POLAND

MULTI-SECTOR NEEDS ASSESSMENT

October 2023

Results overview
OBJECTIVES & METHODOLOGY
OBJECTIVES

The Multi-Sector Needs Assessment (MSNA) for Poland is part of a regional interagency multi-sectoral assessment, seeking to capture and understand:

- the needs of refugees;
- the level of access to basic services, and how refugees’ needs are met;
- service gaps and refugees’ priorities for the coming year.

The MSNA is a key source of information for the 2024 Regional Refugee Response Plan (RRP), which captures priorities and funding requirements for the response.

This overview of the results covers the following topics:

1. DEMOGRAPHICS
2. PROTECTION
3. EDUCATION
4. SOCIO-ECONOMIC INCLUSION AND LIVELIHOODS
5. HEALTH
6. ACCOMMODATION
OVERVIEW

COMPLETED VISITS

5,645 households (HH)

DATA COLLECTION BY

UNHCR and IOM

DATA COLLECTION

From 13/7 to 21/8/2023

ANALYSIS BY

UNHCR and IPSOS

POPULATION COVERAGE

Over 13,420 refugees living in metropolitan and rural areas in 16 regions (voivodeships), in private accommodation, with host families, rentals, hostels/hotels and in collective sites.
# METHODOLOGY

This overview of the results is based on the analysis of collected data after cleaning and weighting.

<table>
<thead>
<tr>
<th>POPULATION</th>
<th>Refugees living country-wide as per sample based on distribution of active PESEL UKR registrations, ZUS insurance and social benefits records, school enrollment</th>
</tr>
</thead>
<tbody>
<tr>
<td>DESIGN</td>
<td>Household interviews conducted in person</td>
</tr>
<tr>
<td>DATA COLLECTION</td>
<td>From <strong>13/7 to 21/8/2023</strong> by enumerators from UNHCR and IOM</td>
</tr>
</tbody>
</table>
| SAMPLE SIZE      | • 5,645 HHs; covering 13,421 HH members  
• Inhabitants of 223 cities / villages  
• 3,883 surveys for 12 biggest cities; 1,762 outside  
• Country-wide stratum plus one for each of the 12 biggest cities |

**SAMPLING AND REPRESENTATIVITY:**
Selected according to certain criteria (geographical coverage, accommodation types), but not statistically representative. Results are indicative.

**LIMITATIONS:**

- Data collection during summer / school holidays most likely affected the sample;
- Lack of comprehensive data and less reach regarding the refugee population outside of urban areas;
- Sensitivity around protection and income questions, therefore, large non-response rate and less reliable data;
- Respondent bias: certain indicators may be under-reported or over-reported due to the subjectivity and perceptions of respondents.
1. DEMOGRAPHICS
TYPE OF COLLECTED DATA

HOUSEHOLDS AND HOUSEHOLD MEMBERS

Households represented by respondents
N=5,645

Members of households who fled Ukraine in February 2022 or after
N=13,421
**DEMOGRAPHICS**

**RESPONDENTS REPRESENTING HOUSEHOLDS**

Around 89% of respondents were **women**, 11% were **men**. The largest age group is 25-39 years (44%).

100% of respondents have **Ukrainian citizenship**. 99% of respondents self-identified as **Ukrainian background**, 3% as **Russian**, 1% as **Belarusian**.
Interviews were conducted in all voivodeships. The highest number of interviews (55%) were conducted in the 12 biggest cities (Warszawa, Wrocław, Łódź, Lublin, Kraków, Białystok, Szczecin, Poznań, Bydgoszcz, Gdańsk, Rzeszów, Katowice).

Locations of the interviews were selected based on data from the PESEL UKR active records (temporary protection status), ZUS social insurance and government social protection benefits together with school enrollment distribution to ensure a relatively even geographical coverage of the country.

The majority of respondents (97%) were interviewed in the same voivodeship where they are residing.
Each shaded region represents the specific Oblast from which these households have been displaced.

