PROTECTION BRIEF #6

REPUBLIC OF MOLDOVA

June 2025

UNHCR
The UN Refugee Agency

Operational Context & Analysis

As of 30 April 2025, nearly 1,935,300 refugees and third-country nationals (TCN) had arrived in the Republic of Moldova[1] from Ukraine since 24 February 2022. While most continued westward to the EU, some 128,710 Ukrainian refugees and 12,680 third-country nationals had chosen to remain in Moldova, of whom 64% were female, and 49% were children.

UNHCR has been actively engaged in monitoring, documenting, and analysing the profiles, needs, and intentions of refugees to enhance and promote evidence-based protection interventions throughout the country. Since May 2022, it has been conducting protection profiling and monitoring activities, including at accommodation sites, centres for humanitarian aid distribution, Community Service Centres (CSC), and other locations.[2]

At the beginning of 2025, the UNHCR monitoring tool was revised to better reflect the evolving situation of refugees living in the country. Several questions were updated, with greater emphasis placed on topics related to inclusion and social cohesion. This report encompasses the **findings from 281 interviews, comprising 505 household members, conducted between 1 February and 30 April 2025**. Reference is also made to Focus Group Discussions (FGDs) conducted by UNHCR and its partners over the same period[3] and the Laolalta social listening activities[4].

It is also important to note that during the previous reporting period at the end of 2024, UNHCR worked with a larger number of partners on data collection, resulting in a more representative sample of approximately 941 interviews. In contrast, in 2025, fewer partners were involved in the monitoring exercise, yielding a smaller sample of 281 respondents. As such, the sample is not statistically representative of the entire refugee population residing in the country, and all findings should be interpreted as indicative. Furthermore, comparisons between the two rounds should be made with caution, given the significant differences in sample size and methodology.

