

COUNTRY CHAPTER

CZECH REPUBLIC



Regional Refugee Response
for the Ukraine Situation

> At a Glance

Czech Republic Planned Response (January-December 2023)



500,000

targeted refugee population



\$81.6 M

total financial requirements in USD



4

partners involved



CZECH REPUBLIC

Part 1: Current Situation

Situation Overview

As of end December 23 2022, a total of 473,216 refugees from Ukraine have received temporary protection (TP) status under the Temporary Protection Directive (TPD). The Czech Republic is both a transit and, primarily, a destination country for refugees from Ukraine, with one of the highest numbers of registered refugees from Ukraine globally, both by absolute number and per capita. The large Ukrainian pre-war diaspora, the dynamic economy with one of the lowest unemployment rates in the EU and the significant solidarity of the host community with refugees have led to large numbers of Ukrainians choosing to seek safety in the Czech Republic.

As the country does not have external Schengen land borders, it is difficult to track the number of new arrivals and pendular movements. The number of Ukrainian nationals granted TP is growing steadily, up to approximately 10,000-15,000 per month, and many refugees consider the Czech Republic their ultimate destination. While onward and pendular movements from and to the Czech Republic continue, making it difficult to establish the exact numbers of those who remain in the country, the RRP for the Czech Republic projects a population of some 500,000 refugees who will pass through and/or stay in the country in 2023 and who will be targeted by assistance by RRP partners, which excludes any contingency figures for a further possible influx. Given the harsh winter conditions, the development of the conflict in Ukraine in the coming months may contribute to an increased flow of refugees into neighbouring countries and the Czech Republic.

Current TP holders are allowed to legally reside in the Czech Republic until March 2023 under the package of national laws – “Lex Ukraine” – passed in March 2022, which focused on the rapid registration of refugees, as well as the introduction of key measures related to access to health insurance, the labour market and education, humanitarian allowances for refugees, and solidarity allowances for hosts. Amendments to the law were passed in June and a new draft is under discussion in late 2022, in view of the extension of the TPD to March 2024.

The Government has developed a comprehensive adaptation/inclusion agenda targeting refugees from Ukraine through a three-phased strategy: flight for safety, adaptation and coexistence, and long-term solutions. The government strategy is articulated around 13 priority areas assigned to 13 working groups, including coordination, communication, financing, digital management, and

inclusion (e.g., housing, education, health, social affairs, security, etc.).¹ The Czech Government is revising its strategy for 2023, and RRP partners will strive to align the RRP accordingly.

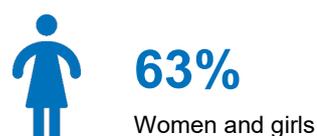
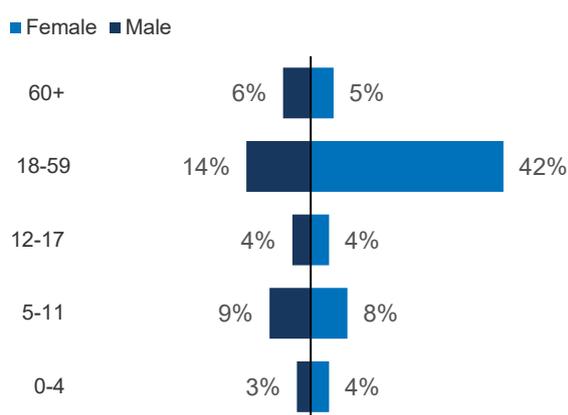
The generosity shown by the Government and the immediate wave of solidarity from the Czech society towards refugees from Ukraine has been remarkable; most are accommodated by the local population, with only a portion in state-run facilities. These efforts are complemented by Inter-Agency initiatives of UN Agencies present in the country (thereafter 'RRP partners'), as well as national and international NGOs and civil society actors.

Despite the impressive response provided to date, the ability of the current social and economic structures to absorb and integrate the sizeable Ukrainian refugee population in the longer term is expected to be strained as the year advances. The Czech Government plans to incorporate vulnerable refugees into the social safety nets already in place for vulnerable Czech nationals, though the details of these changes to the government accommodation scheme for refugees remain under discussion with the Lex Ukraine 5 package. Accommodation arrangements for refugees are included in the RRP strategy to ensure a sustainable response and unhindered access to rights for the refugee population without discrimination, so that no one is left behind.

