Disability Inclusive Safeguarding

Regional Review (Moldova, Poland and Romania)

April 2023
## Contents

**Disability Inclusive Safeguarding** ................................................................................. 1

- Introduction .................................................................................................................. 4
- Terminology .................................................................................................................. 4
- Methodology ................................................................................................................. 5
- Situation for Ukrainian persons with disabilities living as refugees in the region .......... 6
- Organisations of and for Persons with Disability (OPDs) and Safeguarding in Eastern Europe .................................................................................................................. 9
- Country Focus: Moldova ............................................................................................... 11
- Country Focus: Poland ................................................................................................. 12
- Country Focus: Romania ............................................................................................... 13
### Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>CSO</td>
<td>Civil Society Organisation</td>
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<tr>
<td>EDF</td>
<td>European Disability Forum</td>
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<td>GBV</td>
<td>Gender-Based Violence</td>
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<td>INGO</td>
<td>International Non-Governmental Organisation</td>
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<td>OPD</td>
<td>Organisation of Persons with Disabilities</td>
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<tr>
<td>PSEA</td>
<td>Protection from Sexual Exploitation and Abuse</td>
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<td>PWD</td>
<td>Persons with Disabilities</td>
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<td>SEA</td>
<td>Sexual exploitation and abuse</td>
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<td>UNCRPD</td>
<td>United Nations Convention on the Rights of Persons with Disabilities</td>
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</table>
Introduction

Since the start of the war on Ukraine, an estimated 11 million Ukrainians have been displaced. In March 2023 there were over 8 million refugees from Ukraine across Europe (UNHCR, 2023). No data is available about how many of them have a disability. However, estimates suggested that, as of July 2022, 13% of families fleeing Ukraine had at least one member with a disability (UNHCR, 2022). While globally 16% of people are estimated to live with a disability (WHO, 2022), research indicates that rates of disability are likely higher in communities that have fled conflict or disaster (HRW, 2023). This is because during crises people may acquire new impairments and have limited access to medical treatment, as well as struggling to access humanitarian services. Women and girls with disabilities are likely to be at greater risk of experiencing violence and abuse (WHO, 2022).

Organisations for Persons with Disabilities (OPDs) play a vital role in supporting persons with disabilities (PWDs) to live with dignity, and to understand and claim their rights. They are often working in local communities and are a trusted lifeline, providing services such as advocacy support to help PWDs to access education, as well as medical support and assistive devices. OPDs are often places where persons with disabilities can feel safe and valued as active citizens. Without such organisations, many PWDs can become isolated and increasingly at risk of harm. The value of OPDs is heightened in times of humanitarian crisis. It is of vital importance that these organisations have robust safeguarding systems in place so that, in times of increased vulnerability, those accessing their services are not placed at risk of harm or abuse, but that the organisations are spaces that can be relied on.

This report sets out the findings of a review conducted by the Safeguarding Resource and Support Hub Eastern Europe to understand the safeguarding needs of OPDs and Ukrainian refugees with disabilities in Moldova, Poland, and Romania. The research was commissioned to help the Hub understand how to best support organisations working with and for PWDs to strengthen their safeguarding understanding, systems, and approaches.

Terminology

What is disability?

The UN Convention on the Rights of Persons with Disabilities (UNCRPD) describes persons with disabilities as “those who have long-term physical, mental, intellectual, or sensory impairments which, in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others”. When combined with these impairments, barriers that exist in society can hinder effective participation in society.

Impairment + barriers = disability
What is safeguarding and disability inclusive safeguarding?

Safeguarding broadly means preventing and responding to harm caused by staff in the delivery of development and humanitarian assistance. Most staff and associates of CSOs are highly committed and principled but there is always a risk that some may engage in misconduct that harms the people who rely on them for services. During humanitarian emergencies, humanitarian staff have been found to have committed sexual exploitation, and abuse (SEA) such as asking for sexual favours in exchange for humanitarian supplies. These acts are driven by unequal power dynamics between humanitarian and development staff and the people they are supposed to be helping. Work to address SEA is often referred to as Protection from Sexual Exploitation and Abuse (PSEA).

Persons facing discrimination due to their disability, or multiple forms of discrimination due to their intersecting identities (e.g. disability + gender identity), may be at increased risk of SEA and other harms and abuses by those with more power. It is important to consider how persons with disability might be excluded or face discrimination to understand and identify increased risks of harm, including SEA.