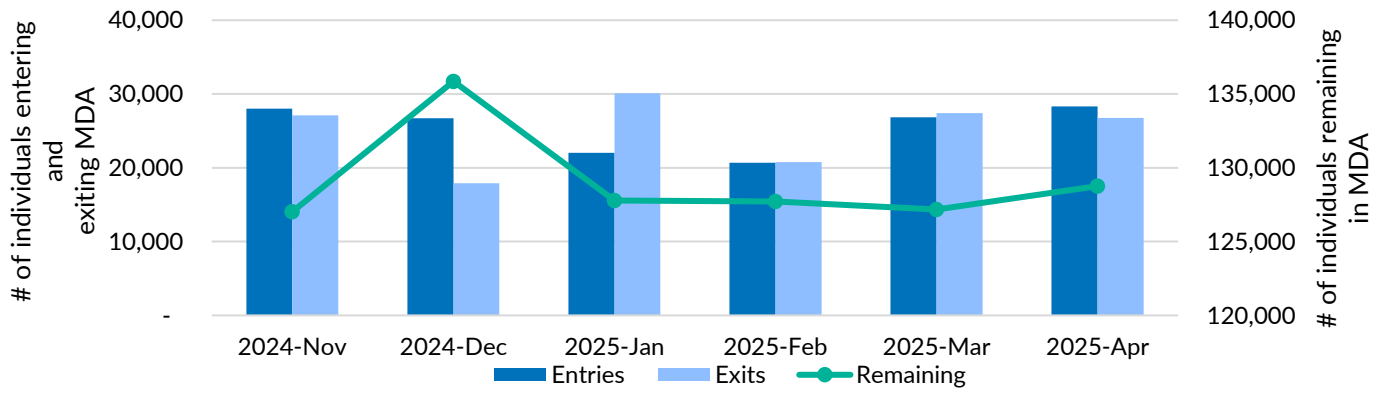
Key Trends & Figures

18,278
People arrived from Ukraine over the reporting period

67%
of respondents were women

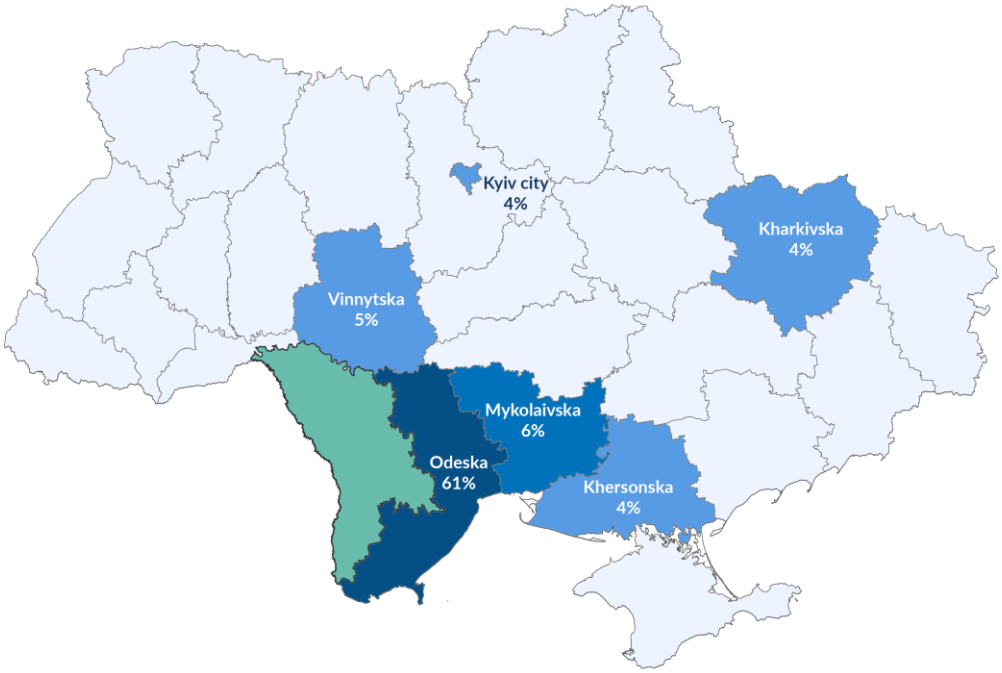
18%
of households indicated having at least one member with a disability

30%
of respondents reported having at least one family member with a serious medical condition



[1] Henceforth referred to as "Moldova."
[2] UNHCR partners are also conducting border monitoring activities at border crossing points and transit hubs using a separate monitoring tool.
[3] During the period from January to March 2025 (Q1), UNHCR and its partners conducted nine Focus Group Discussions (FGD) with 82 participants. More information can be accessed at Interactive Dashboard - Participatory Assessment 2025
[4] Laolalta's social listening report presents an analysis of refugee and local community social media posts or threads shared via online social media sources. Findings in this report come from preliminary data that has not yet been published externally.

Profiles & Displacement Patterns



Over the reporting period, **the most common household profile** was single adults (31%), followed by households with one or more older persons (27%).[5] Similar to the previous reporting periods, respondents largely originated from Odesa region (62%).[6] The most commonly represented age group was individuals aged 35–59 (32%), followed by those aged 60 and above, who accounted for 26% of respondents. More than one-third of the respondents (39%) confirmed that they had **visited Ukraine at least once** since their initial departure. The average duration of stay for the majority of those who travelled back to Ukraine was less than two weeks, with the primary purposes being to check on property (30%), visit relatives (24%), check on the general situation (17%), and to access healthcare services (11%). Three-quarters of respondents (75%) indicated that they still had **immediate family members in Ukraine**, 33% of whom reported that they faced challenges reuniting. Among those who experienced difficulties, 30% cited the security situation as the primary obstacle, followed by disability or medical conditions (11%) and lack of financial means (8%).[7] Participants in FGDs during the reporting period cited key reasons for choosing Moldova, including its proximity to family members in Ukraine, the absence of language barriers, and the relatively affordable cost of living.[8]