Population planning figures

Czech Republic	Refugees registered for Temporary Protection as of end Dec2022 ²	Targeted Population in 2023
Refugee Population	473,216	500,000

Age and gender breakdown³



¹ Czech Republic: [Determination of strategic priorities of the Government of the Czech Republic to deal with the refugee wave related to the invasion of Ukraine by the Russian Federation](#), April 2022.

² This figure may include multiple registrations of the same individual in two or more EU+ countries; registrations that remain incomplete for various reasons, or registrations of refugees who have moved onward, including beyond Europe.

³ Calculations based on Temporary Protection data (for male / female and children / adults disaggregation) and UNHCR's Regional Profiles and Intentions Surveys [#1](#) and [#2](#) (for specific age group disaggregation).

Country Protection Needs, Vulnerabilities and Risks

The vast majority of refugees from Ukraine are women and children, with 75 per cent of adults under the age of 45 and 28 per cent of adults under the age of 30.⁴ A mother with one child is the most common household setup, with 26 per cent of children under the age of 5.⁵ Family separation is a factor exacerbating existing protection risks, increasing the psychosocial stress of adults, and undermining children's protection and affect their wellbeing and development, ultimately leaving refugees at risk of violence, exploitation, and abuse. Based on the findings of the protection monitoring conducted in 2022, refugees are coming to the Czech Republic with significant ongoing vulnerabilities in addition to forced displacement and family separation. Among these are both mental and physical trauma and distress, and gender-based violence (GBV) due to the conflict situation or difficulties in Ukraine accessing basic services, giving rise to needs related to child protection and mental health and psychosocial support (MHPSS). In addition, approximately 8 per cent of respondents in the latest UNHCR intention survey from September 2022 reported that one or more members of their household aged 5 or above have a disability, with a lot of difficulty in walking, seeing, hearing, remembering, communicating or self-care.⁶ People with disabilities often struggle to obtain health care and social assistance, in addition to accommodation, because facilities frequently do not have the necessary accessibility features, like ramps and handicapped-accessible restrooms.

Almost one year into the crisis, with limited possibility to return, refugees in the Czech Republic are in need of mid- and longer-term accommodation arrangements. According to the government, 75 percent of Ukrainians are living in private housing, 10 per cent in solidarity housing (hosted by Czechs or Ukrainians), and 15 per cent are in state-funded accommodation. Securing accommodation arrangements, in particular during the winter season with increased living and utility costs, remains a significant need. Housing considerations are also directly associated with access to employment for adults, access to education for children, and eligibility for social assistance, as they are linked to official residence documents and addresses. Also, the integration of Ukrainians living in non-residential housing remains a priority to ensure access to employment and childcare, in particular for refugees from the Roma minority. In the Czech Republic, host communities, the private sector and municipal authorities, as well as RRP partners, have been instrumental in supporting the Czech Government to provide both temporary and longer-term accommodation to refugees.

Refugee children have the right to education under similar conditions to Czech citizens, and enrolment in pre-primary, primary and lower secondary grades (up to the age of 15) is mandatory. According to the Ministry of Education, around 60,000 Ukrainian children enrolled in the 2022/23 school year.⁷ However, one in every four refugee children enrolled in the previous academic year stopped attending or dropped out of school across pre-primary, primary and secondary education levels for various reasons, including issues of demand and capacity. There is significant pressure on existing schools, including kindergartens, in terms of capacity, space and resources to

⁴ Ministry of Labour and Social Affairs, [Situation of Refugees fleeing Ukraine](#), 13 July 2022.

⁵ Ministry of Interior, [Statistics related to the war in Ukraine](#), 31 October 2022.

⁶ UNHCR, [Lives on Hold: Intentions and Perspectives of Refugees from Ukraine #2](#), September 2022.

