ persons, and persons with disabilities are among the most at-risk groups in Moldova. Gender stereotypes, which undermine women's decision-making, aligned with the lack of opportunities in rural areas, are major factors in this context. About 21% of women in rural areas are employed (EEAS, 2021). This rate is exacerbated among Romani women, as 84.7% are not officially employed, 36.6% attended some form of state education, and 57.8% did not have the opportunity to continue their studies (CoE, 2020). Access to education, the labor market, healthcare services, and information about health and hygiene is limited. Discrimination by medical personnel and informal payments to access medical services are also issues faced by Romani women (CoE, 2020).

GROUPS AT HIGHER RISK OF MARGINALIZATION

In Moldova, groups at higher risk of marginalization still face significant challenges for enjoying their rights and being included. LGBTIQ+ individuals face hate speech, violence, and discrimination, while those with disabilities encounter limited access to basic rights, social isolation, and increased risk of gender-based violence. Those living with HIV, especially women, grapple with stigma that impedes their access to care. The Roma face challenges in education, employment, and documentation, mostly related to stigma and discrimination. Sex workers are impacted by discrimination and the criminalization of sex work, further exposing them to violence and abuse, and creating additional barriers to accessing services and rights.

LGBTIQ+ Persons

LGBTIQ+ persons in Moldova are among the least accepted social groups, often facing hate speech, violence, and discrimination (CoE, 2020). According to the results of the SCORE Survey (SeeD, 2022), 69% of respondents would prefer if LGBTIQ+ individuals leave their communities - compared to 89% in 2017. Despite some improvements following the election of a new government in 2022, societal attitudes remain deeply prejudiced. Approximately 40% of the population perceive persons with diverse Sexual Orientation, Gender Identity and Gender Expression, and Sexual Characteristics (SOGIESC) as "abnormal" (EEAS, 2021). Around 39% of men and 30% of women consider LGBTIQ+ individuals as ill and in need of medical treatment. Episodes of targeted violence against persons with diverse SOGIESC, including an attempted rape of a lesbian woman by a co-worker aiming to "correct her sexual orientation", widespread discrimination of trans people, and barriers to employment are prevalent. Additionally, there have been reports of significant bias from public institutions, harassment, threats, and violence (ILGA-Europe, 2022).

Persons with Disabilities

Persons with disabilities in Moldova encounter considerable barriers to societal participation and enjoyment of rights, including in areas like education, employment, health services, and justice (UN Moldova, 2023). They are among the poorest demographic groups, primarily relying on social protection benefits rather than employment or self-employment (UN Moldova, 2021). Access to information regarding their rights and available services is limited. Widespread social isolation due to stigma is a significant concern, with about only 31% of the population willing to let their child study alongside children with intellectual disabilities (UN Moldova, 2023). GBV risk, particularly among women and girls with psychosocial disabilities, is elevated, with institutionalized individuals facing a heightened threat of sexual abuse. There is an absence of free legal aid and limited access to legal processes related to GBV for women with disabilities (UN Moldova, 2021).

People living with HIV

In Moldova, a quarter of people living with HIV (PLHIV) experience stigma and discrimination, often manifesting as verbal or physical abuse, denial of employment, and violation and threats of violation of their privacy rights and confidentiality of their serostatus. According to the results of the SCORE Survey (SeeD, 2022), 35% of respondents would prefer if PLHIV left their communities - compared to 59% in 2017- and only 18% would accept to interact with them personally. Women living with HIV are especially affected. Owing to internalized stigma, 10% avoid seeking jobs or medical attention. Fear of disclosure and potential discrimination also deter individuals from undergoing timely HIV tests, and 20% struggle with basic needs. Despite improvements in the inclusion of PLHIV, stigma remains a significant impediment to accessing essential services. This situation underscores the urgency for policies that address discrimination and champion equal rights (UNAIDS, 2023).

Persons of Roma Ethnicity

The Roma community in Moldova constitutes approximately 0.3% of the population, although precise numbers remain uncertain. They face low levels of tolerance in Moldova. Only 26% of respondents to the 2022 SCORE survey (SeeD) affirmed that they would be willing to interact with them personally. In addition, Roma individuals face considerable obstacles in accessing education and employment with half of Roma children not enrolled in school (ACTED 2023). This assessment also revealed that formal employment is rare among the Roma, with many depending on unreliable sources of income or social assistance. Challenges also affect the ability of Roma refugees to locally integrate. A 2022 study by Oxfam identified that a prevalent issue among interviewed Roma refugees was an information deficit and restricted access to communication channels. Some estimates suggest that between 30-40% of Roma refugees in Moldova lack documentation, compared to 10% of non-Roma refugees. This situation further hinders their access to services and rights, amplifying their vulnerability to marginalization, violence, and abuse.

Persons engaging in transactional sex, including sex workers

According to the United Nations Development Programme (UNDP, 2021), Moldova is home to an estimated 15,800 sex workers. These individuals encounter numerous challenges in enjoying their rights and accessing essential services. Pervasive stigma and the criminalization of sex work in national legislation are primary barriers, often depriving them of crucial health services. Sex workers frequently face public censure, deemed either criminals or immoral, leading to instances of harassment, violence, and abuse from both law enforcement and the general public. From a human rights perspective, criminalizing sex work infringes upon rights like equality, health, autonomy, dignity, and privacy. This legal stance disproportionately impacts female sex workers, escalating their vulnerability to violence and abuse while limiting their access to services and support. Despite these challenges, Moldova's sex workers are increasingly mobilizing to advocate for their rights, establishing NGOs that offer assistance and services. They are also working to reshape public perceptions of sex work and champion its decriminalization.

RISKS OF TRAFFICKING

In Moldova, women, girls, and marginalized groups like the Roma are particularly vulnerable to trafficking and exploitation, exacerbated by prevailing social norms and institutional corruption (U.S. Department of State, 2022). Despite governmental efforts, victim protection remains inadequate, with traffickers often intimidating victims and officials neglecting protective laws in court proceedings. The Transnistrian Region poses heightened trafficking risks, especially for neglected children and Ukrainian refugees seeking safety.

Women and girls in Moldova are disproportionately vulnerable to trafficking, and prevailing social norms foster an environment permissive of violence against children, including trafficking (U.S. Department of State, 2023). Roma children are especially susceptible to child labor and trafficking, and individuals with mental disabilities are often targeted. There has been a surge in children exploited in online child pornography, with some instances involving their own parents as the exploiters. Ukrainian refugees, notably women and children, remain highly exposed to trafficking risks.

According to the Trafficking in Person Report about Moldova (U.S. Department of State, 2023), in 2022, authorities identified 150 cases in 2022, and investigated 73 trafficking cases (33 sex trafficking, 39 labor trafficking) an increase from 57 in 2021; notably 20 of the cases involved 33 potential child sex trafficking victims. The government prosecuted 109 suspected traffickers (53 sex trafficking, 54 labor trafficking, two unspecified forms of trafficking), a significant increase from 37 in 2021. Of the 150 identified in 2022, the vast majority were Moldovan citizens, and forty-four were children. The Government of the Republic of Moldova does not fully meet the minimum standards for the elimination of trafficking but is making significant efforts to do so. Corruption, especially within law enforcement and the judiciary, has weakened governmental responses, influenced case outcomes, and fostered impunity among officials. There were also significant gaps in victim protection. Only a small number of identified victims received government assistance. Traffickers continued to intimidate victims, and authorities provided inconsistent levels of protection during court proceedings. Those with past incarcerations, arrests for commercial sex, or drug addiction issues often go unidentified as victims. The lack of long-term reintegration support left victims vulnerable to being re-trafficked. The risk of trafficking in persons is higher in the Transnistrian Region, a predominant source for sex trafficking victims in neighboring countries. Children, especially those neglected by their families, are at high risk of being trafficked in the region.

Unaccompanied children, elderly individuals, LGBTQI+ individuals, and persons with disabilities are particularly vulnerable among the refugee population. Several factors exacerbated this vulnerability at the outset of the Ukrainian refugee crisis, including the urgency of relocation and the prevalence of unregistered individuals and organizations offering assistance. However, the situation has improved since then, with some EU nations now enforcing registration requirements for individuals and

organizations offering assistance. Fortunately, Ukrainians can travel swiftly and safely across Europe and access employment and social services, which provides a protective buffer against trafficking. However, they remain vulnerable to various forms of exploitation, including forced labor and online sexual abuse, especially through messaging apps. Although there has not been a significant spike in detected trafficking cases involving Ukrainians across the region, including Moldova, this may be due to unreported incidents or effective protective measures in host countries. (UNODC, 2022).

In 2022, Moldova established two mechanisms for child victim support: the National Referral System (NRS) and the Inter-sectoral Cooperation Mechanism for the Protection of Children, referring child victims and potential victims of violence, neglect, exploitation and trafficking to specialized support. Child abuse cases, encompassing trafficking in state institutions, were identified and reported through the Ministry of Education, Culture, and Research. However, some reports indicate involvement by management in state institutions in child exploitation. The government instituted a 24-hour NGO-run hotline for children facing violence, neglect, or exploitation, offering services and information to both victims and their parents. Nonetheless, it is concerning that traffickers were occasionally present during child victim interviews, and judges often overlooked protective laws during trial proceedings (U.S. Department of State, 2023). Furthermore, the lack of services for the resocialization and integration of child victims of sexual exploitation may exacerbate risks of institutionalization and trauma.

1.1.2.1. Corruption Perception

Moldova's corruption, along with its shortage of human and financial resources, has been identified as a priority issue to be addressed by the Council of Europe (Council of Europe, 2023). The Corruption Perception Index (CPI), which measures how corrupt a country is perceived to be by capturing the level of misuse of political power for private benefit[4], remains high in Moldova at 39 out of 100 (Transparency International, 2023), despite improvement in 2022 compared to 2021.

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4   For more information on how CPI is calculated, please refer to: https://www.transparency.org/en/news/how-cpi-scores-are-calculated.

PSEA RISKS RELATE TO VIOLENCE AGAINST WOMEN & CHILDREN, AND GENDER INEQUALITY

Violence against Women & Children and Gender Inequality		
Risk	**Risk Mitigation and Prevention Measure**	**Relevant Sectors**
Limited Participation in Decision-Making: Women's and girls' restricted access to decision-making roles can lead to policies and practices that do not adequately address or prioritize their needs and rights, including protection from sexual exploitation and abuse (SEA). This is especially true for women and girls at higher risk of marginalization, such as Roma, those with disabilities, LGBTIQ+, and older women.	Promote the inclusion of women in leadership and decision-making roles at all levels, ensuring that their perspectives and needs are represented in policy-making. This shall include enhancing participation of women-led organizations in the PSEA network activities, while actively engaging women and girls in PSEA activities.	PSEA Network and PSEA Task Force Gender Task Force (and UNCT GTG) Disability Task Force (and UNCT DITF) Roma Task Force Child Protection SWG GBV SWG Results Group 1
Increased socio-economic vulnerability: higher poverty rates, especially among female-headed households, as well as gap in income-earning opportunities for women in rural areas compared to urban areas, and discrimination against certain profiles (Roma, divorce or separated women) increases their susceptibility to SEA.	Develop programs that enhance women's human capital, focusing on education, vocational training, and skill development to improve their economic independence and resilience. Implement targeted poverty alleviation strategies that focus on women, especially in female-headed households, to reduce their economic vulnerabilities. Create specific initiatives to improve income-earning opportunities for women in rural areas, such as access to credit, training, and markets. Develop and provide dedicated support services for divorced and separated women, as well as Roma women, including legal aid, financial support, and counseling.	Livelihoods and Socioeconomic WG GBV SWG Gender Task Force (and UNCT GTG) Disability Task Force (and UNCT DITF) Roma Task Force Joint Team on HIV/AIDS
Increased GBV Risks in Conflict and Refugee Settings: Women and girls, particularly Ukrainian refugees, face heightened risks of GBV during all stages of displacement.	Ensure that refugee women and girls have equal access to existing services and resources, tailored to their unique needs and challenges stemming from forced displacement. Empower refugee women through skills training, employment opportunities, and financial assistance, enhancing their self-reliance and reducing their vulnerability to exploitation and abuse.	GBV SWG Child Protection SWG
Cultural Norms Perpetuating Violence: Harmful cultural gender norms within both refugee and host communities contribute to the perpetuation and acceptance of GBV, including SEA.	Implement comprehensive education and awareness campaigns to challenge and change harmful gender norms and the normalization of violence. Engage with communities to raise awareness about GBV, including SEA, and the importance of reporting and intervening in such cases.	PSEA Network and PSEA Taskforce GBV SWG AAP Task Force Results Group 1
Increased Vulnerability of Marginalized Groups: Women in rural areas, older women, Roma women, LGBTIQ+ individuals, and persons with disabilities face heightened risks of GBV due to stereotypes, discrimination, and limited access to financial/material resources and support services.	Ensure that vulnerable marginalized groups have equal access to existing services and resources, tailored to their specific needs. Implement initiatives to improve employment and educational opportunities for women, especially in rural areas and among marginalized groups. Provide training for public institutions and aid organizations to foster inclusivity and understanding of the rights of LGBTIQ+ people, older adults, persons with disabilities, Romani people, people	Livelihoods and Socioeconomic WG GBV SWG Child Protection SWG Gender Task Force (and UNCT GTG) Disability Task Force (and UNCT DITF) Roma Task Force Joint Team on HIV/AIDS

2. THE HUMANITARIAN CONTEXT

This dimension assesses factors related to the introduction of one or more crises into a country, such as a conflict. The dimension captures the geographic extent, scale, and intensity of the crises, as well as the people affected and the severity of needs. These factors aim to reflect the increased risk that comes from large, complex emergencies, as well as from large, complex responses.

