

2024 Refugee Response Plan Moldova

Local Consultations Final Report





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Introduction

The development of a Refugee Response Plan requires the contributions of all involved actors at all levels. However, humanitarian coordination often overlooks the needs of local civil society organizations (CSOs) and does not foster spaces where they can actively contribute and participate in decision-making.

In 2022, to address the challenges faced by local actors in participating in national platforms, UNHCR partnered with local public authorities and Refugee Coordination Forum partners in different localities to decentralize coordination and establish area-based coordination mechanisms, the Local Refugee Coordination Forums (LRCFs). LRCFs are not intended to replicate the national coordination structure at the local level, but rather to address needs through a more holistic and people-centered approach to humanitarian coordination in a multi-sectoral and multi-disciplinary way. They also seek to strengthen local actors' ownership of the refugee response and engagement with affected communities.

Similarly to the 2023 Refugee Response Plan (RRP), as part of the 2024 RRP, UNHCR and partners conducted local consultation workshops within the context of LRCFs to hear from local actors involved in the refugee response about the challenges, needs, priorities, and opportunities that should guide the 2024 response.

In the following pages, we share the key findings of these consultations with all RCF sectors and partners. These findings shall guide the planning of the 2024 RRP, supporting sectors and partners as they go through detailed planning and ensuring that the challenges and needs identified at the local level are integrated in projects and activities for the upcoming year.



Methodology

The 2024 RRP local consultations were held using a common methodology to create an inclusive space for participants to share their views and opinions based on their work with refugees and host communities, and on prioritized profiles among the target population. To develop this report and consolidate inputs, the inter-agency coordination team digitized, organized, and analyzed the information collected during the local consultation workshops.

For the analysis, inputs were categorized based on prioritized profiles per location and labeled as follows:

- **Needs:** the deficit between the minimum standards required for a dignified and healthy life and the current situation of a person or group of people.
- **Gaps and challenges:** barriers preventing a person or a group of people from meeting their needs and enjoying their rights, such as lack of resources, funding, or political will.
- **Capacities and opportunities:** existing resources, skills, and capacities that can be leveraged to ensure a person or group of people can live a dignified and healthy life.
- **Priorities and solutions:** proposed activities and strategies to support refugees and host community members to meet their needs, while bridging gaps and addressing challenges.

To cover a wide geographical area, local consultation workshops were conducted in nine municipalities: Cahul, Ungheni, Comrat, Chişinău, Bălţi, Orhei, Donduseni, Căuşeni, and Tiraspol. The locations were chosen based on the existence of Local Refugee Coordination Forums, with minor modifications for geographical proximity, easier access for participants, and regional representation.

Given the importance of the border areas, the workshop in Donduseni included participants from Otaci and other northern regions, and the workshop in Causeni included participants from Palanca and Stefan Voda.

No.	Location	Date	Time
1	Cahul	September 8th Friday	13:00 – 16:00
2	Ungheni	September 11th Monday	11:00 – 14:00
3	Comrat	September 13th Wednesday	13:00 – 16:00
4	Chisinau	September 18th Monday	13:00 – 16:00
5	Balti	September 19th Tuesday	13:00 – 16:00
6	Orhei	September 20th Wednesday	14:00 – 17:00
7	Donduseni	September 21st Thursday	10:00 – 14:00
8	Causeni	September 26th Tuesday	11:00 – 14:00
9	Tiraspol	September 29th Friday	13:00 – 16:00

Participation

The consultations were attended by 160+ participants from local municipalities, CSOs, INGOs, public institutions, and the refugee and host community. Participation was limited to 30 people to ensure interactive and meaningful discussions. In case a locality had a larger number of potential participants, local NGOs and municipalities were prioritized over international actors.

Local NGOs with expertise in implementing humanitarian and community-based initiatives.

National NGOs engaging in the refugee response activities.

UN Agencies and INGOs engaged in refugee-response activities.

Refugee populations accommodated in various types of settlements.

Host community members who contribute to social cohesion and peaceful coexistence.

Local public authorities involved in services provision for refugees and host communities.



Profiling and group work

The consultations were structured around four phases:

- **Registration:** Participants registered and were provided with information about the Refugee Response Plan and the objectives of the workshop.
- **Profiling:** Participants were divided into groups based on their answers to the registration form, where they were asked to prioritize one population group with whom they work. Each group was given 15 minutes to discuss and list five characteristics of a persona corresponding to their prioritized profile (e.g., women, children). Groups could choose to make separate lists for refugees and host communities or a single list relevant to both.
- **Group work:** Participants worked in groups using a worksheet for 45 minutes to 1 hour, depending on the progress of each group, to examine needs, gaps, strengths, and eventually to identify solutions and priorities of the 2024 refugee response. The worksheet facilitated a structured discussion among the group members, using design thinking principles such as empathy, ideation, prototyping, and testing.
- **Presentations and Q&A:** Each group presented their discussions and findings to all the participants, followed by a discussion and Q&A session.

RRP 2024 Local Consultation Workshop			
Place:		Date:	Beneficiary Profile:
Nevoi – Потребности - Needs	Lacune – Недостачи - Gaps	Puncte forte/Oportunități Прочность/возможности - Strengths	Soluții – Решения - Solutions
1	Guvernul Правительство		
	Societatea civilă Гражданское общество		
	Refugiați și comunități Беженцы и сообщества		
2	Guvernul Правительство		
	Societatea civilă Гражданское общество		
	Refugiați și comunități Беженцы и сообщества		
3	Guvernul Правительство		
	Societatea civilă Гражданское общество		
	Refugiați și comunități Беженцы и сообщества		

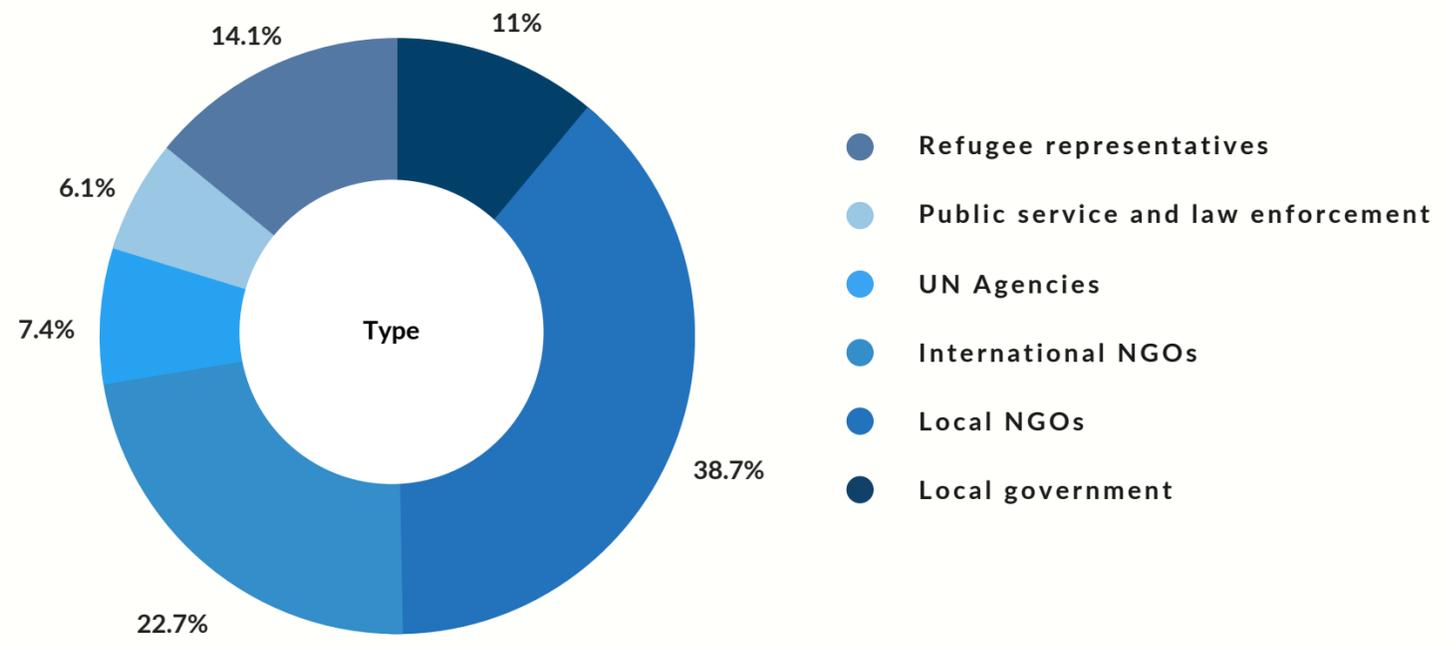
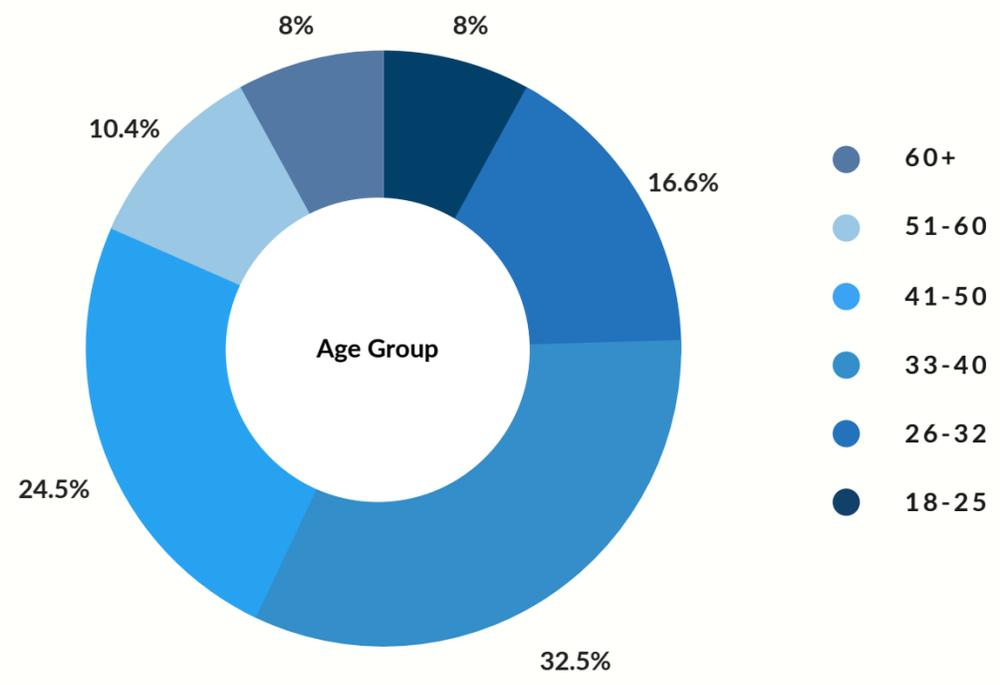
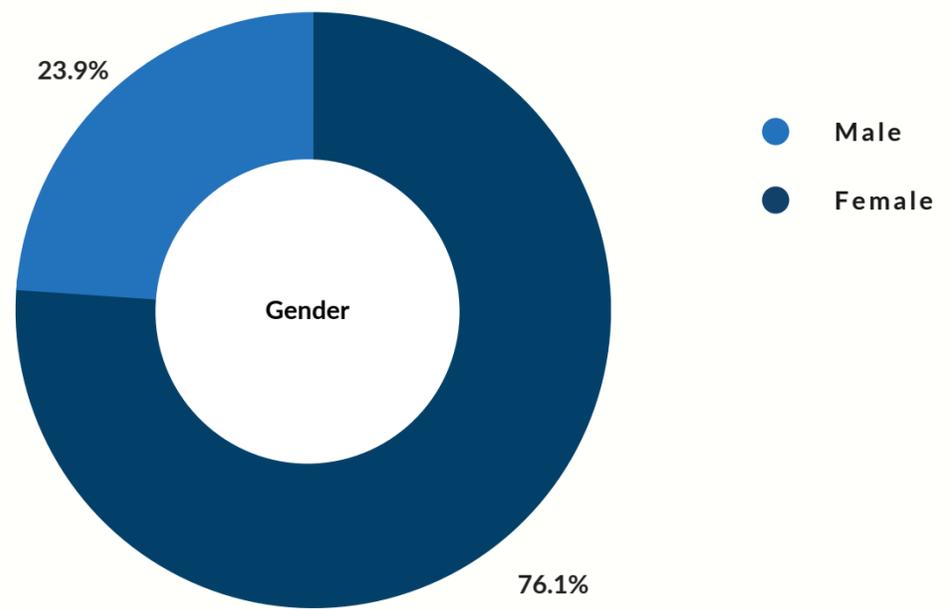
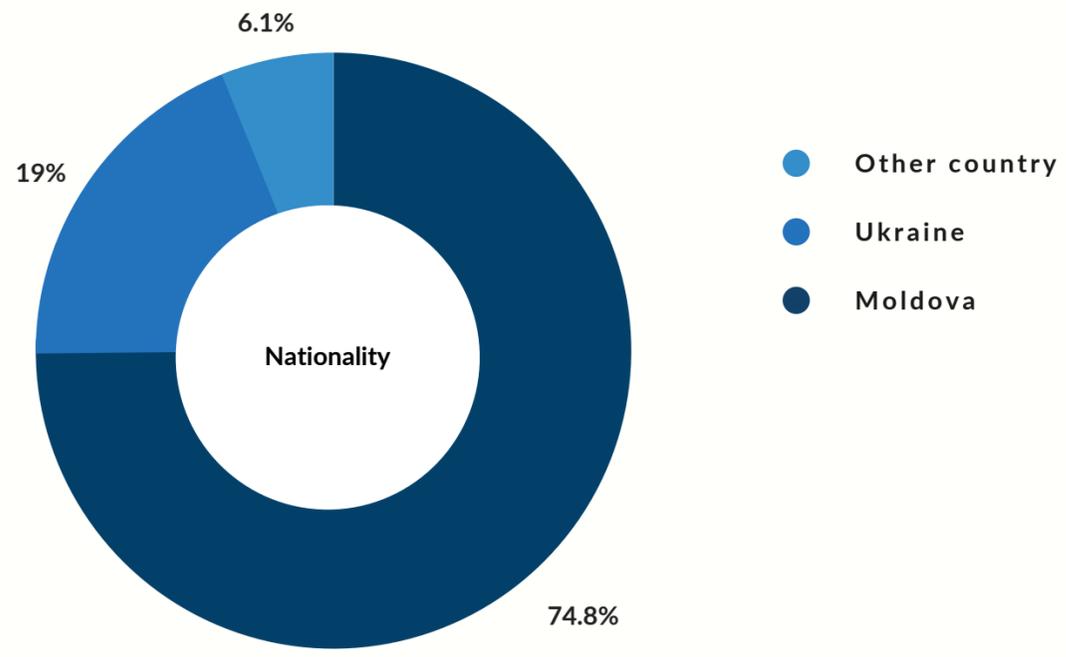
Findings from the registration questionnaire

