



Regional Situation Report

Ukraine Regional Humanitarian Crisis

Region:	Eastern Europe & Central Asia			
Emergency type:	Conflict			
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Key Figures



Highlights

The humanitarian situation in Ukraine deteriorated throughout the reporting period. The Russian Federation had drastically increased its attacks on civilians and caused heavy damages to civilian infrastructure in Ukraine. Attacks on Ukraine's energy infrastructure have caused blackouts and severe interruptions to essential services in Kharkiv, Dnipro, Kyiv and other cities across the country. Healthcare facilities are also targeted, with WHO verifying 91 attacks between April and June. This

¹The total people in need includes 14,6 mln people living in Ukraine and 2,2 Ukrainian refugees living in European countries that are part of the Regional Refugee Response Plan as per the <u>Ukrainian Humanitarian Need and Response Plan 2024</u> and the <u>Ukrainian Refugee Response Plan 2024</u> respectively.

² It is estimated that the rate of people living with disability out of total people in need living in Ukraine and the Ukrainian refugees living in European countries amounts to 14% and 6% respectively.

³ Ukraine — Internal Displacement Report — General Population Survey Round 36, June 2024. IOM

⁴ According to UNFPA inputs to the inter-agency plans: HRP/RRP, Flash Appeal and others.



has resulted in further population moves and could eventually trigger additional waves of refugees towards neighboring countries.

- In Ukraine, partnerships with other UN agencies remain essential to provide integrated support to women and their families. UNFPA and UNHCR have partnered to ensure the provision of generators to the UNFPA Day Centre in Kharkiv, ensuring crucial Gender-Based-Violence (GBV) services. In addition, UNFPA and WFP renewed their partnership to provide food boxes to survivors of violence in more than 50 UNFPA-supported centres across the country. The partnership aims to continue to address the dual challenges of food insecurity and GBV, offering critical support to those most affected. UNFPA continues to explore additional interagency opportunities to combine efforts in the areas of GBV, SRH and economic empowerment for women and girls.
- UNFPA launched the "Voices from Ukraine", a qualitative GBV analysis, which aims to amplify the experience of GBV survivors, adding a human dimension to the numeric data typically gathered during GBV assessments. The research, conducted in close collaboration with Ukraine's GBV AoR partners, will contribute to identifying the risks and forms of GBV to be mitigated throughout the humanitarian response; identifying barriers to safely access GBV services and humanitarian assistance; and galvanizing financial support to address GBV. The "Voices from Ukraine" will also inform the 2025 Humanitarian Needs and Response Plan (HNRP) Ukraine process.
- On the 19th June an event dedicated to the **International Day for the Elimination of Sexual Violence in Conflict** was held in Kyiv. The event was attended by Olha Stefanishyna, Deputy Prime Minister for European and Euro-Atlantic Integration of Ukraine; Oksana Zholnovych, Minister of Social Policy of Ukraine; and Massimo Diana, UNFPA Representative in Ukraine.
- A key milestone was achieved with the launch of the <u>Safe YOU app</u> in <u>Romania</u>, an innovative solution designed to break down barriers and risks related to GBV while strengthening referral systems.
- In Moldova, more than 14,200 women, girls, men and boys from refugee and host communities received tailored GBV prevention, mitigation and response services. These services included static and mobile safe spaces, case management, referrals, cash assistance, dignity kits and vouchers for hygiene products.
- UNFPA in partnership with the NGO La Strada developed the first of its kind in Moldova Guidelines for facilitators on preventing and responding to Technologically-Facilitated GBV (TFGBV) for social workers who work with refugee women and girls in safe spaces, educational institutions and youth centers. A Training of Trainers was conducted, equipping 42 facilitators, youth workers from youth centers and Vocational and Educational Institutions (VET) teachers to identify and address digital violence, ultimately empowering nearly 290 women, girls, and boys through targeted awareness sessions.
- UNFPA Moldova continued its life saving work to improve access for refugee women to quality
 maternal, sexual, and reproductive health services by supporting thinly stretched Moldova's
 infrastructure and ensuring free access of refugees to services. UNFPA continues to reimburse the
 National Health Insurance Fund for the provision of health services to refugee women aged between
 18 and 55, ensuring they have access to medical care.