The larger the scale of the crisis (in terms of geographical coverage and number of people affected) and the higher the impact on peoples' lives (in terms of increasing dependence and vulnerabilities), the higher the risk. Additionally, this dimension also works under the assumption that when humanitarian crises put the security and well-being of populations at risk, there is a higher likelihood for SEA. (SEARO, 2022)

THE OPERATIONAL CONTEXT

Indicator	Value	Year	Source
2.1. Crisis Scope & Intensity	1.7	2023	
2.1.1. Scope & Intensity	2	2023	
2.1.1.1. People Affected	2.0		
People Affected (Absolute)	0.9	2023	INFORM
People Affected (relative to the people in the affected area)	2.6	2023	INFORM
2.1.2. Crisis Severity	1.3	2023	
2.1.2.1. Conditions of People Affected	1.3		
Conditions of People Affected	2.4	2023	INFORM
2.2. Needs Scale & Complexity	2	2023	
2.2.1. Operational Size	3.6	2023	
2.2.1.1 Funding Requirement	3.6		
2023 RRP Funding Requirement	$426,961,899	2023	UNHCR
2023 RRP People Targeted	200,000	2023	UNHCR
2.2.2. Operational Complexity	0.4	2023	
2.2.2.1 Humanitarian Access	0.4		
Denial of existence of humanitarian needs or entitlements to assistance	No	2023	INFORM
Restriction and obstruction of access to services and assistance	No	2023	INFORM
Impediments to enter the country (bureaucratic and administrative)	No	2023	INFORM
Restriction of movement within the country	Partially (1 out of 3)	2023	INFORM
Interference into implementation of humanitarian activities	No	2023	INFORM
Violence against humanitarian personnel, facilities, and assets	No	2023	INFORM
Insecurity or hostilities affecting humanitarian assistance.	No	2023	INFORM
Presence of landmines improvised explosive devices, explosive remnants of war and unexploded ordnance	No	2023	INFORM
Physical constraints in the environment (related to terrain, climate, lack of infrastructure, etc.).	No	2023	INFORM

2.1. CRISIS SCOPE & INTENSITY

The intensity of the conflict and displacement from Ukraine in Moldova is ranked as low severity on global indexes, with an index value of 1.9 out of 5 (INFORM, 2023). Around 950,000 people have arrived from Ukraine since the start of the war, of whom approximately 111,300 remain in the country. An estimated 70% of the total refugee population requires support to cover their basic needs, with approximately 15% classified as extremely vulnerable. The four most urgent needs reported are material assistance, food, healthcare, and accommodation.

Refugee households are employing stress-coping strategies (59%), such as spending savings to meet basic needs or reducing essential health and education expenditures. This indicates that these households are experiencing hardship but have not yet resorted to extreme measures that could imply long-term harm. Of the refugees in the country, 7% reside in accredited Refugee Accommodation Centers (RACs), 83% in private accommodation, 10% in shared accommodations, hotels, or hostels, or unaccredited RACs. RAC safety is higher in the South (67%), primarily due to higher compliance with the PSEA minimum operational standards in relation to staffing, PSEA information accessibility and availability of services, and lower in the Center at 47%.

According to the Index for Risk Management (INFORM), the Republic of Moldova is classified as having a low overall risk, ranking 104th globally (the higher the ranking, the lower the risk). The INFORM SEVERITY Index also classifies the displacement from the Ukraine conflict in Moldova as having a low severity, with an index value of 1.9 out of 5 (INFORM, 2023).

2.1.1.1. People Affected

More than 10 million Ukrainians have fled their homes since February 2022, and half have fled the country. Moldova has registered over 950,000 arrivals from Ukraine since the start of the war, of whom approximately 111,300 remain in the country (UNHCR, 2023).

Children make up 44% of the refugee population (23% boys and 21% girls), while women make up 37% and men make up 18%. 6% of refugees have a disability, and approximately 20% are older persons aged 60 and above. Although the majority of refugees live in urban areas, with the highest percentage in Chisinau, 35% of the refugee population is living in rural areas.

2.1.2.1. Conditions of People Affected

In the first semester of 2023, UNHCR conducted a rapid socio-economic profiling exercise to assess the socio-economic vulnerability level of refugees in Moldova. Findings indicate that household demographics (families with 4+ members), heating sources, accommodation types, residential areas (urban vs rural), and specific needs associated with specific profiles (older people, people with disabilities, and single parents) have a significant correlation with the level of socio-economic vulnerabilities among the refugee population (UNHCR 2023). An estimated 70% of the total refugee population requires support to cover their basic needs, with approximately 15% classified as extremely vulnerable due to multiple vulnerabilities within their households.
The top four urgent needs reported by refugees are material assistance (77%), Food (64%), Healthcare (51%) and Accommodation (22%) (UNHCR 2023). The findings coincide with the 2023 Multi-Sector Needs Assessment, with 44% of the respondents mentioning material support as their main priority need, followed by healthcare (43%), food and nutrition (31%) (REACH 2023).

Refugees in Moldova reside in three main types of accommodation: Accredited Refugee Accommodation Centers (RACs), collective settlements managed by the National Agency for Social Assistance (ANAS), Unaccredited RACs, collective settlements privately managed and not overseen by ANAS, and privately

rented accommodation. According to the 2023 MSNA, 6.7% of refugees reside in accredited RACs, 83.1% in private accommodation, 9.1% in shared accommodations, 0.6% in hotels or hostels, and 0.5% in unaccredited RACs. Private rented accommodation is the preferred option for refugee families. While 44.6% of MSNA respondents affirmed covering the full payment of private accommodation arrangement costs, 27.5% affirmed not covering those costs as they are hosted by local person/family (unrelated) or similar.

The main sources of income for refugee households in the 30 days prior to data collection were UN/INGO support, savings, investment/property, loans, or relatives (79.4% of households) and Employment in Moldova (36.6%) (MSNA 2023). These findings are supported by other assessments, such as UNHCR Cash Post Distribution Monitoring, which revealed that refugee households generally rely on unsustainable sources of income.

The number of households that report no source of income is relatively low (2.3%). However, a significant 9.8% of households are resorting to emergency coping strategies, indicating severe economic distress. These extreme measures, often unsustainable, jeopardize future financial stability and require immediate interventions. The number of refugees resorting to emergency coping mechanisms matches the findings of the UNHCR Rapid Socio Economic Profiling presented above.

The MSNA also found that a significant number of refugee households are using stress strategies (58.8%) as coping mechanisms[5]. These are usually the least severe measures, indicating that these households are experiencing hardship but not yet resorting to extreme measures that could imply longer-term harm. However, frequent reliance on such strategies could lead to an erosion of households' resilience over time. The overall use of crisis strategies is less common (8.4%). Households in this category are likely facing significant challenges, making detrimental decisions that may have medium-term repercussions, such as selling productive assets or accruing burdensome debt.

The most common coping mechanism reported by refugee households in the study was spending savings to cover basic needs (68.2%). Other coping mechanisms included reducing essential health and education expenditures (6.9% and 2.0%, respectively), withdrawing school-aged children from school (0.1%), selling house or land (2.6%), and migrating due to a lack of resources (3.5%). Only 0.6% of households reported engaging in degrading or illegal work for income.

Protection threats to refugees in Moldova are generally limited, and affecting mostly specific population groups, including Roma, LGBTQI+, sex workers, persons with disabilities, and older persons. These groups face discrimination and exclusion, which can lead to isolation and increased vulnerability to exploitation and abuse. As funding and assistance decline, protection risks are likely to increase, especially for those who rely on negative coping mechanisms to survive.

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5   Coping strategies are divided into stress, crisis, or emergency strategies. While stress strategies (such as selling furniture or spending savings) indicate a reduced ability to deal with future shocks, crisis and emergency strategies (such as selling household productive assets or withdrawing children from school) directly reduce future productivity, including development of human capital, thus hindering resilience.

PSEA RISKS RELATE TO SCOPE, INTENSITY AND SEVERITY OF THE SITUATION

Scope & Intensity		
Risk	**Risk Mitigation and Prevention Measure**	**Relevant Sectors**
Vulnerability of Children: With a high percentage of the refugee population being children, there is a risk of exploitation and abuse, particularly for unaccompanied minors or those separated from their families.	Strengthen PSEA measures in child protection activities, including child-friendly spaces, and support the capacity building of aid workers working in RACs on Child Protection and PSEA integration with a focus on child protection Strengthen the capacity of aid workers and community members to identify, report, and address child protection concerns, including SEA.	PSEA Network and Taskforce Child Protection SWG Basic Needs WG
Challenges Faced by Persons with Disabilities: Refugees with disabilities might experience difficulties accessing services and depend on care-takers, making them more susceptible to exploitation and abuse.	Expand disability inclusion and accessibility in Refugee Accommodation Centers. Develop, adapt and widely disseminate accessible and inclusive awareness raising methodologies and information materials to ensure that persons with disabilities are aware of their rights and protection mechanisms.	Disability and Age Task Force Basic Needs Task Force AAP Task Force
Older Refugees at Risk: Older refugees may face challenges in accessing healthcare, social services, and protection, increasing their vulnerability, and the risk of being victims of SEA .	Scale up and establish accessible and inclusive awareness raising methodologies to ensure that older refugees are aware of their rights and protection mechanisms. Empower older refugees through participation in community activities and decision-making processes. Collaborate with relevant stakeholders to foster age and disability inclusion across humanitarian and development initiatives, as well as within government services.	Disability & Age Task Force (and UNCT DITF) AAP Task Force
Crisis Severity		
Reliance on Unsustainable Income Sources: The dependency of a high percentage of refugees on unsustainable income sources like aid, savings, or loans indicates a precarious economic situation that can lead to increased risks of SEA.	Create opportunities for sustainable income generation, such as job placement programs and vocational training, especially for those reliant on aid and savings.	Livelihoods and Socioeconomic WG

2.2. NEEDS SCALE & COMPLEXITY

The Refugee Response Plan for 2023 sought $426,961,899, with 51% of the funding secured as of June 2023. The 2024 plan anticipates increased stability in displacement patterns and increased ownership of the response by the Moldovan government and civil society, resulting in a decreased funding requirement of at least 30% compared to 2023. Humanitarian access is generally favorable, facilitated by high-quality infrastructure, short travel distances, and strong collaboration between aid organizations and government institutions at all levels. In the Transnistria region, situated along the eastern border, where economic conditions are challenging, access to humanitarian assistance is more limited, with refugees often needing to travel to the right bank of the Nistru River to receive assistance. Despite these challenges, the entry of humanitarian goods and supplies has received strong backing from government authorities during the refugee emergency.