During each local consultation workshop, participants were invited to complete an anonymous survey with questions about demographics, the profile of the organization they represented, and four questions related to the needs of refugees and affected host communities, barriers to their inclusion, and their views on priorities for the 2024 RRP at the local level. In the following pages we present the highlights of the participants' responses.

Demographics

Nine local consultation workshops attended by 163 participants. The demographics of the participants are summarized in the charts in the next page.





In addition to the basic information on demographics, participants were asked the four questions below. Respondents were provided preset answers and had a possibility to choose multiple answers.

1. What are the main needs of refugees in your location?
2. What are the main needs of the community where you live and work?
3. What are the main barriers to the inclusion of refugees in your community?
4. In your opinion, what should be the priority of the 2024 RRP in your locality?

Responses to the first two questions were analysed using the following categories:

A. Housing and Accommodation

B. Healthcare (emergency medical care, vaccinations, mental health support)

C. Education (elementary, secondary and tertiary education)

D. Employment (job placement, local businesses, vocational training)

E. Legal support (guidance on immigration laws, asylum application, community advocacy)

F. Social assistance (childcare, older people care)

G. Food and water (including food banks, community gardens)

H. Social Cohesion (social gatherings, community centers, public forums)

I. Infrastructure (roads, facilities, transportation, technological access)

J. Culture and leisure (parks, activities for sports and arts)

Refugee need

K. Financial support

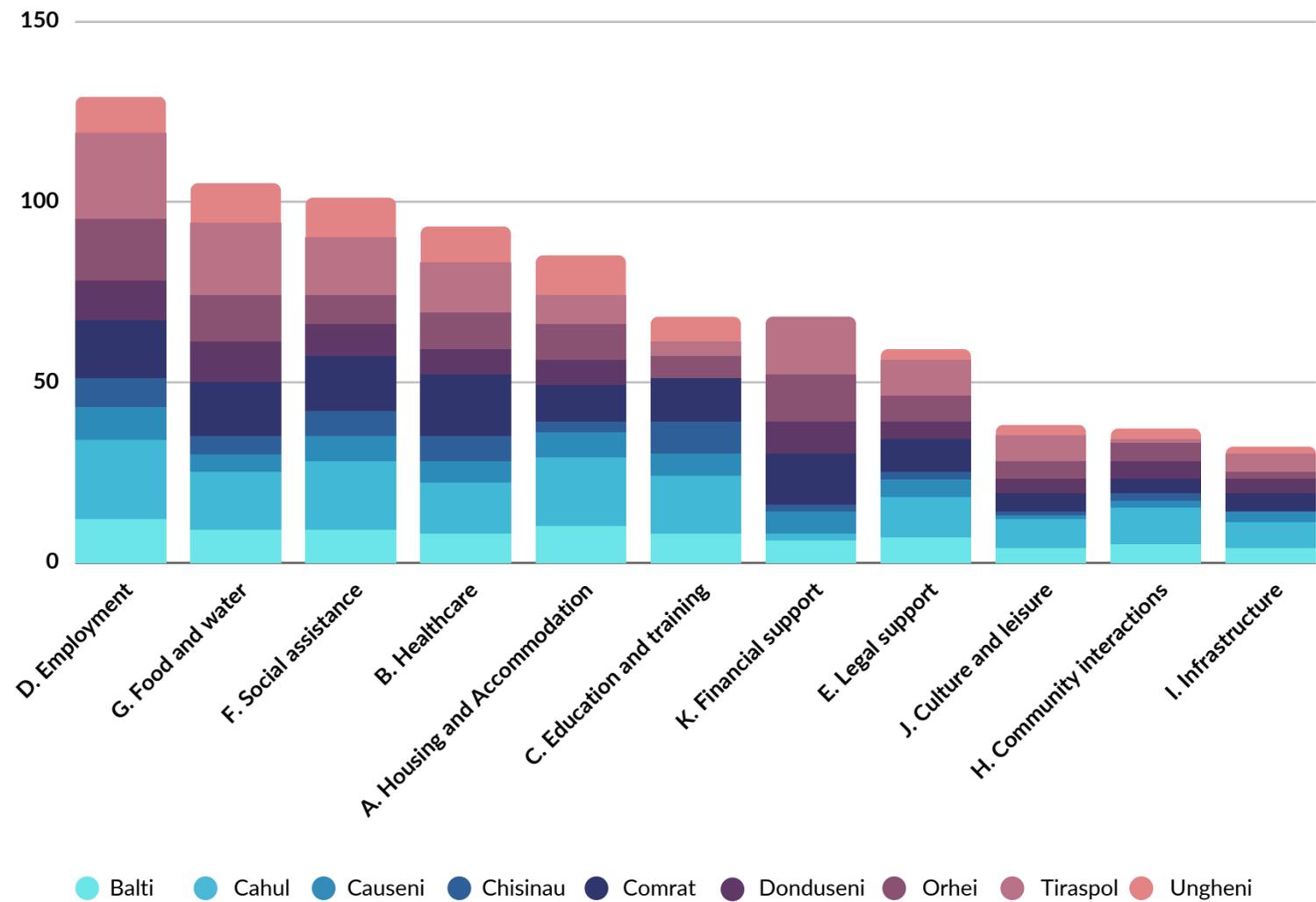
Community need

L. Public safety

M. Environmental sustainability



Main needs of the refugee population

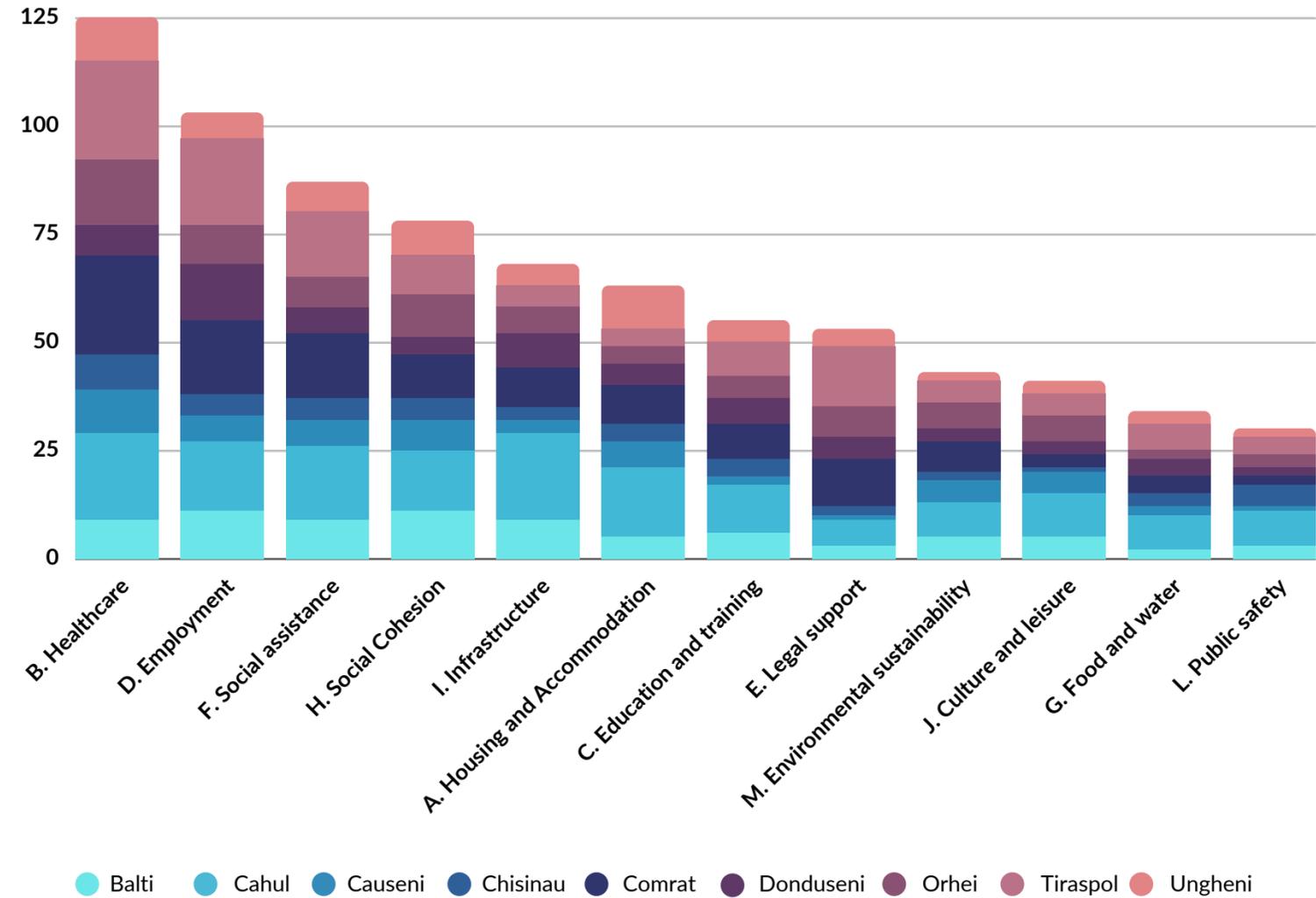


Q1. What are the main needs of refugees (percentage)											
	A	B	C	D	E	F	G	H	I	J	K
Cahul	66%	48%	28%	38%	38%	33%	28%	34%	24%	28%	7%
Ungheni	85%	77%	27%	38%	23%	42%	42%	23%	15%	23%	0%
Comrat	37%	63%	22%	30%	33%	28%	28%	15%	19%	19%	52%
Chisinau	25%	58%	38%	33%	17%	29%	21%	17%	0%	8%	17%
Balti	71%	57%	29%	43%	50%	32%	32%	36%	29%	29%	43%
Orhei	63%	63%	19%	53%	44%	25%	41%	31%	13%	31%	81%
Donduseni	41%	41%	0%	32%	29%	26%	32%	29%	24%	24%	53%
Causeni	64%	55%	27%	41%	45%	32%	23%	18%	27%	9%	55%
Tiraspol	33%	58%	8%	50%	42%	33%	42%	4%	21%	29%	67%
AVERAGE	52%	57%	21%	40%	36%	31%	32%	23%	20%	23%	42%

The graph on the left shows the number of answers for each question, providing insights into the priority areas identified by participants. The matrix above shows the percentage of respondents who selected a given priority per locality, giving a better understanding of the identified needs of the refugee population in each locality.

