



Regional Refugee Response  
for the Ukraine Situation

SLOVAKIA  
OCTOBER 2022

# MULTI - SECTORAL NEEDS ASSESSMENT



THE MSNA WAS CONDUCTED IN THE FRAMEWORK OF:



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## About REACH

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

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## COVER PHOTOGRAPH:

Slovakia. Charity event Domov Pre Ukrajinu (Home for Ukraine) organized by UNHCR's NGO partners and supported by UNHCR  
Memo/Matt Rybansky

# List of acronyms

AAP	Accountability to Affected Population
CAPI	Computer-Assisted Personal Interviewing method
CC	Collective Centers
CP	Child Protection
GBV	Gender Based Violence
IASC	Inter-Agency Standing Committee
MHPSS	Mental Health and Psycho-social Support
MSNA	Multi-Sectoral Needs Assessment
NGO	Non-Governmental Organisation
PiN	People in Need
PS	Psychosocial support
UN	United Nations
UNHCR	United Nations High Commissioner for Refugees (UN Refugee Agency for Refugees)
WG-SS	Washington Group Short Set

# Geographical Classifications

Kraj: Highest-level administrative unit (region) in Slovakia.

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# Executive Summary

As of the 30th of August 2022, more than 7 million refugees have reportedly fled Ukraine, with more than 800,000 people have crossed from Ukraine to Slovakia Republic (hereafter, Slovakia) since 24th February, while more than 90,000 applied for Temporary Protection in Slovakia<sup>1</sup>. While Collective Centers (CC) are playing a key role in the humanitarian response, the overwhelming majority of refugees are residing outside of these centers. At the time of the initial discussion for the implementation of a Multi-Sectoral Needs Assessment (MSNA) in Slovakia, limited information was available to response actors regarding their demographic profile, household composition, humanitarian needs, movement intentions, or coping capacities.

Within the framework of the inter-agency Regional Refugee Response Plan (RRP) for the Ukraine refugee situation, and in particular its Slovakia RRP component, this MSNA was commissioned by UNHCR, the UN Refugee Agency and carried out by REACH, IMPACT Initiatives. UNHCR and People in Need (PIN) Slovakia supported the implementation of the assessment and in addition, the inter-agency Refugee Coordination Forum (RCF) in Slovakia, established by UNHCR, was actively involved during the different phases, in particular by mobilizing the sectoral Working Groups and Task Forces. The findings will be used for ensuring evidence-based

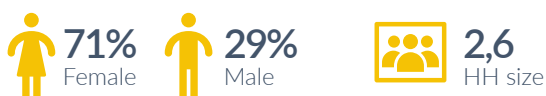
humanitarian interventions across Slovakia to respond to the needs of Ukrainian refugees. This report has been prepared in line with the Grand Bargain commitments towards improved harmonization and coordination of assessment exercises<sup>2</sup>.

This assessment was implemented between June and August 2022, following a quantitative approach reaching 724 households. Primary data was collected through a structured survey, which included multi-sectoral questions pertaining to both the individual and household level. The questionnaire was designed in cooperation between REACH and UNHCR, as well as the RCF Slovakia and sectoral leads. For more details on the methodology, please refer to the [Terms of Reference](#).

This report presents overall needs of Ukrainian refugees who fled to Slovakia due to the ongoing conflict in their country of origin. The analysis of the assessment data is presented across sectors, including protection, livelihoods, health, education, and accommodation, summarizing the demographics of the assessment sample and including cross-cutting indicators on accountability to affected populations (AAP) both for refugees' households living in collective centres (CC) and outside of CC. Key findings from the MSNA include, but are not limited to, the following:

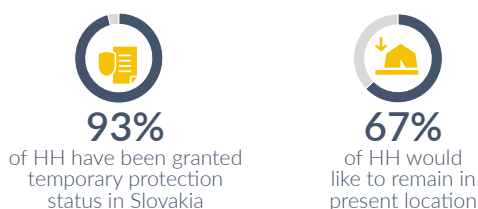
## Demographics

The large majority of household members in the assessment sample were females (71%). The average household was composed of 2.6 persons per household, meaning that there were between 2-3 individuals per household. Overall, 63% of households had at least one child. In fact, children represented 36% of household members, while older persons (60 years old and above) represented 12%.



## Protection

The majority of households interviewed (93%) have been granted temporary protection in Slovakia. Also, the majority of respondents have one or multiple household members who stayed behind in Ukraine. This concerns 71% of households living in CC and 67% of households living outside of CC.



Cases of discrimination based on nationality were mentioned only by 1% of respondents living in CC and 3% of those living outside of CC. The protection risks in relation to gender-based violence (GBV) focused on the perceptions on safety flagged by women and girls in the area where they were

living at the time of the interview. Railway stations and public transportation were thus cited as the most avoided places, with 7% of women and girls living in CC and 11% outside of CC avoiding or feeling unsafe about these places. Additionally, 6% of women and girls living in CC and 8% outside of CC were avoiding or feeling unsafe about places where ethnic minorities were living or gathering. When consulted about sporadic intention movements, two third of households intended to remain in their present location in Slovakia in the next three months (after the interview took place), while around 10% intended to go back to their oblast of origin in Ukraine, and 5% has expressed the intention to sporadically return to another oblast.

## CASH & Livelihoods

Most household members were highly educated, yet mostly unemployed. In addition, 79% of those who were working were in a different occupation than the one they had when they were living in Ukraine. The majority were in domestic work activities at the time of the survey, such as gardening, cleaning, and other duties in a private home. Regarding income composition, around 60% of respondents reported humanitarian assistance as one of their main sources of income, while only 36% mentioned salaried work.



<sup>1</sup> UNHCR Data Portal for Ukraine. Available [online](#).

<sup>2</sup> Grand Bargain commitments available [online](#).

The MSNA findings suggest that around a third of respondents were facing challenges to obtain enough money to cover the household's monthly needs, which this assessment found to be primarily food, but also rent for households living outside of CC. The majority of respondents reported benefitting from cash and food assistance through humanitarian aid, followed by a lower share who benefitted from shelter, clothes, as well as sanitation and hygiene products. However, the need for food, shelter and employment still remains high.

## Health

Almost one quarter of household members were found to be in need of healthcare, with the most pressing needs cited being for preventive consultation, acute and chronic communicable diseases. Out of ten household members who needed healthcare, eight could access it, but two could not. The large majority of children received measles vaccine, and the share of COVID-19 vaccine among the refugees was roughly equivalent to the national average. A third of households declared that at least one household member was so upset, anxious, worried, agitated, angry, or depressed that it was affecting the person's daily functioning. Among the 29 households living in CC and the 63 living outside of CC who sought for professional mental health support, a total of 9 and 33 respectively could not obtain the assistance and support they needed.



**80%**  
of HH members were able to access healthcare when needed



**29%**  
of HH reported having mental health needs

## Education

Education appears to be one of the core priorities as 36% of household members were children.



**52%**  
of HH reported planning to enrol their children in Slovakia for next academic year



**55%**  
of children attended Ukrainian distance learning regularly

Yet, 59% of children living in CC, and 57% of those living outside of CC were not enrolled at school in Slovakia in the last semester. Slovak classes appeared as the most needed educational aid for children and young adults by 17% of households living in CC and 29% of those living outside of CC.

## Accommodation

Most respondents indicated their intention to remain where they were accommodated at the time of the interview. More than half of the households living outside of a CC were in fact hosted by a host family for free. Yet, close to half of the households living outside of CC still had to make payments, which could be a source of additional challenges due to the increase of rent and energy costs coming next winter.



**43%**  
of HH reported living in collective centers



**45%**  
of HH reported living with host families or rented accommodation

## Accountability to affected population

The AAP indicators were included in the MSNA. More than 83% of the respondents were satisfied with the humanitarian assistance and humanitarian workers' behavior. The AAP is central to developing effective communication and community engagement strategies as well as understanding how affected populations want to receive information. In the assessment, 79% of households indicated no challenges to access information, and preferred social media, phone calls or messaging apps to provide feedback on sensitive issues or on the humanitarian aid received.



**79%**  
of HH reported no challenges to access information



**83%**  
of HH reported being satisfied with the humanitarian aid received

As the Ukraine crisis seem to become protracted, it becomes important for all actors who are involved in the response to the Ukrainian situation to have an understanding of the risks, constraints, and future opportunities that households can develop in order to increase their socio-economic resilience.

These findings aim to develop a clearer understanding of priority needs of Ukrainian refugee households and are a first step toward developing a durable solution to alleviate their vulnerabilities.