2.2.1.1. Funding Requirements

The Refugee Response Plan (RRP) for 2023 required USD 426,961,899 to meet the basic humanitarian needs of the population affected, and as of June 2023 was 50% funded. In 2023, UN agencies and other partners planned to provide cash assistance to about 120,000 refugees and 107,000 affected host community members under the 2023 RRP, which has an overall planning figure of 200,000 refugees from Ukraine, including individuals remaining in Moldova but also those transiting the country, and 120,000 host community members.

The majority of Ukrainian refugees are located in the capital city of Chişinău, where most UN agencies and national and international NGOs are also based.

The 2024 RRP takes into account the fact that the displacement situation is becoming more stable and that the Moldova Government and civil society are better prepared to respond to the refugee influx. For 2024, the RRP planning figure includes 90,000 refugees, and 55,000 affected host community members, under half of the previous year. The overall funding requirement for 2024 is expected to decrease by at least 30% when compared to 2023, in line with the reduced planning figures and existing needs.

2.2.2.1 Humanitarian Access

Humanitarian access in Moldova is generally good. This is facilitated by high-quality infrastructure, short distances, and strong collaboration between the aid community and government institutions at all levels. While there are usually no impediments to entry into the country, there have been reports of arbitrary denial of visas or longer-than-average processing times for visas for certain profiles of aid workers, namely black and Arab colleagues. As for the entry of humanitarian goods and supplies, aid organizations have counted on the support of government authorities from the onset of the refugee emergency.

There have been no reports of violence against personnel, facilities, and assets, nor denial of the existence of humanitarian needs or entitlements to assistance. Overall, aid organizations have close and productive relationships with government institutions at all levels and often engage in joint planning and service delivery to avoid establishing parallel systems and promote the inclusion of refugees into national systems and services.

Aid organizations have been operating in the Transnistria region. Due to operational challenges, some humanitarian organizations provide support in the region, but refugees have had to travel to the right bank of the Nistru River to claim cash and other assistance. The majority of the population speaks Russian, which facilitates the integration of refugees into society. However, they are affected by the overall socioeconomic situation in the region, which is the poorest in the country. Overall, compared to other regions, addressing humanitarian needs - especially cash assistance and NFI's poses unique challenges. This negatively affects the ability to address the needs of refugees and vulnerable Moldovans in the region. Stronger engagement would be beneficial, also reducing the risks of SEA.

PSEA RISKS RELATED TO HUMANITARIAN ACCESS

Humanitarian Access		
Risk	**Risk Mitigation and Prevention Measure**	**Relevant Sectors**
SEA Risk in Transnistrian Region: Limited participation of local organizations in the PSEA Network, and economic hardship in Transnistrian Region, coupled with the need for refugees to travel for aid, significantly increase their vulnerability to SEA.	Improve direct access to humanitarian assistance within the Transnistrian Region reducing the need for refugees to travel long distances. Expand participation of organizations in the Transnistrian Region in the PSEA Network.	PSEA Network and Task Force Local Refugee Coordination Forum - Transnistrian Region, UNCT

3. THE OPERATIONAL CONTEXT

This dimension reflects how the overall response operation is designed and managed, including types of assistance and how they are delivered and monitored, as well as the awareness and commitment of aid workers and humanitarian organizations to prevent, identify, and address incidents of SEA.

The more sensitive and knowledgeable on the risks of SEA aid agencies and organizations are, the less likely they will perform or accept any act of SEA. Other underlying assumptions for this dimension are related to the type of assistance aid institutions provide.

As highlighted by some studies, types of aid that involve the provision of goods (such as food, cash, or NFIs) increase the risk of SEA and other types of misconduct performed by aid workers. Additionally, the higher the gaps in funding aid activities, the more likely operations would overlook basic protective mechanisms when distributing aid. (SEARO, 2022)

Indicator	Value	Year	Source
3.1. Response institutions	5.6	2023	
3.1.1. Leadership & Staffing	4.7	2023	
3.1.1.1. Staff Capacities on PSEA	4.7		
% of aid workers who reported receiving no PSEA training in the past 12 months.	21%	2023	UNHCR, WHO
3.1.2. Organizational Culture & Practices	6.5	2023	
3.1.2.1. Staff Knowledge on PSEA	6.5		
% of staff that provide an incorrect answer to any of the five questions related to the prohibition of sexual exploitation and abuse incidents	13%	2023	UNHCR, WHO
3.2. Response Modalities	4.9	2023	
3.2.1. Operational Design & Management	5.1	2023	
3.2.1.1 Funding for Food, Cash and NFI	5.1		
2023 RRP Funding Requirements	$426,961,899	2023	UNHCR
Percentage of 2023 RRP Funding Earmarked for Cash, Food and NFI	$196,594,156	2023	UNHCR
3.2.2. Operational Reach	4.7	2023	
3.2.2.1 Gaps in Funding and Activities	4.7		
People targeted in prior RRP	250,000	2023	UNHCR
People reached in prior RRP	130,000	2023	UNHCR

Moldova is a development context in which a refugee emergency has existed since February 2022, following the full-scale invasion of Ukraine by the Russian Federation. Therefore, a United Nations Country Team (UNCT) led by the UN Resident Coordinator (RC) coordinates development activities under the overall framework of the United Nations Sustainable Development Cooperation Framework (UNSDCF), while a Refugee Coordination Forum (RCF), established under the overall framework of the Refugee Coordination Model (RCM), serves as the main coordination body for refugee response activities. The RCF is led by the UNHCR Representative in the capacity of Refugee Coordinator, and activities responding to the needs of refugees and affected host communities in Moldova are articulated in the Refugee Response Plan (RRP).

The UN System in Moldova

Moldova joined the United Nations on March 2, 1992. Currently, twenty four UN Resident and non-Resident specialized agencies, funds, and programs (AFP) operate in Moldova. The UN Country Team (UNCT) is led by the Resident Coordinator and has signed the Sustainable Development Cooperation Framework 2023-2027 with the Government of the Republic of Moldova.

The UNCT also has dedicated technical groups, including a Prevention of Sexual Exploitation and Abuse (PSEA) Task Force - part of the Moldova PSEA Network - chaired by the World Health Organization (WHO) and co-chaired by the United Nations Children's Fund (UNICEF) in 2023, and a Gender Task Force led by UN Women.

Twenty-four UN entities operate in Moldova, with a workforce of 114 international staff and 502 national staff.

The Refugee Response in Moldova

Following the onset of the full scale invasion of Ukraine by the Russian Federation, and the consequent displacement of refugees from Ukraine to Moldova, a Refugee Coordination Forum - under the overall framework of the Refugee Coordination Model - was established in Moldova. The RCF is an inter-agency coordination body co-led by the Government of Moldova and UNHCR, which comprises over 70 partners, including UN Agencies, INGOs, NNGOs and the Red Cross.

The forum comprises 8 working groups and 4 cross-sectoral task forces, including the PSEA Network (which serves both the RCF and the UNCT).

Since 2022, UNHCR - under the coordination framework of the RCF - has been leading the development of Refugee Response Plans (RRPs) for Moldova, which are part of the Regional RRP for the Ukraine Situation. The 2023 RRP required USD 426,961,899, and as of June 2023 is 51% funded.

A quick assessment conducted by the iNGO Forum in October 2023 revealed that 14 out of the 24 organizations that are part of the forum employ 559 individuals, of whom 16% are internationals. There is no consolidated data for local organizations; however, it is estimated that 2023 RRP pledging partners employ approximately 500 individuals.

3.1. RESPONSE INSTITUTIONS

The aid community invested significant efforts in bolstering organizational capacity for PSEA implementation through regular induction and refresher trainings, the development of Standard Operating Procedures on PSEA, and the establishment of inter-agency Complaint and Feedback Mechanisms. Most organizations were found to have implemented a PSEA focal point, conducted regular personnel training, and established a Code of Conduct. While these findings apply to UN agencies, INGOs, and larger CSOs, further efforts are required to support smaller CSOs, which were found to have policies in place in only 39% of cases. Crucial areas for strengthening institutional PSEA response include building capacity for investigating SEA cases, expanding the utilization of the Misconduct Disclosure Scheme to prevent the rehiring of convicted staff, and ensuring that institutional-level policies and mechanisms are accessible to communities (including the translation of Codes of Conduct into local languages, dissemination of these documents, and information on Complaints and Feedback Mechanisms). Additional focus should be placed on training quality, as 14% of personnel were unaware of how and where to refer victims for assistance, and the requirement to mandatorily report suspected PSEA cases was not followed by some respondents.

3.1.1.1. Staff and Organizational Capacities on PSEA

In 2023, the PSEA Network in Moldova trained over 1,300 aid workers through inter-agency training based on the IASC Learning Package, "Saying No to Sexual Misconduct." In addition to one-day induction trainings, the PSEA Network has also delivered PSEA Training of Trainers, specific trainings for PSEA Focal Points on the implementation of the Inter-Agency PSEA SOP, development and management of CFMs, UN Common Tool for IP PSEA Capacity Assessment, and facilitated participation of staff from national and local CSOs in the CHS IQTS training as part of a wider effort to create a local pool of investigators. The organization has also supported capacity building of data enumerators in the context of data collection activities, and facilitated a workshop on the Misconduct Disclosure Scheme in Moldova, including supporting the translation of relevant documents to Romanian and Russian.

PSEA LEADERSHIP SURVEY AND ORGANIZATIONAL CAPACITY ON PSEA

As part of the Joint PSEA Risk Assessment, the PSEA Network conducted a PSEA Leadership Survey of all UNCT and RCF Partners in Moldova. The survey targeted the heads of organizations and aimed to assess their compliance with PSEA Minimum Operational Standards. It comprised 28 questions covering organizational policy; management; human resources systems; mandatory training; reporting; assistance and referrals; investigation; and inter-agency PSEA coordination.

Overall, the survey results showed that there is a good level of compliance with PSEA Minimum Operational Standards among UNCT and RCF Partners in Moldova. However, there are some areas where improvement is needed, being the most critical ones: A) limited capacity to investigate SEA; B) low implementation of reference checks and vetting procedures; and C) limited accessibility of reporting channels.

A total of 32 organizations responded to the survey. They included 11 UN agencies, 11 INGOs, 9 national NGOs, and 1 faith-based organization. The majority of respondents (18) had been in Moldova for more than 10 years, while a minority (4) had been in the country for less than one year.

The survey results revealed that all 32 organizations had designated a PSEA Focal Point, with 71% formally assigning responsibility for PSEA in their job descriptions and performance appraisals. The majority, 90% (or 29 organizations), had adopted a Code of Conduct, which was distributed to and signed by all staff (93% of those that adopted a Code of Conduct, or 27 organizations). Disciplinary procedures for violations were clearly outlined in the Code of Conduct and incorporated into staff rules and regulations (89%, or 26 organizations).

Most organizations (90%) reported conducting induction and refresher training on misconduct and SEA either online or in person, and shared information with staff on their obligation to report. Senior management had PSEA achievements and results included in their performance appraisal in the majority of organizations surveyed (75%), and the PSEA focal point regularly reported on progress (90%).

Policies on SEA were broadly available within surveyed organizations. Most organizations had whistleblower policies and procedures for handling complaints (90%) and investigations (75%) in place and operational at the local level (81%). However, fewer organizations, particularly those with a budget over 500k (71%), had adopted the Moldova PSEA Standard Operating Procedures. Relevant clauses were included in sub-agreements (82%) and agreements with donors and other individuals with a cooperative agreement (84%). Most organizations reported having access to an investigation body (75%).