• In Belarus, the **"Health Support for Elderly Ukrainian Women" initiative** started in April, upon request of Ukrainian refugee women of older age. The initiative aims at empowering people of older age with essential health knowledge and strategies to improve the quality of life in their senior years.

Situation Overview

- As of June 2024, an estimated 6,55 million people have been forced to flee Ukraine, with nearly 6 million refugees (92%) of them hosted in European countries⁵.
- In Moldova <u>120,472 individuals</u> have registered for temporary protection as of June 2024. The flow of refugees in European Union (EU) countries (including Poland, Romania, and Slovakia) remains dynamic as 4,3 million individuals with an active registration for temporary protection have left (temporarily or not) the specific EU country that hosted them and returned to Ukraine.⁶ As of early July 2024, in <u>Poland</u>, 952,109 refugees counted with active registration under the EU Temporary Protection Directive (TPD), but 1,756,777 have been cumulatively registered since the emergency began. In <u>Romania</u>, 159,317 refugees have been registered for TP, with only 77,249 currently recorded inside the country. In <u>Slovakia</u>, the number of refugees with TP and those recorded in-country is similar, with 139,954 and 117,266, respectively. In <u>Belarus</u>, 49,320 refugees from Ukraine are recorded as of end of June 2024, indicating 19% increase since beginning of 2024 and 60% increase since mid-2023⁷. The highest increase in the number of refugees from Ukraine was observed in Minsk (from 8,911 to 11,263 individuals, or by 25% since the beginning of 2024).
- The second Inter-Agency GBV Safety Audit in the Republic of Moldova reveals persistent and alarming gender-based violence (GBV) risks for both refugees and the host community, particularly women and girls. These threats manifest in various forms, including technology-facilitated GBV, intimate partner violence, human trafficking, and incidents occurring in both private accommodations and public spaces such as transportation. Vulnerability is heightened for specific groups, notably persons with disabilities, Roma women, and adolescent girls and boys. Refugee women and girls face particularly acute GBV risks when interacting with private landlords, with documented cases of harassment and exploitation.
- The Inter-Agency Multi-sectoral Needs Assessment (MSNA) reports on <u>Health and Wellbeing</u> and <u>Protection and Accountability</u> covering Bulgaria, Czech Republic, Hungary, Moldova, Poland, Romania, and Slovakia, were published in June 2024 and co-authored by UNFPA. Women and girls cited healthcare (including for Sexual and Reproductive Health - SRH), accommodation, and employment as their top three priority needs. Ensuring access to these essential services can provide lifesaving support while reducing GBV risks.
- According to the same Protection MSNA analysis, the main reported barriers limiting women and girls' access to services (including GBV and SRH services) are a lack of awareness about available services, stigma and feelings of shame, language barriers, area of residence (urban vs. rural, with limited access to services reported in rural areas) and cultural barriers.

⁵ <u>UNHCR Operational Data Portal (Ukraine), June 2024</u> (Accessed on June 30, 2024)

⁶OCHA, <u>Humanitarian Data Exchange</u>. (Accessed on June 30, 2024)

⁷ UNHCHR, Belarus Factsheet, February 2024.



- Regionally, the **importance of mental health and psychosocial support services** was highlighted with 19% of individuals reporting mental health related problems. These issues vary by age and gender, with females consistently reporting higher levels, especially among those aged 35 and older.
- The reports also highlighted Ukrainian refugee households with members with disabilities face heightened challenges in accessing services compared to other refugee households. The top priority needs for 86% of households with members with disability in Slovakia are health services, medicine, employment/livelihoods, food.⁸
- Furthermore, **economic empowerment** remains key in enabling women and girls, including survivors of GBV, in accessing lifesaving healthcare including SRH and related GBV response services.