⁷ Ministry of Education, [Current numbers of Ukrainian children in Czech schools](#), 19 September 2022

accommodate additional students, particularly in Prague. Acquisition of the Czech language, a shortage of teachers and other support staff, and the psychosocial support needs of children further add to the multifaceted challenges for school enrolment and learning by refugee children and youth in Czech Republic.

TP holders have access to humanitarian benefits, including health insurance, however, amendments introduced through the Lex Ukraine II changed the system, whereby the humanitarian allowance for refugees has been limited to 150 days, after which period they shall be entitled to the same level of benefits as Czech citizens, depending on income and accommodation status. Financial coverage of health insurance coverage for TP holders is limited to a maximum of 150 days, except for children and older persons. Vulnerable refugees will gradually be included in the national social protection system already in place for vulnerable Czech people, however, there may be gaps for particular groups in the adequacy and timing of the payment of benefits. Tailored health and psychosocial assistance for persons with disability are also critical priorities, to ensure protection and promote the inclusion of refugees with disabilities in the Czech Republic.

Given the demographic profile of the refugee population, there are heightened protection risks, in particular for women, GBV, including SEA and human trafficking for sexual exploitation purposes, labour exploitation, and child protection risks, including separation of children from their parents and close family members. Alongside enhanced support to expand capacity in the sectors of education, health and social protection, RRP partners are also seeking to provide targeted assistance to vulnerable refugees, including unaccompanied and separated children, survivors of exploitation/trafficking/GBV, persons with disabilities, LGBTIQ+ persons, refugees from the Roma community and people with psychosocial and mental health needs.

Part 2: Country Protection and Solutions Strategy

The RRP protection and solutions strategy for the Czech Republic aims at supporting the efforts of the national authorities at all levels in addressing the needs of refugees from Ukraine and looking for ways to facilitate adaptation and inclusion into the national protection schemes, with a focus on the most vulnerable. In particular, the RRP response will support and complement the Czech Government's strategy for adaptation, coexistence, and long-term solutions, in line with the multi-stakeholder and partnership approach enshrined in the Global Compact on Refugees (GCR).

RRP partners will strive to ensure a coherent and predictable protection response with the participation of refugees while strengthening national protection systems. Specific attention will be given to the protection needs of single women, female-headed households, unaccompanied and separated children, older persons, LGBTIQ+ persons, people with serious medical conditions and persons with disabilities. Efforts will be made to support frontline workers in identifying and providing services to vulnerable refugees and third-country nationals (TCNs) to mitigate life-threatening risks and risks linked to sexual exploitation and abuse.

The following strategic objectives (SO) will guide the response:

Country Strategic Objectives

SO1: Support the Czech Government to ensure refugees' access to protection and assistance on a non-discriminatory basis, including the rights associated with temporary protection.

- Strengthen the protection response of the Czech Government and all relevant actors to register new arrivals, identify and refer persons with specific needs among the refugee population, and provide required specialized services and humanitarian assistance, that apply an age, gender and diversity approach. Support local actors to provide targeted legal and social counseling and assistance to persons of concern.
- Support and strengthen national child protection systems and services provided by state institutions and NGOs, to ensure the social service workforce can adequately respond to the specific needs of refugee children and their families, in particular unaccompanied and separated children and children at heightened risk, such as children with disabilities and children from minority groups.
- Reinforce the capacity of organizations specialized in supporting survivors of GBV, exploitation, and trafficking with a particular focus on women and girls and facilitate access to services, support, and assistance through highly targeted in-person outreach work, online outreach, and training of relevant first responders.

SO2: Work in partnership with national and local governments and civil society to create solutions and expand refugees' access to social and economic opportunities to facilitate a whole-of-society approach to inclusion.

- Ensure access of refugees to livelihood and economic opportunities through professional skills training, short-term employment opportunities and job placements, job counseling and language training, and support for recognition of qualifications, while ensuring that protection risks, such as exploitation and trafficking, are minimized and addressed. The focus will be placed on ensuring that vulnerable refugees, including persons with disabilities and single mothers, are provided with access to livelihood support.
- Provide technical and operational support to the Czech Government and regional authorities in provision of safe, accessible and long-term accommodation, including through developing long-term accommodation strategies and pilot initiatives, such as improvements to collective sites, renovation and outfitting of existing apartments and piloting innovative approaches to increasing housing supply.
- Continue to support the inclusion of refugee children into the national education system through increasing school capacity and services, along with the capacity of school staff to respond to the educational and socio-economic needs of teachers and students, whilst providing flexible/alternative programmes for those most vulnerable and out-of-school.