» Access the data on [UNHCR's MicroData Library](#)

*UNHCR's Microdata Library is a public online library containing anonymous microdata of persons affected by forced displacement collected by UNHCR, its partners and other third parties.*

# Introduction

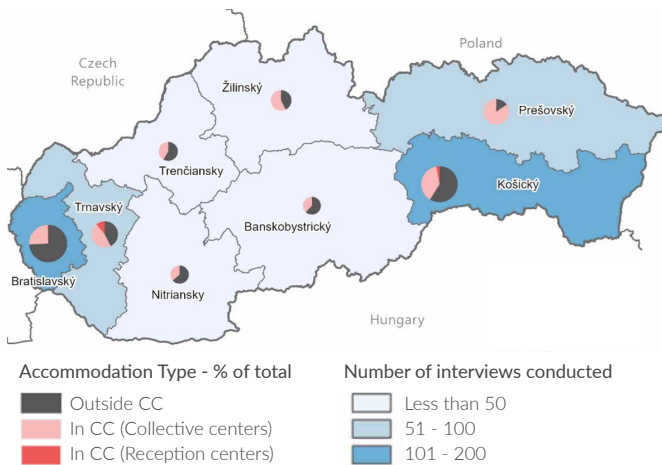
## Background

As the data on the refugee households from Ukraine living in Slovakia was limited at the time of designing the MSNA, there was a need for rapidly available needs information to inform humanitarian programming and strategy in the immediate and long-term interventions. In this connection, within the inter-agency Regional Refugee Response Plan (RRP) for the Ukraine refugee situation, UNHCR, the UN Refugee Agency commissioned REACH, IMPACT Initiatives to carry out this MSNA. UNHCR and People in Need (PIN) Slovakia supported the implementation of the assessment and in addition, the inter-agency Refugee Coordination Forum (RCF) in Slovakia, established by UNHCR, was actively involved. The MSNA was conducted to provide updated and an analysis on multi-sectoral needs and priorities for refugees in Slovakia, with the aim to better inform the response activities and effectively address the needs of refugees.

## Geographical coverage

The population of interest includes all refugees' households coming from Ukraine who have been displaced to Slovakia. The sample includes two distinct population strata: refugees living in CC, and refugees living outside of CC, at the time of the interview. Refugees living outside of CC covered a variety of accommodation types, including private rented accommodation (shared or not), paid hotel or hostel, paid and unpaid host family. The unit of measurement was primarily the hosted refugee-household, with specific indicators measured at the individual level through a roster approach. The regions with the most surveyed households are the Bratislavský and the Košický kraje.

MAP 1: ASSESSED AREAS



## Objectives

The 2022 MSNA provided a comprehensive, evidence-based understanding of the multi-sectoral needs of refugee households living in and outside of CC to better inform the ongoing humanitarian response activities and planning of UNHCR and partners on:

1. What are the most common demographic profiles comprising refugee households from Ukraine in Slovakia?
  - a. What is the average household size?
  - b. What proportion of households contain children (0-17 years)?
  - c. What is the gender and age composition of households?
  - d. What proportion of households contain vulnerable groups, including but not limited to pregnant or lactating women, older persons, or people with disabilities?
2. What are households' reported priority needs across the active sectors within the humanitarian response (specified below)?
  - a. Protection (including GBV and Child Protection (CP))
  - b. Health
  - c. Education
  - d. Accommodation
  - e. Livelihoods
3. To what extent do refugee households from Ukraine in Slovakia possess coping and resilience capacities, in the event of a protracted displacement?
  - a. What are households' current income, expenditure patterns?
  - b. What are the primary livelihoods sources for adult household members?
  - c. What are the most prevalent education levels attained and labor skills of adult household members?
  - d. What are the movement intentions of households in the next three months?
4. To what extent are refugee households able to access information and provide feedback regarding services, assistance, and humanitarian aid?
5. To what extent are households reportedly receiving assistance?
6. Which household profiles, as determined through research question 1, appear to have the highest needs across the assessed sectors?



## Methodology

The MSNA in Slovakia was implemented through a quantitative approach, in which primary data was collected through a structured, multi-sectoral survey. This survey included questions pertaining to both the individual and household level for all surveyed households. The questionnaire was designed in cooperation between REACH and UNHCR, as well as sectoral leads in Slovakia. The survey was conducted using two different sampling techniques: a purposive sampling for households living in CC, and a 2-stage random sampling not stratified for households living outside of CC. Data collection took place between the 18th of July and the 10th of August 2022. The assessment covered a total of 327 households living in CC, and 397 living outside of CC in Slovakia.

The sampling frame for refugees living in CC was based on the latest CC population figures collected by REACH and obtained from the UNHCR. Notably, the number of households in these centers was estimated based on the population size in each CC, divided by the average household size, which was estimated to be 3.5 members<sup>3</sup>. CC with a refugee population of less than 20 individuals were excluded from the assessment.

Regarding the sampling frame REACH conducted further scoping with United Nations (UN) agencies, and Non-Governmental Organisations (NGO) partners operating in host communities, to identify and estimate population data. In addition, to account for potential sudden movement in population, areas with less than 50 individuals registered were excluded.

## Limitations

**Sampling frame and representativeness:** Due to ambiguity in the first question of the questionnaire, people were initially disaggregated by the location where the interview took place (in CC or outside of CC) rather than where the respondents were living. As a result, 235 respondents interviewed outside of CC were in fact living in CC. Another 8 respondents were interviewed in CC, but lived outside of CC. After taking that into account, the sample was rearranged to capture households' living location, and not the place of interview. Thus, the final sample is composed of 327 households living in CC, and 397 living outside of CC. This is still in range of the minimum sampling frame initially targeted. However, since both samples were rearranged, data is not representative anymore, but instead only indicative. The reader should note that initial preliminary findings computed using a representative sample for households living in CC did not express a variation larger than 3% for most indicators compared to the current results for that stratum. Therefore,

even though indicative only, the following findings are still relevant and close to what was found with a representative sample for households living in CC. Results for household members living outside of CC were planned to be indicative only, even before the redistribution of observations.

**Perceptions:** Indicators related to service provision are based on respondents' perception and may not directly reflect the realities of service provision, whether it is from households living in CC or outside of CC.

**Timing of assessment:** When interpreting findings, users are informed that data collection was conducted between July and August 2022. Findings should be interpreted as a snapshot of the situation of refugees at that point in time.

**Unchecked information provided:** Regarding questions on vaccination status, the reader should note that the interviews were done face-to-face in public locations in which verification of responses was not made.

## Assessment process

This assessment employed a purposively selected, not statistically representative sample in CC, and a 2-stage random sampling not stratified for households living outside of CC. The sampling frame for households living in CC was produced using the UNHCR data based on a list of CC and the number of individuals living in the CC, one week before the start of data collection. CC with a reported population of less than 20 refugees were excluded from the sampling, in order to reduce the nonresponse rate for data collection. For the refugees living outside of CC, REACH contacted the rational local administration and asked for information about the number of registered refugees in each settlement. In order to ensure sufficient households for data collection, to filter locations with no refugees, areas with less than 50 registered refugees were excluded from the sampling. Findings are indicative only, statistically significant at a 95% confidence level and a 5% margin of error for results on households living outside of CC, and a 95% confidence level with a 10% margin of error for results on households living in CC.

TABLE 1: SAMPLING METHODOLOGY<sup>3</sup>

Strata	Estimated numbers of reachable individuals	Estimated number of reachable households	Minimum sampling frame	Minimum sampling frame + buffer	Achieved sample
In collective centers	2,149	611	90	100	327
Outside collective centers	76,452	21,844	284	567	397
Total	78,601	22,455	374	667	724

<sup>3</sup> The sampling frame in collective centers has been created based on the latest collective centers population figures collected by REACH and obtained from the Slovak National Statistical Office. The number of households was estimated based on the population size in each collective center divided by the average household size, which was estimated to be 3.5 members (based on the information available at the time of designing the evaluation). Collective centers with less than 20 individuals were excluded.

Regarding the sampling frame, REACH conducted further scoping with UN agencies, and NGO partners operating in host communities, to identify and estimate population data.

Quantitative data collection consisted of a multi-sectoral household-level survey conducted using the computer-assisted personal interviewing (CAPI) method. All interviews were conducted at the household level (featuring individual loop questions per household member). Findings are indicative only for households both in and outside of CC, at the 95% confidence level and 10% margin of error for results in CC; and respectively 95% and 5% for results of households outside of CC.

### Findings are indicative:

**In CC:** with a minimum 95% confidence level and 10% margin of error.

**Outside of CC:** with a minimum 95% confidence level and 5% margin of error.

Enumerators interviewed only adult members of the households. The respondent was asked questions to reflect the socio-economic status about the entire household, which in the case of refugee households included answering on behalf of any non-family members or members of other families living under the same roof with the respondent and sharing resources. This practice was adopted due to frequent resource and expenditure sharing between those refugees living in the same household, such as pooling

funds to buy food or pay rent. For certain indicators, such as health, education and the occurrence of difficulties, data was collected at the individual level, by means of asking the respondent on behalf of all other household members.