While this is likely the case for UN agencies, INGOs, and consolidated national NGOs, a mapping of local CSOs in the Moldova Refugee Response conducted by UN Women and UNHCR showed

that only 39% of surveyed CSOs reported having PSEA policies. The percentage of CSOs with PSEA policies varied according to the size of the organization, with larger CSOs more likely to have such policies in place (71%). This may be because larger CSOs partner more often with UN agencies and need to abide by the UN's PSEA requirements, which may reflect the impact of the UN Implementing Partner PSEA Capacity Assessment.

In addition, a critical gap identified in the Implementing Partners' PSEA Capacity Assessment is the limited capacity to investigate SEA cases. For smaller organizations, putting in place investigation mechanisms is often not viable or sustainable, as it requires extensive resources. Moreover, there is limited capacity in the country to investigate SEA cases across national and local organizations, requiring UN agencies and INGOs to support their partners, while contributing to long-lasting solutions through capacity building at the national level.

62% of organizations reported conducting internal risk assessments on their own projects and implementing partners' projects.

Lower compliance was found in translation and in making sure that Codes of Conduct were available to beneficiaries (65%) and the availability of safe, confidential, and context-specific reporting channels (69%). Reporting channels were more often available for larger organizations, with over 21 staff members, in comparison with organizations with 0-20 staff (89% of larger organizations have a system in place, compared to 53% for smaller organizations).

Moreover, just over half (56%) had implemented a reference check and vetting procedures using the "clear-check" or Misconduct Disclosure scheme, which prevent re-hiring of individuals with a record of SEA or harassment. This result was particularly significant for Moldovan NGOs, where only 22% implemented reference checks and vetting of candidates.

Most organizations (87%) also reported conducting awareness to affected people on their rights and PSEA reporting channels. Most organizations reported having an established mechanism to refer survivors to assistance (81%) and to ensure that sensitive and identifiable information was handled confidentially and with the survivor's authorization (93%).

3.1.2.1. Staff Knowledge on PSEA

In May 2023, the Moldova PSEA Network conducted a Perception Survey with 353 aid workers in the country in the context of the Joint PSEA Risk Assessment. The survey was self-administered through an online form, and responses were anonymous. The survey assessed aid workers' awareness of key PSEA principles, understanding of their own organization's PSEA practices, and attitudes related to PSEA.

Respondents were primarily associated with the United Nations (39%), international NGOs (36%), and Moldovan NGOs (24%). Most respondents were national staff (66%), with smaller groups identifying as international staff (21%) and national consultants (11%). There were also a few international consultants, interns, and volunteers. Geographically, most respondents were based in Chişinău (87%), while the rest were dispersed across other Moldovan cities, including Găgăuzia, Ştefan Vodă, Ungheni, and Cahul.

Regarding work experience in the aid sector, 36% of respondents had less than a year of experience, 34% had between 1-5 years, 16% had over 10 years, and 15% had between 6-10 years. When it comes to PSEA Training, 79% of respondents (280 individuals) received an in-person PSEA training in the past 12 months, while 21% (73 individuals) did not. Among those who have been trained, 98% found the training effective in raising awareness about their PSEA responsibilities, while only 2% disagreed.

Aid workers who received PSEA training were more likely to report that their organization had shared awareness-raising materials with them (94% vs. 75%), knew the steps to take in cases of sexual exploitation

and abuse (96% vs. 89%), and had clear information on how to report sexual exploitation and abuse (94% vs. 82%).

Overall respondents' understanding of specific PSEA principles were:

- **Sexual Relationship with children**: Almost all respondents (99%) correctly stated that it is unacceptable for an aid worker to engage in a sexual relationship with children, even with consent. Only 1% indicated otherwise.
- **Soliciting Sex Workers**: About 99% correctly stated that it is not acceptable for aid workers to hire or solicit sex workers, regardless of the legality in the work country. Only 1% believed otherwise.
- **Reporting SEA within the Organization**: A significant 99.7% agreed that it is their responsibility to report instances of sexual exploitation and abuse within their organization.
- **Reporting SEA Outside the Organization**: Approximately 94% felt it was their responsibility to report sexual exploitation and abuse by individuals from other organizations, with 6% disagreeing.
- **Assistance to Victims**: About 95% rightly indicated that victim assistance should not be conditional on cooperation with investigations, while 5% disagreed.

In terms of reporting, 95% of respondents reported that they knew the steps they needed to take if they heard a rumor of SEA or became aware of a risk of SEA. Additionally, 92% of respondents reported that their organization provided clear information on how to report SEA, and 86% reported that their organization provided clear information on where to direct or refer victims of SEA.

According to the survey, a large majority (97%) of respondents were unaware of any instances in the past 12 months where aid workers in Moldova exchanged money or commodities for sex, or engaged in other forms of SEA. However, among those who were aware of such instances (12 people), only 33% (4 people) reported them. All of the respondents who reported abuse felt that their organization took appropriate action in response.

Based on the survey data, several areas were identified where responses contrary to established principles or best practices were selected by 5% or more of respondents, indicating room for improvement:

- **Reporting responsibility for other organizations**: 6% of respondents felt it was not their responsibility to report an act of sexual exploitation and abuse by an individual employed by another organization. This suggests that there is a need to clarify the universal obligation to report SEA incidents, regardless of organizational affiliation.
- **Conditional assistance for victims**: 5% of respondents believed that victims of SEA are only eligible for assistance if they cooperate with investigations. This is a critical area that requires strengthening messaging of the notion that assistance to victims is a priority and it is not conditional to collaboration nor participation in investigations.
- **Steps to take on reporting**: 5% of respondents were not aware of the steps they need to take if they hear a rumor of SEA or become aware of a risk. In addition, 8% of respondents stated their organization does not provide clear information on how to report SEA. Improvements in communication about reporting mechanisms are needed.
- **Directing/referring victims**: 14% of respondents were not aware of where to direct or refer victims of SEA. This is an important area that may require additional focus to improve awareness on safe and confidential referrals, and availability of services.
- **Fear of retaliation**: 5% of respondents felt they could not report an instance of SEA without fear of retaliation. Promoting safe and confidential reporting mechanisms, as well as putting in place whistleblowers protection mechanisms is crucial for creating a safe reporting environment, and the PSEA Network shall strengthen work with Senior Management Teams to highlight the importance of ensuring an environment where people feel and are safe when reporting.

PSEA RISKS RELATED TO LEADERSHIP, STAFFING, ORGANIZATIONAL CULTURE & PRACTICES

Leadership & Staffing

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Limited Capacity for SEA Investigations: national and local organizations often lack the resources to conduct thorough investigations of SEA cases.	Provide support and resources to smaller organizations to develop their capacity to investigate SEA cases. This could include training, shared resources (pool of local investigators), or collaborative investigation mechanisms.	PSEA Network and Taskforce
Inadequate Reference Checks and Vetting Procedures: A significant number of organizations, especially Moldovan NGOs, do not sufficiently implement reference checks and vetting, increasing the risk of hiring individuals with a history of SEA or harassment.	Encourage and assist all organizations in implementing comprehensive reference checks and vetting procedures, ensuring they align with the "clear-check" or Misconduct Disclosure Scheme. Promote universal roll out of Misconduct Disclosure Scheme	PSEA Network and Taskforce UNCT Operations Management Team (OMT)
Limited Accessibility of Reporting Channels: Many organizations have not adequately established safe, confidential, and context-specific reporting channels, particularly smaller organizations.	Work to make reporting channels more accessible, especially in smaller organizations, ensuring they are safe, confidential, and culturally appropriate.	PSEA Network and Taskforce AAP Task Force
Variability in PSEA Policy Implementation: There is a disparity in the adoption of PSEA policies, with local CSOs less likely to have such policies compared to larger organizations.	Increase efforts to ensure all organizations, particularly local CSOs, adopt and implement effective PSEA policies. This can involve training, sharing best practices, and providing templates or guidance. Increase efforts to ensure all organizations, particularly local CSOs, adopt and implement effective PSEA policies. This can involve training, sharing best practices, and providing templates or guidance. Continue to support UN Agencies to implement the UN Implementing Partner PSEA Capacity Assessment in a coordinated manner, and usage of the UNPP PSEA Module.	PSEA Network and Taskforce Gender Task Force (and UNCT GTG)
Inconsistencies in Code of Conduct Translation and Availability: Codes of Conduct are not always translated or made available to individuals receiving aid, limiting their awareness of rights and reporting channels.	Ensure that Codes of Conduct are translated into relevant languages and are readily available to all individuals receiving aid, enhancing their awareness of their rights and available reporting mechanisms.	PSEA Network and Taskforce

Organizational Culture & Practices

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Responsibility for Reporting in Other Organizations: 6% of respondents of the Perception Survey with Aid Workers believed it was not their responsibility to report SEA in other organizations, indicating a gap in understanding of universal reporting obligations.	Emphasize through training and communication that all staff, regardless of their organization, have a responsibility to report SEA incidents.	PSEA Network and Taskforce
Conditional Assistance for Victims: 5% of respondents believed that victims of SEA are only eligible for assistance if they cooperate with investigations.	Reinforce the principle that assistance to SEA victims should never be conditional on their participation in investigations.	PSEA Network and Taskforce
Uncertainty in Reporting Steps: 5% of respondents were not aware of the steps they need to take if they hear a rumor of SEA or become aware of a risk. Additionally, 8% stated their organization does not provide clear information on how to report SEA.	Improve internal communication to ensure all staff are aware of the steps to report SEA and understand the available reporting mechanisms.	PSEA Network and Taskforce
Lack of Awareness in Referring Victims: 14% of respondents were not aware of where to direct or refer victims of SEA.	Provide detailed training and resources on how to safely and confidentially refer victims to appropriate services using established GBV referral pathways.	PSEA Network and Taskforce GBV SWG Child Protection SWG
Fear of Retaliation in Reporting: 5% of respondents felt they could not report an instance of SEA without fear of retaliation.	Implement and promote whistleblower protection mechanisms to create a safe environment for reporting SEA without fear of retaliation.	PSEA Network and Taskforce UNCT RCF

3.2. RESPONSE MODALITIES

In 2022, the UNSDCF achieved a funding level of 79%, while the RRP reached 73%, indicating a relatively low funding gap compared to other development and humanitarian responses. While the SEARO methodology associates the prevalent response modalities in Moldova with increased SEA risk, with approximately 46% of the total funding requirements for the refugee response relying on the provision of multi-purpose cash assistance, food, and non-food items, the systems in place for managing, delivering, and monitoring the response were found to have a high capacity for preventing SEA risks. Overall, cash enrollment centers adhere to the Minimum Operational Standards, staff has been trained, and information on PSEA and reporting mechanisms is readily available, although there is a need to improve accessibility and inclusion - including for persons with disability and Roma people. A gap identified by this risk assessment pertains to churches and faith-based organizations, which were largely excluded from the assessment's scope. However, 77% of respondents of the PSEA Perception Survey with Individuals Receiving Aid indicated receiving assistance from these entities.

3.2.1.1. Funding for Food, Cash and NFI

The 2023 Refugee Response Plan (RRP) required 196,594,156 for the distribution of multi-purpose cash assistance (MPCA) or commodities (food and non-food items), out of a total of USD 426,961,899. This is significant as based on existing evidence, aid provided through commodities and physical aid supplies (such as food, cash, and non-food items) leads to a higher incidence of SEA than social services (such as training, building of social infrastructure, etc.) (SEARO 2022).

MPCA has been a cornerstone of the refugee response in Moldova, with over 160,000 refugees and vulnerable Moldovans benefitting from MPCA in the first two quarters of 2023. According to various assessments, cash is the preferred modality of assistance among refugees and is the most suitable modality for the response in Moldova given the functionality and accessibility of markets. The majority of MPCA is reimbursed by UNHCR, WFP, and partners, and MPCA activities are coordinated under the RCF Cash Working Group, led by UNHCR and the Ministry of Labor and Social Protection.