Disability inclusive safeguarding means ensuring safeguarding structures and systems are designed to respond to the needs of PWDs.

Methodology

This regional research was commissioned to understand which OPDs are operating and assisting Ukrainian refugees with disabilities and how they are currently implementing safeguarding policies and procedures. In depth assessments were conducted in the Safeguarding Hub Eastern Europe’s focus countries: Moldova, Romania, and Poland. These were complemented by a regional desk review to understand the key safeguarding challenges for refugees with disabilities and OPDs. Relevant literature was identified through search strategies, including Google and relevant electronic database searches, using key search words1, as well as reviewing literature published by humanitarian stakeholders operating in the region and organisations working on disability rights.

Over 30 interviews were carried out with representatives from OPDs, disability networks, and local and national government officials working with and for PWDs in Moldova, Poland, Romania.

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1 Search terms included a combination of the following: safeguarding, SEAH, sexual exploitation, sexual abuse, sexual harassment, harm, abuse, disability, children with disabilities, persons with disabilities, safeguarding, child protection, trafficking, gender based violence, humanitarian aid, Eastern Europe, Ukraine, Poland, Moldova, Romania, risks, refugee.
The study should be read with the following limitations in mind:

- Firstly, the in-country interviews were conducted by consultants who are disability experts, but not necessarily safeguarding experts. This inevitably led to some compromise in terms of the depth of conversation on safeguarding.
- Secondly, the speed and pace of the humanitarian response has resulted in limited capacity within OPDs, CSOs and INGOS to engage with the assessments. Over half of those approached for interviews declined citing lack of time or energy to engage. However, the sample is sufficient to give an indication of challenges faced at the national level by OPDs.

**Situation for Ukrainian persons with disabilities living as refugees in the region**

Ukrainian refugees with disabilities are largely invisible in information about the response due to a lack of data. The European Disability Forum (EDF) estimated that before the war there were 2.7 million persons with disabilities registered in Ukraine (2022). It also estimated that “upwards of 200,000 children with disabilities from Ukraine may have sought refuge with their families in other countries” (EDF, 2023).

PWDs in the region face increased safeguarding risks based on several factors, including:

1. **Historical systems of state-run institutionalised care**

Many children and adults with disabilities in Eastern European countries continue to live in institutions, segregated from society, despite the evidence demonstrating it being inherently harmful (EDF, 2023). This is despite moves towards more inclusive, rights-based approaches to disability. Before the war, Ukraine had the highest number of children in institutional care in Europe. Over half of more than 90,000 children living in residential care institutions (including orphanages, boarding schools and other care facilities) were children with disabilities (UNICEF, 2022). Thousands of children have been evacuated from institutions in Ukraine and rehoused either in Ukraine or in neighbouring countries where they might have been (re)institutionalised and continue to face the risk of abandonment and neglect (UNHCR and EDF, 2022). Residential institutions are usually established with the aim of protecting and caring for children who do not have families or cannot safely live with their families, but these children also face a greater risk of trafficking and other forms of violence (Lancet Commission, 2020; HRW, 2022). Consequently, risks associated with institutionalisation now intersect with the risks and vulnerabilities of unaccompanied

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2 As it exposes children, and in particular those with disabilities, to a considerably higher risk of all forms of abuse, including trafficking than children raised in a family environment.
children and adults with disabilities, separated from their usual support networks while seeking refuge.

2. Overstretched national systems in refugee-hosting countries

The extra pressure of refugees on support systems in neighbouring countries impacts the availability and quality of specialized services for refugees with disabilities. This includes healthcare, for example access to medicine and assistive devices. It also limits their opportunities to access education and other activities ([UNICEF, 2022, UNHCR and EDF, 2022](UNICEF, 2022, UNHCR and EDF, 2022)). Food distributions are not sufficiently addressing specific dietary needs, such as those of people with different chronic illnesses or disabilities ([UN Women, 2022](UN Women, 2022)). Lack of interpretation capacity (including Ukrainian sign language) and inadequate accessibility of basic services, information, accommodation and reception facilities present major challenges for refugees with disabilities ([UNHCR and EDF, 2022](UNHCR and EDF, 2022)). More broadly, with even fewer opportunities to support themselves, PWDs might adopt negative coping strategies to gain access to food and other supplies, or for their own safety and security.