Throughout all stages of the research cycle, the assessment team took all necessary measures stipulated in the global IMPACT Data Protection Policy in order to protect and safeguard personal data and to minimize the risk of attributing findings to specific individuals or households. In addition to personal data protection, the assessment team upheld data responsibility: the safe, ethical and effective management of data as outlined in the Inter-Agency Standing Committee (IASC) Operational Guidance on Data Responsibility in Humanitarian Action<sup>4</sup>. This included asking for informed consent and taking measures to prevent the exposure of sensitive non-personal data, ensuring data protection and security in line with the principles for data responsibility in humanitarian action.

Data quality was ensured through data cleaning carried out by the Data Specialist and Data Officer. Issues such as logic checks, interview lengths and outliers were flagged and addressed with the field teams. The number of completed interviews was tracked daily. Upon completing data collection and processing the data, preliminary analysis was performed using R in accordance with the Data Analysis Plan, which clearly links overarching research questions with the relevant indicators and interview questions, and which lists all variables used for aggregation and disaggregation of findings. This report serves as a selective deep dive into some of the findings and main indicators per sector.

<sup>4</sup> IASC Operational Guidance on Data Responsibility in Humanitarian Action. Available [online](#).

# Findings

## Demographic Profile

This section discusses the demographics of the refugees households living in Slovakia, including average household size, gender and household composition by age group and vulnerability.

### Average household composition

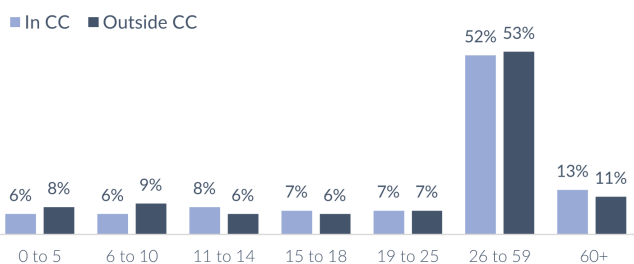
The average household was composed of 2.6 persons, with on average 2.46 individuals per household in CC, and 2.69 living outside of CC. The respondents' average age was 43 for interviews conducted in and outside of CC. Among all household members (which included respondents and their household members), the average age was 31.

According to the MSNA data, 71% of households living in CC and 67% of those living outside of CC experienced a separation in their household due to the ongoing conflict and displacement to Slovakia.

The main reasons cited were first that the person(s) left behind had mandatory military conscription (66% of households in CC, 61% outside of CC); followed by family member(s) who did not wish to leave Ukraine (45% and 41%, respectively) and the inability of family member(s) to leave their communities or place of residence in Ukraine due to the ongoing conflict was mentioned by 13% of households living in CC and 21% of those living outside of CC. The most cited reason was that one or more family member(s) were unable to travel due to serious medical condition, disability or old age (17% of the households who were separated and living in CC, 11% of those separated living outside of CC).

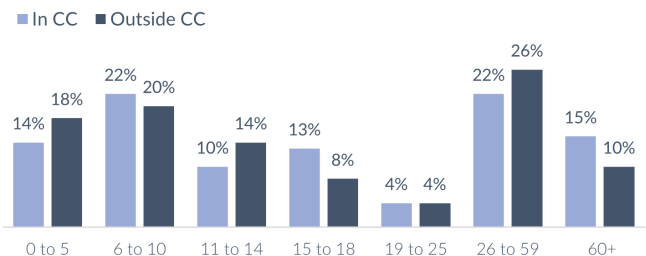
Regarding age, 36% of household members were children (35% in CC and 37% outside of CC). Overall, 63% of households had at least one child. More precisely, 58% of households living in CC had at least one member below 18, and 66% of households outside of CC. In the same way, 12% of household members were aged 60 or more (14% in CC and 10% outside of CC). Overall, 24% of households had at least one member who is aged 60 or more (27% in CC and 22% outside of CC).

FIGURE 1: SHARE OF FEMALES BY AGE GROUP, BY STRATA



In the assessment sample, around a quarter of males were between 26 and 59, while more than 50% of females were in that age category. This can be explained due to the conscription of men aged 18 to 60 into the armed forces of Ukraine.

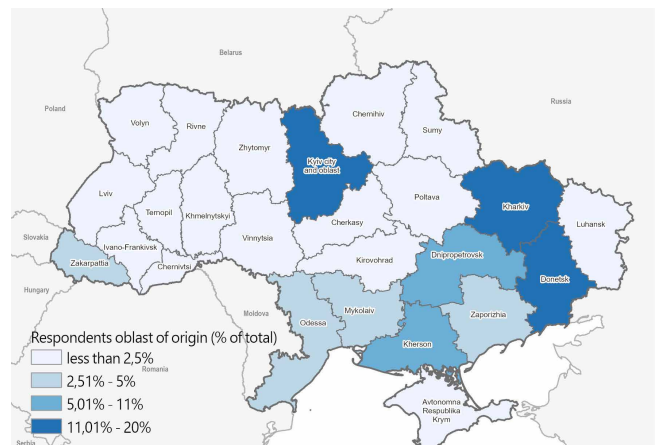
FIGURE 2: SHARE OF MALES BY AGE GROUPS, BY STRATA



Women was the most represented gender, with 71% of all households' members being females, and 29% being males. Households reported that 2% of women were breastfeeding (11 women), while 0.3% (2 members) were pregnant at the time of the assessment.

Most households came from Kharkiv (20%), followed by Donetsk (12%), and Kyiv city (12%).

MAP 2: HOUSEHOLDS' OBLAST OF ORIGIN



### Disability

Following the Washington Group Short Set (WG-SS) of questions, proxy respondents were asked if any household member above 5 years old had visual, hearing, mobility, cognition, self-care, and communication difficulties<sup>5</sup>. Overall, 3% of household members had a lot of difficulty or could not see at all even if wearing glasses; 3% had a lot of difficulty or could not walk or climb steps at all; 1% had a lot of difficulty or could not hear at all even with a hearing aid; 1% had a lot of difficulty or could not remember or concentrate at all; 1% had a lot of difficulty or could not self-care (this includes activities such as self-washing or self-dressing) at all; and 1% had a lot of difficulty or could not use their usual language at all. Figures 3 and 4 show all household members that reported a difficulty in the above mentioned areas, disaggregated by gender and age.

<sup>5</sup> WG - Short Set on Functioning - [online](#)

FIGURE 3: WG - SS HOUSEHOLDS' MEMBERS (FEMALE)

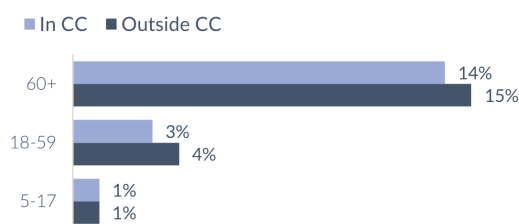
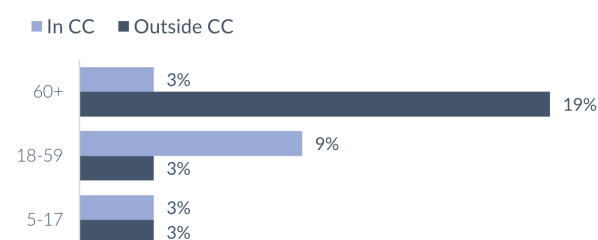


FIGURE 4: WG - SS HOUSEHOLDS' MEMBERS (MALE)



Most household members identified with difficulties were older people (60 years old or above). It must be noted that the WG-SS does not apply to children under the age of 5, and it can miss children with developmental disabilities over the age of 5.

## Protection

### Temporary protection

The majority of households interviewed (93%) have been granted temporary protection status in Slovakia, while 2% applied and were still waiting for a decision on their application at the time of the interview. Another 2% did not apply yet, although they were planning to register. Besides, 3% of households living in CC and 1% of households living outside of CC were not planning to apply for temporary protection.

When asked about the rights associated with temporary protection, 86% of households living in CC and 82% outside of CC were aware that Ukrainians transiting or those who have applied for asylum or temporary protection are entitled to emergency health care. However, 14% in CC and 18% outside of CC were not aware of it<sup>6</sup>.

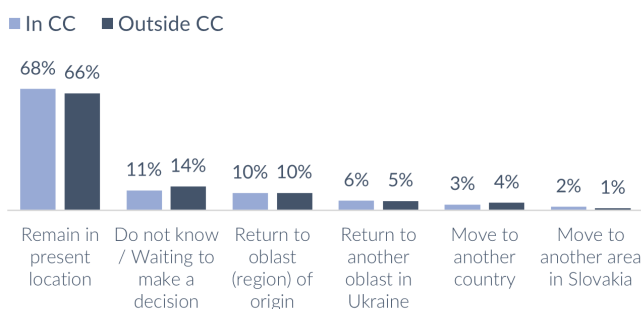
Households that held temporary protection status tended to have limited awareness about some of their entitlements, with 25% not aware they have access to kindergarten, primary, and secondary school free of charge (26% in CC and 24% outside CC respectively). Similarly, 45% of households were not aware of meal allowances in kindergarten and primary schools (47% in CC, 44% outside CC). Furthermore,

22% were not aware of temporary protection holders to receive a monthly allowance for each child (24% living in CC, 21% outside CC).