SO3: Ensure that refugees with specific needs continue to have access to targeted support and assistance, while also engaging with and strengthening community-level protective mechanisms.

- Continue to support existing national measures and systems of the government and civil society, through a multi-sectoral humanitarian response, to ensure refugees' protection, assistance and inclusion to enhance early identification of persons with specific needs and their referral to specialized services.
- Support the Czech Government to ensure that refugees are systematically included in the different forms of social protection, such as people with disabilities, and that targeted support is provided during winter for vulnerable refugees. It is envisaged that targeted support will be required to complement and enhance the Czech Government services to persons with specific needs, including psychosocial support, prevention and response to GBV and human trafficking, disability inclusion and in the protection of children.
- Reinforce accountability to affected people (AAP) through establishing and strengthening two-way communication with communities, increasing access to information and awareness-raising for refugees and TCNs.

SO4: Advance social cohesion between refugees and host communities through targeted interventions.

- Scale up innovative approaches and strengthen partnerships to enhance refugee inclusion through assistance to local civil society and refugee-led organizations.
- Leverage the potential of refugees and refugee-led and Ukrainian diaspora organizations to help solve some of the challenges faced in accessing rights and services and facilitate dialogue and information exchange between refugees, Czech Government authorities and the broader Czech population.
- Provide individual and community integration support to promote and advance social cohesion and self-sufficiency, for example, through access to the labour market and Czech language courses, as well as social, cultural, and recreational events and exchanges.

Mental Health and Psychosocial Support in Czech Republic

Collaboration across government, civil society and UN Agencies on the provision of MHPSS is crucial to the response and in 2022 it has led to a number of initiatives to ensure care and support is provided to refugees from Ukraine.

The National Institute of Mental Health, for example, has mapped the psychosocial services for Ukrainians in the Czech Republic. AMIGA, a Czech NGO, has established a network of Ukrainian- and Russian-speaking specialists in mental health, health care, social work and education, who work with refugees in their native language to improve psychological health and resilience, and to better adapt to the challenges of displacement due to the war. Many of the professionals engaged through AMIGA are Ukrainian refugees themselves and provide their specialized services to give back to the Ukrainian refugee community. These examples demonstrate ways to engage refugees in the response, strengthen community-based protection mechanisms, deploy skills and expertise of refugees for the benefit of their own community and support the livelihoods and engagement of refugees in the Czech Republic.

Sectoral Responses

PROTECTION



Partners will conduct protection monitoring to rapidly identify emerging protection risks and gaps in the response to inform evidence-based protection advocacy and engage with authorities at the national level to address key findings. Partners will also increase outreach in communities, in Prague and outside of the main cities, to identify refugees with specific needs and ensure they are referred to specialized services. Specific attention will be given to single women, female-headed households, and unaccompanied and separated children, as well as older persons, LGBTIQ+ persons, people with serious medical conditions and those living with disabilities.

Efforts will be made to support national protection mechanisms in the identification and provision of services to persons with specific needs. Protection from sexual exploitation and abuse will also form a key part of the response. To this end, particular attention will be paid to engaging and empowering the refugee community to ensure their participation in designing and implementing the response, through participatory assessments, focus group discussions, collaboration with refugee and community-led organizations and other forms of support to the refugee community.