When considering all responses, regardless of location, employment, food and water, social assistance, and healthcare appear as the top four needs. However, when considering the relevance of each area based on the responses of participants per locality, access to health (with an average of 57% of participants in each locality identifying it as a need), housing and accommodation (52%), financial support (42%), and employment (40%) are the most pressing needs. These responses align with the findings of UNHCR Protection Monitoring and Profiling, as well as the Multi-Sector Needs Assessment. Partners reported that in some locations, certain needs were more acute, such as housing and accommodation in Ungheni (selected by 85% of participants in the locality) and Balti (71%), financial support to cover basic needs in Orhei (81%), and access to health services in Ungheni (77%), Comrat (63%), and Orhei (63%).

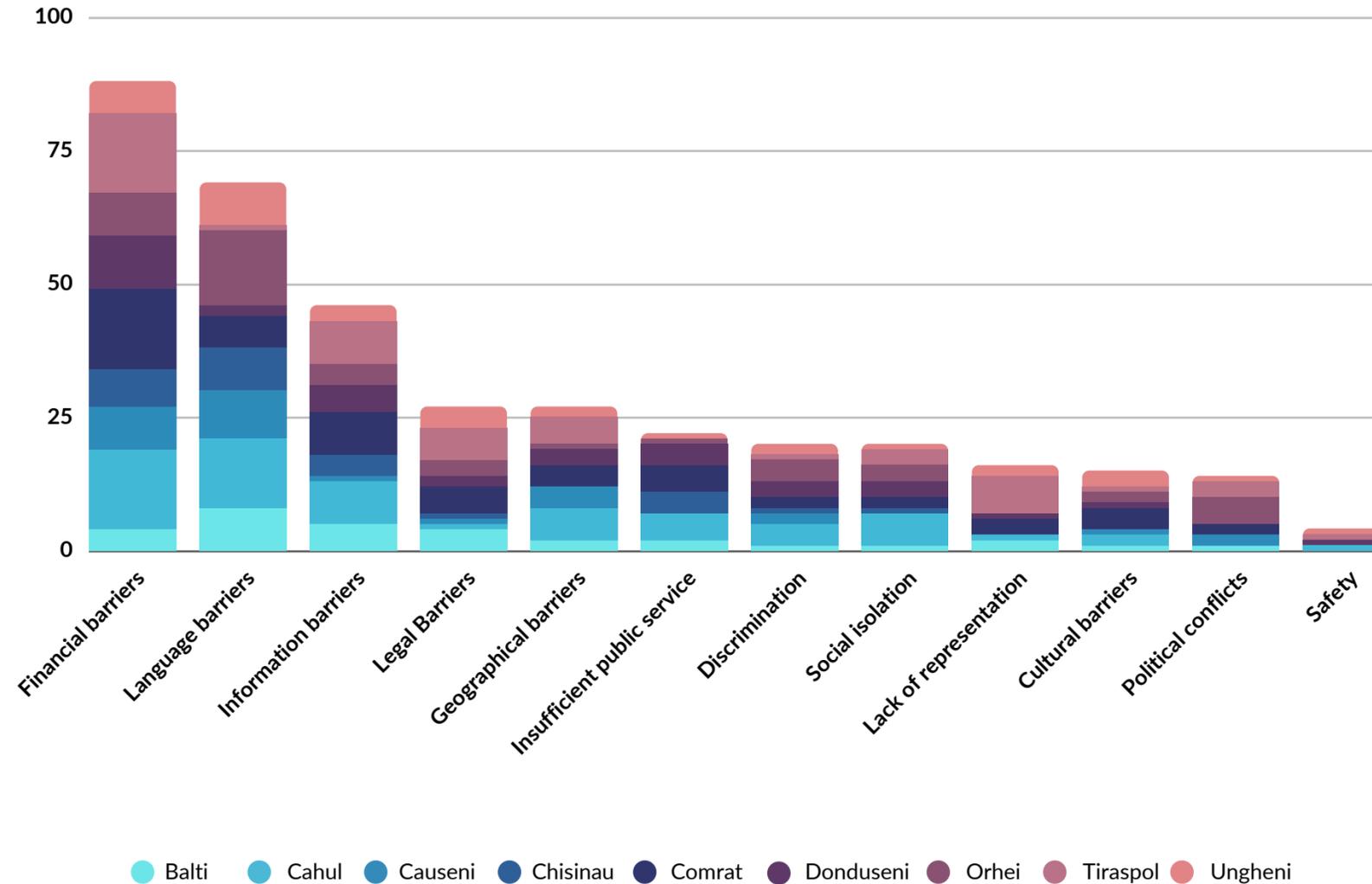
Main needs of local communities



Q2. What are the main community needs? (percentage)												
	A	B	C	D	E	F	G	H	I	J	L	M
Cahul	55%	34%	38%	55%	21%	59%	28%	24%	34%	34%	28%	28%
Ungheni	77%	38%	38%	46%	31%	54%	23%	31%	19%	23%	15%	15%
Comrat	33%	43%	30%	63%	41%	56%	15%	19%	17%	11%	7%	26%
Chisinau	33%	33%	33%	42%	17%	42%	25%	21%	13%	8%	42%	17%
Balti	36%	32%	43%	79%	21%	64%	14%	39%	32%	36%	21%	36%
Orhei	25%	47%	31%	56%	44%	44%	13%	31%	19%	38%	19%	38%
Donduseni	29%	21%	35%	76%	29%	35%	24%	12%	24%	18%	12%	18%
Causeni	55%	45%	18%	55%	9%	55%	18%	32%	14%	45%	9%	45%
Tiraspol	17%	48%	33%	83%	58%	63%	25%	19%	10%	21%	17%	21%
AVERAGE	39%	38%	34%	63%	33%	53%	21%	24%	21%	25%	18%	26%

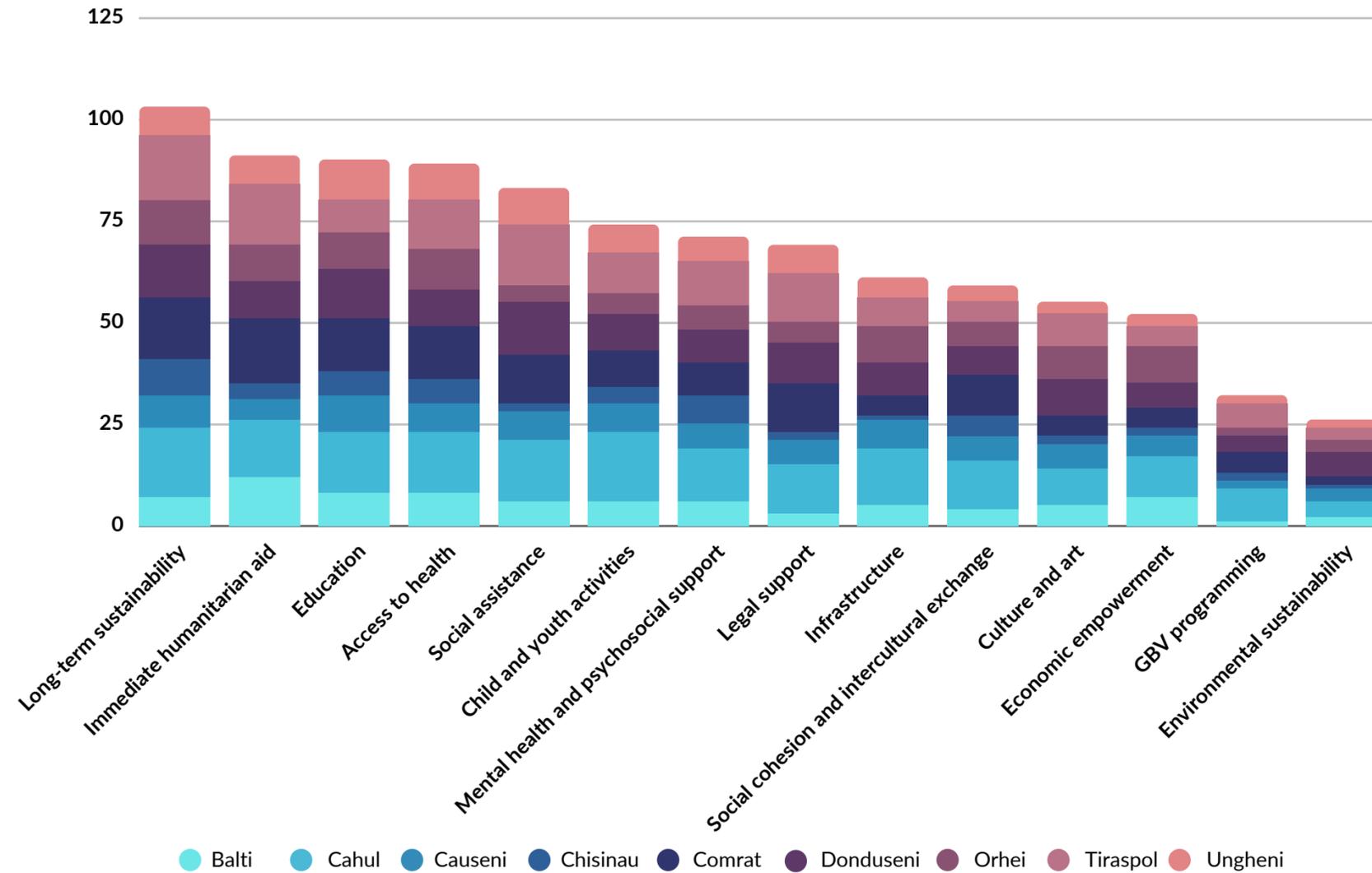
When considering the totality of responses regardless of location, participants identified healthcare, employment, social assistance and social cohesion as the top 4 priority needs for local communities. When considering identification of needs per locality, the main issues identified by participants are employment, social assistance, and housing and accommodation and healthcare. Some identified areas do overlap with those identified as need for the refugee community, including access to employment opportunities, health – including MHPSS - and social services. These areas may be understood as an overarching need for both refugee populations and Moldovan host communities.

Main barriers for the refugee inclusion into the community



According to participants, the top three barriers hindering refugee inclusion according to participants are limited financial resources, language barriers, and information gaps. While lack of financial resources was highlighted by participants in all consultations, language barrier saw a significant difference in the percentage of respondents from a location to another (4% in Tiraspol whereas 88% in Orhei and 82% in Causeni).

Priorities for the 2024 Refugee Response Plan



Participants consider long-term sustainability as a top priority for refugee response in 2024. This may involve formalizing legal status, social integration and community engagement, long-term housing and accommodation, employment, and increased ownership of the response by local actors. Immediate humanitarian aid is ranked second, as there is still a need to respond to the humanitarian needs of the most vulnerable members of the refugee and host communities, whose protection needs may not be addressed by the government due to limited inclusion in the national protection systems and services.

Other priorities identified by participants include education (55%), health (55%), access to social assistance (51%), activities for children and youth (45%), and mental health and psychosocial support (44%).