UNFPA Response

Ukraine

- Around **86,840 women, girls, men and boys** were supported through tailored GBV prevention, mitigation and response. Services include:
 - **107** psychosocial support mobile teams;
 - 29 "Vilna" Women and Girls Safe Spaces (WGSS);
 - **9** women's career hubs (8 regional and 1 online hubs);
 - **14** Survivor Relief Centres, supporting GBV survivors, including survivors of Conflict Related Sexual Violence (CRSV) (2 mobile and 1 stationary opened this quarter).
- UNFPA reached **1,929 GBV survivors** through GBV Case Management (GBV CM) services, ensuring survivor-centered coordination and referral to GBV specialized services. This resulted in 7,169 direct services provision or referrals to external services such as medical care, safety planning, psychological counseling, legal assistance, economic empowerment, and access to other essential GBV response services based on their individual needs assessments.
- UNFPA supported **municipal GBV response services**, launching two day-care counseling centers with crisis rooms in <u>Sokal and Novoyavorivsk</u> (Lviv region), a GBV shelter in Snihurivka and day-care counseling center with crisis room in Kryve Ozero (Mykolaiv region), a day-care counseling center and primary consultative service in Khotyn (Chernivtsi region), a crisis room in Berezhany (Ternopil region), a day-care counseling center in Rokytne (Rivne region) and a primary consultative service in Chuhuiiv (Kharkiv region).
- Around **80 GBV survivors** received cash assistance via GBV CM services for the first-time in the reported period and 250 women who experienced GBV continued to benefit from recurrent installments as part of the ongoing cases.
- 29% of the **women reached with cash assistance** for SRH chose the payment via digital wallet modality, an innovative approach allowing secure, anonymous and contactless digital transfers.
- In collaboration with partners and authorities, UNFPA distributed around **9,560 dignity kits** with tailored items for women and girls in most affected regions (Chernihiv, Dnipro, Kharkiv, Kherson, Mykolaiiv and Sumy).

⁸ Slovakia: Multi-Sector Needs Assessment 2023 - Annex Report on Persons with Disabilities - June 2024



- Within the **GBV Prevention interventions**, UNFPA:
 - Provided free **psychological professional counseling to 609 teenagers** via virtual "No trivia" platform; free mental consulting to 1,170 men through the "Helpline for Men 2345" project (by phone and via online chat).
 - Provided career consultations to 1,976 vulnerable women, and helped 212 of these women in finding employment or starting their own business, and arranged professional skills training for 486 within the "VONA Hub" project across the regions of Ukraine.
 - Organized 7 training sessions on "Domestic and GBV: I know, I prevent, I affect" for 176 local activists in the communities of Korosten, Mukachevo, Pavlohrad, Rokytne, Sumy, Kyiv, Ivano-Frankivsk, Khoroshiv, Lutsk, Dobropillia, Irpin, Starokostiantyniv, Khmelnytskyi and Kalush.
 - Conducted Training of Trainers (ToT) for 27 specialists of UNFPA's "Vilna"WGSS, to prepare facilitators on the "Ice Breakers" board game, a methodology specifically developed by UNFPA to understand and learn all stages of changing social norms to prevent domestic and GBV and successfully implement the projects on this topic in the communities;
 - UNFPA continues its successful interagency project with WFP which started in 2023. The project includes supply of food boxes and dissemination of life-saving information on available GBV services (booklets inserted into WFP food boxes) to raise awareness and ensure access to information about existing GBV services such as shelters, crisis rooms and day care centers to support the survivors and improve their nutrition. 150,000 GBV booklets have been disseminated so far. A total of 2,253 boxes were distributed across 20 Oblasts, reaching 53 locations.
- End of May, a monitoring and scoping mission was undertaken with the Inter-Agency Protection from Sexual Exploitation and Abuse (PSEA) Coordinator to the Dnipropetrovsk region. Within the mission, UNFPA participated in a meeting of the Dnipropetrovsk Liaison PSEA Focal Points, as part of an effort to decentralize the PSEA Network and work more closely with field staff to roll-out key PSEA interventions. Also, visits to UNFPA-supported "Vilna" WGSS revealed a good level of baseline knowledge of implementing partners' staff working there on PSEA and discussions were held on how to cascade that knowledge further down to beneficiary level. Furthermore, discussions with the Police GBV Unit enabled a stronger foundation to start working with the police as a key entry point for receiving SEA incident disclosures.
- In parallel, UNFPA started the process of re-assessing Implementing Partner capacities for PSEA to identify any support they need. A webinar was held to kick-start the capacity assessment and strengthening process to improve the performance of humanitarian actors in PSEA interventions.
- In conjunction with the government and women-led civil society partners, UNFPA continues piloting a short-term programme to support female survivors of GBV, including CRSV. In May-June 2024, one more cycle wrapped up in Zakarpattia region to help another group of 15 women recover from violence instances they faced. The programme consists of three components: restoration of women's holistic state, psychotherapeutic assistance, and medical component with familiarization of local SRH and GBV services. Case-management and functional referrals are also in place, to ensure participants' needs are at the very heart of programmes' design. Further, some survivors proceeded to the Aurora online psychotherapy platform to continue individual therapy via Eye