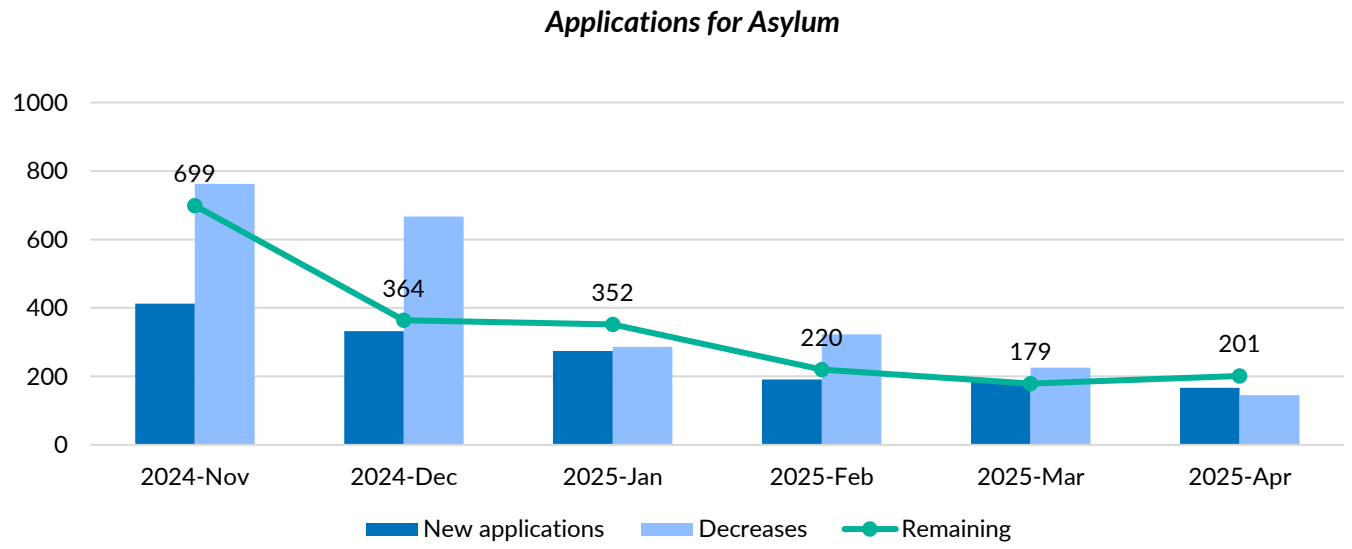
> *"For older people from Ukraine, it is difficult to adapt to a new place. In this sense, Moldova is a good place because people are open and friendly, and we understand the language."*
> ***- FGD participant in Donduseni***

Among the 281 surveyed households, 10% reported having **children separated from both parents**, an increase from 5.5% in the previous reporting period (Q4 2024). Notably, the proportion of **households reporting family members with specific needs**, including disabilities or serious medical conditions, rose from 20% to 29% over the reporting period.[9]

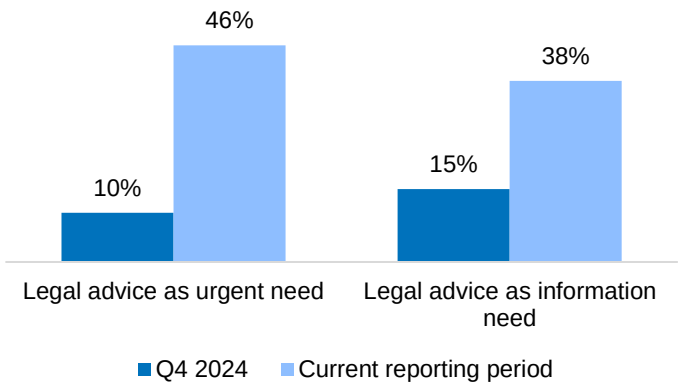
Regarding legal status, 95% of respondents had applied for Temporary Protection (TP) as of the end of April. While the issuance of TP identity documents continued to rise during the reporting period, the pace has slowed

[5] Other household profiles included single adults with dependents (25%), 2+ adults with dependents (10%), and 2+ adults (7%).
[6] Other regions of origin were evenly split between Mykolaivska, Vinnytska, Kyiv City, Kharkivska, and Khersonska oblast.
[7] The revised questionnaire no longer includes 'current martial law' as a response option, which had previously been the most frequently cited answer in past reporting periods.
[8] Interactive Dashboard - Participatory Assessment 2025
[9] Top difficulties reported were seeing (50%), walking (44%), self-care (32%), and hearing (24%).