Findings from group discussions

This section summarizes the discussions and provides an overview of the key priorities identified in each location. Final findings and recommendations are presented at the end of the section

Participants in each location prioritized two to four profiles to guide them on identifying needs, gaps and challenges, capacities and opportunities, and priorities and solutions. The table on the right lists the prioritized profiles in each location.

As explained in the methodology section, at each locality groups were created based on participant's answer to the question "Which profile of individuals are you mostly working with?" in the online registration form. To facilitate grouping, participants were asked to choose only one most relevant answer.

1. Balti	A. Women B. Roma community C. Older people
2. Cahul	A. Women B. Children C. Persons with disabilities
3. Causeni	A. Children B. Roma community
4. Comrat	A. Women B. Children C. Persons with disabilities and older people
5. Chisinau	A. Women B. Children C. Persons with disabilities
6. Donduseni	A. Women B. The older people C. Roma community
7. Orhei	A. Women B. Children C. Older people
8. Tiraspol	A. Women B. Children C. Persons with disabilities D. Older people
9. Ungheni	A. Women B. Children C. Persons with disabilities

BALTI

Women in Balti face challenges in accessing housing, socio-economic inclusion, and healthcare, especially for those with chronic diseases. Proposed solutions include expanding housing support to ensure that women have access to safe and adequate housing, revising employment legislation to become more inclusive for refugees (self-employment), and promoting closer collaboration between NGOs and refugees to understand and address the needs of women with severe health conditions.

The Roma community in Balti face challenges in accessing education, healthcare and inclusion. They face challenges related to a lack of inclusive educational programs for Roma children, limited access to health services, and barriers to accessing information on rights and available services. Proposed solutions include supporting access of Roma children and youth to both formal and non-formal educational programs, working with health service providers to improve cultural awareness and mainstream Roma inclusion, and work to promote more inclusive communication and information sharing with Roma refugees about their rights and available services.

Older people in Balti face challenges in accessing healthcare, social inclusion, and financial constraints to meet basic needs. Proposed solutions include enhancing collaboration between organizations to create a comprehensive care network to support older people's access to healthcare services, developing programs and activities that promote social integration and reduce isolation among older people, and providing financial support to help older people meet their basic needs.





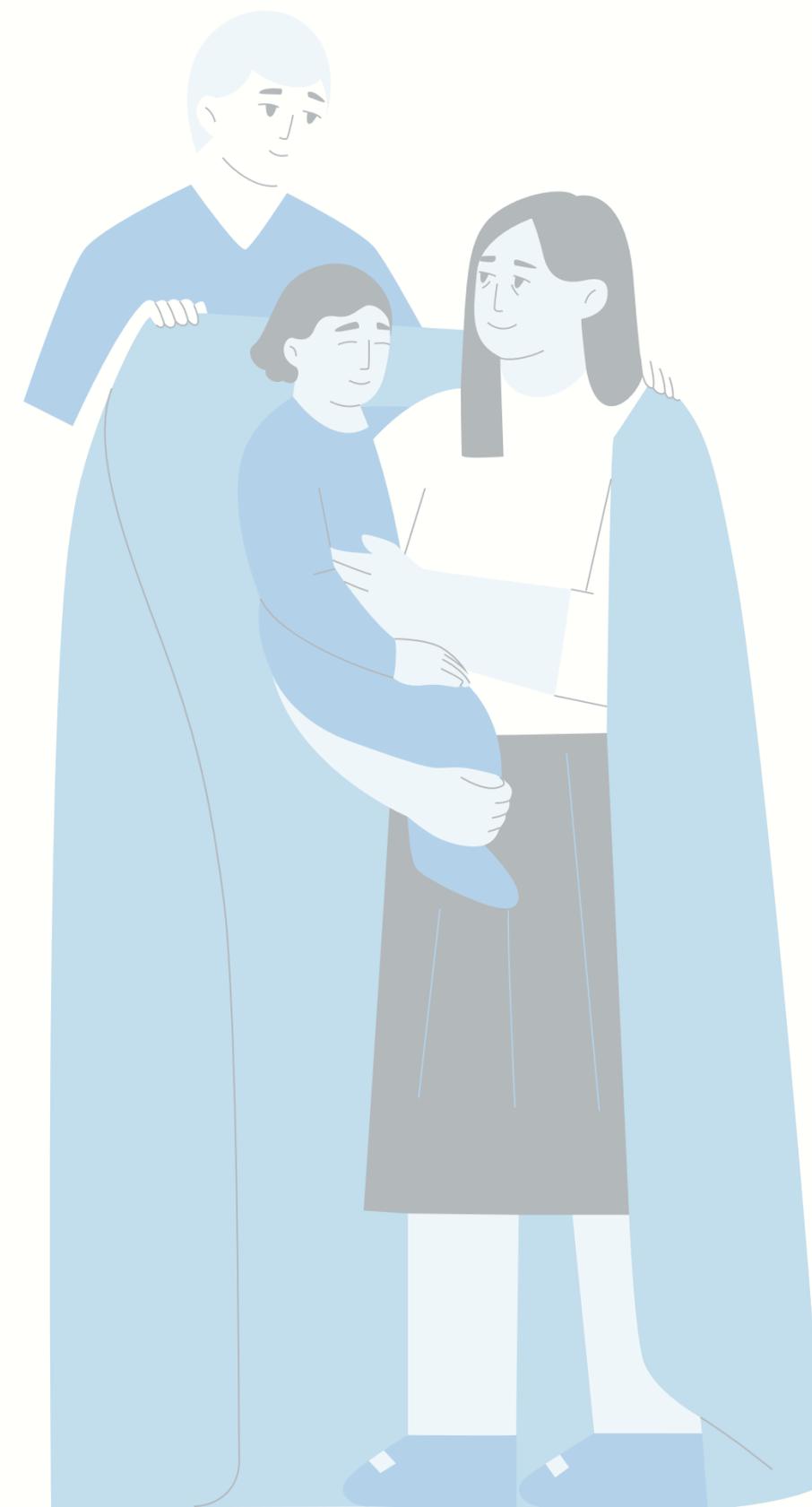
Priority Population Group	Women	Roma community	Older people
Identified Needs	Accommodation and Housing, Employment, Socio-Economic Inclusion and Employment, Information	Education, Basic Needs, Healthcare, Information	Basic Needs, Healthcare, Inclusion
Identified Challenges	<ul style="list-style-type: none"> • Inadequate social housing and reduction in the number of Refugee Accommodation Centers; • Low wages and legal barriers limiting refugees to run individual entrepreneurial entities; • Limited medical services for those with chronic diseases 	<ul style="list-style-type: none"> • Lack of inclusive educational programs targeting Roma children; • Limited access to health insurance and care; • Limited mainstreaming of Roma inclusion in Health services, creating barriers for Roma refugees to seek and access health; • Barriers to access information on rights and available services 	<ul style="list-style-type: none"> • Unmet specific healthcare needs due to limited financial capacity and transportation issues; • Lack of integration, recreational facilities, and personal care. • Older people often feels isolated and underserved. • Financial constraints hindering coverage of basic needs
Identified Capacities and Opportunities	<ul style="list-style-type: none"> • Governmental guarantees refugees' right to work, with additional positions created in educational sector; • Local CSOs offer employment support; • Emergency care and basic health services are provided by the government and partners, including medications, diagnostics, doctor visits, and transport; • The community actively collaborates in seeking solutions 	<ul style="list-style-type: none"> • The community members often find solutions using governmental web sources for refugees, or the refugee green line 	<ul style="list-style-type: none"> • NGOs and CSOs offer diverse forms of aid, from healthcare to social engagement programs
Identified Priorities and Proposed Solutions	<ul style="list-style-type: none"> • Accommodation: Optimize decisions on RACs and give CSOs access and support to renovate social housing. • Employment: Revise employment legislation to become more inclusive for refugees, concerning self-employment/entrepreneurship. • Empower refugees to explore employment and business opportunities through informative sessions. • Medical services: Promote closer collaboration between NGOs and refugees to understand and address the needs of women with severe health conditions. Evaluate the capacity of local NGOs and provide capacity-building efforts to optimize medical assistance in Balti. Adjust the legislation to respond to the community's health needs. 	<ul style="list-style-type: none"> • Education: Support access of Roma children and youth to both formal and non-formal educational programs. • Healthcare: Work with health service providers to improve cultural awareness and mainstream Roma inclusion. Support Roma refugees to access Temporary Protection and provide information on health services and how to access them. • Information: Enhance audio-visual content, especially for those with limited literacy, and work with community mediators and member to support information dissemination among Roma community and ease the access to aid available locally. • Basic needs: Provide support to Roma refugees to help them cover the costs associated with healthcare and education. 	<ul style="list-style-type: none"> • Healthcare: Enhance collaboration between organizations to create a comprehensive care network to support and promote access healthcare services, including specialized care for chronic diseases. Improve transportation options for older people to facilitate their access to healthcare services. • Social integration: Develop programs and activities that promote social integration and reduce isolation among the older people. Provide support to older people to help them participate in social activities and recreational programs. • Basic Needs and Social Assistance: work with refugee response partners and government to support older people to meet their basic needs, including through access to social assistance programmes.

CAHUL

Women in Cahul face challenges in accessing healthcare, financial stability, and housing. While government-funded emergency medical aid is available and CSOs conduct health campaigns, refugee women often have difficulty finding family doctors who speak their language or understand their cultural needs. Additionally, they struggle with low-wage jobs and insufficient employment support. Existing social housing legislation has limited capacity to integrate refugees. Proposed solutions include increasing the number of family doctors who speak the languages of refugees and providing cultural competency training for healthcare workers, promoting economic integration for refugees through partnerships between the public and the private sector, and offering professional courses for skill development. It's also suggested to facilitate the disability status validation process for refugee women with disabilities in Moldova.

Children in Cahul face challenges with legal status, education, and social integration. While robust child protection legal frameworks and equipped safe spaces exist, there is a lack of information dissemination about these facilities, especially in rural areas. Additional challenges include non-recognition of vaccinations from Ukraine and transportation challenges. Proposed solutions involve supporting refugee to enroll and attend local school, improving transportation, and reinforcing information dissemination on available services to further assist in children's integration.

Persons with disabilities in Cahul face a lack of adequate social assistance mechanisms. They require personal care, improved accessibility in public spaces and services, and more initiatives for social inclusion. While national laws ensuring accessibility exist, they are often not followed in practice. Few persons with disabilities manage to find jobs, and there are tax benefits for their employers. Solutions should look at developing a comprehensive integration plan for them, establishing, or enhancing rehabilitation centers, providing employment incentives, and enforcement of existing laws on accessibility.