Refugees from Ukraine in Poland mainly come from Kharkivska Oblast (12%), Dnipropetrovska Oblast (11%) and Khersonska Oblast (11%).
**DEMOGRAPHICS**

**HOUSEHOLD CHARACTERISTICS**

- **Average HH size**: 2.7
- **52%** HHs with children
- **49%** HHs with a chronically ill member
- **42%** HHs with only one adult (18-59) and dependents*

- **28%** HHs with one or more adults (18-59) *without* dependents
- **20%** HHs with two or more adults (18-59) and dependents
- **9%** HHs with exclusively elderly
- **6%** HHs with a pregnant or breastfeeding woman

*Dependents – children (0-17 y.o.) and elderly (60+ y.o.)
**DEMOGRAPHICS**

**HOUSEHOLD MEMBERS CHARACTERISTICS**

Household Members by gender & age

<table>
<thead>
<tr>
<th>Gender &amp; Age</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4</td>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>5-11</td>
<td>9%</td>
<td>9%</td>
</tr>
<tr>
<td>12-17</td>
<td>7%</td>
<td>7%</td>
</tr>
<tr>
<td>18-24</td>
<td>2%</td>
<td>2%</td>
</tr>
<tr>
<td>25-39</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>40-59</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>60+</td>
<td>9%</td>
<td>9%</td>
</tr>
</tbody>
</table>

HH members are children **37%**

HH members are elderly **12%**

HH members are individuals with disabilities (WGD 3) **5%**
2. PROTECTION
PROTECTION

HOUSEHOLD MEMBERS – STATUS

HH members who applied for PESEL UKR

- 98% applied for PESEL
- 1% No

HH members holding an electronic travel document (DIIA.pl)

- 59% have diiapl
- 40% No
- 1% Do not know

Yes  No, but planning to apply  No, and not planning to apply

Regional Refugee Response for the Ukraine Situation
% of HHs reporting tensions with host community

- 66%
- 31%
- 3%

Type of hostile behavior reported (out of the 31% reporting tensions)

- Verbal aggression: 78%
- Discriminatory behavior (e.g. while searching for job, accommodation): 37%
- Hostile/aggressive comments in social media: 21%
- Hostile/aggressive comments in news forums online: 13%
- Physical attack: 9%
- Sexual harassment: 1%

PROTECTION
HOUSEHOLDS – SOCIAL TENSIONS
Proportion of HHs having concerns regarding risks faced by boys and girls, is 38% and 32%, respectively.

The two most commonly mentioned risks are the same for both groups – increased vulnerability to neglect, as well as psychological violence in the community. In the third place is increased vulnerability to abuse (for boys), and sexual violence in community (for girls).
Most respondents were able to mention at least one service where they can report violence against children. 16% said that they do not know of any services. 79% mentioned the police, 17% reported that they know of government services, 10% know of a helpline, and 7% know of NGO services.
Note: Respondents may have had different approaches to what “aid” constitutes, sometimes not understanding this to comprise certain Government services.

About half of HHs have received aid from either governmental sources or humanitarian organizations in the last 3 months. 8% were not satisfied with the aid received. The main reason for dissatisfaction with the aid received was that it was insufficient (51%).
82% of HHs have reported unmet need(s) – the top 3 most commonly mentioned are employment / livelihoods (32%), healthcare (27%), and accommodation (23%).
The vast majority of HHs are satisfied with humanitarian workers. Among those who are dissatisfied (7%), the main reported reasons are that aid criteria are not clear / seem unfair (40%), assistance does not meet needs (36%), aid workers are disrespectful (23%), as well as that aid workers show a lack of respect and empathy for their situation (17%).
3. EDUCATION
Note: The education attendance figures are based on self-reported responses from participants and do not rely on official attendance records from Polish schools.

Most of the children in mandatory school age, 77%, were — according to respondents — enrolled in school in Poland in the school year 2022/23. This result is significantly higher than the data presented by the National authorities and may be due to respondent bias that is associated with compulsory schooling in Poland.

Still based on self-reporting, 80% of children in mandatory school age were to be enrolled in Poland in the coming school year, while 9% were not to be enrolled, and for 10% of children respondents said they had not decided yet or did not know.
4. SOCIO-ECONOMIC INCLUSION AND LIVELIHOODS
Labor Force Participation
out of working age population 15 to 59 (women) and 15 to 64 (men)

- 61% Of working age are employed
- 11% Employed
- 28% Unemployed
- 72% Inside the labor force
- 28% Outside labor force

11% of youth (16 to 24) who are Not in Education, Employment or Training (NEET)

The definitions below are based on the core ILO Labor Force Survey (LFS) questions.