### Movement intentions

When asked about their movement intentions for the coming three months (Figure 5), 66% of households living in CC to 68% outside of CC indicated that they wanted to stay where they were currently living, while 15% and 16% respectively intended to sporadically move back to Ukraine, either to their oblast of origin or to another region. Moreover, 11% of households living in CC and 14% living outside of CC indicated that they did not know what their plans were in the next three months, or that they were still waiting to make a decision. Another 3% inside and 4% of households outside of CC were planning to move to a third country. Moreover, 1% of households living in CC and 2% outside of CC indicated that they were planning to move within Slovakia in the coming three months.

FIGURE 5: MOVEMENT INTENTIONS IN THE NEXT THREE MONTHS, OVERALL



### Perceptions on safety

Respondents shared the main safety concerns for women in their household. The assessment found that 94% of households in CC and 91% of households outside of CC did not have concerns regarding the safety of women. On average, households living outside of CC had more concerns for women, although numbers were low. Almost 3% of respondents outside of CC, and less than 1% in CC, were concerned about discrimination or violence on the basis of ethnicity or temporary protection status. Verbal harassment was reported by almost 2% of households outside of CC and less than 1% in CC. Table 2 shows there were different concerns for the safety and security for women in their area depending on the kraj (region) people were residing in. Overall, households in Košice<sup>7</sup> had concerns on physical harassment and violence, as well as verbal harassment.

*“We feel safe here, because there is no war. We don't have any concerns about the safety of women or children.”*

<sup>6</sup> Temporary Protection - UNHCR Slovakia [online](#)

<sup>7</sup> Note that the sample size per region is relatively small, therefore the results should be interpreted with caution.

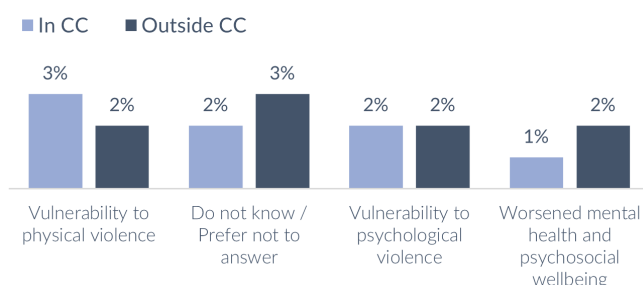
TABLE 2: RESPONDENTS' CONCERNS ABOUT WOMEN'S SAFETY IN THE AREA WHERE THEY LIVE (PER REGION)

Kraj	Strata	No concerns	Being robbed	Being threatened with violence	Being kidnapped	Physical harassment or violence	Being exploited
Košický	Inside CC	89%	0%	3%	0%	1%	0%
	Outside CC	83%	5%	3%	4%	4%	0%
Bratislavský	Inside CC	90%	2%	2%	0%	0%	0%
	Outside CC	93%	4%	1%	2%	1%	1%
Trnavský	Inside CC	100%	0%	0%	0%	0%	0%
	Outside CC	92%	5%	0%	0%	3%	0%
Trenčiansky	Inside CC	95%	0%	0%	0%	0%	0%
	Outside CC	96%	0%	0%	0%	0%	0%
Nitriansky	Inside CC	100%	0%	0%	0%	0%	0%
	Outside CC	93%	0%	0%	0%	0%	0%
Žilinský	Inside CC	97%	0%	0%	0%	0%	0%
	Outside CC	91%	0%	0%	0%	4%	0%
Banskobystrický	Inside CC	94%	6%	0%	0%	0%	0%
	Outside CC	92%	0%	0%	0%	0%	0%
Prešovský	Inside CC	94%	1%	0%	0%	0%	0%
	Outside CC	92%	0%	0%	0%	0%	8%

Over half of the respondents indicated that women in their households did not avoid any places (55% of households living in CC, 61% of those living outside of CC). Furthermore, 32% of respondents living in CC said that they did not know if women in their household were avoiding specific places, compared to 21% of respondents outside of CC. Railway stations and other public transportation points scored the highest, with 7% of respondents in CC and 11% of respondents outside of CC indicating that women avoided these places.

There was a relatively small percentage of respondents who had concerns about children's safety. In fact, 94% of respondents in CC and 92% of respondents outside of CC indicated that they have no safety concerns for girls and boys in the area where they live. Concerns were mainly related to children's vulnerability to physical and psychological violence, and mental health and psychosocial well-being, as illustrated in Figure 6. Specifically, concerns were higher for respondents living in Bratislava and Košice, and respondents living outside of CC in Trenčin region.

FIGURE 6: RESPONDENTS' CONCERNS ABOUT CHILDREN'S SAFETY IN THE AREA WHERE THEY LIVE <sup>8</sup>

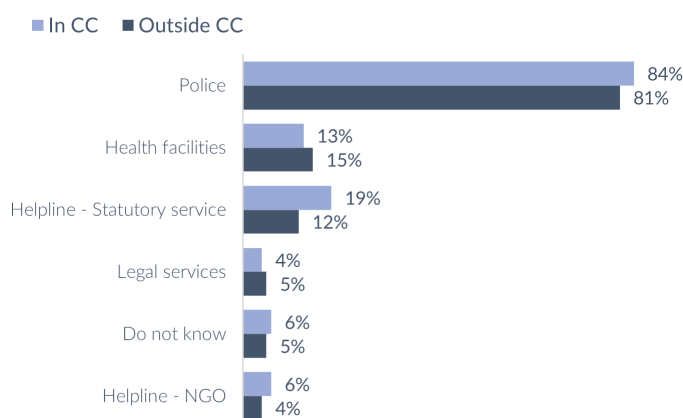


Half of the respondents reported not being aware of child-friendly spaces, while 51% of respondents in CC and 47% outside of CC reported awareness of recreational activities and child-friendly spaces in the areas where they live.

### Referral pathways and service provision

In the assessment, respondents were asked where they would refer a friend who had been sexually assaulted. Overall, 83% of respondents indicated that the referral would be to the police, 15% to a statutory helpline, and 14% to healthcare services. A referral to a helpline was mentioned more frequently by persons living in CC than outside CC. A small percentage of respondents (6% in CC and 5% outside CC) did not know where they would refer a person who have been sexually assaulted. This data is illustrated in Figure 7.

FIGURE 7: SHARE OF HOUSEHOLDS ON WHERE THEY WOULD REFER A FRIEND WHO HAD BEEN SEXUALLY ASSAULTED, BY STRATA <sup>9</sup>

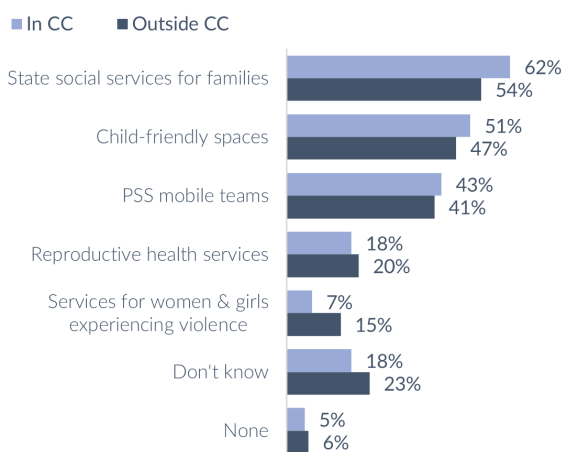


The MSNA data shows some of the services that household members were aware of in the area where they lived (illustrated in Figure 8). Over half of the respondents indicated governmental social services for families in the areas where they were living at the time of the interview (62% of respondents in CC and 54% outside CC), including services managed by or under the auspices of the Ministry of Labour, Social Affairs, and Family. Additionally, 51% of respondents

<sup>8</sup> 94% of households living in collective centers and 92% outside did not express any concern.  
<sup>9</sup> Note that multiple choices could have been selected therefore findings may exceed 100%.

in CC and 47% outside of CC reported child-friendly spaces, while half of the respondents reported not being aware of any child-friendly spaces in the area. Regarding the psychosocial support (PSS), 43% of households in CC and 41% outside of CC perceived the PSS mobile teams as available in their area. Smaller percentages of households are aware of reproductive health services (18% in CC and 20% outside CC), services for women and girls experiencing violence (7% in CC and 15% outside CC) available in the areas where they live (illustrated in Figure 8).