Sub-Sector: Child Protection



To improve the protection environment for girls and boys impacted by the crisis, partners will work to strengthen and complement the national child protection system, ensuring critical child protection prevention and response services are provided to refugee children at risk, as well as their non-discriminatory access to registration, documentation and rights. Existing response services will continue to be strengthened to ensure their effectiveness in preventing and responding to child protection risks and violations and to guarantee that children and their families have access to integrated support services. The response will focus on supporting existing protection mechanisms and the national social assistance system to identify and refer the most at risk, including unaccompanied and separated children, children with disabilities with protection needs, and other children at risk, to appropriate services and support. Additional support services will complement cash assistance to benefit children identified as at risk to ensure they are provided with comprehensive support through the best interest procedure, ensuring direct service provision and referral to specialized services as needed. Specific efforts will be directed towards identifying and protecting refugee children from the Roma community and ensuring non-discriminatory access to the socio-economic assistance scheme.

Increasing access to information on children's rights and child protection services, including those related to violence against girls and boys, will continue to be key in the humanitarian response. Engagement with regional and local authorities and civil society organizations will be enhanced to identify local needs and solutions through support to sub-national authorities and community-based structures and services. In particular, partners will work to expand and strengthen comprehensive

packages of community-based integrated protection services in the country's 14 regions, including outreach and individualized case management, information dissemination on services and referral pathways, MHPSS and identification and protection of the at-risk children. Frontline social service workforce capacity will be bolstered in the regions with the highest number of refugees, and standardized, protection-sensitive referral mechanisms between sectors will be strengthened.

Sub-Sector: Gender-Based Violence (GBV)



Partners will collaborate with national authorities and other relevant organizations supporting the establishment of protection-sensitive systems (including age, gender, and diversity considerations, SEA and trafficking for sexual exploitation preventive measures, vetting systems for volunteers, and volunteer organizations providing transport, and accommodation).

Partners will also cooperate with government and organizations on GBV risk-mitigation across all sectors, in particular for those engaged in the distribution of assistance, provision of accommodation, and enhanced dissemination of information to refugee communities, through outreach and communication to ensure women and girls have access to information on GBV services.

Partners will reinforce the capacity of organizations specialized in supporting GBV survivors, including victims of sexual exploitation and abuse (SEA) and trafficking for sexual exploitation purposes, facilitate access to services, support, and assistance to survivors among the refugee population from Ukraine in the Czech Republic, through highly targeted in-person outreach work, online outreach, and training of relevant first responders on safe disclosures and referrals.

Partners will also support organizations in managing safe shelters and providing social and psychosocial services, as well as legal and reintegration support for victims of exploitation and trafficking.

EDUCATION



Partners will prioritize inclusion of refugee children from Ukraine in the national formal education system in the Czech Republic, in close cooperation with the Czech Government and in line with its inclusion policies in education of refugee children. This will include accelerating key interventions to provide high-quality education and learning opportunities for refugees from early childhood to adolescence in formal education in the national school system. School capacity and services, including classroom spaces, furniture, equipment, learning materials, lunches etc., will be improved to provide safe and conducive learning environments.

Partners will contribute to building capacity of school staff – teachers, teaching assistants and school directors, among others – to address learning and socio-emotional needs of vulnerable children at pre-primary, primary and secondary schools, including Ukrainian refugee children and

children with disabilities. MHPSS will be provided to both children and teachers by specialist support staff including Ukrainian psychologists and through School Counselling Centres.

Partners will provide flexible and innovative programmes to meet various learning and development demands of refugees. These programmes include 'adaptation/preparatory classes' for Ukrainian students with intensive Czech language classes to facilitate integration into schools, as well as extracurricular activities and non-formal education and skills development programmes for both Ukrainian and Czech children and adolescents. Through these programmes, children and youth can connect with peers and improve their socio-emotional well-being. Finally, partners will strengthen the education management information system and use of data at regional, municipality and school levels for providing effective support and allocating resources.