Enrollment of refugees in cash programs takes place at seven enrollment centers across Moldova, as well as through mobile teams. As part of a joint PSEA risk assessment, four of the seven cash enrollment centers were visited to assess their compliance with PSEA Minimum Operational Standards. In all assessed centers, staff working on cash programs had signed codes of conduct and undergone in-person PSEA training. While information on PSEA and reporting mechanisms was available in all of the centers, including in the form of posters or visit cards to be distributed during registration, the positioning of information in some centers should be improved to ensure visibility and privacy, allowing individuals to use QR codes that lead to reporting mechanisms without fear of being seen.

One critical area requiring improvement is accessibility for persons with disabilities in cash enrollment centers. This includes enhancing physical accessibility and providing information in accessible formats. In addition, in all centers - as in majority of RACs - information on PSEA and CFM was not available in formats suitable for children.

Despite limited distribution, NFIs and in-kind food are typically distributed at Refugee Accommodation Centers, which are areas with an elevated risk of SEA and often host the most vulnerable refugee populations in Moldova. This joint assessment identified a critical risk: according to a perception survey of individuals receiving aid, 77% of respondents affirmed receiving assistance from churches or faith-based organizations (FBOs). While the Refugee Coordination Forum includes a significant number of FBOs, with some actively participating in the PSEA Network, churches and FBO volunteer organizations have not been actively integrated into the network. Given their significant role in aid distribution in Moldova, close collaboration with FBOs, including religious leaders, is essential to promote PSEA integration into their assistance programs.

SAFETY ASSESSMENT OF REFUGEE ACCOMMODATION CENTERS

To better understand the SEA risks in Accredited RACs, UNHCR - in collaboration with WHO - conducted a Safety Assessment of Refugee Accommodation Centers as part of this Joint SEA Risk Assessment to evaluate various PSEA safety measures within the RACs. The assessment covered 39 RACs, with the following geographical distribution: 12 in the north, 7 in the south, 8 in the center and 12 in Chisinau. The total capacity of the assessed RACs was by the time of the assessment 2,470 places, with an occupancy rate of approx. 70%.

Based on the collected data, each RAC was assigned a safety index score that measures overall compliance with PSEA safety measures (table below). This index served as a tool for planning and prioritizing interventions. It also guided the development of a plan for the consolidation of RACs, offering people movement to safer RACs and prioritizing the closure of RACs with a higher risk of SEA. Data collection took place in May and June 2023, and RACs were closed in August 2023 based on this assessment.

The assessment revealed regional disparities in safety levels, with RACs in the South region scoring the highest average safety index of 67%, above the national average of 55%. This was primarily due to strengths in the level of compliance of PSEA minimum operational standards in relation to staffing (reference check, onboarding, training, gender parity), PSEA information accessibility and availability of services, including specialized services for victims of SEA. Conversely, the RACs in the Central region had the lowest Safety Index at 47%, largely due to weaknesses in staffing and child protection. Levels of disability inclusion across RACs was low or very low.

A similar assessment has not been done in Unaccredited RACs. However, in September 2022, the Refugee Coordination Forum Protection and Basic Needs Working Groups, conducted a rapid assessment of the 15 Unaccredited RACs identified. The findings of the assessment indicate that overall these RACs are well served and have on average good conditions, with no protection risks identified. While engagement with unaccredited RACs is not straightforward, it would be important to build trust with managers to ensure a similar SEA assessment as the one done in accredited RACs are done in those RACs.

SAFETY ACCESS INDEX THEMATIC AREAS

To establish the safety index, indicators covering the nine areas below were assessed:

- **Access Control**: Evaluates regulated access and identity verification for facility visitors, media, service providers and staff.
- **Information Availability:** Assesses availability and visibility of key humanitarian service information, inc. PSEA.
- **Accessibility for Persons with Disabilities**: Measures physical facility accessibility, inclusive information dissemination and tailored support to persons with disabilities.
- **Safe Disclosure**: Assesses access to safe and confidential reporting channels and communication channels.
- **Child Protection:** Examines child-friendly information provision, reporting channels, child friendly spaces , and staff capacities on child protection.
- **Staffing Protocols**: Considers staff vetting procedures, adherence to code of conduct, staff awareness of code of conduct, and gender balance among staff.
- **Lighting**: Assesses adequacy of lighting within the facility and surrounding areas.
- **Privacy Arrangements**: Measures privacy respect in sleeping arrangements and bathroom facilities.
- **Availability and Access to Service**s: Evaluates availability of/accessibility to services for GBV/SEA victims and survivors.

REFUGEE ACCOMMODATION CENTRE SAFETY INDEX OVERVIEW

Region	Access	Informa-tion	Accessib.	Disclos.	Child Prot.	Staffing	Lighting	Privacy	Services	Safety Index
South	94%	100%	100%	100%	100%	100%	100%	100%	100%	99%
North	100%	88%	75%	92%	78%	92%	100%	84%	100%	90%
North	76%	100%	38%	50%	100%	100%	79%	84%	100%	81%
South	82%	88%	13%	75%	78%	100%	100%	68%	100%	78%
South	71%	88%	50%	75%	61%	100%	100%	76%	80%	78%
North	94%	92%	38%	42%	67%	100%	100%	64%	100%	77%
North	76%	88%	25%	67%	78%	77%	100%	84%	100%	77%
Chişinău	100%	92%	0%	42%	67%	100%	100%	88%	100%	77%
South	94%	88%	13%	92%	44%	100%	79%	56%	100%	74%
Chişinău	88%	88%	0%	42%	67%	100%	100%	76%	100%	73%
Chişinău	65%	80%	63%	67%	72%	54%	100%	80%	70%	72%
Chişinău	88%	100%	25%	42%	50%	77%	86%	88%	80%	71%
Center	47%	92%	63%	67%	78%	8%	86%	88%	100%	70%
Center	65%	80%	38%	75%	33%	77%	100%	60%	100%	70%
Chişinău	76%	28%	38%	50%	33%	100%	79%	68%	100%	64%
Chişinău	41%	60%	38%	75%	33%	77%	93%	68%	70%	62%
South	24%	32%	75%	50%	67%	77%	79%	88%	50%	60%
North	94%	88%	13%	42%	33%	92%	79%	64%	20%	58%
South	65%	40%	25%	25%	67%	92%	43%	60%	100%	57%
North	59%	28%	0%	67%	67%	54%	100%	72%	70%	57%
South	53%	80%	0%	42%	61%	77%	79%	52%	70%	57%
Chişinău	41%	80%	50%	67%	0%	31%	100%	68%	70%	56%
Chişinău	47%	28%	25%	42%	33%	100%	86%	72%	70%	56%
Chişinău	65%	56%	25%	17%	17%	100%	36%	72%	100%	54%
Center	59%	8%	0%	42%	33%	54%	100%	56%	100%	50%
North	82%	8%	63%	67%	0%	23%	93%	44%	50%	48%
North	24%	56%	0%	67%	50%	23%	43%	40%	70%	41%
Center	41%	60%	25%	75%	0%	23%	79%	20%	40%	40%
North	94%	28%	0%	17%	50%	31%	43%	44%	40%	39%
Center	47%	16%	0%	42%	17%	0%	100%	32%	80%	37%
Center	88%	52%	0%	17%	50%	8%	36%	28%	50%	37%
Center	94%	28%	0%	17%	0%	8%	43%	36%	70%	33%

3.2.2.1. Gaps in Funding and Activities

In 2022, under the UNSDCF, the United Nations in Moldova successfully secured approximately USD 59,993,693 in grant-based financing for implementing the joint development work plan. Of this total, USD 17.1 million were dedicated to social services-related activities. As of October 2023, the 2023 joint development work plan has an overall funding requirement of USD 189 million, out of which USD 149.7 million (79.2%) is available. Gender Equality (SDG 5) has a total funding requirement of USD 16.8 million and is 96.5% funded.

The 2022 RRP had a total envelope of USD 391,539,208, out of which 286,856,129 USD were funded (73%). The refugee response to the Ukraine situation in Moldova has been characterized by a satisfactory level of funding, which has allowed aid organizations to effectively respond to the needs of both refugees and

affected host community members. Out of the 250,000 individuals targeted in 2022, 130,000 were reached, while, as of June 2023, the 2023 RRP has a 51% of funding level, and has reached 160,000 individuals out of the 200,000 year target.

In 2024, funding and assistance are expected to decline due to lower planning figures, less acute needs compared to the initial response phase, some integration of refugees into government support, and emerging crises in other regions of the world likely to reduce humanitarian funding for the refugee influx in Moldova. In this context, it will be crucial to ensure proper identification, outreach, and referral for assistance to individuals facing acute levels of socio-economic vulnerability and those at higher risk of marginalization. Targeted assistance and robust safeguarding mechanisms are essential, as reduced assistance availability may increase SEA risks.

PSEA RISKS RELATED TO OPERATIONAL DESIGN & MANAGEMENT, AND GAPS IN FUNDING AND ACTIVITIES

Operational Design & Management

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Increased SEA Risk with Cash and In-Kind Assistance: The distribution of multi-purpose cash (MPCA) and in kind assistance (food and non-food items) which constitutes a significant portion of the RRP budget, is associated with a higher incidence of SEA.	Continue to implement PSEA protocols in the distribution of MPCA and commodities, including monitoring and reporting mechanisms.	Basic Needs WG Cash WG
Accessibility Issues at Cash Enrollment Centers: Cash enrollment centers have challenges with physical accessibility and providing information in formats accessible to persons with disabilities.	Improve physical accessibility and information formats in cash enrollment centers.	Disability & Age Task Force (and UNCT DITF) Cash WG

Refugee Accommodation Centers

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Elevated SEA Risk in Refugee Accommodation Centers: The distribution of in-kind food and non-food items (NFIs) in RACs, which host vulnerable refugee populations, presents an elevated risk of SEA.	Intensify SEA monitoring and reporting mechanisms in RACs, particularly during the distribution of NFIs and food.	Basic Needs WG
Regional Disparities in Safety Levels of RACs: Variations in compliance with PSEA safety measures across regions, with the Central region scoring the lowest.	Focus on improving PSEA safety measures in RACs with lower safety scores, particularly in the Central region.	Basic Needs WG
Weaknesses in Staffing and Child Protection: Certain RACs, especially in the Central region, have weaknesses in staffing, including reference checks, onboarding, training, and child protection measures.	Expand capacity building activities on PSEA for RAC managers and RAC staff. Support RAC managers to integrate PSEA to RAC management to ensure compliance with operational standards	Basic Needs WG Child Protection SWG
Low Levels of Disability Inclusion: Inadequate inclusion of persons with disabilities in RACs, leading to potential marginalization and increased vulnerability.	Develop and integrate disability inclusion strategies in all RACs to provide accessible services and protection.	Disability & Age Task Force (and UNCT DITF) Basic Need WG

Gaps in Funding and Activities

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Decrease in Funding for 2024: The expected decline in funding and assistance in 2024 could lead to reduced support for refugees and host communities, potentially increasing their vulnerability to SEA.	Prioritize and allocate available resources efficiently to ensure that the most vulnerable groups continue to receive essential support despite funding cuts. Intensify SEA monitoring and reporting mechanisms, particularly in areas or among groups where assistance is reduced, to quickly identify and address potential SEA incidents. Continue to strengthen the capacity of local NGOs and community-based organizations to respond to SEA risks and provide assistance, especially as international presence diminishes.	PSEA Network and Taskforce Basic Needs WG Cash WG Protection WG
Challenges in Targeting Vulnerable Groups: As funding decreases, the challenge of properly identifying and assisting those facing acute socio-economic vulnerabilities and at higher risk of marginalization increases, also contributing to increased SEA risks.	Strengthen identification of individuals at acute socio-economic risk or those more likely to be marginalized, ensuring they are prioritized for assistance.	Basic Needs WG Cash WG Protection WG

4. THE PROTECTIVE ENVIRONMENT

This dimension reflects the specific capacities and protective measures that are put in place to reduce, identify, and address incidents of SEA. The higher the capacities identified, the lesser the risk of SEA. Unlike the rest of the dimensions, the higher the results on its components, the lower the risk of SEA—although the index has normalized scores, so high scores indicate high risk.