3. Violence against children with disabilities

Globally, children with disabilities are almost four times more likely to become victims of violence than children without disabilities ([UNICEF, 2013](UNICEF, 2013)). They are nearly three times more likely to be subjected to sexual violence, with girls at the greatest risk ([UNFPA, 2018](UNFPA, 2018)). Children who are deaf, blind, or autistic, have psychosocial and intellectual disabilities, or have multiple impairments are most vulnerable to all forms of violence (Jones et al. in [UNFPA, 2018](UNFPA, 2018)). Violence can be perpetrated by humanitarian aid workers, guardians, caregivers, parents, peers, educators, service providers and others. Research from the EU suggests that this is also the case in Eastern Europe ([FRA, 2015](FRA, 2015)).

4. Intersections of Gender-Based Violence (GBV) and disability

Globally, women and girls with disabilities are estimated to face up to 10 times more GBV than those without disabilities ([UNFPA, 2018](UNFPA, 2018)). Girls and young women with intellectual or psychosocial disabilities are particularly vulnerable to sexual violence followed by those with physical, particularly sensory disabilities ([Amborski et al., 2022](Amborski et al., 2022)). In Eastern Europe, rates of GBV are high. An estimated 84% of women with disabilities in Moldova have experienced abuse in adulthood, since the age of 15 ([UNFPA, 2020](UNFPA, 2020)). In Ukraine the figure is 81% (ibid). Women with disabilities are also more likely to experience more severe consequences of their
experiences of GBV, such as physical injuries. They are less likely to report their experiences of violence. The reasons for this include a lack of trust, a lack of services, a lack of information about services, and a lack of access to services, including physical barriers to accessing services (ibid).

5. Marginalised groups with intersecting vulnerabilities face increased safeguarding risks

It is well recognised that certain groups of refugees face increased safeguarding risks based on intersecting risk factors. All research participants agreed that those most at risk were women and children, unaccompanied children, Roma people, persons with disabilities, LGBTQI+ people and older people. Those at greatest risk of sexual exploitation and abuse are those with intersecting risk factors for example, unaccompanied children and adults with disabilities; PWDs living in larger transit centres, and PWDs who have previously been institutionalized.

6. Human trafficking

PWDs – especially women and girls – tend to have fewer financial means and informational resources. They are therefore particularly vulnerable to trafficking and exploitation (UNHCR and EDF, 2022). Children with disabilities who have experience of living in institutions are particularly susceptible to falling victim to trafficking (European Commission, 2015). A rapid assessment of trafficking risks of refugees from Ukraine by La Strada International found that chronically ill, disabled and elderly people are a group particularly vulnerable to trafficking and exploitation (Hoff and de Volder, 2022).

7. Increased risk of discrimination

Despite being the world's biggest minority, PWDs regularly face discrimination. Discrimination is still embedded in many Eastern European countries’ legislative frameworks making it hard for PWDs to easily access education and health care systems. Negative stereotyping of PWDs has been documented in the Ukraine evacuation response. UNHCR and EDF, for example, reported that PWDs may face barriers or discrimination in accessing appropriate housing, education, employment, social protection, legal aid and recognition of disability status (2022).

8. Aid delivery mechanisms and undignified aid delivery

A joint UNFPA and UNHCR GBV risk assessment exercise, which looked at GBV risks produced by cash and voucher assistance in Moldova, found that people with intellectual and psycho-social disabilities were at higher risk of exploitation and fraud when accessing cash enrolment procedures (2022). It also found that services requiring online registration and SMS messages about cash disbursements might not reach (or reach in time) PWDs,
leaving them more exposed to exploitation and/or GBV. The same assessment found that persons with mental illness are at risk of being considered easy targets for sexual abuse.

9. PWD dependency on others

Chronically ill, disabled and older people are often very dependent on others. At times of war, they risk being left behind when others flee. They may be unable to access the support and care they require to meet their basic needs. Their vulnerability can expose them to an increased risk of exploitation and abuse (UNFPA and UNHCR, 2022).

10. Communication and language barriers

There is a lack of accessible and culturally appropriate communication material on PSEA/GBV for PWDs fleeing from Ukraine to refugee hosting countries (UNHCR, 2023). Throughout the research we heard many reports of PWDs not understanding their rights and not being able to report complaints if something did not feel right. Limited accessible ways of reporting concerns and language barriers present a huge safeguarding risk for the humanitarian response in the region. Where complaints mechanisms have been set up, they are not well known and are not adapted for the needs of PWDs. PWDs and older people can have difficulties in communicating due to their age, as well as difficulties hearing, seeing, talking and understanding.