024 Local Coordination Workshop

Date: _____ Beneficiary Profile: _____

Regional Refugee Response for the Ukraine Situation

Needs	Lacune - Недостатки - Gaps	Puncte forte/Oportunități Промислості/Возможности - Strengths	Soluții - Решения - Solutions
<ul style="list-style-type: none"> - asigurabilitatea serviciilor publice de îngrijire medicală / asigurabilitatea serviciilor psihice - lipsa unor servicii medicale specializate - infrastructură culturală insuficientă - cunoașterea limitată a mecanismelor de raportare către ONG 	<ul style="list-style-type: none"> - servicii medicale / psihologice insuficiente / necorespunzătoare - servicii psihice / psihologice insuficiente / necorespunzătoare - infrastructură culturală insuficientă - cunoașterea limitată a mecanismelor de raportare către ONG 	<ul style="list-style-type: none"> - servicii medicale / psihologice existente - servicii psihice / psihologice existente - servicii medicale / psihologice existente - servicii psihice / psihologice existente 	<ul style="list-style-type: none"> - dezvoltarea serviciilor medicale / psihologice - dezvoltarea serviciilor psihice / psihologice - dezvoltarea serviciilor medicale / psihologice - dezvoltarea serviciilor psihice / psihologice
<ul style="list-style-type: none"> - infrastructură culturală insuficientă - cunoașterea limitată a mecanismelor de raportare către ONG 	<ul style="list-style-type: none"> - servicii medicale / psihologice insuficiente / necorespunzătoare - servicii psihice / psihologice insuficiente / necorespunzătoare 	<ul style="list-style-type: none"> - servicii medicale / psihologice existente - servicii psihice / psihologice existente 	<ul style="list-style-type: none"> - dezvoltarea serviciilor medicale / psihologice - dezvoltarea serviciilor psihice / psihologice
<ul style="list-style-type: none"> - infrastructură culturală insuficientă - cunoașterea limitată a mecanismelor de raportare către ONG 	<ul style="list-style-type: none"> - servicii medicale / psihologice insuficiente / necorespunzătoare - servicii psihice / psihologice insuficiente / necorespunzătoare 	<ul style="list-style-type: none"> - servicii medicale / psihologice existente - servicii psihice / psihologice existente 	<ul style="list-style-type: none"> - dezvoltarea serviciilor medicale / psihologice - dezvoltarea serviciilor psihice / psihologice



PE
AWAY FROM
HOMI
SPERANȚĂ DEPARTE DE C

O lume în care
refugiații sunt
mereu incluși

Brand / 2774560

Priority Population Group	Women	Children	Persons with Disabilities
Identified Needs	Accommodation and Housing, Healthcare, Socio-Economic Inclusion and Employment	Education, Inclusion	Healthcare, Rehanibilitation Services, Socio-Economic Inclusion and Employment
Identified Challenges	<ul style="list-style-type: none"> • Shortage of family doctors and limited cultural awareness on health services. • Low wages and limited employment support. • Barriers accessing social housing programs. 	<ul style="list-style-type: none"> • Lack of information about safe spaces in rural areas. • Non-recognition of foreign vaccinations. • Barriers to access education, including transportation issues 	<ul style="list-style-type: none"> • Insufficient social assistance mechanisms. • Lack of compliance with national accessibility laws. • Limited employment opportunities despite tax incentives
Identified Capacities and Opportunities	<ul style="list-style-type: none"> • Access to government-funded emergency medical aid. • CSOs run health campaigns. 	<ul style="list-style-type: none"> • Robust child protection legal framework. • Well-equipped safe spaces and community centers. • Quality integration and educational programs. 	<ul style="list-style-type: none"> • National legislation ensures accessibility. • Some find jobs through existing programs. • Tax benefits for employers
Identified Priorities and Proposed Solutions	<ul style="list-style-type: none"> • Healthcare: Work with service provider to promote more accessible and culturally sensitive health care and ease the disability status validation for refugee in Moldova. • Financial stability: Promote economic integration through partnerships with the public and private sector, and professional course provision. • Housing: Work with local authorities to advocate and support the inclusion of refugees in social housing programs and promote avenues for CSOs to work on infrastructural renovations. Improve sustainability of rental support programmes. 	<ul style="list-style-type: none"> • Access to Education: support enrollment of refugee children. Advocate for and support the recognition of foreign vaccinations and improve transportation. • Social integration: Foster community activities and reinforce information dissemination about rights and available services. 	<ul style="list-style-type: none"> • Personal care: support PwD to access personal care services. • Rehabilitation Centers: Establish or enhance rehabilitation centers. • Social inclusion: Develop a comprehensive integration plan and enforce existing laws on accessibility. Improve accessibility in public services, accomodation centers and aid organization premises.

CAUSENI

Children in Causeni face challenges in protection, healthcare, and education. While the government's child protection scheme is in place, there are barriers affecting the access of unaccompanied children to Temporary Protection, mainly related to lack of awareness of their rights. Refugee children's healthcare is hampered by challenges in accessing medical insurance and limited information on health services. Educational challenges arise due to limited opportunities for refugee children to learn both Romanian and Ukrainian, including lack of educational resources in the Ukrainian language (such as availability of Ukrainian books in libraries) and communication barriers. Proposed solutions include strengthening delivery of information on how to access TP, health and the national healthcare system, integrating refugee educators in the school system, and emphasizing Romanian language learning.

The Roma community in Causeni faces challenges related to education, access to aid, and inclusion. Challenges to comply with certain legal requirements, as well as limited support, hinder their access to education. Civil society organizations have sometimes been perceived as not being fully inclusive of the Roma community, due to prevailing stereotypes and prejudice. Proposed solutions include expand educational opportunities for Roma refugees, media campaigns to combat stereotypes, and fostering collaboration between local authorities and the community for delivery of inclusive and culturally sensitive assistance.





SPERANT

O lume refugia mereu

Man with glasses, wearing a light-colored short-sleeved shirt, sitting at a table and looking at a document.

Woman with blonde hair wearing a dark floral patterned shirt, sitting at a table and looking towards the center.

Blonde woman in profile, wearing large hoop earrings, looking towards the center of the table.

Person in the foreground, seen from the back/side, holding a marker over the papers on the table.

Large sheets of paper on the table with handwritten notes in Romanian. Visible text includes: 'Interpretarea...', 'Situatia...', 'gestiune...', 'lipsa...', 'obiective...', 'acceptabile...', 'grupul...', 'instabilitate...', 'probleme...', 'fapturi...', 'diferen...', 'informa...', 'stabilitate...', 'fapturi...', 'grupul...'



Priority Population Group	Roma Community	Children
Identified Needs	Education, Inclusion	Education, Healthcare, Information, Legal Support
Identified Challenges	<ul style="list-style-type: none"> • Educational access restricted by administrative barriers, and limited support to effectively access schools. • Civil society organizations have sometimes been perceived as not being fully inclusive of the Roma community, due to prevailing community stereotypes and prejudice. • Limited governmental initiative for Roma integration despite existing legislation. 	<ul style="list-style-type: none"> • Barriers to unaccompanied children to access a legal status in Moldova related to limited awareness of their rights by service providers and caregivers. • Refugee children's healthcare is hampered by challenges in accessing medical insurance and limited information on health services. • Limited opportunities for refugee children to learn Romanian, and continue learning of Ukrainian language.
Identified Capacities and Opportunities	<ul style="list-style-type: none"> • Legislative frameworks ensuring social protection. • Heightened attention from the Ministry of Education. 	<ul style="list-style-type: none"> • Government monitors child welfare. Support provided for child protection.
Identified Priorities and Proposed Solutions	<ul style="list-style-type: none"> • Education: Expand educational opportunities for Roma refugees. • Fighting Discrimination: Promote campaigns to combat discrimination, including stereotypes. • Integration: Foster collaboration between local authorities and the community for delivery of inclusive and culturally sensitive assistance and promote local integration. 	<ul style="list-style-type: none"> • Protection: Enhance availability of information on TP registration. • Healthcare: Improve delivery of information on how to access health and the national healthcare system. • Education: Support the enrollment of refugee children in the school system. • Language Learning: Expand opportunities for refugee children to learn Romanian and continue learning Ukrainian, particularly by increasing the availability of learning resources such as books. Emphasize the importance of Romanian language learning through school initiatives, community programs, and language training opportunities. Integrate refugee educators in the school system.

COMRAT

Women in Comrat struggle with financial stability, access to healthcare, and education. Government financial assistance is limited, and unemployment rates among refugee women are high. Access to healthcare is hindered by a lack of awareness among both refugees and healthcare providers about the healthcare package and entitlements under TP, as well as by the challenges of accessing health insurance for non-employed refugees. Some refugees perceive that the education system in Moldova is not in line with Ukrainian standards, which may hinder the enrollment of children in Moldovan schools, in addition to administrative barriers. However, there are good practices such as the provision of maternity support by the government and financial assistance to cover basic needs by civil society organizations. Identified solutions include expanding employment support programs, increasing the availability of information on healthcare, advocating with the government to improve access to health insurance for refugees, and promoting a dialogue between Moldovan and Ukrainian educational authorities for the alignment of school curricula.

Refugee children in Comrat struggle with accommodation, education, and inclusion challenges. Administrative barriers have hindered the enrollment of refugee children in local schools, resulting in limited local integration and further isolating refugee children. The reluctance of some refugees to learn Romanian has also contributed to this trend. Regarding access to healthcare, there is widespread ambiguity and overall low awareness among health service providers about the right of refugees to access medical services, as well as about the service package granted under TP, which affects children's access to healthcare. Efforts should aim to promote the inclusion of refugee children in local schools, promote activities that foster their inclusion and combat isolation, reduce administrative barriers for refugees to access health insurance, and raise awareness among health service providers about refugees' right to health under Temporary Protection.

People with disabilities and older persons in Comrat main needs revolve around access to healthcare, well-being, and inclusion. Available support is perceived as insufficient to cover the needs associated with access to medications, which has been impacted by the increased prices of medicines. Moreover, participants perceive that better coordination is needed among local responders to avoid overlooking the needs of groups at higher risk of marginalization, including older people and people with disabilities, especially those living in rural areas. There is also a shared perception that there are not enough activities fostering the local inclusion and integration of older refugees and refugees with disabilities in Comrat, which impacts their well-being as they feel isolated. Identified good practices include the right to access health under Temporary Protection, which needs further operationalization and adjustments, as well as activities implemented by some CSOs that address some of the identified needs, including the provision of community MHPSS. Solutions involve supporting refugees to access medication, while supporting their financial stability, enhancing access to medical services, and expanding community-based initiatives aimed at promoting local inclusion and the well-being of older refugees and refugees with disabilities.