FIGURE 8: PERCEPTION ON AVAILABLE SERVICES



### Family separation

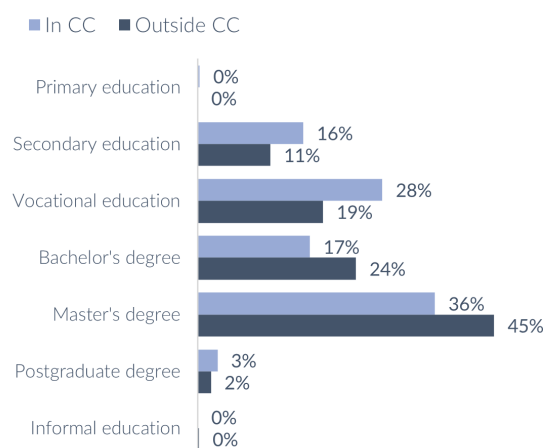
The majority of respondents have one or multiple household members who stayed behind in Ukraine. This concerns 71% of households living in CC and 67% of households living outside of CC. The first reason cited by households for family separation concerned the mandatory military conscription (66% of households living in CC and 61% of households living outside of CC). Another explanation for family separation was that some immediate family members wished to remain in Ukraine. This was the case for 45% of respondents living in CC, and 41% living outside of CC. In addition, 13% of households in CC indicated that they were separated because a household member was unable to leave the place of residence in Ukraine due to the ongoing conflict (21% of households living outside of CC). Other household members were unable to travel due to a serious medical condition, a disability, or old age. This was the case for 17% of households separated and living in CC, and 11% of those living outside of CC.

The assessment found that 8% of respondents indicated that they lived with a child of whom they were not the parent, 1% of respondents stated that parents entrusted their children's care to them before leaving Ukraine, and with nearly 1% had taken up guardianship and have an official document attesting to it. It is important to note that respondents did not clarify if these documents were released by Ukrainian or Slovak authorities.

## Cash & Livelihoods

Data collection for the MSNA was conducted roughly five months after the start of the conflict, with the majority of arrivals happening in March and April 2022. This aspect, along with language barriers or challenges in accessing child care, could explain the high proportion of respondents reporting not to be engaged in any form of work at the time of the interview (47% for both respondents living in CC and outside of CC), compared to the time they were in Ukraine (8% and 6% respectively).

FIGURE 9: HIGHEST LEVEL OF EDUCATION ACHIEVED, AS REPORTED BY THE RESPONDENTS



Notably, as represented in Figure 9, a majority of respondents reportedly had a university degree, 56% of respondents living in CC and 71% of those living outside of CC. Based on the assessment data, respondents living outside of CC tended to have higher levels of post-secondary and/or tertiary education. This could translate into a high level of employability in key sectors of the Slovakian economy, where gaps may exist.

TABLE 3: MAIN OCCUPATIONS BEFORE AND AFTER COMING TO SLOVAKIA

	In CC		Outside CC	
	Previous	Current	Previous	Current
Formal labour	68%	23%	71%	28%
Retired	10%	14%	9%	8%
Not working	8%	47%	6%	47%
Informal labour	6%	5%	3%	7%
Own/family business	3%	0%	5%	0%
Student	4%	1%	3%	2%
Caregiver, freelance, prefer not to say	1%	9%	2%	7%

The majority of respondents (68% of those currently living in CC at the time of the interview, 71% outside of CC) were found to be employed in formal work before the start of the conflict. They are only 23% in CC and 28% outside of CC since they arrived in Slovakia, respectively.

Furthermore, only 8% of respondents living in CC (6% of those living outside of CC) did not report any occupation before moving to Slovakia, against 47% of respondents since they arrived in Slovakia.

*“We can’t get our child into a kindergarten because they are full, we have to work at night.”*

As displayed in Table 4, among the 23% of respondents living in CC (28% outside of CC) and were engaged in formal work (93 and 136 respondents, respectively), 20% in CC (21% outside of CC) mostly in domestic service activities (e.g., domestic help, maids, gardener, etc.). Another significant share was involved in the manufacturing sector (11% and 15%, respectively), or in accommodation and food service activities (9% for both households living in or out of CC). Another 17% of the total respondents did not want to answer about their main sectors of occupation<sup>10</sup>.

TABLE 4: SECTORS OF OCCUPATION IN SLOVAKIA

	In CC	Outside CC
Activities of households	20%	21%
Prefer not to answer	17%	17%
Manufacturing	11%	15%
Artisanal production	10%	5%
Accommodation and food service	9%	9%
Agriculture, forestry and fishing	9%	4%
Wholesale and retail trade	7%	4%
Transportation and storage	6%	9%
Administrative and support service activities	3%	3%
Medical and health activities	3%	1%
Education	1%	5%
Professional scientific and technical activities	1%	2%
Energy, electricity, gas	1%	1%
Construction	1%	1%
None	1%	1%
Water supply	1%	0%
Arts, entertainment and recreation	0%	2%
Other	0%	2%
Social work activities	0%	2%
Beauty and hairdressing	0%	2%
Financial and insurance activities	0%	1%

## Sources of Income

As reported in Table 5, the four main sources of income of households in the 30 days prior to data collection were humanitarian assistance for (59%), salaried work for (36%), remittances for (25%) and Ukrainian government assistance for (12%).

TABLE 5: SOURCES OF INCOME IN THE LAST 30 DAYS PRIOR TO DATA COLLECTION, BY STRATA

Source of income	In CC		Outside CC		Overall % of HH
	Average amount	% of HH	Average amount	% of HH	
Humanitarian assistance	160 €	58%	179 €	59%	59%
Salaried work	483 €	31%	575 €	40%	36%
Remittances	303 €	24%	255 €	25%	25%
Ukrainian gov. assistance	154 €	14%	151 €	11%	12%
Casual labour	447 €	8%	373 €	7%	8%
Support from kins	126 €	2%	40 €	2%	2%
Own business or commerce	360 €	1%	477 €	3%	2%
Charitable donations	145 €	1%	152 €	2%	1%
Other sources	233 €	9%	214 €	11%	10%

In fact, 30% of households in collective centres and 35% outside cannot support their monthly households needs and reported facing challenges to obtain enough money. The main constraints reported were not having the language proficiency required to secure employment, followed by the lack of employment opportunities in line with their professional profile, and not sufficient humanitarian cash assistance particularly for households in collective centres, while childcare needs were mostly reported by households outside collective centres.

TABLE 6: REPORTED EXPENSES IN THE LAST 30 DAYS PRIOR TO DATA COLLECTION, BY STRATA<sup>11</sup>

Reported expenses	In CC		Outside CC		Overall % of HH
	Average amount	% of HH	Average amount	% of HH	
Food	212 €	96%	271 €	96%	96%
Rent	198 €	5%	412 €	27%	17%
Transport	33 €	18%	43 €	13%	15%
Healthcare	81 €	19%	97 €	9%	14%
Communication	39 €	10%	33 €	10%	10%
Education	113 €	3%	65 €	3%	3%
Utilities	150 €	1%	152 €	5%	3%
Other expenses	130 €	13%	109 €	15%	14%

Overall, the main expense item is food (96% of the households), followed by rent (17%) and transportation (15%).<sup>12</sup> While food is the most often reported expense item, and on average, the highest expense for households in CC, the highest expense for households living outside CC was rent and utilities (€412.62). Communication and education expenses in percentage are similar across households.

On average, as shown by Table 7, the average monthly income per capita was around €53 greater than the average expense per capita. The difference between incomes and expenses was lower for households outside of CC.

<sup>10</sup> The share of unknown sector or refusals to answer this question is surprising and should be further investigated in future research.

<sup>11</sup> % of households corresponds to the share of households reporting this income/expense.

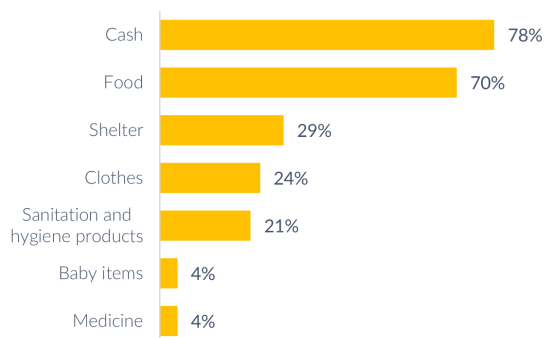
<sup>12</sup> Note that 5% of households living in CCs appear to have paid a rent in the last 30 days prior to the interview. Several explanations can help interpreting this result. First, it may come from the timing of the survey. They may have paid a rent in the 30 days prior to the interview, and still be living in a CC at the time of the survey. Second, they may be helping a relative living outside of CCs to pay a rent, and thus understood this expense as a rent. These interpretations are not comprehensive and should be considered as suggestions only.