significantly since the beginning of 2025 compared to 2024. According to data from the General Inspectorate for Migration (IGM), as of 28 April, a total of 72,705 individuals had been issued TP documents, including 17,849 children.[10] UNHCR has continued to observe **an overall decrease in the number of asylum applications** in Moldova, particularly among Ukrainian men of conscription age who crossed the border irregularly from Ukraine to Moldova. In September 2024, over 1,300 Ukrainian nationals applied for asylum; however, since the beginning of 2025, the number has dropped significantly and stabilized at around 200 applications. According to border monitoring conducted by UNHCR's partner, the Law Centre of Advocates (CDA), the number of asylum claims submitted at the Palanca and Otaci border crossing points, as well as the adjacent green borders, also declined during the reporting period.[11] While UNHCR is not aware of Ukrainian men encountering difficulties in lodging asylum claims when crossing the border irregularly, challenges persist at official border crossing points due to restrictions imposed by the State Border Guard Service of Ukraine (SBGSU), whose presence, either at jointly controlled BCPs such as Palanca or at Ukrainian-side BCPs, limits the ability of men to approach and access these crossing points.



Overall, **legal status** remained a key area of concern for many refugees during the reporting period. Legal assistance emerged as the most pressing urgent need, cited by 46% of respondents. This was echoed in FGDs, particularly in January and February, when many refugees expressed confusion and concern over the extension of TP and the broader uncertainty surrounding their legal situation in Moldova.[12][13]



Information needs mirrored these concerns, with 38% of respondents actively seeking information about their legal status. Social listening activities conducted by Laolalta further confirmed that legal status remains a dominant topic of discussion among refugees online. In addition to TP, refugees frequently inquired about residence permits, permanent residency options, and pathways to citizenship, underscoring a widespread desire for more stability and clarity regarding their long-term prospects in Moldova.

[10] Government statistics on TP beneficiaries, as well as on Ukrainian nationals with other forms of legal status, can be found https://igm.gov.md/comunicate-de-presa/bpage/2/

[11] As of 5 October 2024, IGM representatives are no longer present 24/7 at Palanca BCP, which has impacted the reporting on asylum statistics from the green border. Consequently, asylum statistics of those identified on the green border have not been provided to UNHCR partner CDA since October 2024.

[12] Interactive Dashboard - Participatory Assessment 2025

[13] Part of the data collection was conducted before the official extension of TP, which likely influenced the high level of concern reflected in the results.

Protection risks

"Each of us dreams of a world without fear and war—a world where we don't wake up to explosions in the night, and our children don't sleep on the floors of bomb shelters instead of in their own beds".
- FGD participant in Hincesti

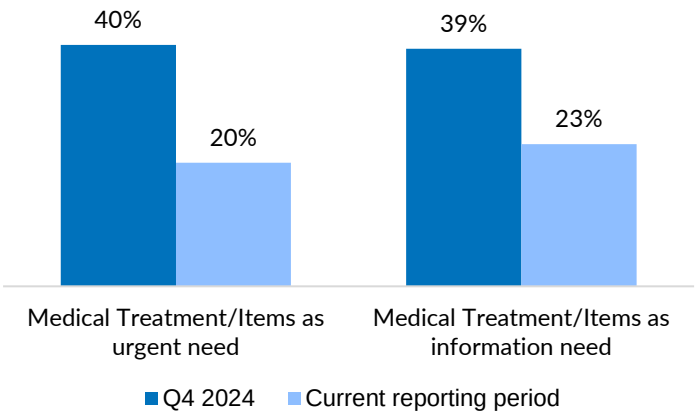
An **increase in vulnerability** among refugees in Moldova has been observed since the end of 2024. Budget constraints and the downsizing of humanitarian actors at the beginning of the year has further exacerbated the situation, particularly for the most vulnerable. One key area heavily affected is cash assistance, which has undergone multiple changes and reductions over the past two years. The most recent change to UNHCR's Multi-Purpose Cash Assistance (MPCA) programme came into effect in April 2025, reducing the monthly transfer value from 2,200 MDL to 1,625 MDL per person. As a result, many beneficiaries, especially those in vulnerable categories, are facing greater financial hardship in meeting their basic needs and have resorted to more negative coping mechanisms. FGDs revealed that many respondents consider the reduced cash assistance insufficient to cover essential needs, particularly in light of rising living costs in Moldova.[14] In terms of **information needs**, financial assistance remained the top priority for respondents in this reporting period (57%). Among vulnerable groups (e.g., older persons and persons with disabilities), financial aid remained the most sought-after type of information.