The protective environment is seen as the structures and resources in place to mitigate the impact and prevent the occurrence of SEA. The dimension also assumes that the better the accountability systems in place to report any incident of SEA, and the higher access to services for the victims/survivors, the lower the risk of perpetuating SEA. (SEARO, 2022)

Indicator	Value	Year	Source
4.1 Capacity & Resource	5	2023	
4.1.1 Coordination & Leadership	4.4	2023	
4.1.1.1 Inter-agency Structure			
1) Is there a PSEA Network in place with clear TORs;	Yes	2023	
2) Is the Network formally led by co-chairs;	Yes	2023	
3) Is the Network formally led or supported by a PSEA Coordinator.	Yes	2023	
4) Has an Action Plan been submitted to the OCSEA?	Yes	2023	
4.1.1.2. Inter-Agency Coordination			
1) Is a coordinator present	Yes	2023	
2) what is the seniority of the PSEA Coordinator	P3		
3) How much of the PSEA Coordinator time is dedicated to PSEA Inter-Agency Coordination	40%		
4) What type of contract do the PSEA Coordinator has	Fixed		
5) What is the duration of the PSEA Coordinator deployment	Until 2025		
6) Have the PSEA coordinator received PSEA Coordination training	Yes	UNHCR Training	
4.1.2 Funding & Resources	5.5	2023	
4.1.2.1 RRP Funds allocated to GBV and Child Protection			
Percentage of funds in the RRP earmarked for GBV and Child Protection	5.5 (7.5%)	2023	
4.2 Mechanisms & Accountability	5	2023	
4.2.1 Survivor Assistance	5	2023	
4.2.2.1 Victim / Survivor Access to Dedicated Resources	5	2023	
4.2.2 Reporting & Accountability	4.9	2023	
4.2.2.1 Interagency Reporting Mechanisms			
1.A) Status of development and implementation of PSEA SOPs across the response for prompt, safe and survivor-centered investigations.	0.8		
1.B) SEA information sharing SOPs Complying with quality criteria.	0.75		
1.C) Reports on allegations have been shared in 2023.	Yes		
2.A) SEA information sharing SOPs include what anonymized information is to be shared by whom, how often, for which purposes and how to safely store information shared.	1		
3.A) Number of allegations reported to the PSEA Network per month	Yes		

4.1. CAPACITY & RESOURCES

In 2023, the PSEA Action Plan was fully funded, with the entire $314,500 secured. Gender-Based Violence and Child Protection activities accounted for 7.5% of the RRP whilst GBV activities accounted for 4% of the UNSDCF. The PSEA Network and PSEA Task Force, the designated coordination structures, convene regularly. The inter-agency coordinator dedicates 40% of their time to PSEA coordination, promoting PSEA integration into humanitarian and development programs in Moldova, while receiving additional human resource support. However, it is crucial to advocate for a full-time national staff member who can bridge coordination requirements between humanitarian and development actors, while strengthening the localization of PSEA efforts.

4.1.1.1. Inter-Agency PSEA Structure

The Moldova PSEA Network, an inter-agency coordination body accountable to the Resident Coordinator, the UN Country Team (UNCT), the Refugee Coordinator (UNHCR Representative), and the Refugee Coordination Forum, oversees system-wide PSEA efforts. As the refugee situation is the primary humanitarian concern in Moldova and has been the largest component of UN programs in the country since 2022, UNHCR, in accordance with its mandated accountabilities under the Refugee Coordination Moldova (RCM), is responsible for coordinating PSEA in Moldova. The PSEA Coordinator is located within the UNHCR office and has dual reporting lines to the Resident Coordinator and UNHCR Representative. This aligns with the IASC Vision and Strategy on PSEA (2022-2026) and the in-country PSEA Coordinator Generic Terms of Reference.

As of October 2023, the PSEA Network comprises 56 organizations with formally designated PSEA Focal Points, including UN Entities, NGOs, OSCE, and IFRC. In 2023, the PSEA Network developed an Action Plan, submitted to the OSCSEA in November 2022, outlining key PSEA activities focused on capacity building, awareness raising, strengthening of Complaint and Feedback mechanisms, and collaboration with the GBV and Child Protection Working Groups on assistance to survivors. The Action Plan has a total funding requirement of 314,500 USD, which was fully funded by contributions from various organizations following strong buy-in of PSEA integration by the UNCT and RCF leadership. As of October 2023, the Network is co-chaired by Plan International and UNHCR.

Within the PSEA Network, a PSEAH Task Force, co-chaired by WHO and UNICEF, provides technical support and coordination focusing on UN-related PSEAH requirements particularly on development, and related engagement with the Government, while the overall network serves as a wider platform bringing together representatives of both UN, NNGOs, and INGOs. The PSEAH Task Force differently from the PSEA Network, also focuses on Sexual Harassment. The PSEA Network and the PSEAH Task Force operate under updated Terms of Reference (TORs).

4.1.1.2. Inter-Agency PSEA Coordination

As the refugee situation is the primary humanitarian concern in Moldova and has been the largest component of UN programs in the country since 2022, the PSEA Coordination responsibility is managed by UNHCR in Moldova and the PSEA Network is led by a P3 PSEA Coordinator, who balances the responsibilities of PSEA Coordinator with those of Inter-Agency Coordination Officer, supporting UNHCR in its role as RCF and RRP Coordinator. The coordinator dedicates 40% of their time to PSEA inter-agency coordination and holds a fixed-term appointment contract until 2025. The coordinator has received comprehensive PSEA training.

While combining the PSEA Coordinator and Inter-Agency Coordinator roles positions the coordinator favorably to promote PSEA integration in Moldova's refugee response, the workload poses serious challenges to their ability to sustainably manage key inter-agency PSEA processes.

On the one hand, the combined role allows the coordinator to effectively push for good practices, such as including PSEA in the RRP, establishing mandatory PSEA requirements for RRP pledging partners, promoting and delivering comprehensive inter-agency PSEA trainings, and integrating PSEA into inter-agency CFMs. However, this dual responsibility also limits their capacity to closely monitor and follow up on key inter-agency PSEA processes.

This limitation has been partially addressed by UNHCR hiring dedicated staff to assist the coordinator in PSEA activities, along with support from dedicated PSEA staff from other agencies. However, such an arrangement poses significant risks of PSEA not being prioritized if there is no strong commitment from the position incumbent and a supportive environment.

While the PSEA Network in Moldova remained operational and effective despite this situation, it is reasonable to assume that a 100% dedicated position would have enabled the Network to achieve a greater number of its annual action plan objectives. In the perspective of a stable or decreasing refugees' presence and consequent scale-down of the response, it would be recommended to plan UNCT PSEA Coordination capacity. This would require the establishment of a UNCT common basket and would support both a PSEA Task Force Coordinator r position, and PSEA annual Action Plan activities in development settings. The PSEA Task Force Coordinator would maintain the ongoing good practice of close coordination and collaboration with the PSEA Network Coordinator, hosted and funded by UNHCR as the mandated agency leading and overseeing PSEA in the refugee response.

PSEA RISKS RELATED TO COORDINATION & LEADERSHIP

Risk	Risk Mitigation and Prevention Measure	Relevant Sectors
Dual Role of PSEA Coordinator: The PSEA Coordinator, also serving as the Inter-Agency Coordination Officer, may face challenges due to the dual responsibilities. The effectiveness of PSEA initiatives heavily relies on the commitment of the current position incumbent and support from other agencies, posing risks if these are not consistently strong.	Consider establishing a fully dedicated PSEA Coordinator position.	UNHCR UNCT
Potential Challenges in Sustaining PSEA Momentum: As the refugee situation stabilizes or decreases, there is a risk that PSEA might not be prioritized, especially if responsibilities are not clearly defined in a scaled-down response.	Strengthen UNCT PSEA Coordination capacity, with dedicated funding from a UNCT common basket for both a UN PSEA Task Force PSEA Coordinator position and annual action plan activities in development settings, while coordinating with UNHCR as the mandated agency leading and overseeing PSEA in the refugee response.	UNHCR UNCT
Limited Integration of Faith-based organizations (FBOs) in PSEA Network: FBOs, despite their significant role in aid distribution, are not actively integrated into the PSEA Network.	Actively involve FBOs and religious leaders in the PSEA Network, providing them with training and resources to integrate PSEA measures into their assistance programs.	PSEA Network and Taskforce AAP Task Force

4.1.2.1. RP funds allocated to GBV and Child Protection

From the total 2023 RRP allocation of $426,961,889, $31,903,479 was earmarked for GBV and child protection. In 2022, out of a total request of $391,539,208, $38,612,013 was allocated for these same critical areas. This represents an average of 7.5% of the total requirements for both years.

Within the framework of the SEARO Methodology, the scale of funding requested for GBV and child protection serves as a proxy indicator of the humanitarian system's commitment to addressing GBV. However, when dedicated PSEA funding is available, this proxy indicator is superseded by the actual coverage of PSEA

funds in relation to the identified needs of the inter-agency PSEA Action Plan.

In 2023, the Action Plan had a total funding requirement of $314,500, which was fully met through contributions from various organizations, demonstrating a strong commitment to PSEA integration by the UNCT and RCF leadership.

In 2023, the financial resources for GBV activities under the UNSDCF amounted to $6,000,000 or 4% of the total. While this figure is not considered part of the SEARO Methodology, it is relevant to mention these figures for Moldova considering the relevant development programming implemented by UN agencies, funds and programmes in the country.

4.2. MECHANISMS & ACCOUNTABILITY

> As of October 2023, no officially reported cases of sexual exploitation and abuse (SEA) involving UN or partners in Moldova were identified through available agency-level and inter-agency complaints and feedback mechanisms, compared to 5 cases in 2022. Since no cases were reported, the accessibility of assistance and services to support victims/survivors could not be assessed by this risk assessment. Areas for improvement include measures to cultivate trust and a better understanding of the barriers to reporting for SEA and GBV survivors; strengthening awareness of support services, which were only known to 43% of respondents participating in the Perception Survey with Individuals Receiving Aid; and increasing RACs' staff capacity to safely refer individuals.

4.2.1.1. Victim/Survivor Access to Dedicated Resources

As of October 2023, there have been no officially reported cases of sexual exploitation and abuse (SEA) involving UN personnel or partners in Moldova in 2023. While no formal allegations have been received through inter-agency mechanisms, rumors have been identified and addressed. However, no complaints, either anonymous or identified, have been filed in connection with these rumors.

In 2022, five allegations were received through the Inter-Agency Complaint Mechanism. Three of these complaints referred to a single incident, while in the other two cases, the survivor's identity was unknown. In one of these cases, the identity of the alleged perpetrator was also unknown.

In a perception survey conducted among aid workers, 8 individuals reported witnessing SEA incidents in the last 12 months, and 4 affirmed having reported them. These cases may not be reflected in the iREPORT Dashboard[6] for Moldova as they may involve non-UN partners or personnel. Alternatively, the incidents identified by respondents may not be incidents of SEA but be other forms of GBV. Finally, there is a possibility that UN personnel and partners are not adequately informing the Resident Coordinator about SEA allegations.

Since no SEA cases have been reported through inter-agency mechanisms or UN reporting channels, this indicator cannot accurately assess the accessibility of assistance and services available to support survivors. Despite this limitation, the data gathered during this SEA Risk Assessment offers valuable insights into survivor assistance in Moldova.

During the Safety Assessment of RACs, specific questions were asked about the availability and accessibility of specialized services for survivors. According to the final results, the national average score for the availability and accessibility of such services in RACs stands at 71%.

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6   The iReport SEA Dashboard is a UN mechanism to track and share information with in-country UN senior most officials. All UN agencies and organizations receiving funding from the UN that receive a complaint are required to inform the UN's most senior official within 24 hours.

This overall positive performance is largely attributed to the widespread presence of Refugee Coordination Forum in RACs across the country. These partners, through initiatives such as safe spaces and mobile teams, including Blue Dot and Orange Safe Spaces, along with nearby government facilities like hospitals and social assistance offices, play a crucial role in providing support services.