HEALTH AND NUTRITION



Health sector partners aim to reinforce the government-led response, by supporting the Ministry of Health and other government authorities and local actors with capacity-building, tools and technical assistance as needed and aligned with the EU temporary protection mechanisms and response for health. This includes promoting extension of the entitlement to the full range of publicly financed health services for refugees and removing administrative, financial and communication barriers for refugees in accessing health services.⁸

Specific interventions by partners will focus on equitable access to quality primary health care services for refugee women, children and adolescents through the expansion of outpatient centres within university hospitals and general practitioner (GP) facilities across the country; ensuring the continuity of care and referrals for chronic non-communicable diseases (NCDs) and chronic communicable diseases (CDs), particularly HIV and tuberculosis (TB); and health promotion interventions delivered through the regional health promotion centre under the National Institute of Public Health. Partners will also focus on strengthening the capacities of Czech doctors and other health care providers on communication skills related to the cultural aspects of the provision of care, including interpersonal communication skills on the topics of vaccinations and psychosocial support. They will engage in supplementary communication and language support to ensure refugees are aware of health care entitlements linked to the TP status, to help them to access the health system, and to increase awareness around HIV prevention and support access to HIV treatment. Partners will address vaccine hesitancy by supporting the national vaccination

⁸ More specifically, partners will support government and health authorities in designing policies to increase access and reduce barriers to health services and to medicines and medical products for the refugee population in the Czech Republic. They will work alongside national health systems to set up early warning mechanisms to strengthen surveillance systems that detect and respond to potential threats. They will conduct Risk Communication and Community Engagement situational analyses and implement on-going listening and feedback mechanisms through building inclusive networks, engaging individuals with potential vulnerabilities to take an active part in protecting their health, and assisting programmes that serve at-risk individuals to develop continuity of operations plans. Also, they will conduct needs assessments, and health situational and risk analyses, to understand the needs of refugees in the Czech Republic, their health status and potential threats, while monitoring and evaluating access to and utilization of health services, gaps and barriers, especially among vulnerable populations, including refugee health entitlements under and outside EU temporary protection, to ensure meaningful access to health care in the Czech Republic.

campaign and initiating behavioral change interventions promoting vaccinations and other preventive measures, targeting both refugee and host communities.

To address the shortage of doctors and particularly pediatricians in the country, partners will work jointly with public institutions to increase availability and access to primary health care services. Partners will collaborate with educational institutions to increase the capacities of Ukrainian doctors by enrolling Ukrainian health care providers into courses to increase their understanding of the Czech health care system and support successful approbation exams. They will also support the accreditation and licensing of Ukrainians doctors and health care workers to enable their meaningful integration into the health system.

LIVELIHOODS AND SOCIO-ECONOMIC INCLUSION



The Czech Republic rapidly supported refugees' access to national documentation, even prior to the activation of the TPD, thus enabling access to programmes and services, including social protection, from the onset of the response. Despite this favorable legal environment, refugees' socio-economic inclusion is constrained by a range of de facto and administrative barriers: language, limited options for childcare, inflexible documentation requirements, strained services, capacity gaps, lack of awareness by the private sector on refugees' profiles and their right to work, and limited availability of information on rights and services and the institutional pathways to accessing these.

The response will thus include socio-economic profiling; stakeholder mapping; close monitoring of access gaps to inform advocacy efforts and partnerships development; assistance to refugees to access services and market opportunities through information provision, job counseling and accompaniment as well as provision of legal services; and development of socio-economic inclusion partnerships with the public and private sectors, civil society, international organizations, academia and refugees themselves; and technical support to the government to address barriers for inclusion.

Partners will support interventions that not only address the immediate needs of the most vulnerable refugees but will also focus on planning and delivering medium- and long-term strategies to increase their resilience, expand and strengthen national systems, and support adults in connecting to work and youth to skills for employability, including technical skills, soft skills, and job search skills. Partners will also promote dialogue, mutual understanding and social cohesion among refugees and host communities as a means of facilitating peaceful coexistence and promoting solutions, including long-term socio-economic inclusion.

BASIC NEEDS



Ensuring safe, systematic and dignified access to food, accommodation and other basic needs among refugees in the Czech Republic is a top priority. This includes needs of new arrivals in 2023 and those who arrived in 2022. To sustain the ongoing response for refugees from Ukraine, the scope of engagement of RRP partners will cover both direct provision of immediate life-saving assistance and capacity support to local authorities and response actors.

Under the RRP, actors will continue to support the Government with a focus on securing short- and medium-term food security through the continued provision of immediate in-kind food assistance, as well as multi-purpose cash assistance for food and basic needs for vulnerable households, pending their inclusion in the national social assistance programme or successful integration into the Czech labour market.