Healthcare

42%
Of respondents aged 60 and above indicated healthcare as an urgent need

24%
Of respondents indicated healthcare as an information need

30%
Of respondents with at least one family member with a serious medical condition



Profiles continue to show that a significant part of the refugee community overall faces health concerns in Moldova. The number of households reporting having at least one family member with a **serious medical condition** increased from 17% to 30% in this reporting period.[15] Healthcare continues to be reported as an urgent need by 20% of overall respondents, and as an information need (23%). However, among households with one or more older persons, with or without dependents, healthcare was the most frequently cited urgent need (39%), followed closely by households with persons with disabilities (38%).

While basic medical assistance is generally available to all beneficiaries of TP, findings from FGDs revealed a number of persistent challenges, particularly in accessing specialized services and navigating the healthcare system. Participants across age groups described long waiting times, especially for appointments with family doctors and specialists. Access to specialized medical care was reported to be especially limited for those outside Chișinău, where patients often must travel long distances and bear high transportation costs to access appropriate care.[16]

Adults aged 30–49 noted limited access to specialized treatment and described the process of obtaining care in public facilities as complicated and inconvenient. In Refugee Accommodation Centres (RACs), participants

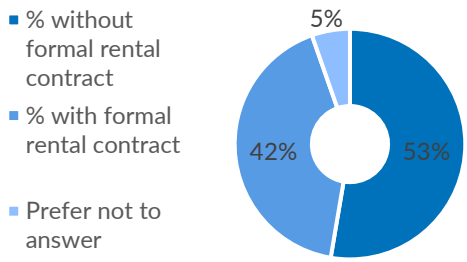
[14] Ibid
[15] Findings should be interpreted with caution due to differences in sample sizes and data collection methods between reporting rounds.
[16] Interactive Dashboard - Participatory Assessment 2025

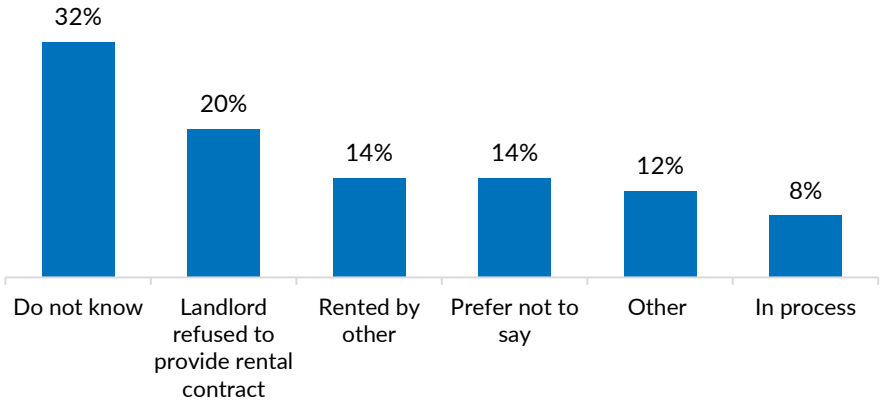
reported that healthcare services were often unavailable and that refugees were not always aware of existing free or subsidized medicines. Among older persons and individuals of pre-retirement age, additional barriers were noted. While many participants had access to family doctors and acknowledged that TP had improved access to compensated medications, specialized care remained difficult to obtain. Although basic medical services were generally available, several participants stated that their medical issues remained unresolved even after seeking help from multiple institutions. A persistent challenge for the refugee population is the inability to purchase compulsory health insurance. According to findings from the latest Local Refugee Coordination Forum (LCRF) in Bălți (May), local organizations have been forced to significantly reduce medical voucher distribution and prevention activities due to declining donor funding. These vouchers had previously supported the most vulnerable individuals in accessing essential medication.

Among those who had visited Ukraine at least once since their initial departure, approximately 11% did so to access healthcare. This trend was also observed by UNHCR's implementing partner CDA through ongoing border monitoring, with several individuals reporting that they were traveling to EU countries for medical treatment.