Movement Desensitization and Reprocessing (EMDR) and trauma-informed Cognitive Behaviour Therapy (CBT) methods as highly effective for dealing with traumatic cases including resulting from GBV or CRSV. Being online, Aurora is another layer of UNFPA's efforts to help survivors regardless of their location, which was effectively integrated into the overall response system. Aurora welcomes all survivors, although most users (90% of the total) are women.

- In addition, close to 128,970 people received life-saving SRH services through the 28 Mobile Reproductive Health Units and 151 barrier-free gynecologic cabinets, which are also tailored to meet the needs of women with disabilities. This figure includes beneficiaries covered by Maternal and Child Health (MCH) and SRH services by providing drugs and disposable in bulk distributed to 94 maternity hospitals.
- Over **3,210 pregnant and lactating women (PLW)** received one-time cash assistance, in five frontline regions: Kharkiv, Zaporizhzhia, Donetsk, Mykolaiv, and Kherson.
- UNFPA strengthened the capacity of almost 690 health professionals on various SRH-related topics, including clinical management of rape, client centered medical care in case of GBV, coordination and referral system at regional level, effective communication with clients with a focus on the needs of vulnerable groups, friendly approach to providing SRH services to adolescents and youth, providing SRH care to women with disabilities and family planning, modern methods of contraception.
- UNFPA selected 24 PHC facilities in 10 regions and improved the skills and knowledge of 15 nurses and midwives, thanks to in-service training provided by gynecologists, in order to integrate SRH to primary healthcare and improve access to SRH services of the population in rural and close to contact line areas. Training sessions will continue in the coming months, reaching additional healthcare staff across the regions.
- UNFPA through maternity hospitals distributed **7,500 kits for pregnant and lactating women** that include essential materials tailored to the needs of pregnant and postpartum/lactating women and newborns.
- **2 mobile maternity units** were transferred to Kherson and Donetsk regions to support the provision of SRH services in areas where health facilities were seriously damaged, destroyed or do not count with electricity supply.
- UNFPA has launched the "Youth Embracing Strength" (Y.E.S.) project. The project aims to enhance
 the resilience, coping capacity, and mental health of young people in the Dnipropetrovsk, Donetsk,
 and Luhansk regions, focusing on supporting 150 youth workers and specialist working with young
 people, addressing short-term humanitarian needs, and establishing peer support and referral
 systems for specialized services. By involving local youth and youth workers in data collection,
 capacity-building, and community-led activities, the Y.E.S. project seeks to promote dignity and
 well-being amidst the ongoing war. The project is set to reach at least 1,500 young people in these
 war-affected regions.
- The network of **11 TatoHubs** continues to operate as gender-transformative community-based family resilience centers focusing on responsible fatherhood, GBV prevention, psychological support and social cohesion. In response to the crisis, these centers provided support to 7,329 beneficiaries including 2,773 women, 1,990 men and 2,556 children, helping them to reduce emotional distress and develop skills in self-regulation and self-care.