Organisations of and for Persons with Disability (OPDs) and Safeguarding in Eastern Europe

The research found that OPDs across Moldova, Poland and Romania face similar challenges and barriers to implementing effective safeguarding systems and processes.

1. Limited understanding of safeguarding

Safeguarding and PSEA are relatively new concepts in Eastern Europe, particularly in terms of how humanitarian organisations conceptualise and speak about them. This research found scarce understanding of safeguarding principles, standards, acceptable behaviours, and a prevalent belief that CSO staff teams comprise of ‘good people’. Many participants mentioned that “caregivers would not harm someone with disabilities“. They would not envisage that people working in their organisations could harm a PWD. The small and close-knit nature of these organisations made it difficult to raise this issue. Most of the OPDs interviewed had limited safeguarding systems in place (policy, code of conduct, reporting mechanisms etc.)

Participants did not raise the topic of safeguarding risks posed by staff or response activities towards PWDs, especially those with psychosocial and intellectual disabilities. They felt more comfortable discussing the barriers that PWDs face, for example,
environmental risks such as the lack of adaptive spaces and accessible transport etc. To conclude, OPDs seem to better understand the safeguarding needs of persons with physical disabilities compared to the needs of persons with other types of disabilities.

2. Capacity to respond

Whilst OPDs are often considered to be best placed to respond to the needs of refugees with disabilities, the majority are run by volunteers or very small teams. Before the war on Ukraine, the OPDs we spoke to admitted that they were already operating at capacity and therefore, had found it difficult to respond to the influx of refugees. Many OPDs are staffed by PWDs themselves or the loved ones of PWDs, working as volunteers. They are operating on extremely limited funding (in some cases no funding at all), and many people we spoke to reported staff burnout as a major challenge. Since the start of the war on Ukraine, the region has seen an influx of INGOs wanting to partner with OPDs. However, in order for the OPDs to work as partners, they must comply with minimum safeguarding standards, such as having trained staff, safeguarding policies, a code of conduct etc. Many INGOs have offered safeguarding training to OPDs to help them to meet these minimum standards. Our research found that those working for OPDs were often not able to take up these opportunities due to lack of capacity.

3. Lack of Human Resources

The OPDs we spoke to in all three counties are facing significant human resource challenges. Where they have received funding to recruit additional staff or volunteers, the speed and ad hoc nature of the response, combined with the lack of pre-existing safeguarding systems, has resulted in risky recruitment processes. OPDs reported confusion about how to conduct background and criminal records checks on staff and volunteers. There was also some resistance to conduct these due to “capacity and culture”. Some OPDs explained that “normally people were recruited from amongst friends.” Again, they shared the belief that those wanting to work with OPDs were ‘good people’. Whilst most of those volunteering to support refugees are doing it out of generosity and good will to help, it is well reported that a humanitarian crisis also presents opportunities for those wanting to cause harm, to sexually exploit and abuse vulnerable people. The prevailing belief that all humanitarian workers are ‘good people’ and the lack of understanding of safe recruitment processes are concerning.
Country Focus: Moldova

Moldova has welcomed 674,051 Ukrainian refugees and 76,752 third country nationals since the outbreak of the war on Ukraine. In late January 2023, 102,283 refugees in Moldova were recorded (UN Operational Data Portal, February 2023). There is no official data on the numbers of persons with disabilities. Respondents in Moldova highlighted groups at particular risk as children and adults with disabilities arriving unaccompanied; and persons with disabilities living in larger transit centres.

The research found a varied level of understanding of safeguarding terminology. OPDs and CSOs funded by the UN seem to have more understanding of PSEA practices, whereas smaller OPDs and CSOs are often not familiar with the concept of safeguarding. 50% of interviewees had never been involved in any safeguarding training. Many smaller organisations told us that they have no capacity to attend safeguarding training even if invited.

**Key safeguarding risks identified:**

**Transportation:**

Lack of safety checks of the means of transportation and persons providing transportation services.

Lack of adapted and accessible infrastructure, which would allow refugees with disabilities to travel to public administration offices, leave them reliant on others to access services.