While MHPSS services were available and accessible at all RACs in the Centre Region, the North Region lags behind with 58%. Moreover, the percentage of RACs with staff trained to safely refer individuals to services varies from 86% in the South to 50% in the Centre.

This inconsistency is further highlighted by respondents from interviews, where only 43% are aware of services to support victims of inappropriate behavior by humanitarian workers. Representatives from NGOs emphasized the need for not just reporting mechanisms but also effective mechanisms for processing SEA incidents, including ensuring assistance to survivors.

During FGDs, children expressed a high level of trust that perpetrators would be held accountable, and that support would be provided to victims. However, it's important to note that this finding is limited by the selection of children participating in the FGDs which were those targeted by NGO partner activities.

Support services to survivors

The legal framework of the Republic of Moldova upholds the right of survivors to medical, legal, psychological, and social support, and the provision of such services is not contingent upon the initiation of criminal proceedings. Public services are complemented by support from civil society, particularly women-led and women's rights organizations, and international organizations. The provision of government social services to victims of violence is constrained by limited funding, resulting in an understaffed social welfare system. Social workers are underpaid and face a caseload exceeding the recommended threshold. The situation is even more dire in rural areas, where access to social services is severely limited (GREVIO, 2023). In addition to the limited coordination between law enforcement agencies, the justice system, social services, and NGOs providing support to victims of violence, these victims also face barriers in accessing healthcare. Often lacking medical insurance, they struggle to access quality healthcare for their long-term health problems, which are not adequately covered by the state's health insurance fund (ibidem). Additionally, GBV experts have identified a knowledge gap among healthcare professionals regarding specialized services for women victims of violence. This lack of knowledge hinders their ability to make safe and timely referrals to support services, compromising the effectiveness of what is often the first and sometimes the only entry point for women and child victims of violence (ibidem).

PSEA RISKS RELATED TO SURVIVOR ASSISTANCE

Survivor Assistance		
Risk	**Risk Mitigation and Prevention Measure**	**Relevant Sectors**
Limited Awareness of Support Services: The fact that only 43% of respondents participating in the Perception Survey with Individuals receiving Aid were aware of services to support victims of inappropriate behavior by humanitarian workers highlights a gap in awareness.	Conduct targeted awareness campaigns to inform both aid workers and beneficiaries about available support services for SEA survivors.	PSEA Network and Taskforce GBV SWG CP SWG AAP Task Force
Limited Service Accessibility: The availability and accessibility of specialized services for GBV survivors, including SEA, vary across regions, especially in rural areas.	Collaborate with relevant stakeholders, including government institutions, to enhance the capacity of local actors to provide specialized services for GBV survivors. Partner with organizations to strengthen the capacity of social assistants and local CSOs in identifying, referring, and providing specialized services for GBV survivors. Deploy mobile teams to provide services in areas with limited service coverage, particularly rural areas, ensuring accessibility for individuals facing challenges in accessing services for various reasons.	Results Group 1 GBV SWG CP SWG Gender Taskforce PSEA Network and Task Force
Understaffing and Overburden in Social Services: The social welfare system is understaffed and faces a high caseload, particularly in rural areas.	Advocate for increased funding and resources for social services, and support inclusion of refugees.	Results Group 1 Protection WG GBV SWG CP SWG
Barriers in Healthcare Access for Victims: Victims often lack medical insurance and face barriers in accessing quality healthcare. Knowledge Gap Among Healthcare Professionals: There is a lack of knowledge about specialized services for victims of violence, hindering effective referrals.	Collaborate with the healthcare sector to ensure that victims of SEA receive necessary medical support regardless of their insurance status. Train healthcare professionals in identifying and referring victims of violence to appropriate services. Implement targeted training programs for healthcare workers on SEA and GBV. Develop and distribute resource guides detailing referral pathways and support services available for victims.	Results Group 1 Protection WG GBV SWG CP SWG Health and Nutrition WG GBV SWG CP SWG Health and Nutrition WG

4.2.2.1. Interagency Reporting Mechanisms

In November 2022, the Inter-Agency Standard Operating Procedures for Providing Assistance to Survivors and Recording and Processing Sexual Exploitation and Abuse Complaints by Humanitarian and Development Actors in Moldova were formally adopted by the PSEA Network. Since then, two workshops have been held for PSEA Focal Points to train them on the implementation of the SOPs. Additionally, several specific training sessions have been conducted covering different aspects of the SOPs, including survivor assistance and reporting.

The SOP includes a section on data sharing, as well as a mechanism for partners to share information on allegations with the PSEA Network. For this purpose, an online SEA Complaint Notification Form has been created. The form is hosted on UNHCR servers to ensure data protection safeguards and requires organizations to report whenever an allegation is received or referred. However, since its establishment, the form has not received any notifications. There is a need to continue to raise awareness of the form among PSEA Focal Points and encourage its use by PSEA Network Partners.

At the inter-agency level, there are three inter-agency complaint and feedback channels that may receive SEA Complaints: the Refugee Green Line, an email address (moldova.help@unhcr.org), and an online complaint form available in English, Romanian, Russian, and Ukrainian. In 2023, rumors of SEA were received and followed upon through the Inter-Agency Complaint Mechanisms. However, it was not possible to

gather sufficient information to identify an alleged perpetrator, which has hindered the possibility of a formal investigation. Despite this, in one instance regarding a Refugee Accommodation Center, preventive measures and risk mitigation strategies were implemented. These actions encompass disseminating information about accessible support services and reporting mechanisms among residents, conducting site visits for monitoring purposes, and prioritizing the closure of this particular accommodation center in the context of the RAC Consolidation Process.

No SEA complaints were received through the Green Line in 2023, despite extensive PSEA training for its staff. In 2023, staff participated in three PSEA trainings, including a hands-on session on recording and referring of SEA complaints. From January to October 2023, the Refugee Green Line handled 52,400 calls. Refugees accounted for 78% of the calls, while host community members made up 21%, and organizations, local authorities, or other profiles accounted for 1%. Most inquiries concerned food and cash assistance. 314 calls identified as feedback and complaints were received in 2023. Over 90% of the feedback and complaints were related to cash assistance, primarily concerning overdue payments. A smaller portion addressed instances of discrimination in accessing services (especially by Roma refugees when accessing Refugee Accommodation Centers), situations of fraud on the delivery of assistance, and misconduct by humanitarian actors (excluding SEA).

Barrier to Reporting

One of the primary challenges faced by the PSEA Network in Moldova is the low rate of disclosure of GBV incidents, including SEA. There is a need to strengthen initiatives that not only raise awareness among refugees and host community members about existing reporting channels and available services but also cultivate trust and mitigate barriers that hinder survivors from reporting and seeking assistance. Recognizing this challenge, the GBV SWG and the PSEA Network have commissioned a study delving into the barriers to reporting in Moldova, which is due for completion in February 2024 and is expected to provide insights for evidence-based programming.

The Perception Survey with Individuals Receiving Aid (with a total of 113 respondents) and the MSNA (with a total of 890 respondents) provide some insights into attitudes towards reporting and barriers.

None of the individuals surveyed as part of the Perception Survey with Aid Workers mentioned being asked for favors or payment in exchange for humanitarian assistance or services. Most indicated that they were informed about how to report inappropriate behavior by humanitarian workers (64%), with the vast majority (88%) reporting that they would report humanitarian workers engaging in prohibited behavior such as asking for money or personal favors in exchange for humanitarian assistance. This is higher than the findings from the MSNA, according to which 68% of households are likely to report inappropriate behavior by aid workers, while 17% would not do so, and 14% are unsure.

Q13. Were you, or someone in your household, asked for favours or payment in exchange for humanitarian assistance or services? (one answer)", N=94, % of respondents that received assistance in the past year

100	Yes
	No

Among those who indicated they would not report (8 individuals), reasons included a lack of information on reporting procedures (3), a lack of trust in the reporting process (3), concerns about losing access to assistance or services (2), and fear of negative consequences or retaliation (2), among others. This information is consistent with findings from the MSNA, according to which 84% of refugees affirmed having access to safe and confidential reporting and information channels, while 11% affirmed not having access and 4% did not express an opinion.

Differently than in other humanitarian contexts where in-person feedback is preferred, respondents participating in the Perception Survey prefer to report cases of inappropriate behavior or provide feedback primarily through a hotline (89%) and secondly in person (52%). Email, text messages, mobile apps, online forms, and postal mail were less popular reporting channels among interviewees. Most respondents (79%)

indicated that they would be more inclined to report inappropriate behavior by a humanitarian worker if the reporting could be done anonymously (which may suggest a misconception since reports can be done anonymously). These findings are consistent with information gathered in the MSNA, as well as in the Information Ecosystem Assessment done by UNHCR and Internews during the first quarter of 2023. Both studies reveal a high level of trust among refugees towards the Refugee Green Line, underscoring the importance of continuously enhancing its capacity to address sensitive complaints, including SEA, while expanding in-person entry points for reporting SEA incidents.

According to findings from FGDs, factors that hinder reporting include societal negative perceptions around reporting (as mentioned by one of the participants "[in Moldova], the local community is not accustomed to reporting"), lack of information and trust in reporting channels, as well as the normalization of violence, which may hinder individuals' ability to identify that they have been victims of SEA. While participants in general expressed a sense of safety when reporting misconduct, some mentioned safety concerns, including fear of retaliation, lack of a safe space for reporting and confidentiality issues. Suggested measures to overcome those barriers include reinforcing messages about available reporting mechanisms, providing clear information about what happens after a complaint is filed, ensuring accessibility of complaint forms – especially for Roma, Persons with Disabilities, and children. Additionally, the importance of engaging with community actors, including community leaders, caregivers, and teachers was highlighted.

Consistent with the findings of the Perception Survey, the Information Ecosystem Assessment conducted by Internews and UNHCR (2023) also highlights key barriers to reporting. The assessment revealed a general reluctance among individuals to provide feedback that could be perceived as ungrateful for the services received during the refugee response. Despite this hesitation, Ukrainian refugees felt more comfortable sharing their thoughts with Ukrainian researchers in focus group settings. This suggests that in-person discussions with fellow Ukrainians could help alleviate concerns about participating in CFMs, particularly if these conversations emphasize the importance of such feedback in improving aid operations. Survey participants from focus groups generally expressed approval for establishing CFM mechanisms both offline and online, including phone surveys.

The same assessment found that most Moldovans (75%) reported having feedback they would like to provide, but a quarter of respondents were hesitant to do so. Reasons for hesitation included a reluctance to complain (21%), a belief that nothing would change (15%), safety concerns (10%), and a preference not to answer (12%). Only 5% said they couldn't find a way to submit feedback.

Access to Information

One of the elements assessed as part of the Perception Survey with individuals receiving aid was the level of access to PSEA-related information, including awareness of the code of conduct, awareness of reporting channels, and standards of behavior by aid workers.

Respondents were generally satisfied with the quantity of information provided by organizations that support refugees and the existing communication channels ("We do not look for information by ourselves - it is always available [around us]"). However, this was not the case for information about how exactly to report misconduct.

During the FGDs, Roma respondents raised concerns regarding the accessibility of the existing communication channels. They pointed out that these channels are not universally accessible within their community, as not all members have the ability to read, write, or utilize a phone for internet browsing, which is often required for registering for assistance. Similarly, older people may miss crucial information because it is disseminated through social media. Children during FGDs reported that the vast majority would prefer to receive information via social media.

Respondents believed that the presence of numerous organizations and the dispersion of humanitarian information across different sites and platforms make it challenging to keep up with the information. They recommended creating a unified information platform that would gather information from all organizations

PERCEPTION SURVEY WITH INDIVIDUALS RECEIVING AID ASSISTANCE

As part of the Joint PSEA Risk Assessment, the PSEA Network conducted a Perception Survey with Individuals Receiving Aid Assistance to assess the level of satisfaction of individuals vis-à-vis the engagement with aid organizations and provision of aid, their level of awareness of aid workers' code of conduct, complaint and feedback mechanisms, and support services, as well as their views on reporting, including enabling factors and barriers. Data were collected through quantitative (survey) and qualitative (FGDs with Ukrainian refugees and NGOs supporting refugees) methods. The survey was conducted using a face-to-face CAPI (Computer-Assisted Personal Interview) method. One hundred and thirteen interviews were conducted among Ukrainian refugees. The survey data was collected between June 6 and June 12, 2023. The 14 FGDs were conducted with refugees (seven, including refugees living inside and outside RAC, persons with disabilities, Roma refugees, and children) and women-led NGOs working with refugees (one). The FGD data were collected between May 22 and August 25, 2023.