Moldova

- UNFPA currently runs **31 Safe Spaces** (20 static and 11 mobile). During April-June 2024, UNFPA Safe Spaces reached 7,845 women and 197 people with disabilities. 1,901 women were provided with individual GBV response services, including Psychological First Aid and psychological counseling. As part of UNFPA's accountability to affected populations (AAP), feedback and complaint mechanisms have been established in all Safe Spaces to assess beneficiary satisfaction.
- UNFPA has secured agreements with local authorities to sustain **Mobile Safe Spaces operations** beyond 2025 through the national network of youth centers. **Five minibuses** have been transferred to selected youth centers to expand services to disadvantaged or refugee youth in remote areas.
- UNFPA as part of the commitment to **support grassroot Women-led Organizations (WLOs)** organized a one-week "Gender Equality Summer Camp" with the aim to strengthen 30 WLOs' capacity to carry out local initiatives to prevent gender-based violence by promoting gender equality, combat stereotypes and increase positive masculinity across refugee and host communities.
- UNFPA together with the Ministry of Labour and Social Protection developed the national GBV Case Management Standard Operating Procedures (CM SOPs) with the aim of providing quality care to survivors from refugee and host communities. This exercise is part of the national social assistance, RESTART reform. UNFPA also developed a monitoring mechanism to track the performance of community social workers responding to GBV cases in collaboration with the Ministry of Labour and Social Protection.
- UNFPA has finalized an in-depth analysis on "Safety and Accountability: Improving Program for Perpetrators of Domestic Violence in the Republic of Moldova". This also included roadmaps for improving programs for the overall system dealing with domestic violence perpetrators and also for perpetrators' programs in the penitentiary and probation systems and civil-society-led specialized systems. Eight specialized perpetrators training workshops have been initiated for probation and penitentiary officers with a focus on the safety of the survivor, control mechanisms and motivational interviewing following an international curriculum.
- UNFPA has finalized the analysis on the compatibility of the **normative framework on preventing and combating Violence Against Women (VAW)** with the provisions of the Istanbul Convention, including preliminary amendments to the legislation in the context of the National Program on preventing and combating violence against women and domestic violence implementation (HG 332/31.05.2023).
- Through the Bodyright campaign, nearly **600 young people**, including refugees, participated in engaging outreach events and activities like games and debates to prevent online violence, raising awareness about online risks and effective response strategies.
- UNFPA initiated and facilitated the collaboration and communication between the Alliance of Organizations of People with Disabilities (AOPD) with the Ministry of Labor and Social Protection, including the specialists within the regional and local social assistance structures (STAS and ATAS) regarding GBV among people with disabilities and social services. This effort improved the knowledge and connection of service providers from different fields, facilitating collaboration in identifying cases of GBV.
- UNFPA has completed the equipping of strategic national and regional hospitals, including national coordinating institutions providing medical care to survivors of sexual violence. Additionally, 6 perinatal centers across the country, including Comrat Regional Hospital in the Autonomous



Territorial Unit of Gagauzia, have been equipped with modern medical equipment for maternity care.