The high number of refugees continues to stretch available resources and expose shortages of suitable and sustainable accommodation options. In close coordination with local and national authorities, RRP partners will continue to assist relevant ministries by providing immediate short-to-mid-term accommodation options for the most vulnerable refugees and mid-to-long term housing solutions. This includes adequate response and preparation for the winter season through enhancing existing accommodation facilities, targeted cash grants and exploration of new modalities for timely, accessible and dignified accommodation.

A key area requiring significant resources is support to municipalities/regions outside of Prague with systematic accommodation models, recognizing that social housing capacities are either not available or extremely limited. Integrating refugees into the regular housing market may require innovative approaches, alongside cash grants and additional support systems.

Country Cross-Cutting Response Priorities

Accountability to Affected Populations (AAP)



Activities to ensure accountability to affected people and inclusion will continue to be prioritized and will be grouped around the pillars of a) participation and inclusion in line with Age, Gender, and Diversity principles for meaningful consultation; b) communication and transparency, including access to information; c) feedback and response and d) learning and adaptation.

Continuous engagement of refugee women, men, girls, and boys of diverse backgrounds in all RRP implementation stages will be sought by employing participatory methodologies to develop, implement, and evaluate humanitarian interventions. Feedback received from refugees will help to adjust the response where needed. Refugees will continue to access relevant, timely and up-to-date information through two-way communication and feedback mechanisms, such as the [UNHCR HELP Page](#), IOM Help Line, Regional Call Centre and other initiatives. The role of refugee volunteers and community-based and refugee-led actors will continue to be reinforced, including

through dissemination and use of tools and guidance, such as on the registration and vetting of volunteers, as well as community-based feedback and complaint mechanisms.

Protection from Sexual Exploitation and Abuse (PSEA)



Protection from sexual exploitation and abuse (PSEA) is a key priority in the response. Sexual exploitation and abuse directly contradict the principles upon which humanitarian action is based, inflict harm on those whom the humanitarian and development community is obliged to protect, and jeopardize the credibility of all assistance agencies. The Ukraine emergency is characterized by a number of specific risk factors, such as an exceptionally high incidence of family separation and of female-headed households, as well as a wide range of actors involved in the response, some of whom have limited experience with PSEA. These risk factors may be further compounded by increasing socio-economic vulnerabilities, difficulties in finding suitable accommodation, and potential fatigue among Czech Government and host community as the emergency extends into its second year.

PSEA is an integral and cross-cutting component of the RRP and is mainstreamed across all sectors for refugees from Ukraine. In addition, it requires dedicated and proactive collective efforts to mitigate and prevent risks, such as joint SEA risk assessments, partner capacity assessments, capacity building and training, and community outreach and awareness raising with the refugee community. A Regional PSEA and Safeguarding Network has been established, co-chaired by UNHCR and Save the Children, to support these national efforts and ensure consistency, exchange, and the collection of best practices in line with PSEA global commitments.

Mental Health and Psychosocial Support (MHPSS)



Mental health and psychosocial support (MHPSS) is a multi-sectoral issue widely recognized as a priority in the response. MHPSS is mainstreamed across all sectors as a cross-cutting issue, in particular Protection, Child Protection, GBV and health, with sectors identifying MHPSS-related challenges and prioritizing areas of intervention within their scope. MHPSS services and actors will also work to address the language and cultural differences and barriers present across the response.

Key strategic priority areas for MHPSS include: a) protecting and improving the psychosocial well-being of host and refugee communities, especially vulnerable populations such as older persons, caregivers, unaccompanied and separated children, GBV survivors, LGBTIQ+ persons, etc.; b) supporting access to specialized mental health services while reinforcing the capacity of the existing resources; c) integrating MHPSS into other humanitarian sectors as well as working with ministries of health, education, and social protection to support national MHPSS policies; and d) mainstreaming staff care and self-care in the MHPSS workforce through capacity-building interventions and support to caregivers to ensure the well-being of families and children

An MHPSS working group is established and active in the Czech Republic and will continue to coordinate and technically guide the MHPSS response in coordination with national authorities. Partners of the national MHPSS technical working group will strengthen capacity and coordination among all actors, including the Government, UN Agencies, NGOs, civil society and community-based organizations, including child protection authorities, through trainings, updated referral pathways and service mapping.