TABLE 7: AVERAGE INCOMES AND EXPENSES PER CAPITA (€), BY STRATA

Location	Average income per capita	Average expense per capita	Difference
In CC	196 €	121 €	75 €
Outside CC	208 €	174 €	35 €
Overall	203 €	150 €	53 €

The majority of respondents reported having received cash (78%), food (70%), or shelter (29%) since arriving to Slovakia, followed by clothes (24%), as well as sanitation and hygiene products (21%). Food assistance (50%), shelter (39%) and employment (35%) remain the top three priority needs most often shared by respondents. These results are not significantly different across strata. In other words, households living in CC received on average the same types of assistance as those living outside of CC.

FIGURE 10: MAIN TYPES OF HUMANITARIAN AID RECEIVED BY HOUSEHOLDS, OVERALL <sup>13</sup>



Banks remain the most frequent financial service providers the households cited when asked about which ones they have access to in their immediate area. In fact, 93% of households living in CC cited banks, and 96% of those living outside of CC. It was followed by the use of formal money transfers as financial service provider (10% in CC, 5% outside of CC). Finally, 3% of households both in and out of CC cited no financial service provider.

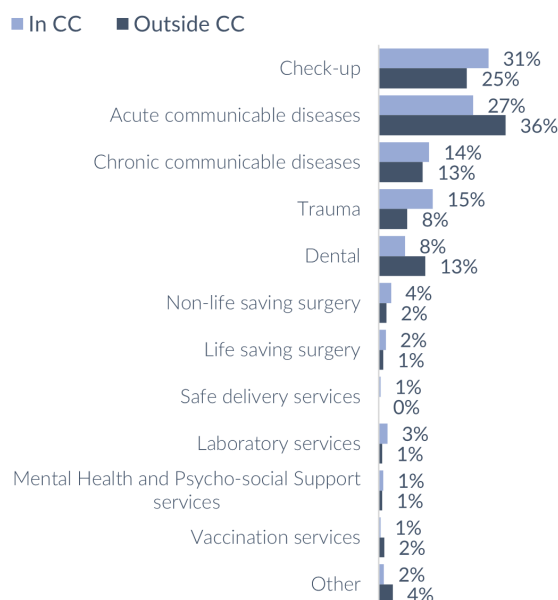
## Health

This section gives an overview of the health needs of households, including access and barriers to healthcare. It also reviews household members' capacity to access healthcare services since arriving to Slovakia as well as knowledge about mental healthcare services. Respondents were asked a set of questions about the health status of each of their household members, with questions about the need to access healthcare services and their ability to access them, including any potential barriers.

From approximately one quarter to one fifth of household members (25% of those living in CC and 22% of those living outside of CC) reported having to access healthcare services since arriving to Slovakia. As reported in Figure 11, the most often reported healthcare needs were visits for acute illness (27% and 36% respectively), preventive services (31%

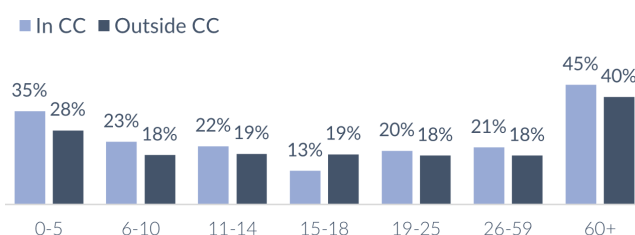
and 25%), chronic communicable diseases (14% and 13%), consultation for trauma (15% and 8%), and dental care (8% and 13%).

FIGURE 11: HEALTHCARE NEEDS, BY STRATA <sup>14</sup>



Household members living outside of CC were significantly more likely to have a medical visit due to an acute illness compared to members living in these centers (9 percentage points difference), whereas preventive check-up was the most often reported reason for accessing healthcare services by household members living in the CC: 31% of households' members cited this need, against 25% of household members living outside of CC.

FIGURE 12: SHARE OF HOUSEHOLD MEMBERS IN NEED FOR HEALTHCARE, BY AGE AND STRATA



Overall, 80% of households' members were able to access healthcare when they felt they needed it. This is a vector of inequality though: 86% of those living in CC could access healthcare when needed, while only 76% of those living outside of CC.

Of the remaining 20% of household members who could not access healthcare services when needed, the majority of them (24%) reported that they did not know where to go. This is a striking result showing that information is needed to increase the accessibility of healthcare for household members. This is particularly the case for household members living outside of

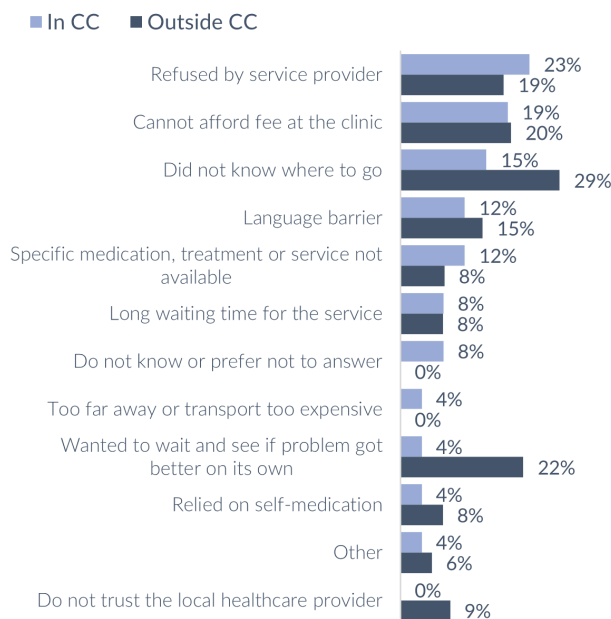
<sup>13</sup> Other types of aid include employment (1%), feeding support for children of less than two years old (1%), healthcare services (2%), cooking materials (3%), language courses (3%), communication (2%), psychological support (0.4%), support with transport (0.4%), and other type of aids (0.2%). Note that multiple choices could have been selected therefore findings may exceed 100%.

<sup>14</sup> Multiple choices could be selected, therefore findings may exceed 100%.



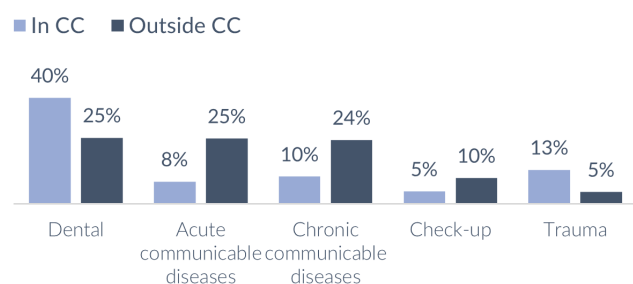
CC, as 29% of them could not access healthcare because they did not know where to go (compared to 15% of those living in CC). Another 19% of households living in CC (23% of those living outside of CC) and in need of healthcare were refused by the service provider. Finally, 20% of household members answered that they cannot afford the fee at the clinic, and this result was balanced across both strata.

FIGURE 13: REASONS FOR NOT ACCESSING HEALTHCARE, BY STRATA <sup>15</sup>



Further disaggregation of the household members who could not access healthcare (presented in Figure 14) revealed that individuals seeking dental care were less likely to access the service. Among the overall 20% of household members who could not access healthcare, 40% of those living in CC were in need for dental care, and 25% of those living outside of CC. It is followed by chronic and acute communicable diseases, as well as trauma and check-up. However, these findings must be interpreted cautiously due to the low sampling size and the fact that further investigation of the reasons for low access to healthcare is needed.

FIGURE 14: SHARE OF INDIVIDUALS NOT ACCESSING HEALTHCARE AMONG THOSE WHO NEEDED SUPPORT, BY MAIN HEALTHCARE SERVICES ATTEMPTED TO REACH AND STRATA <sup>16</sup>



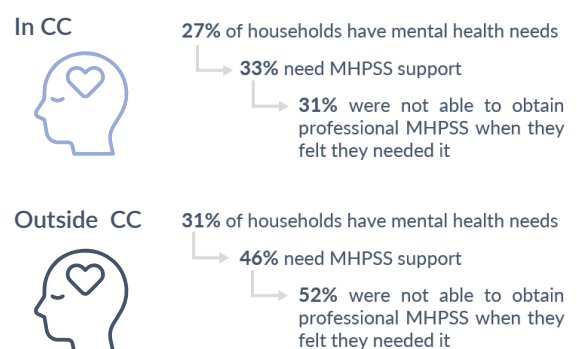
Furthermore, 14% of households living in CC were not aware that in Slovakia, people transiting or having applied for asylum/temporary protection status are entitled to urgent and necessary healthcare. This share is even higher (19%) for those living outside of CC.