- UNFPA invests in emergency healthcare by improving emergency obstetric care and procuring ambulances. The procurement of three Type C ambulances is underway to strengthen the national referral system for emergency neonatal care. These ambulances are mobile intensive care units and can care for babies and mothers who may be in a life threatening and critical condition. Besides, the UNFPA supported provision of equipment and supplies for blood banks offering comprehensive emergency obstetric care. This infrastructure support was accompanied by training of healthcare staff in perinatal centers in clinical management of obstetric emergencies.
- 95% of refugees use local healthcare, particularly primary healthcare, as a strategic segment providing antenatal care, monitoring of pregnant women, and postnatal care for new mothers, as well as youth-friendly health services and medical assistance in case of medical-surgical emergencies within the family doctor's competence. In light of this, UNFPA continues to strengthen the primary healthcare system nationwide. During the reporting period, UNFPA equipped **200 gynecological offices** with electrically operated chairs (adapted for women with disabilities) to enhance SRH care delivery at the primary healthcare level.
- In addition to delivery of the equipment, **84 healthcare providers and 38 engineering and bioengineering staff** were trained on the use and maintenance of this equipment across 16 medical healthcare facilities. 27 obstetricians-gynecologists were trained from perinatal centers and medical education institutions on Human-Rights Based Intranatal Care for a positive pregnancy experience.
- A series of nine training sessions covered **45 healthcare professionals** from the National Center for Pre-Hospital Medical Care from across the country on emergency medical assistance in cases of sexual violence.
- During the reporting period, UNFPA supported the **capacity building of 172 family doctors** through training primary healthcare professionals on logistics management for forecasting and supplying contraceptives to the list of vulnerable groups, which includes the refugees. **Since the beginning of the year, 53% of family doctors nationwide have been covered by these trainings**.
- Significant progress was made in **enhancing the national system for cervical cancer screening**, including the procurement of a server to manage colposcopy-related data for the recently established network of colposcopy offices across Moldova. Additionally, on June 4-5, the National Conference titled "United for Women's Health! News in Cervical Screening and Colposcopy: Practices and Challenges in a Humanitarian Context" was organized, featuring international experts on the topic.
- Under the collaboration with the Health for Youth Association, and utilizing the Mobile Gynecological Clinic donated in February 2024 to the Public Medical and Sanitary Institution Cahul Health Center,
 938 young people received youth-friendly health services and counseling provided by the staff of the Youth Health Mobile Clinic. Additionally, 1,297 young people were reached with youth-friendly health information and education activities during the reporting period.

Belarus

• During the reporting period, **540 individuals** were reached with GBV programming, including psychosocial support (PSS) services, recreational and social activities in Brest (36%), Gomel (40%) and Vitesbsk (24%) oblasts.



- At least **205 women**, including over **81 older people and 14 persons with disabilities**, were referred to adequate services and support, particularly for medical care, employment, temporary shelter, food and hygienic goods.
- The two Crisis Centres operated by the Red Cross in Brest City and Vitebsk City and supported by UNFPA provided accommodation, specialists' support and counseling for 2 Ukrainian families in Brest and 8 Ukrainian women in Vitebsk.
- In April-June 2024, around 60 refugees of older age from Ukraine participated in different kinds of recreational and social activities organized with UNFPA support at Orange Safe Spaces, including "Digital literacy"; "Healthy ageing", "Yoga" and "Art therapy" classes). During this period people of older age were also able to participate in the "Bakery workshop", a new activity offered to Ukrainian refugees at the Orange Safe Space in Brest.
- Under the new "Health Support for Elderly Ukrainian Women" initiative, three sessions with a general practitioner, a gerontologist, and a gynecologist were organized in Brest city in April and May. During the sessions, doctors provided information about age-related conditions, symptoms, risk factors, and preventative measures. **41 women of older age** received medical advice and **29 women with multiple chronic illnesses** received referral.