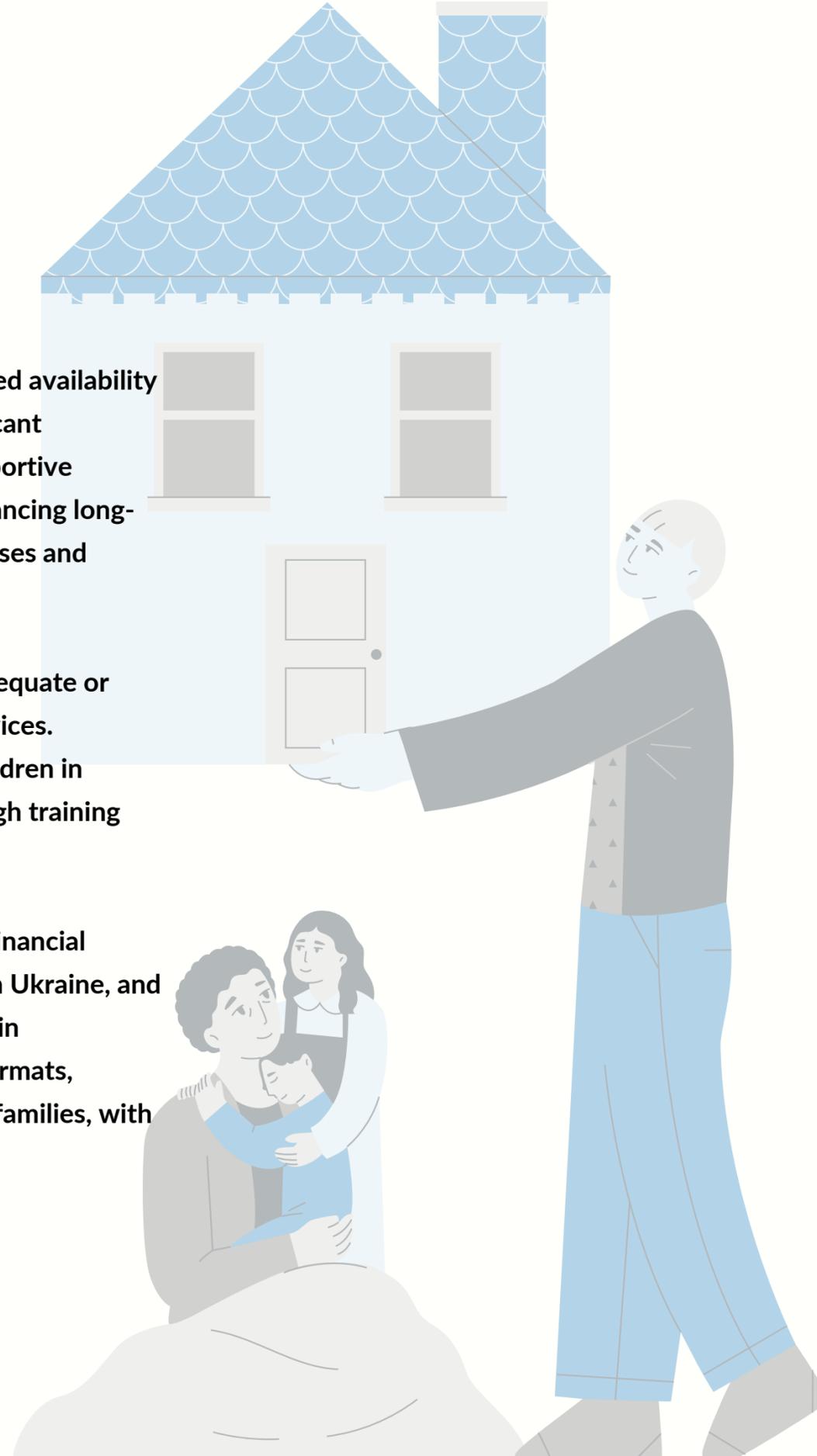
Priority Population Group	Women	Children	Persons with Disabilities and Older Persons
Identified Needs	Basic Needs, Healthcare, Education, Socio-Economic Inclusion and Employment	Accommodation and housing. Education, Healthcare. Inclusion	Healthcare, Inclusion, MHPSS
Identified Challenges	<ul style="list-style-type: none"> Limited governmental financial assistance and high unemployment rates among refugee women. Limited awareness regarding healthcare packages and entitlements under TP. Perceived misalignment between Moldovan and Ukrainian education systems. 	<ul style="list-style-type: none"> Administrative barriers to school enrollment and limited local integration. Reluctance towards learning Romanian and isolation from local communities. Ambiguity and low awareness among healthcare providers regarding refugees' healthcare rights. 	<ul style="list-style-type: none"> Limited support and increased medicine prices impacting access to healthcare. Needs of groups at higher risk, especially in rural areas, being overlooked. Lack of activities promoting local inclusion and integration, leading to feelings of isolation among older refugees and those with disabilities.
Identified Capacities and Opportunities	<ul style="list-style-type: none"> Provision of maternity support by the government and financial assistance by CSOs. 	N/A	<ul style="list-style-type: none"> The right to access health under Temporary Protection. Some CSO activities addressing identified needs, including providing community MHPSS.
Identified Priorities and Proposed Solutions	<ul style="list-style-type: none"> Employment Enhancement: Expand employment support programs focusing on skill development and entrepreneurship. Healthcare Information Availability: Increase information availability on healthcare entitlements under TP and advocate for improved access to health insurance. Educational Dialogue: Promote dialogue between Moldovan and Ukrainian educational authorities for potential alignment of school curricula. 	<ul style="list-style-type: none"> Educational Inclusion: Address administrative barriers hindering school enrollment and engage in dialogue for curriculum alignment. Promotion of Social and Linguistic Integration: Implement programs and activities to promote social interaction, inclusion, and Romanian language learning among refugee children. Healthcare Accessibility: Work towards reducing healthcare access barriers and raising awareness among providers regarding refugees' rights. 	<ul style="list-style-type: none"> Access to medication: Implement support systems ensuring access to medication and financial stability for refugees. Healthcare Accessibility: Enhance access and awareness regarding medical services available under Temporary Protection. Inclusive Community Initiatives: Expand community-based initiatives promoting local inclusion and well-being, especially among older refugees and those with disabilities.

CHISINAU

Women in Chişinău face challenges in accessing housing, socio-economic inclusion, and employment opportunities. The limited availability of government services (especially healthcare and childcare), job opportunities, and Romanian language courses poses significant challenges. However, there are enabling factors such as the legal framework, which allows TP beneficiaries to work, and supportive community initiatives. Recommended solutions encompass enhancing conditions in short-term accommodation centers, enhancing long-term housing support, increasing employment opportunities, and providing job qualification courses, including language courses and exams/certifications.

Children in Chisinau face needs related to education, social assistance, and psychosocial support. Existing challenges are inadequate or limited kindergarten infrastructure, challenges accessing social assistance and support, and limited availability of MHPSS services. Solutions could involve enhancing/expanding professional childcare and kindergarten services, support the enrollment of children in school system and to foster their inclusion in social assistance services, and expanding availability of MHPSS, including through training programs for psychosocial support specialists.

People with disabilities in Chisinau face challenges accessing healthcare, personal support, transportation, and information. Financial constraints, social barriers, limited awareness of referral mechanisms among CSOs, unavailability of equivalent medications in Ukraine, and a strained medical system exacerbate these problems. Solutions may include prioritizing the needs of people with disabilities in governmental and local budgetary planning, disseminating information about service availability in accessible and inclusive formats, strengthening referral pathways, and advocate for funding to improve availability of services supporting this group and their families, with focus on rehabilitation services and access to assistive devices.



Priority Population Group	Women	Children	Persons with Disabilities
Identified Needs	Accommodation and Housing, Socio-Economic Inclusion and Employment	Education, Social Assistance, Inclusion, MHPSS	Healthcare, Inclusion, Personal Care, Information
Identified Challenges	<ul style="list-style-type: none"> Limited availability of government services, including health and childcare, job opportunities, and Romanian language courses 	<ul style="list-style-type: none"> Inadequate or limited kindergarten infrastructure, inefficient social aid distribution, lack of psychosocial support specialists 	<ul style="list-style-type: none"> Financial constraints, social barriers, limited awareness referral mechanisms among CSOs, unavailability of equivalent medications in Ukraine, and a strained medical system
Identified Capacities and Opportunities	<ul style="list-style-type: none"> Temporary Protection status for employment Supportive community initiatives 	<ul style="list-style-type: none"> Available community initiatives Existing community and NGO support 	<ul style="list-style-type: none"> Existing protective legal frameworks Available community and NGO support
Identified Priorities and Proposed Solutions	<ul style="list-style-type: none"> Access to housing: Enhance conditions in short-term accommodation centers, and advocate for more long-term and sustainable housing options. Support socio-economic inclusion: work with public and private actors to increase employment opportunities, and provide job qualification courses, including language courses. Expand availability of childcare services. 	<ul style="list-style-type: none"> Enhance childcare and kindergarten services: Enhance professional childcare and kindergarten services. Support enrollment and inclusion: Support the enrollment of children in the school system and foster their inclusion in social assistance. Expand MHPSS: Expand the availability of mental health and psychosocial support (MHPSS), including through training programs for psychosocial support specialists. 	<ul style="list-style-type: none"> Government and local budgetary planning: Prioritize the needs of people with disabilities in governmental and local budgetary planning. Awareness raising on Service availability: Disseminate information about service availability in accessible and inclusive formats. Referral pathways: Strengthen referral pathways for people with disabilities to better respond to their needs. Rehabilitation services: Improve the availability of services supporting people with disabilities and their families, with focus on rehabilitation services and assistive devices.

DONDUSENI

Women in Donduseni face challenges in housing, financial stability, and community inclusion. While civil society organizations support access to housing and children attend schools and online learning programs, women continue to face financial instability due to limited job opportunities and limited support for entrepreneurs. There is also limited availability of professional courses in Ukrainian and/or Russian. Promoting government and civil society collaboration to expand housing opportunities, promote employment and entrepreneurship programs, along with Romanian language programs are among the proposed solutions.

Older people in Donduseni struggle to meet basic needs, secure housing, and access healthcare. Limited winter support from the government and the closure of refugee accommodation centers contribute to concerns about basic needs and housing. While cash support helps to address some of these needs, increasing rental costs and limited access to healthcare and medications pose additional challenges. Identified solutions include promoting the inclusion of older refugees in social assistance services, expanding long-term accommodation support for older people, supporting access to healthcare and medication, and enhancing information campaigns about TP and associated rights, such as access to healthcare.

The Roma community in Donduseni faces challenges in education, healthcare, and employment. Persistent discrimination and stereotypes against the Roma community hinder their inclusion in the national education system and the employment sector, while affecting their access to services. Participants reported that discrimination in the school system has contributed to drop-out rates. Limited access to healthcare and information on healthcare services also pose challenges for local integration. While there are limited employment opportunities, government employment services and grants for small enterprise development have been identified as positively impacting the socio-economic inclusion of Roma refugees. Proposed solutions include creating opportunities for intercultural dialogue, promoting the inclusion of Roma refugees in the education system and combating prejudice and stereotyping, supporting access to healthcare, including through information campaigns and outreach to rural areas, and advocating for employment opportunities, while expanding support programs focusing on labor inclusion and entrepreneurship.





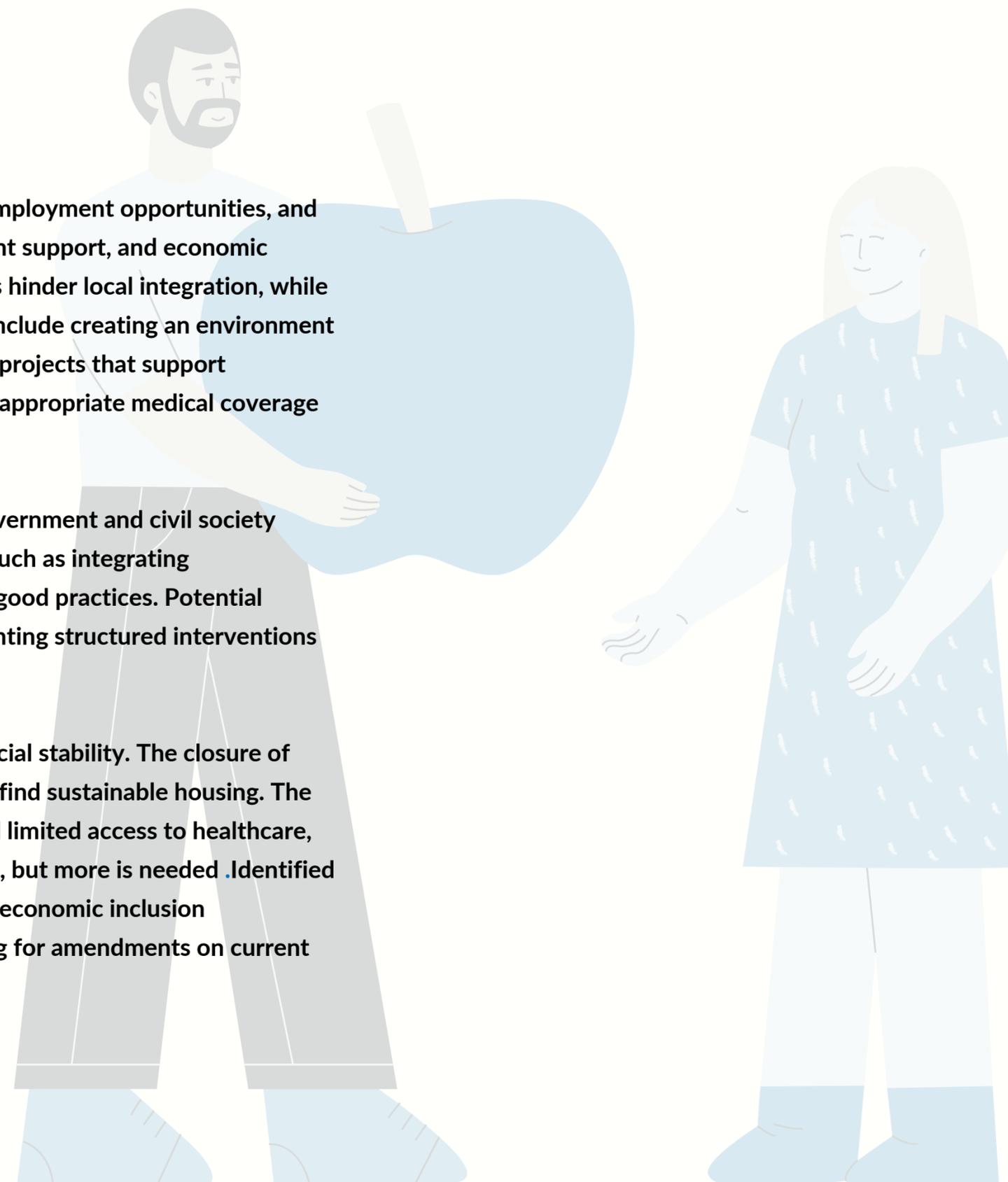
Priority Population Group	Women	Older People	Roma Community
Identified Needs	Accommodatoin and Housing, Basic Needs, Socio-Economic Inclusion and Employment	Basic Needs, Accommodation and Housing, Healthcare, Information	Education, Healthcare, Inclusion, Socio-Economic Inclusion and Employment
Identified Challenges	<ul style="list-style-type: none"> • High rents and scarce housing. • Limited job opportunities entrepreneurial support. • Insufficient professional courses in Ukrainian or Russian. 	<ul style="list-style-type: none"> • Limited government winter support. • Limited short-term accommodation and long-term housing support • Rising rental costs • Limited access to healthcare and medications. 	<ul style="list-style-type: none"> • Discrimination and stereotypes affecting education and employment. • Limited healthcare access and availability of related information.
Identified Capacities and Opportunities	<ul style="list-style-type: none"> • Access to schools and online learning programs for children. • Civil society's engagement in addressing housing issues. • Availability of cash support initiatives. 	<ul style="list-style-type: none"> • Availability of cash support initiatives. 	<ul style="list-style-type: none"> • Government employment services and grants for small enterprise development.
Identified Priorities and Proposed Solutions	<ul style="list-style-type: none"> • Housing: Enhance collaborations to expand housing opportunities • Employment: expand employment and entrepreneurship support. • Language Learning: support Romanian language programs. 	<ul style="list-style-type: none"> • Inclusion: Promote the inclusion of older refugees in social assistance. • Housing: Expand housing support • Health Care: facilitate access to healthcare and medication. • Information: Enhance information campaigns about Temporary Protection and associated rights. 	<ul style="list-style-type: none"> • Tackle Discrimination: Create opportunities for inter-cultural dialogue and advocate for educational inclusion. • Health Care: Promote healthcare access through information campaigns and outreach, especially in rural areas. • Employment and Entrepreneurship: Advocate for employment opportunities and expand support programs focusing on labor inclusion and entrepreneurship.