**Accommodation:**

Lack of safe and accessible opportunities for accommodation in private houses.

Resistance and discrimination by private hosts to accommodating persons with disabilities.

Increased acts of aggression among refugees living in overcrowded reception centres with PWDs being more at risk of being targeted.

**Reporting:**

There are very few structured safeguarding reporting mechanisms in place within OPDs and therefore little opportunity for PWDs to report concerns.

Safeguarding investigations are not well understood. There are limited mechanisms for misconduct complaints, beyond criminal offences.
Where safeguarding reporting mechanisms do exist and criminal investigations are carried out, these are not adapted for PWDs. For example, the use of sign language interpreters for people with hearing impairments.

**Country Focus: Poland**

Poland has welcomed the largest numbers of refugees from Ukraine since the start of the war. As of February 2023, 1,541,394 Ukrainian refugees were registered for temporary protection in Poland (UN Operational Data Portal, February 2023). No disaggregated data is available for PWDs. Those most at risk were identified as: children and adults with disabilities arriving unaccompanied or separated; and persons with disabilities with intersecting risk factors, such as women and girls.

**Key safeguarding risks identified:**

**Risk of gender-based violence (GBV)**

PWDs, especially women and girls, are at increased risk of GBV including trafficking for the purpose of sexual and labour exploitation.

PWDs, who are survivors of GBV, face increased safeguarding risks.

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One organisation interviewed spoke of a case of a female refugee client with a disability who was raped while fleeing Ukraine.

**Transportation**

Mobility constraints are a major obstacle for PWDs with transportation often not fit or adapted to their needs. In the humanitarian response, lack of adequately adapted means of transport has left many having to take long and often uncomfortable journeys with no accessible infrastructure or facilities. This can leave some PWDs with a greater reliance on humanitarian workers.

Several cases have been documented of PWDs being forced to cross the border without their assistive equipment, e.g., wheelchairs, leaving them dependent on others for mobility and support.

**PWDs dependent on care givers**

Poland has seen a large group of PWDs who are dependent on care givers. Those PWDs without caregivers (but who require them) are therefore highly vulnerable to abuse. They are deprived of a support network and exposed to potential abuse from the staff of institutions hosting them.
Accessing services

Some interviewees described community mistrust of PWDs from Ukraine and accusations of refugees simulating a disability. This particularly affected men with disabilities who are believed to be ‘pretending to avoid the martial law’.

Many PWDs have encountered difficulties registering for temporary protection due limited mobility or a lack of knowledge about the service.

PWDs are more likely to depend on social protection assistance and reside in collective shelters for longer periods than others. This leaves them at greater risk of experiencing safeguarding-related misconduct, including SEA.

Country Focus: Romania

Romania is a transit country for many refugees from Ukraine. In February there were 112,575 refugees from Ukraine who were registered for Temporary Protection or similar national protection schemes (UN Operational Data Portal, February 2023). There is no disaggregated data on the number of PWDs.

Key safeguarding risks identified:

Travelling to and beyond Romania

PWDs face difficulties in moving from Romania to another country of preference. The research identified a range of barriers, including a lack of adapted means of transportation, a lack of financial resources and a reliance on care providers who may be unwilling or unable to travel.

Limited access to sexual reproductive health and rights information and services

Prior to the war on Ukraine, PWDs in Romania had extremely limited access to sexual reproductive health and rights services. This is particularly problematic for women and girls with disabilities who have experienced a safeguarding-related misconduct, including SEA.

One OPD shared a case about a mother of a child on the autism spectrum who found a flat with a private individual in an urban area. In the middle of the night, the owner of the flat demanded sexual services from the woman in exchange for her and her child to stay with him. They fled during the night and ended up on the street.

Access to medication and assistive equipment
Some medication and assistive equipment requiring regular attention, e.g., protheses and audio devices needed by PWDs, which were formally available in Ukraine is not available in Romania. Many PWDs experience long waiting times to see doctors. This leaves PWDs with an increased dependence on others for support, including day-to-day tasks, which they may otherwise have been able to do had the right medical support been available.

**Stigma and over-protectiveness**

There were several reports of systemic barriers around over-protectiveness and stigma of PWDs, resulting in families not encouraging PWDs to access services due to the fear of being mistreated.

**About the Safeguarding Resource and Support Hub Eastern Europe report:**

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