EU Neighboring Countries

Romania

- UNFPA continues to work with its local Romanian partner, the Eastern European Institute for Reproductive Health (EEIRH) and its Government counterpart, the National Agency for Gender Equality (ANES), to **build the capacity of service providers in the Government-led GBV Integrated Services**.
- Under the co-leadership of ANES and UNFPA, the GBV CM Force continues to invest in the alignment of protocols and information management systems with International standards, and has successfully developed the GBV Case Management SoPs for Romania.
- A key milestone was achieved with the rollout of the <u>Safe YOU app in Romania</u>, an innovative and evidence-based solution to reduce barriers and risks related to GBV and to strengthen referral systems. This is possible due to the partnership between UNFPA EECARO, Impact Innovations Institute's Initiatives Foundation (<u>IMINI</u>) and the <u>Sensiblu Foundation</u>, a Romanian WLO, with the financial support of BPRM, to ensure that the technology is contextualized to suit the needs of the Ukrainian refugees and local communities.
- In Romania, UNFPA and EEIRH facilitated the development of the <u>Virtual Contraceptive</u> <u>Consultation</u> (ViC) platform, an online learning package to enhance the knowledge and skills of family planning (FP) service providers which includes a module to ensure supply chain management for vulnerable populations including refugees. ViC provides content in the Romanian language, enabling providers to deliver more effective, personalized, and up-to-date contraceptive counseling and services, ultimately improving patient outcomes and satisfaction. Additionally, content from the Romanian edition of the WHO Global Handbook for Family Planning Providers has been uploaded and is available <u>here</u> for reference. The ViC platform is currently undergoing the accreditation process and will be accompanied by a WhatsApp group to inform and generate demand among family planning physicians.



• As part of UNFPA's efforts to equip non-governmental GBV service providers to **adopt disability inclusive approaches**, the Disability Inclusion assessment tool and UNFPA Tip Sheet on Disability Inclusion in GBV programming were translated into Romanian and capacity building initiatives will be conducted in July. The health facilities readiness assessment to ensure the quality of post-GBV healthcare for Ukrainian refugees and host community members will also start after the training.

Poland

- UNFPA is implementing GBV activities with IRC and local CSOs, namely Feminoteka and Martynka, **ensuring localization** of the initiatives designed towards Ukrainian refugees and local communities and to enhance capacity and increase participation of WLOs in the response. With this in mind, IRC held a retreat for 24 Feminoteka staff to discuss Staff Care and Support (GBV Minimum Standards n°3), including burnout prevention, welling, cohesion and solidarity within team members.
- During the reporting period, **56 women and girls** received GBV case management services offered by partners, or other types of GBV specialized services, including Psychosocial support (PSS), legal support, social assistance, and referrals to other specialized and non-specialised services.
- Recreational activities, such as yoga and self-defense are also available. **11** women and girls participated in a WenDo workshop, a self-defense art that equips women with practical and easy to apply tools for prevention and protection from different forms of sexual harassment and enhance their self-defense skills.
- **3,920 people** through Poland were reached with GBV and life saving information through the social media engagements.

Slovakia

- UNFPA has been promoting localisation by working with local CSOs and working towards strengthening their capacity for GBV programming. This has been done by conducting virtual and in-person training in May and June. During the reporting period, UNFPA partnered with UNHCR to build the capacity of GBV service providers working on the dedicated GBV Hotline for Ukrainian refugees and peer educators from the League for Mental Health (LFMH) on GBV and risk mitigation. A follow-up webinar dedicated to safe referrals was organized and others are planned for the coming months.
- At least **190 people (out of which 77% are women and girls)** were reached with individual psychosocial support (PSS) services, including psychological first aid and counseling services offered through the GBV hotline service offered in Ukrainian and Slovak language.



Results Snapshots region wide



135,180 People reached with SRH services 99% Female



101,980 People reached with **GBV prevention**, mitigation and response activities 94% Female



NFI



People reached with Humanitarian Cash & Voucher Assistance for GBV and SRH 99% Female

11,140 Non-food items (such as dignity kits) distributed to individuals



+

190

73

5

Health facilities supported

Youth Spaces supported

1,020 People trained on GBV and SRH-related topics

Safe Spaces for women and girls supported

Results Snapshots by country

		Ukraine	Moldova	Belarus	EU Countries
•	People reached with SRH services	128,970	6,120	90	-
* ?	People reached with GBV prevention, mitigation and response activities	86,840	14,230	540	310
	People reached with Humanitarian Cash & Voucher Assistance for GBV and SRH	3,290	30	-	-
	People trained on GBV and SRH-related topics	690	330	-	-
	Health facilities supported	179	9	2	-
	Safe Spaces for women and girls supported	38	31	3	1
	Youth Spaces supported by UNFPA	-	5	-	-
NFI	Non-food items (such as dignity kits) distributed to individuals	9,560	1,580	-	-