### Vaccination

Each respondent who reported having a minor in their household composition was asked if the minor was vaccinated against measles. As a result, these findings are based solely on respondents' feedback, and should therefore be interpreted cautiously. It appeared that, overall, 81% of children aged 5 or below received measles vaccine, whether it was in Slovakia, Ukraine, or in a third country. Also, among the 55% of households aware that they were entitled to free COVID-19 vaccination, 45% of those living in CC did not receive any COVID-19 vaccination, and 44% of those living outside of CC. These findings are almost in line with the nationwide vaccination rate in Slovakia, where 51.2% of the total population is currently vaccinated as of September 2022.<sup>17</sup>

### Mental Health and Psychosocial Support (MHPSS)

Respectively 27% of households living in CC and 31% of those living outside of CC declared having mental health needs in the last 30 days. Among them, 33% in CC (46% outside of CC) were in need of professional counselling and psycho-social support. Finally, among the households who sought this support, 31% living in CC (52% outside of CC) were not able to obtain any when they felt they needed it. This corresponds to 9 households living in CC and 33 living outside of CC.



Challenges accessing MHPSS include not knowing where to go (56% of respondents in CC, and 42% for those outside of CC). The language barrier was cited by 11% and 27% of respondents in CC and outside of CC, respectively. Finally, 11% of those living in CC said there was a long waiting list for this service, and 10% of respondents living outside of CC wanted to wait and see if their situation would get better.

<sup>15</sup> Multiple choices could be selected, therefore findings may exceed 100%.

<sup>16</sup> This figure presents the types of healthcare services that the 20% of household members who could not access healthcare needed.

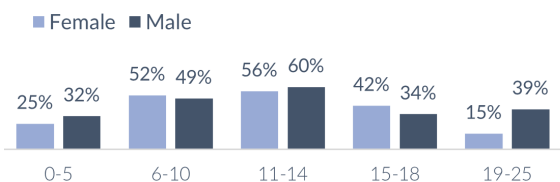
<sup>17</sup> With at least one dose, according to the [European Centre for Disease Prevention and Control](#)

## Education

### Enrolment rate for school-age children

In the households interviewed, 36% of household members were children (35% in CC and 37% outside of CC), with 58% of households living in CC and 66% outside CC had at least one child in their household. Of all household members, 19% in CCs and 21% outside CC are of primary school age. 9% of household members in CCs and 7.2% outside of CCs are of secondary-school age. During the same period, 55% of children in these households continued their schooling online, through the services provided by the Ukrainian Ministry of Education. Some studied via both systems.

FIGURE 15: ENROLMENT OF SCHOOL-AGE CHILDREN IN HOUSEHOLDS SURVEYED FOR THE ACADEMIC YEAR 2021-22



For the 2022-23 academic year, 17% of children in CC and 14% outside CC were intending to enrol in pre-school, 49% of children in CC and 56% outside CC were enrolled in primary, 19% of children in CC and 10% outside CC were enrolled in secondary school. See Figure 16.

FIGURE 16: SHARE OF HOUSEHOLDS WITH SCHOOL-AGED CHILDREN REPORTING ON THE PLANNED TYPE OF SCHOOL FOR THE 2022-2023 SCHOOL YEAR, BY STRATA

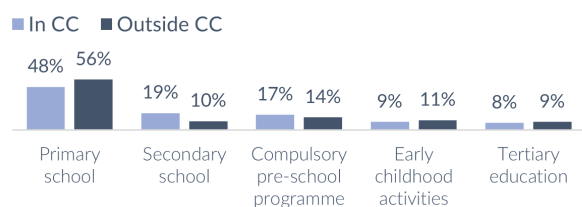
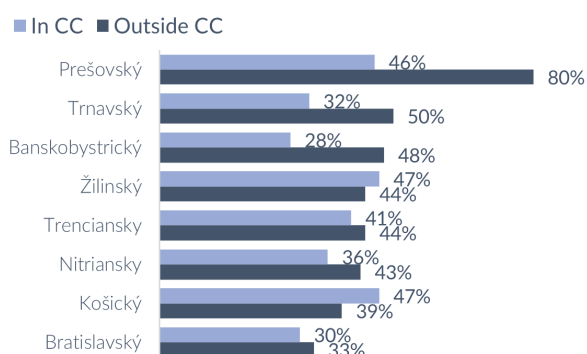


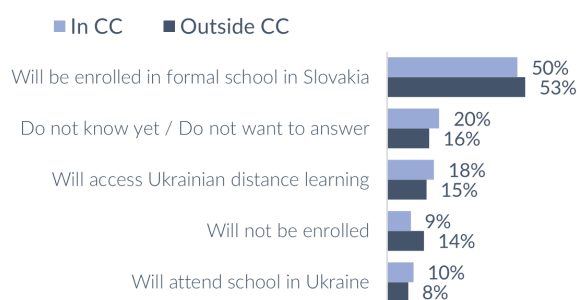
Figure 17 indicates that Prešov was the region with the highest enrollment rate for the 2021-22 academic year, with 80% of children and young adults living outside of CC being enrolled in that region. However, only 10 household members below the age of 25 outside of CC were interviewed in that region. Therefore, these findings should be interpreted cautiously.

FIGURE 17: SHARE OF ENROLLMENT AT SCHOOL IN SLOVAKIA IN THE PREVIOUS YEAR, BY STRATA AND BY KRAJ



Respondents intentions with respect to the enrolment of school-age children in Slovakia for the academic year 2022-2023 (Figure 18) shows that the majority of parents will formally enrol their children in local schools (50% in CC and 53% outside CC). However 16% of respondents living in CC and 20% outside CC were undecided at the time of the interview. A small percentage of respondents indicated that they will continue with Ukrainian distance learning (18% in CC and 15% outside CC) or that their intention is that children attend school in Ukraine (10% in CC and 8% outside CC). In addition, 9% of respondents living in CC, and 14% living outside CC, indicated that they were not planning to enrol their children at local schools in Slovakia for the next academic year 2022-2023.

FIGURE 18: SHARE OF ENROLLMENT INTENTIONS FOR THE ACADEMIC YEAR 2022-2023, BY STRATA



When respondents were asked about the type of support children in their household would need to help them attending school or participating in regular learning activities, 29% of households outside of CC and 17% in CC responded that Slovak classes were a priority. The large share of respondents who indicated Slovak classes as well as the large gap of results between respondents in CC and outside of CC indicate that, in addition to being the main type of educational need, it was also significantly more needed for households living outside of CC. Around 15% of households needed school equipment (such as bags or uniforms), 14% needed school supplies such as calculators, notebooks, rulers and 13% needed laptops.

### Post-secondary or tertiary education

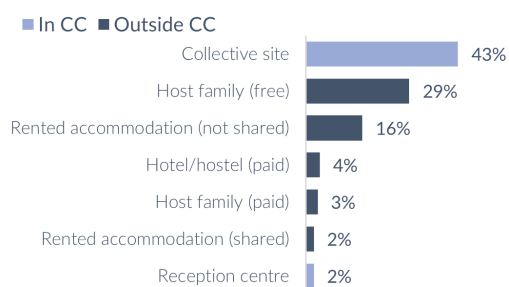
Additionally 15% of women and 39% of men age between 19-25 were enrolled in post-primary or tertiary education in Spring 2022. The percentage of males is more than double than the percentage of females.

While children with temporary protection status are not obliged to complete compulsory education, they are entitled to free education in Slovakia. This applies to kindergartens, primary and secondary public schools. Only 25% of respondents were not aware of that children are entitled to access public kindergartens, primary and secondary schools free of charge (26% in CC and 24% outside of CC respectively). Similarly, 45% of households were not aware of meal allowances in kindergarten and primary schools (47% in CC, 44% outside of CC).

## Accommodation

Slovakia’s response regarding the accommodation needs of refugees was to set up a series of collective settlements that are called collective centers, in which the refugees would be able to benefit from shelter and other kinds of emergency services. In the sample, 95% of households living in CC are located in collective sites, and 5% in reception centres.<sup>18,19</sup>

FIGURE 19: SHARE OF RESPONDENTS PER ACCOMMODATION TYPE



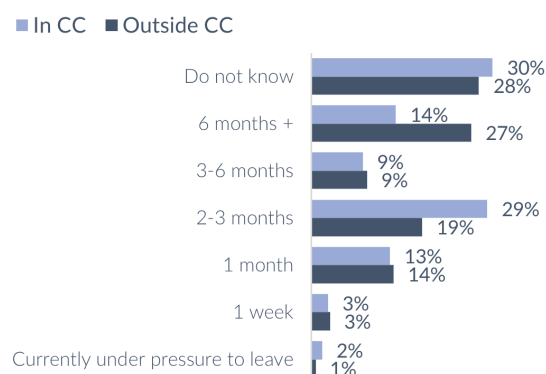
Most households living outside of CC (53%) were in a hosted accommodation by families. Another 29% of households were living in rented private accommodations. Lastly, 7% were living in a hotel or hostel where they were paying a daily rate, 6% in a host family for which they contributed with a payment, and 4% in rented accommodation shared with others. Overall, Kharkiv was the most often reported oblast of origin among all refugee households assessed, followed by Donetsk, Kyiv city, and Dnipropetrovsk.