ORHEI

Challenges faced by women in Orhe revolve around financial stability, socioeconomic inclusion, employment opportunities, and access to healthcare. Despite civil society's efforts to bridge the gaps through courses, employment support, and economic empowerment projects, limited access to government social assistance persists. Language barriers hinder local integration, while access to healthcare is limited by the existing legal framework. Proposed priorities and solutions include creating an environment that promotes labor inclusion and gender equality for women, guaranteeing equal pay, expanding projects that support entrepreneurship, and supporting civil society-driven programs. Revising the legislation to ensure appropriate medical coverage for refugees is also recommended.

Children in Orhei face needs related to basic needs, food security, and social inclusion. Limited government and civil society support, especially regarding baby food provision, are one of the main identified gaps. Initiatives such as integrating psychologists into schools and NGOs organizing events to foster social cohesion are identified as good practices. Potential solutions involve working with the government to expand social protection services and implementing structured interventions that nurture interactions between refugees and local communities.

Older people in Orhei face challenges in accessing social assistance, healthcare and securing financial stability. The closure of Refugee Accommodation Centers (RACs) and increasing rental prices make it difficult for them to find sustainable housing. The Ukrainian government's social payments are insufficient, especially given the high cost of rent and limited access to healthcare, particularly for those under Temporary Protection. NGOs provide some essential medical services, but more is needed. Identified solutions for these challenges encompass expanding long-term housing support, promoting socio-economic inclusion opportunities for older refugees and supporting their access to healthcare, including by advocating for amendments on current legislation.





Beneficiary Profile
Date: _____
Financial Consultation Workshop

Needs - Потребности - Needs

Financial
(Socio-economic)

Intergaze

Socio-profesional

Medical

Lacune - Недостатки - Gaps

Puncte forte/Oportunitati
Преимущества/Возможности - Strengths

Priority Population Group	Women	Children	Older People
Identified Needs	Basic Needs, Socio-Economic Inclusion and Employment, Healthcare	Basic Needs, Social Assistance, Food Security, Inclusion	Social Assistance, Basic Needs, Healthcare, Accommodation and Housing
Identified Challenges	<ul style="list-style-type: none"> Limited access to government social assistance (pensions and allowances). Language barriers impacting local integration. Limited healthcare access due to legal frameworks. 	<ul style="list-style-type: none"> Limited government and civil society support, particularly in baby food provision. Social and cultural integration is limited, inducing feelings of isolation. 	<ul style="list-style-type: none"> Prospective RAC closures and increasing rental prices. Insufficient social payments amidst inflated rents. Restricted healthcare access, particularly under Temporary Protection.
Identified Capacities and Opportunities	<ul style="list-style-type: none"> Civil society efforts through courses, employment support, and economic empowerment projects. 	<ul style="list-style-type: none"> Integrating psychologists into schools. NGOs organizing events to foster social cohesion. 	<ul style="list-style-type: none"> NGOs providing some key medical services.
Identified Priorities and Proposed Solutions	<ul style="list-style-type: none"> Labor & Equality: Create an environment promoting labor inclusion and gender equality. Guarantee equal pay. Entrepreneurship: Expand entrepreneurship projects. Support to CSOs: Support civil society-driven programs fostering socio-economic inclusion. Healthcare Legislation: Revise legislation to ensure refugee coverage. 	<ul style="list-style-type: none"> Social Protection: Work with the government to expand social protection services addressing children's needs. Community Integration: Implement structured NGO interventions fostering interaction between refugees and local communities. 	<ul style="list-style-type: none"> Housing Support: Expand long-term housing support. Socio-Economic Inclusion: Promote socio-economic inclusion for older refugees. Legislation & Healthcare Access: Advocate for legislative amendments and support healthcare access.

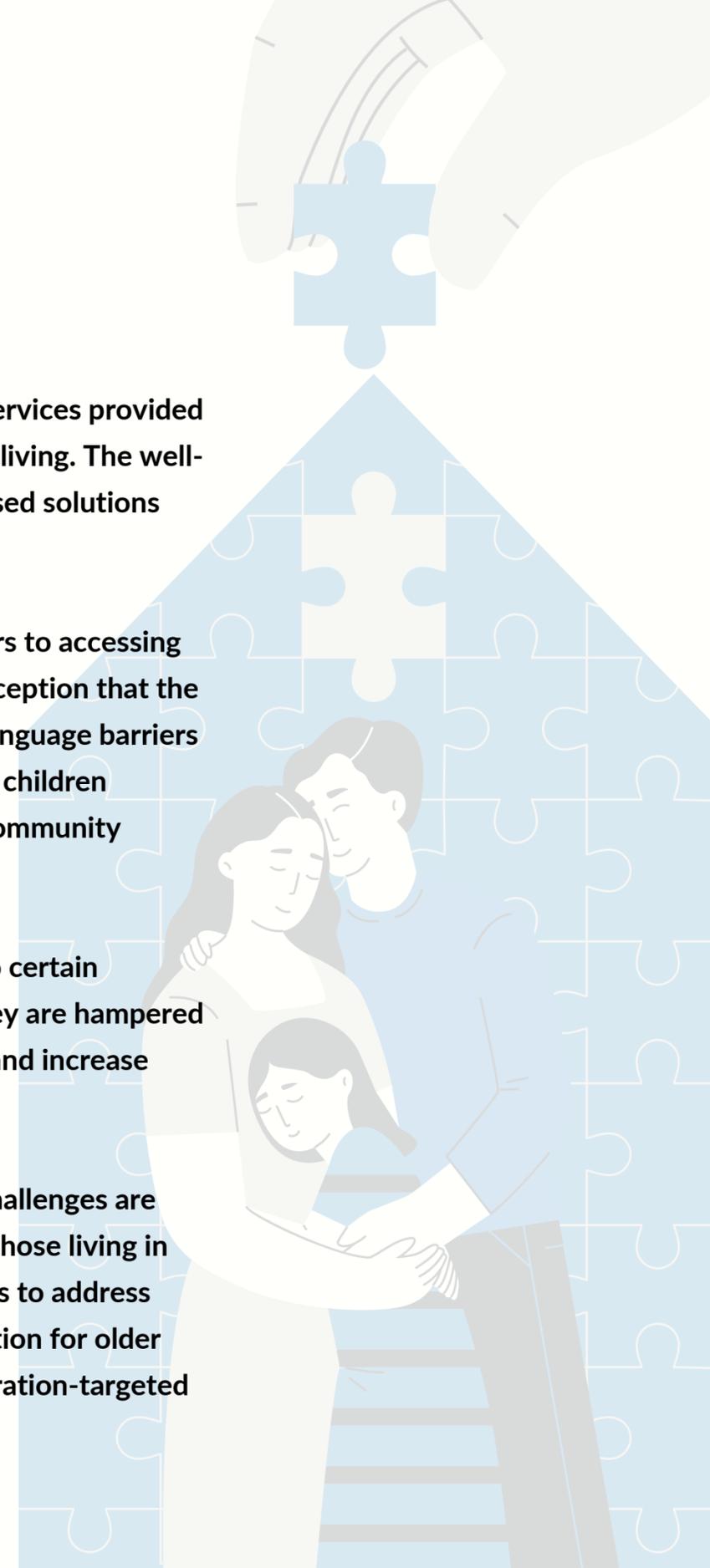
TIRASPOL

Women in Tiraspol face needs related to basic needs and MHPSS. Support exists in the form of allowances, job opportunities, and services provided by civil society organizations, but financial challenges are exacerbated by insufficient funding for women's programs and the cost of living. The well-being of refugee women is also affected by a lack of community programs, leading to isolation, and limited access to MHPSS. Proposed solutions include establishing community centers, offering mentorship, and organizing cultural events to support and promote inclusion.

Children in Tiraspol face challenges related to legal status, education, and social inclusion. These challenges stem largely from barriers to accessing legal status and documentation, and limited community support due to misconceptions about refugee inclusion (specifically, the perception that the presence of refugees has caused conflicts). However, there are some positive aspects, such as access to free education with lower language barriers than in other regions. To address these challenges, participants suggested expanding child-focused assistance, providing support for children accessing online education in school settings, and increasing support to CSOs working with children, including for the provision of community activities that foster social cohesion and inclusion.

Persons with disabilities in Tiraspol face challenges in accessing medicine, financial aid, and accessible information. Limited access to certain medications forces refugees to seek them elsewhere. CSOs are trying to bridge the gap with medicines and assistive devices, but they are hampered by limited funding. Possible solutions could include introducing home-based rehabilitation, increasing financial assistance to OPDs, and increase availability of information for refugees in accessible and inclusive formats.

Older people in Tiraspol face obstacles in meeting basic needs, accessing medical assistance, and integrating into social life. These challenges are exacerbated by financial restrictions for both locals and refugees. Refugees have limited access to healthcare, including barriers for those living in rural areas, such as limited transportation. Older refugees also feel isolated and lack social activities that foster inclusion. Approaches to address these issues include enhancing financial support, supporting older people to access healthcare and medication, providing transportation for older people in rural areas, supporting the integration of older individuals into social activities, and supporting CSOs to initiate more integration-targeted activities.