In accordance with the results of the study, most often refugees used in-person interactions and phone hotlines to get in contact with humanitarian workers or organizations. Hotlines were also one of the most frequently used and preferred methods of communication for obtaining information about the work and services provided by organizations that support refugees, in addition to social media pages such as Facebook, Viber, and Telegram, word-of-mouth and offline meetings at RACs. In general, refugees were satisfied with the quantity of information provided by organizations that support refugees, as well as with the behavior and assistance provided by humanitarian workers and organizations.

While conducting interviews with refugees, none of the interviewees mentioned that they had been asked for favours or payment in exchange for humanitarian assistance or services. However, there have also been registered cases of dissatisfaction with the behavior and assistance provided by humanitarian workers and organizations, primarily due to no changes after giving feedback or making complaints, a lack of respect for refugees' cultures, poor interactions with individual members of the refugee community, and refugees not being consulted about their needs.

When asked about encountering unfair, bad or inappropriate provision of aid services, respondents referred to rudeness, to eligibility criteria to obtain assistance or issues related to quality of goods and services, and none of the refugees or representatives of organizations that participated in the Focus Groups mentioned instances of Sexual Exploitation and Abuse.

Participants were generally aware about the fact that humanitarian workers must follow a code of conduct when supporting people and communities and that all assistance is free of charge. Most FGD participants were not informed about how exactly to report unfair, bad, or inappropriate behavior by someone working or volunteering for an organization supporting refugees, while refugees involved in the in-depth interviews mentioned being generally informed.

Overall, refugees declared that they would report humanitarian workers engaging in prohibited behavior, such as asking for money or personal favors in exchange for humanitarian assistance. They believed there are no concerns or issues related to the work of organizations providing aid to the refugees that should never be reported to anyone; it only depends on an individual's willingness to report. On the other hand, respondents believed they would never report problems or concerns related to personal issues they feel should be resolved independently, such as health problems or family relations. Refugees living in RACs, especially, tended not to report cases of inappropriate behavior by humanitarian workers. Those who chose to not report usually do so due to a lack of information on how to report, a lack of trust in the reporting process and gratefulness and perception of not having "serious problems".

Respondents preferred to report cases of inappropriate behavior or provide feedback through various methods, including hotlines, in-person communication, online reporting, handwritten notes, or face-to-face discussions. Additionally, refugees supported anonymous reporting when reporting inappropriate behavior by humanitarian workers.

supporting refugees or selecting one from existing pages/websites that are most used by refugees for setting up the unified platform.

Most respondents from interviews were aware that aid workers must follow a code of conduct (69%) and that all support provided by humanitarian workers is free of charge (95%). The majority of respondents were informed that asking for money, gifts, or personal favors in exchange for humanitarian assistance is prohibited (93%).

"Q8. Were you informed / Do you know that humanitarian workers must follow a code of conduct when supporting you? (one answer)", N=113, %

69	31	■ Yes
		■ No

"Q9. Were you informed / Do you know that all support provided by humanitarian workers - such a food, cash, clothes, transportation, and accommodation - is free of charge? (one answer)", N=113, %

95	5	■ Yes
		■ No

"Q10. Were you informed / Do you know that some behaviours by humanitarian workers, like asking for money, gifts, or personal favours in exchange of humanitarian assistance, are prohibited? (one answer)", N=113, %

93	7	■ Yes
		■ No

Satisfaction with Aid Workers and Assistance

According to the findings of the Perception Survey with Individuals Receiving Aid, 66% of households had contacted humanitarian workers or organizations, while 83% informed having received aid assistance in the past year. It was generally easy for 92% of households to get in touch with these organizations when they needed help. Respondents most often contacted humanitarian organizations in person (88%) or through a phone hotline (73%). In the previous year, respondents had received assistance from UN and UN-related organizations (98%), Churches/faith-based organizations (77%), and International organizations (67%).

92% of respondents found it generally very easy or somewhat easy to get in touch with humanitarian workers or organizations when in need of help. The most common methods for contacting the organization were face-to-face (58%) and by phone (48%).

Most of the respondents participating in the interviews were satisfied with the way humanitarian workers in their area behave (86%). Respondents who were not satisfied with the aid workers' behavior were asked the reasons for their dissatisfaction. The top four answers were:

- Nothing changed after feedback or complaints were made.
- Lack of respect for refugees' cultures/understanding of their situation.
- Lack of respect in interactions with individual members of refugees' communities.
- Refugees were not consulted about their needs.

No respondent mentioned that humanitarian workers had asked for favors in exchange for aid or services.

The MSNA data, which included a considerably larger sample (890 respondents), had slightly higher percentages: 97% of households were satisfied with the behavior of aid workers, while those unsatisfied (21 respondents) were mostly unsatisfied due to not being consulted on what they needed (52%), being treated disrespectfully (27%), not being provided feedback after submitting complaints (21%), and due to the fact that they perceived assistance as not being enough, useful, and/or of poor quality.

PSEA RISKS RELATED TO REPORTING & ACCOUNTABILITY

Reporting & Accountability		
Risk	**Risk Mitigation and Prevention Measure**	**Relevant Sectors**
Limited Accessibility of Complaint Mechanisms: Challenges in accessibility of complaint channels, especially for vulnerable groups like the Roma, persons with disabilities, and children, contributing to underreporting.	Ensure reporting mechanisms are easily accessible to all, including options for anonymous reporting, and are communicated effectively to all groups. Collaborate with community leaders, caregivers, and teachers to promote understanding and participation in reporting mechanisms. Provide regular training for staff and community actors on identifying and safely reporting SEA, with a focus on understanding the specific needs and challenges of diverse groups.	PSEA Network and Task Force AAP Task Force Disability & Age Task Force (and UNCT DITF) Roma Task Force Education WG Child Protection SWG
Hesitancy in Providing Feedback/Complaints: Reluctance among individuals to provide feedback due to fears of being perceived as ungrateful, and skepticism about the effectiveness of reporting, which may contribute to underreporting.	Engage in community dialogue and education to challenge negative perceptions around reporting and the normalization of violence. Work to build trust in the reporting process by demonstrating transparency, confidentiality, and effective response to complaints. Collaborate with community leaders, caregivers, and teachers to promote understanding and participation in reporting mechanisms. Recognize and address cultural sensitivities in communication and feedback processes, particularly in diverse communities.	PSEA Network and Task Force GBV SWG AAP Task Force Disability & Age Task Force (and UNCT DITF) Roma Task Force Education WG Child Protection SWG
Insufficient Information on Reporting Misconduct: Although respondents of the Perception Survey with Individuals receiving aid were generally aware of humanitarian codes of conduct and the fact that aid should be free, many lacked specific information on how to report misconduct, contributing to underreporting.	Enhance awareness and accessibility of reporting channels for SEA to encourage formal reporting among aid workers and address the issue of underreporting. Provide clear and detailed information about the steps to report misconduct, ensuring it is easily accessible and understandable to all individuals receiving aid. Address the specific needs of different groups (e.g., Roma, older people, children) by diversifying communication methods and ensuring information is accessible in various formats. Expand collaboration with health service providers and community-based organizations to address underreporting by increasing reporting channels, eliminating barriers to disclosure, and raising awareness among communities about their rights and reporting procedures, ensuring the use of culturally sensitive approaches.	PSEA Network and Task Force GBV SWG AAP Task Force Disability & Age Task Force (and UNCT DITF) Roma Task Force Education WG Child Protection SWG Health and Nutrition SWG

CONCLUSION

This inter-agency risk assessment employed the SEARO methodology to establish a national baseline of sexual exploitation and abuse risks in Moldova and determine the requirements for a relevant, coherent, effective, efficient, and sustainable intervention to prevent sexual exploitation and abuse.

The response operation in Moldova was funded at just under 80%, with the PSEA 2023 Action Plan fully funded, enabling the aid community to invest significant efforts in bolstering organizational capacity for PSEA. This included regular induction and refresher trainings, the development of Standard Operating Procedures on PSEA, and the establishment of inter-agency Complaint and Feedback Mechanisms.

The assessment concluded that the inter-agency approach broadly reflects international Protection from Sexual Exploitation, Abuse standards and commitments provided by the Inter-Agency Standing Committee, OECD-DAC, and the United Nations Secretary-General. Most organizations, particularly UN agencies and international or large CSOs, were found to have implemented basic requirements such as having a PSEA focal point, training personnel, and having a Code of Conduct.

While the humanitarian response in Moldova relies on high-risk modalities, with approximately 46% of the total funding delivered as multipurpose cash assistance, food, and non-food items, and with significant GBV risks, particularly domestic violence, with 34% of women having experienced physical or sexual violence by their partner, the systems in place were found to have a high capacity for preventing SEA risks.

The absence of officially reported cases of SEA involving UN or partners in Moldova may indicate a low risk but may also be explained by barriers to reporting, including mandatory reporting of GBV cases, as well as cultural factors, such as the perception among refugees of feeling ungrateful for the assistance received.

The sustainability of established prevention and response systems for PSEA in the context of a reduced humanitarian response requires an evolving architecture with a transition to an RCO-led PSEA Coordination structure with strong civil society participation, a UNCT common basket funding mechanism for PSEA activities, and a national PSEA Coordinator position to support the RCO and the UNCT in assuming the responsibilities currently held by UNHCR in its coordination role of the refugee response.

Critical areas for focus to ensure gaps in PSEA prevention and response mechanisms are filled include:

- Address the limited capacity to investigate SEA cases among Implementing Partners by establishing a pool of SEA Investigators, with SOPs for inter-agency support.
- Ensure consistent implementation of reference checks and vetting procedures to prevent re-hiring of perpetrators of sexual misconduct by promoting universal roll-out of the Misconduct Disclosure Scheme.
- Support small national CSOs to become compliant with Minimum Operational Standards on PSEA by rolling out dedicated capacity-building initiatives on PSEA policy and standards and reporting mechanisms.
- Strengthen the staffing and child protection systems of RACs and overall accessibility for persons with disabilities.
- Strengthen the awareness and availability of specialized GBV Services for victims/survivors, in particular, ensure awareness by aid workers of what services exist and how to access them and the right of the victim to assistance despite cooperation with investigations.
- Promote advocacy initiatives to support improvements on the national legal framework related to gender-based violence, and in particular, legislation on mandatory reporting, protection, and availability of services for sex workers and women with psychosocial and intellectual disabilities.

- Fill existing evidence gaps, particularly related to the SEA risks of faith-based organizations, churches as well as risks related to assistance in the Transnistrian region.
- Once available, follow up on the findings of the study on barriers to disclosure being conducted by the PSEA Network and the GBV SWG to address existing barriers.
- Increase availability and accessibility of complaints and feedback mechanisms, awareness of phone-based systems that are the preferred system for reporting by refugees, Codes of Conduct, particularly among people with disabilities and Roma communities.
- Ensure the sustainability of established prevention and response systems for PSEA in the context of a scaled-down humanitarian response by establishing a common basket funded by the UNCT for both the PSEA coordination position and annual action plan activities.

SOURCES:

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UNHCR, the UN Refugee Agency, is a global organization dedicated to saving lives, protecting rights and building a better future for people forced to flee their homes because of conflict and persecution. We lead international action to protect refugees, forcibly displaced communities, and stateless people. We deliver life-saving assistance, help safeguard fundamental human rights, and develop solutions that ensure people have a safe place called home where they can build a better future. We also work to ensure that stateless people are granted a nationality. We work in over 130 countries, using our expertise to protect and care for millions.