TABLE 8: MAIN REPORTED OBLAST OF ORIGIN

Oblast	In CC (%)	Outside CC (%)	Overall (%)
Kharkiv	19%	21%	20%
Donetsk	15%	9%	12%
Kyiv city	9%	13%	12%
Dnipropetrovsk	10%	11%	10%
Kherson	8%	8%	8%
Zaporizhzhia	6%	4%	5%
Kyiv oblast	3%	7%	5%

Findings presented in Figure 20 suggest that most households estimated their possible duration of stay in their current accommodation at the time of the interview to be between 1 to more than 6 months, with most of them wishing to remain in their current accommodation. Additionally, 30% of respondents living in CC, and 28% of those living outside of CC, did not know how long they could stay in their accommodation.

FIGURE 20: POSSIBLE DURATION OF STAY, BY STRATA

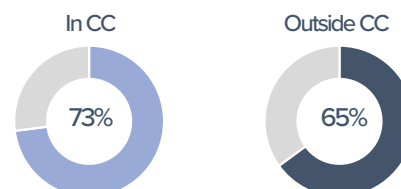


Further analysis suggest that, overall, 67% of the respondents plan to remain in their present location in Slovakia in the next three months following data collection. Importantly, 13% of respondents did not know what their movement intentions were, or were waiting to have more information to make a decision. Another 10% expressed intentions to return to their oblast of origin in Ukraine in the next three months, 6% to return to another oblast there, and 4% to move to another country. Only 2% of respondents expressed intentions to move to another area in Slovakia. These results are not significantly different between respondents who were living in CC and outside of CC.

## Accountability to affected population

The majority of respondents interviewed reported having received humanitarian assistance since they arrived to Slovakia (73% of households living in CC, 65% of those living outside of CC). Of these, respectively 89% and 78% reported being satisfied with the humanitarian aid received. For the ones who were not satisfied, the three main reasons cited were that they did not receive enough assistance, the poor quality of services, and that the assistance received was not helpful.

FIGURE 21: SHARE OF HOUSEHOLDS WHO RECEIVED HUMANITARIAN AID, IN AND OUTSIDE OF CCS, RESPECTIVELY



<sup>18</sup> Reception center: an institution designed to manage the reception of asylum seekers, refugees and migrants. Reception centers provide an organized environment that allows authorities and other stakeholders to develop a targeted response while the persons concerned await decisions on applications for admission to the territory or the granting of international protection. Such centers can be managed by state bodies, NGOs and/or international organizations. Support services are often provided by several different actors, according to their mandates and areas of competence.

<sup>19</sup> Collective center: existing buildings used for temporary living to receive the displaced population. A wide variety of building types are used as collective centers, including schools, hotels, gyms, community centers, hospitals, factories, religious buildings, police stations, or military barracks.

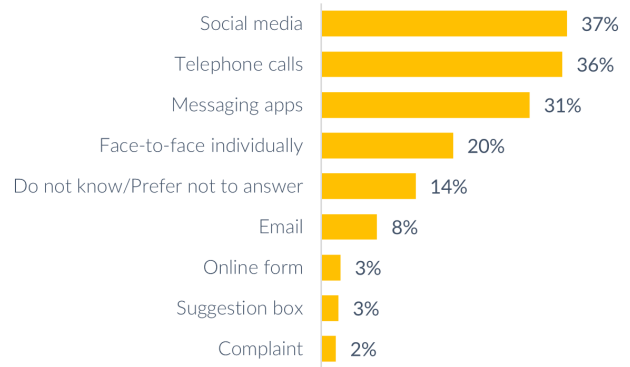
Respondents were asked if they encountered any challenges to access information. In the whole sample, 79% of respondents indicated no challenges. Yet, the two most common challenges cited among those who did encounter difficulties were that information was often unavailable in the language the respondent understands, and that it was unclear where to find information. In total, 40% of respondents' preferred option to provide feedback or make complaints about aid received was social media, followed by 33% who mentioned telephone calls, 32% messaging apps, 15% face-to-face individual interviews, 8% emails, and 5% online form.

*“Although the help received is not enough, we are still infinitely grateful.”*

To provide feedback to aid providers about sensitive issues, 37% of respondents preferred social media, 36% telephone calls, 31% messaging apps, 20% individual face-to-face interviews, and 8% emails.<sup>20</sup> Note that the results regarding feedback mechanisms on the aid received and on sensitive

issues are similar for households living in CC and those living outside of CC.

FIGURE 22: PREFERRED OPTIONS TO PROVIDE FEEDBACK TO AID PROVIDERS ABOUT SENSITIVE ISSUES AS REPORTED BY HOUSEHOLDS, OVERALL<sup>20</sup>



The high level of digitalization was reflected in refugees' access to mobile networks and connectivity, with 96% of households surveyed having a functioning SIM card.

<sup>20</sup> Note that multiple choices could have been selected therefore findings may exceed 100%.

# Conclusions

The MSNA in Slovakia aims to support an evidence-based humanitarian response in Slovakia through the provision of multi-sectoral data about the needs and coping capacities of Ukrainian refugee households who have fled the ongoing conflict in their country of origin to inform the government authorities and the humanitarian community. Specifically, this report presents results for households living in CC or outside of CC in Slovakia at the time of the interview. As the situation in Ukraine is still ongoing, and unpredictable, this assessment provides a snapshot of the needs and challenges faced by these households as of summer 2022 (June-September).

Findings from the MSNA revealed that refugees were mostly females. Most surveyed households either did not intend to move away from their present location in the next three months after the interview or had difficulties deciding on their intentions. Only 21% of households indicated intentions to move away from their current location. In addition, the majority of households living in CC and outside of CC indicated that the area they were living in was predominantly safe for women and children. However, the situation appeared not to be homogeneous across all the kraje (regions), with Kosice being the region with most concerns.

Importantly, almost half of the households (47%) were not engaged in any form of work at the time of the interview despite the average high level of education and employment in their country of origin. Most respondents were engaged in domestic services work. A significant share of respondents did not want to specify which activity they were engaging in (if any). Out of the key sectors respondents worked in, manufacturing was among the most cited. Close to 60% of households cited humanitarian cash assistance as one of their main sources of income, 36% cited salaried work, 25% remittances, and 12% were receiving Ukrainian government assistance. The MSNA findings indicated that the main households' expenses are food, rent, transport, healthcare and communication.

A significant share of households (25% of households living in CC, 22% of those living outside of CC) had healthcare needs. Among them, respectively 86% and 76% reported being able to access their local provider. Access constraints to health care include: not knowing where to go, a language barrier, a specific unavailable service, refused by the service provider or wanting to wait and see if their situation would eventually get better on its own. 27% of households in CC and 31% outside of CC had mental health needs. Among them, 33%

in CC and 46% outside of CC were in need of professional counselling and psycho-social support. Of those, 31% of households living in CC and 52% outside of CC could not access it when needed.

Overall, around 40% of children and young adults were enrolled at school in Slovakia and 55% attended Ukrainian distance learning regularly in the spring semester 2022. Enrollment rates were heterogeneous depending on the kraj, with Presov having the highest shares of enrollment at school in Slovakia, and Bratislava having the lowest. Around half of the children and young adults were intended to enrol at a formal Slovakian school for the next academic year 2022-2023. Yet, Slovak classes appeared as the main support needed to help households' children to get education in Slovakia.

Based on the findings of this round of MSNA, the large majority of respondents received humanitarian aid and were satisfied with it (84%). Those who were not satisfied most commonly attributed this to the quantity of aid received not being sufficient, to the poor quality of services, and to the assistance received perceived as not helpful enough. Importantly, the main priority needs cited by households are food (50%), shelter (39%), and employment (35%). They also indicated a preference to provide feedback mainly through social media (37%), telephone calls (36%), messaging apps (31%) or individual interviews (20%).

To conclude, even though the vast majority of interviewed refugees in need of healthcare could access it, efforts need to be pursued to ensure universal health coverage, beyond emergency healthcare. Additionally, education and employment were reported as the sectors with highest needs for humanitarian assistance, along with food and shelter aid. Providing general information to access health services, as well as increasing the access to Slovak classes to ease refugees' integration was a reported need as well. Strengthening communication channels with refugee communities will contribute to better access of refugees to information about their rights, benefits and services. This should include feedback mechanisms for refugees to be able to raise issues with the Government and other actors. With the end of the conflict not anywhere in sight as of September 2022, the arrival of winter may increase pre-existing vulnerabilities and require further action from humanitarian actors.



Regional Refugee Response  
for the Ukraine Situation

# MULTI - SECTORAL NEEDS ASSESSMENT

October 2022

**REACH** Informing  
more effective  
humanitarian action