HOPE AWAY FROM HOME

SPERANȚĂ DEPARTE DE CASĂ

O lume în care
refugiații sunt
mereu incluși

Planul de răspuns
pentru refugiați 2024

Atelier de Consultare Locală

План по урегулированию ситуации с
беженцами 2024

Консультации с Местными Организациями



Priority Population Group	Women	Children	Persons with Disabilities	Older People
Identified Needs	Basic Needs, MHPSS, Inclusion	Legal Status, Social Assistance, Education, Inclusion	Healthcare, Basic Needs, Inclusion	Basic Need, Healthcare, Inclusion, MHPSS
Identified Challenges	<ul style="list-style-type: none"> • Insufficient funding for women's programs and high cost of living. • Lack of community programs, leading to isolation. • Limited access to MHPSS. 	<ul style="list-style-type: none"> • Barriers to legal status and documentation. • Limited community support due to misconceptions about refugees. 	<ul style="list-style-type: none"> • Challenges accessing certain medications and adequate assistive devices. • CSOs hampered by limited funding. 	<ul style="list-style-type: none"> • Financial restrictions affecting both locals and refugees. • Limited access to healthcare, especially in rural areas due to transportation barriers. • Isolation and lack of social activities promoting inclusion.
Identified Capacities and Opportunities	<ul style="list-style-type: none"> • Allowances, job opportunities, and services from CSOs. 	<ul style="list-style-type: none"> • Access to free education with lower language barriers. 	<ul style="list-style-type: none"> • Some CSOs bridge gaps for medicines and equipment despite funding challenges. 	<ul style="list-style-type: none"> • Local CSOs do provide certain level of support for older people.
Identified Priorities and Proposed Solutions	<ul style="list-style-type: none"> • Information and Mentorship: Implement programs and policies that enhance financial stability for women by securing funds for women's programs, offer mentorship. • Cultural and Inclusion Events: Organize cultural events to support and promote inclusion. • MHPSS: expand availability of MHPSS services. 	<ul style="list-style-type: none"> • Child-Focused Assistance: Expand child-focused assistance. • Support for Online Education: Provide additional support for children accessing online education to be able to do so in school settings. • Support for CSOs: Increase assistance to CSOs, emphasizing community activities that foster social cohesion and inclusion. 	<ul style="list-style-type: none"> • Home-Based Rehabilitation: Support home-based rehabilitation. • Healthcare and Assistive Devices: Collaborate with CSOs and healthcare providers to ensure access to necessary medications and assistive devices. • Financial Assistance: Increase aid to Organizations of Persons with Disabilities (OPDs). • Accessible Information: Ensure information availability in accessible and inclusive formats. 	<ul style="list-style-type: none"> • Healthcare and Assistive Devices: Collaborate with CSOs and healthcare providers to ensure access to necessary medications and assistive devices. • Transportation Solutions: Provide transportation, particularly for those in rural areas. • Social Activity Integration: Support the integration into social activities and assist CSOs to initiate more targeted integration activities.

UNGHENI

Women in Ungheni face primary needs in housing, basic needs, and healthcare. These needs are exacerbated by potential RACs closures and high rental costs. Additionally, refugee women face barriers to accessing healthcare, including limited service availability, especially from specialists, and lack of awareness and understanding of health entitlements under TP beyond free emergency care. Although refugees under TP have the right to work, refugee women in Ungheni struggle to achieve self-sufficiency due to language barriers and low wages. Key priorities for refugee women include long-term housing solutions, clear information on medical care accessibility under TP, improved employment opportunities, and financial support.

Children in Ungheni face needs in housing, well-being and inclusion, education, and coverage of basic needs, especially in the upcoming winter. Inclusive education that values linguistic and cultural diversity is essential, but the absence of Ukrainian-language teachers and Romanian language classes hinders inclusion. Fostering children's emotional well-being and inclusion also remains critical. Although the state assists with utilities, and various organizations help refugees with housing, rental assistance does not cover all the needs, and landlords often resist long-term leases to refugees. On a positive note, school-provided free meals are contributing to meet children's nutritional needs. Identified priorities and solutions include ensuring stable, long-term rental assistance, widening housing options, provisioning clothing vouchers, and supporting refugee children to access resources and opportunities to learn Ukrainian and Romanian.

Persons with disabilities and older people in Ungheni face challenges accessing personal care services, participating in community activities, and finding services and support. The local government and civil society organizations (CSOs) have provided some support, such as funding social assistance services, but more is needed. Despite these efforts, people with disabilities and older people often feel isolated. This highlights the need for social inclusion strategies. Priorities should emphasize expanding availability of services for people with disabilities, better support for social workers, community activities promoting local integration and fostering community networks, and awareness campaigns about disabilities and ageing in inclusive and participative formats.





- пережить
как дальше жить
уязвимость ← паника
→ медицина
→ финансы

- организованности
- информированности
- материнства
- успокоение в связи с пониманием, советами коллегью



Priority Population Group	Women	Children	Persons with Disabilities and Older People
Identified Needs	Accommodation and Housing, Employment, Basic Needs and Healthcare	Housing, Inclusion, Education, and Basic Needs (Clothing, Footwear), MHPSS	Healthcare, Social Assistance, Inclusion, Information, MHPSS
Identified Challenges	<ul style="list-style-type: none"> • High rental costs and potential Residential Accommodation Center closures • Limited access to and awareness of healthcare entitlements • Low wages and language barriers in employment 	<ul style="list-style-type: none"> • Absence of Ukrainian-language teachers • Landlords resisting long-term leases, affecting housing and well-being of children. • Limited initiatives fostering inclusion and well-being of refugee children. • Limited access to seasonal support. 	<ul style="list-style-type: none"> • Feeling of isolation • Limited availability of services and awareness
Identified Capacities and Opportunities	Not specified	- School-provided free meals - Some organizations help with housing - State assists with utilities	- Local government and CSO initiatives - Enhancement of local social assistant capacities by CSOs
Identified Priorities and Proposed Solutions	<ul style="list-style-type: none"> • Housing Stability: Develop long-term housing solutions and support. • Healthcare: Provide clear information on medical care accessibility under Temporary Protection. • Employment Opportunities: Create better employment opportunities and language classes. 	<ul style="list-style-type: none"> • Housing: Ensure stable, long-term rental assistance and explore alternative housing options. • Basic Needs: ensure targeted support through cash and/or vouchers, especially for winter needs. • Language and Cultural Inclusion: Support to learn Ukrainian and Romanian and access educational resources for language learning. Include Ukrainian educators in the school system. • Well-Being and Inclusion: Strategies to foster emotional well-being and social integration amidst disruptions like teachers' absence. 	<ul style="list-style-type: none"> • Service Availability: Expand and promote accessible services for persons with disabilities. • Social Worker Support: Provide better support and resources for social workers supporting older refugees and refugees with disabilities. • Community Integration: Promote community activities and networks fostering local integration and combat isolation. • Awareness: Run awareness campaigns in participative formats to promote understanding of disabilities and aging.

Final Recommendations

Access to Legal Status

Supporting refugees to access a legal status remains a key priority as it is the foundation for them to locally integrate and enjoy a wider range of rights. It is key to ensure that those refugees at higher risk of marginalization are targeted and supported, including unaccompanied children, Roma refugees, older refugees, and refugees with disabilities.

Recommendations:

- Address legal challenges specifically for refugee children in the Transnistria region to access legal status and obtain documentation valid throughout the territory of Moldova.
- Improve outreach efforts and strengthen availability of information in accessible and inclusive formats on Temporary Protection and other available legal status for refugees from Ukraine, focusing on rural areas.



Housing and Accommodation

One of the most pressing needs identified in the context of local consultations is housing. As the situation becomes more protected, and amid the consolidation process of Refugee Accommodation Centers, it is important that RRP partners, in partnership with the Government, promote housing solutions for refugees, including the provision of stable, long-term housing alternatives and rental support, especially focusing on groups at higher risk, including Roma refugees, older refugees, and refugees with disabilities. Enhanced accommodation solutions for refugees encompass improved housing facilities, strategic collaborations between RRP partners and local public authorities, support for strengthening social housing programs, and rental support, among other initiatives.

Recommendations:

- Increase access to safe and adequate housing through social housing programs, rental support, and other initiatives.
- Advocate for refugees' inclusion in social housing programs.
- Work with host community members to address misperceptions and rumors that may be impacting their willingness to rent properties to refugees.
- Work with host community members to tackle discrimination against Roma refugees and identify and support those willing to support housing solutions.



Employment and Entrepreneurship

The challenges faced by refugees to obtain a stable and sustainable source of income can be categorized into four aspects: low wages, administrative barriers, language barriers, and lack of support for entrepreneurship. Creating conducive environments for employment and entrepreneurship among refugees includes addressing administrative barriers, ensuring access to job opportunities, vocational training, and empowering self-employment, with special attention to various demographic groups like women and persons with disabilities.

Recommendations:

- Promote and boost employment opportunities through varied strategies including sensitizing private sectors.
- Enhance employment opportunities for refugees, including women, through targeted programs focusing on vocational training and skill development.
- Bolster financial, material, and legal support for refugees to engage in self-employment.
- Expand childcare services to improve access to the labor market, especially for female single headed households.



Health, Nutrition, and MHPSS

Access to healthcare has been identified as a priority need across all regions. The biggest challenges include administrative barriers due to the existing legal framework, lack of clarity among refugees and healthcare providers on the health service package and entitlements under Temporary Protection, and challenges for non-employed refugees to access medical insurance. Refugees, especially persons with disabilities and older adults, face difficulty financing their medical expenditures, especially covering the costs of medication, assistive devices, and rehabilitation services. There are also challenges finding certain medications in the local market. To overcome these challenges, health-focused strategies for refugees need to be multifaceted, enhancing access to healthcare services, providing

Recommendations:

- Improve access to healthcare through collaboration with local providers and specialized services, including medical care for individuals with chronic diseases and access to medication.
- Strengthen medical care accessibility and clarify guidelines / service package among health providers, especially under Temporary Protection status.
- Enhance support for older person and persons with disabilities to access rehabilitation services, and assistive devices.
- Continue to integrate and expand the availability of MHPSS in the refugee response, ensuring specialized services are accessible to those in need.
- Facilitate the disability status validation process for refugees with disabilities.
- Work with health service providers to improve cultural awareness and mainstream Roma inclusion in health services.



Education

Across regions, participants of Local Consultations identified education as a priority need. Refugees face several barriers to accessing the national school system, including administrative barriers, language barriers, and limited material support, such as transportation. Learning Romanian is essential for educational opportunities, peaceful coexistence, and socioeconomic integration. The government and RRP partners should scale up Romanian language courses and certification programs for refugee adults and children. Roma populations are underrepresented in education. Efforts are needed to promote their inclusion in the education system, which should be prepared to receive them in an inclusive and respectful manner. Fostering educational accessibility and inclusivity for refugee children requires addressing barriers, promoting linguistic and cultural inclusion, and ensuring additional support structures are in place.

Recommendations:

- Make education more accessible by supporting enrollment and addressing challenges related to external documentation like vaccine certificates.
- Address barriers for enrollment and promote space for parental engagement in the educational process.
- Boost educational and linguistic inclusion through enhanced support, including Romanian and Ukrainian language classes.
- Provide additional support, such as tutoring and mentoring programs, to help refugee children succeed in school.
- Facilitate transportation for refugee children to access schools, focusing on those living in rural areas.
- Support refugees following online school to attend it in school settings.
- Work with the school and Roma communities to promote the educational inclusion of Roma refugees.



Social Cohesion and Inclusion

Local consultations have highlighted the importance of social cohesion and inclusion. Despite the welcoming environment and limited social tension, refugees often face challenges such as cultural, social, and language barriers that can exclude them from community engagement. The government and RRP partners must develop and enhance programs to promote social cohesion and inclusion. This involves creating activities that bridge local and refugee populations and introducing initiatives that foster mutual understanding and intercultural dialogue. Particular attention should be paid to Roma populations, who are often marginalized, to ensure their active participation in social environments and to dismantle prevailing stereotypes and discriminatory practices. It is also key to address the isolation experienced by older refugees and those with disabilities by promoting inclusivity through community-based initiatives, psychosocial support, and opportunities for them to connect with each other and the wider community, while also building their support networks and enjoying leisure time.

Recommendations:

- Enhance social integration and combat isolation through programs and activities that foster mutual understanding and intercultural dialogue and providing psychosocial support to refugees and communities hosting them.
- Address the isolation experienced by older refugees and those with disabilities through community-based initiatives, such as social clubs and support groups.
- Work with the media and host community to promote positive narratives about refugees and challenge negative stereotypes, particularly related to Roma community.
- Work with Roma community members, organizations, and mediators to implement activities aiming on addressing discrimination and stereotypes hindering access to services and rights.





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Final Report on Local Consultations

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The opinions expressed in this publication reflect the opinions gathered during 2024 local consultations and do not necessarily reflect the views of UNHCR.