Accommodation

Accommodation types varied among the surveyed households. The proportion of those renting private apartments or homes slightly decreased from 44% to 39% in this reporting period. Similarly, the share of respondents hosted by relatives declined from 36% to 34%. In contrast, the number of those hosted by non-family members increased from 12% to 14%. There was also a slight decrease in respondents residing in collective accommodation, dropping from 5% to 4%. Overall, the number of respondents who indicated accommodation as an urgent need increased from 13% to 23% over the reporting period.





Among those renting apartments, less than half (42%) reported having **formal rental contracts with their landlords**, a significant decrease from the previous round (64%). Of those without a rental contract, around one-fifth (20%) indicated that the landlord had refused to provide one. This issue was also reflected in FGDs, where participants highlighted ongoing challenges related to high rental prices and the lack of formal agreements.[17] Notably, among those planning to leave their current accommodation within the next three months, over one-third cited being asked to leave because landlords had found other tenants (36%). This was followed by those who said they could no longer afford the rent (21%). Social listening conducted by Laolalta also captured ongoing discussions among Ukrainian refugees around the need for official rental contracts and the challenges they face in dealing with landlords.

Conditions in RACs were generally described as acceptable by residents. However, many reported challenges in finding alternative housing, and some felt isolated due to the remote location of certain RACs. In 2025, partners supporting the relocation of residents from closed RACs conducted a verification exercise to assess the impact and sustainability of their rental assistance programmes. The initiative provided six months of rental support to facilitate integration into host communities. The exercise found that 77% of beneficiaries remained in their rented

[17] Ibid

accommodation after the support ended, while 23% relocated, mainly due to rent increases or landlord-related issues. It also assessed employment within supported households: 66% reported that at least one member was working, of whom 60% were employed full-time and 40% part-time or temporarily.

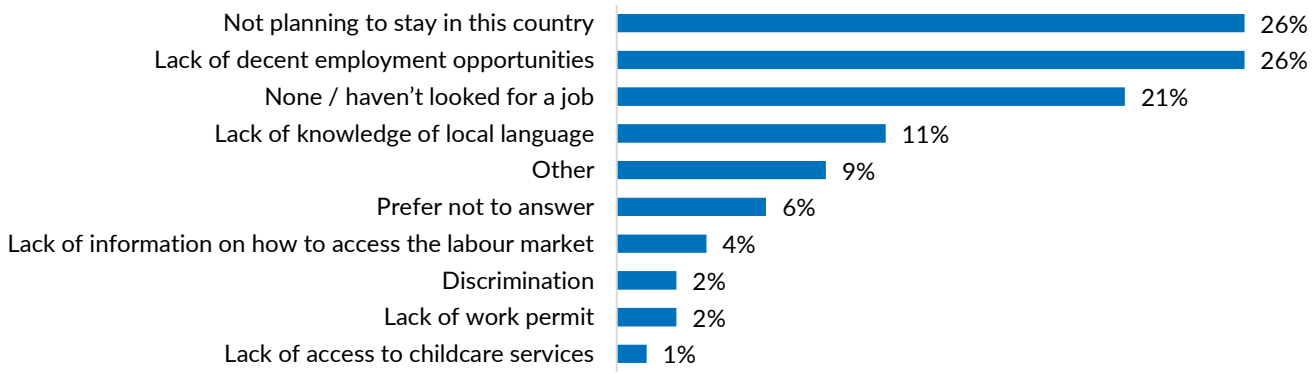
Employment

The proportion of retired respondents remained consistent with the previous period at 27%, aligning with the share of older persons and persons with disabilities among those surveyed. In contrast, the percentage of respondents reporting engagement in family responsibilities declined from 27% to 15% in this reporting period.