Partnership and Coordination

In line with the Refugee Coordination Model, RRP partners have developed coordination structure to support the existing government coordination mechanism, which includes working groups in 13 key priority areas, including coordination, communication, financing, digital management, and all the relevant aspects of refugee integration (e.g., housing, education, health, social affairs, security, etc.).

Partners involved	4
UN Agencies	4

Note: This list only includes appealing organizations under the RRP, many of which collaborate with implementing partners to carry out RRP activities. See 'Budget Summary by Partner' for partner breakdown per type.

The Refugee Coordination Forum (RCF) is the key coordination body of the RRP partners, within the framework of the Refugee Coordination Model (RCM). Co-chaired by the Ministry of the Interior (Mol) and UNHCR, comprising relevant representatives of the Government, civil society organizations coordinated within the NGO Consortium, and UN agencies, the RCF aims to strengthen coordination of the RRP partners with the Government and civil society, providing strategic guidance for the identification and implementation of relevant interventions, ensure preparedness and contingency planning, as well as providing guidance to the Protection Working Group (PWG), reporting to the RCF. It works closely with the Government Working Group on EU/International Strategy, ensuring coordinated response and accountability towards refugees and the donors. The RCF meets regularly to discuss key strategic topics and facilitates related dialogue among the key stakeholders.

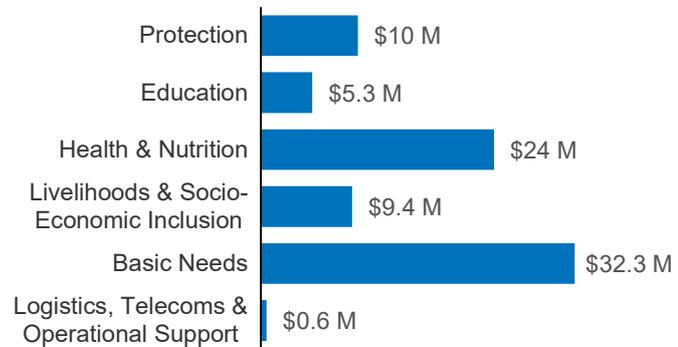
Inter-Agency Financial Requirements

Total financial requirements in USD



\$81.6 M

By sector in million USD



Total Protection requirements	\$9,990,160
Other protection activities	\$2,329,010
GBV	\$1,532,174
Child Protection	\$6,128,976

Total Cash Assistance requirements*	\$20,622,206
Basic Needs	\$19,422,206
Livelihoods & Socio-Economic Inclusion	\$1,200,000

* This is a breakdown by sector of the requirements for cash assistance which are included in the above total sectoral budgets. Cash assistance is pursued and reflected as a key modality of assistance and protection in line with UNHCR's CBI Policy 2022-2026. Cash assistance is used as a cross-cutting modality across the various sectors, including protection, and is budgeted for accordingly and in line with a basic needs approach. As the modality of choice of people we serve, cash assistance will be used as the primary means to meet immediate basic needs and provide important protection outcomes.

By partner type

Partners involved	4
UN Agencies	\$81.6 M

By partner

Partner / Acronym	Protection	Education	Health & Nutrition	Livelihoods & Socio-economic Inclusion	Basic Needs	Logistics, Telecoms & Operational Support	Total USD
UN Agencies							
International Organization for Migration (IOM)	696,836		384,285	5,149,415	7,168,190	640,474	14,039,200
United Nations Children's Fund (UNICEF)	5,207,498	5,320,676	3,677,661		18,422,206		32,628,041
United Nations High Commissioner for Refugees (UNHCR)	4,085,826			4,223,482	6,661,739		14,971,047
World Health Organization (WHO)			19,940,000				19,940,000
Total	\$9,990,160	\$5,320,676	\$24,001,946	\$9,372,897	\$32,252,135	\$640,474	\$81,578,288