**Employment**: Employment includes individuals of working age who have engaged in income-generating activities in the past week. This encompasses formal employment, self-employment, agricultural/fishing work, diverse income generation, temporary absence from paid roles, and unpaid contributions to family businesses.

**Unemployment**: % of working-age individuals who were not employed during the past week (as per the definition above), who looked for a paid job or tried to start a business in the past 4 weeks, and who are available to start working within the next 2 weeks if ever a job or business opportunity becomes available.

**Outside labor force**: % of working-age individuals who were not employed during the past week, and who either cannot start working within the next 2 weeks if a job or business opportunity becomes available or did not look for a paid job or did not try to start a business in the past 4 weeks.

**Inside labor force**: Employed and Unemployed
The most common sectors of employment are various service activities, manufacturing, and hospitality.

The main challenges reported are lack of knowledge of the Polish language, a lack of decent employment opportunities and a lack of employment opportunities suited to their skills.
42% of HHs declare they are covered by Polish and 18% – by Ukrainian social protection systems. The most common social benefits are child or family grant in Poland and old-age pension in Ukraine.
38% of HHs report that they are able to afford less than last year, the main reasons for this are increased prices (e.g. food, housing, education), reduced income, and increased expenses from unexpected events.
47% of HHs adopted at least one livelihood coping strategy.
The Livelihood Coping Strategies – Essential Needs (LCS-EN) is an indicator used to understand the medium and longer-term coping capacity of households and their ability to overcome challenges in meeting their essential needs in the future. The indicator is derived from a series of questions regarding the households’ experiences with livelihood stress and asset depletion to cope with food shortages.
Food Consumption Score

- Poor: 0.4%
- Borderline: 2%
- 98%

Households Reporting Food-Based Coping Strategies

- Reliance on less preferred/less expensive food: 55%
- Restrict consumption of adults: 25%
- Reduction of meal size: 23%
- Borrow food or money to buy food: 17%
- Reduce number of meals eaten: 17%

% of all households
5. HEALTH
29% of HH members who needed healthcare in the last month. 10% of those needs were not met.
HEALTH

HOUSEHOLD MEMBERS – HEALTH CARE ACCESS IN THE LAST MONTH
BARRIERS IN ACCESS (AMONG THOSE WHO WERE NOT ABLE TO OBTAIN THE NEEDED HEALTH CARE)

The main barriers in access to healthcare (HH members)

- Unable to make an appointment: 47%
- Language barriers: 19%
- Could not afford fee at the clinic: 18%
- Lack of knowledge of how to access health...: 15%
- Treatment or service needed unavailable: 12%
- The person did not try to obtain medical care: 8%
- No functional health facility nearby: 7%
- Did not receive correct medications first time: 6%
- Do not trust local provider: 6%

The main reported barriers in access to healthcare are **not being able to make an appointment (47%)**, **language (19%)**, and **not being able to afford the fee at the clinic (18%)**.
According to the respondents, more than 20% HH members aged 5 years or older feel either upset, anxious, worried, agitated, angry, or depressed that it affects the person’s daily functioning. More than half among them (12% of all HH members aged 5 years or older) were reported to be in need of mental health or psychosocial support. The question was asked to respondents who answered on behalf of their household members. However, they may not have always been aware of the existence of needs in these categories in their family. It is also worth noting that due to the sensitive nature of the question, there are chances that under-reporting may have happened.

45% of persons in need of mental health or psychosocial support have received help for their problem. The main reasons for not getting the help they needed were that they did not know where to seek help (37%) and the lack of time (19%).
6. ACCOMMODATION
Regarding the living conditions of HHs, the most common arrangement is accommodation on their own (59%). 20% share with others, 13% live in a hotel/hostel, and 7% at a collective site.

Some 4% of HHs are facing pressure to leave their accommodation.
26% of HHs report issues with their current living conditions. The most common problems are not enough space and a lack of separate showers or toilets.
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