Seventeen percent of respondents reported being employed, with 10% working in-person in Moldova and 7% employed remotely. Among those employed, only 58% (out of 26 who responded) said their current job matched their formal qualifications. Self-employment remained rare, with just 1% of respondents identifying as self-employed. These figures align with feedback from FGDs, where participants reported challenges in registering businesses due to bureaucratic hurdles, particularly with the SRL process, and highlighted the lack of access to the simplified *patenta* system, which remains available only to Moldovan citizens. This continues to discourage Ukrainian entrepreneurs from starting small businesses.[18]

Notably, the proportion of unemployed respondents increased significantly during this period, rising to 28% from just 11% in the previous round.[19] The **main barriers to accessing employment** in Moldova were equally split: 26% of respondents cited not planning to remain in the country long-term, while another 26% pointed to a lack of employment opportunities that provide a decent wage or acceptable working conditions. In the previous reporting period, the lack of employment opportunities had been the dominant barrier, cited by 43% of respondents.

Barriers in accessing emloyment



Gendered differences in employment barriers were also evident: male respondents were more likely to cite the intention to leave Moldova as a reason for not seeking work (44%), while female respondents equally cited not actively looking for work and lack of opportunities (23% each). Language barriers were noted by only 11% of unemployed respondents.

FGDs provided further insight into the complex barriers refugees face in accessing employment. Adults aged 30–49 explained that limited Romanian language skills, lack of childcare, particularly affecting mothers with young children, and the absence of job opportunities in smaller towns and rural areas made it extremely difficult to secure work. These structural and logistical constraints often left otherwise willing participants excluded from the labour market. Older persons and those of pre-retirement age described even more constrained employment prospects. Many lived in rural areas where opportunities were scarce, and although cities such as Chișinău offered more employment options, high rental prices made relocation unaffordable for most. Participants frequently

[18] Ibid

[19] Findings should be interpreted with caution due to differences in sample sizes and data collection methods between reporting rounds.

mentioned caregiving responsibilities, age-related limitations, health issues, and the lack of access to vocational training as key factors further restricting their ability to engage in paid work. Notably, none of the older participants in these discussions were employed at the time, though several expressed a willingness to work if appropriate opportunities were available.

Across all groups, participants emphasized that financial support, whether from UNHCR's assistance programmes or Ukrainian pensions, was insufficient to meet basic needs. This was especially true for larger households or those including individuals with medical conditions, highlighting the importance of employment not just as a matter of self-reliance, but also of survival.

CALLS TO ACTION

Mitigate the impact of reduced humanitarian services: Significant reductions in humanitarian services have directly affected the most vulnerable refugees, including older persons and persons with disabilities. With several partners downsizing or closing programs due to limited funding, gaps in essential services have widened. Continued engagement with donors and government actors is needed to advocate for the sustainability of life-saving programs and ensure that critical needs, such as medical assistance and protection services, are not left unmet. Coordination efforts should prioritize identifying urgent gaps and supporting partners that deliver frontline assistance.

Improve access to healthcare: While the TP allows refugees to access family doctors and emergency treatment, it does not cover more specialized medical treatment. The access to specialized medical care and medication was often substituted by different humanitarian organizations often in the form of medicine vouchers, and mobile unit family doctor visits, which are now due to budget constraints being reduced or unavailable anymore. Older people, people with disabilities and people with chronic and serious medical conditions remain especially vulnerable due to not being able to cover high medical bills and travel for treatment. Advocating for strengthening access to healthcare including the mobile units and provision of transportation, is essential to support the most vulnerable refugees and prevent them from being left behind.

Access to adequate housing and employment: Although accommodation and employment were not the most urgent needs reported by respondents in this period, they remained high on the priority list for those intending to stay in Moldova for the long term. Many refugees face significant challenges in accessing adequate housing due to rising rental costs and the absence of an official lease contract. Those living in housing without an official lease contract are in an increasingly vulnerable situation and could be at risk of eviction/exploitation due to lacking legal protection. At the same time, a large number of respondents remain unemployed, increasing their vulnerability and leaving them reliable on savings, cash support programs or pensions only. Continued efforts are necessary to improve financial sustainability, improve tenant protection, and ensure that refugees have access to safe housing and dignified employment opportunities.

Acknowledgements

We are grateful for the extensive involvement and support of UNHCR's partners in this Protection Monitoring Brief, in particular Law Center of Advocates (CDA). We are also grateful for the support of local authorities, civil society, international organizations and our donors. Most importantly, UNHCR would like to acknowledge the resilience and strength of refugees from Ukraine, who continue to share with us their challenges, fears, and hopes.

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