Coordination Mechanisms

Gender-Based Violence:

Ukraine

- UNFPA continued leading GBV Area of Responsibility (AoR) and providing GBViE prevention and response support. In the 2nd quarter 2024, the GBV AoR partners reached cumulatively 162,908 GBV survivors and at risk individuals with GBV services (case management services, PSS, legal aid, crisis accommodation, recreational activities in WGSSs, DKs and CVA for protection). In addition, strengthened the capacity of 1,707 GBV and 1,234 non-GBV humanitarian workers on supporting at-risk individuals. During the reporting period, 58% of the overall performance by the GBV AoR was managed through UNFPA operations including delivery of 63% of services, 23% of awareness raising activities and 19% of training for GBV and non-GBV actors across the country.
- GBViE prevention and response was managed through 31 coordination and thematic meetings held at national, sub-national and regional level and attended by 239 organizations including UN, INGOs, NGOs, authorities and others. <u>GBV AoR 2023 Achievements E-bulletin</u> was finalized and became public.
- In light of the ongoing evacuations in frontline locations of the south-east part of Ukraine, GBV AoR established up to date emergency preparedness plans for Kharkiv, Donetsk and Sumy regions and issued guiding <u>"Recommendations for GBV and Non-GBV Actors During Evacuations</u>" and <u>"Lessons learned - Evacuation and support services in Kharkiv</u>" to further improve emergency preparedness and quality of lifesaving assistance delivered in close proximity with the frontline areas of Ukraine.
- <u>"Understanding the Role and Difference of Dignity Kits and Hygiene Kits in Humanitarian</u> <u>Assistance</u>", a joint guidelines were issued by the GBV AoR and WASH Cluster to improve delivery of humanitarian assistance to vulnerable women and girls including those residing in the frontline areas.
- The **2025 Humanitarian Needs and Response Plan (HNRP) field consultations** were initiated to collect partners' feedback on the GBV risks, needs severity, and GBViE response gaps; more will follow in the upcoming months. The first GBV AoR field consultations were held in the Chernihiv region with the participation of NGOs, INGOs, UN agencies, regional authorities and state service representatives. Additional consultations are planned in the upcoming months in other regions to assess prioritized needs and the scale of GBViE response for 2025.
- GBV AoR in cooperation with the CCCM, Protection, Health and Shelter Clusters conducted **interagency GBV Safety Audits** in Kharkiv collective sites and FGDs with IDP women to identify and address protection risks faced by residents of CCs.



Moldova

• UNFPA co-leads the GBV Sub-Working Group (SWG) with UNHCR, bringing over 63 national and international organizations, women-led organizations, and government entities to coordinate the GBV prevention, mitigation, and response interventions targeting the Ukrainian refugees and the host communities. During the reporting period, the GBV SWG conducted a validation workshop for the 2023 GBV Safety Audit conducted in December to present the results and collect technical inputs to the analysis of data from GBV SWG members.

EU Neighboring Countries

- In Romania, UNFPA is **co-leading the GBV Case Management Task Force** with ANES, having just recently approved the SOPs for GBV CM to be adopted by organizations and stakeholders conducting Case Management in the country.
- UNFPA continues to co-lead the **Regional GBV Working Group** dedicated to the Ukraine Response, along with UNHCR and Voice Amplified, with national and international organizations representing the refugee hosting countries engaged in the 2024 Refugee Response Plan.

Sexual and Reproductive Health:

Ukraine

- UNFPA continues to coordinate the SRH Technical Working Group (TWG) at the national level and jointly with other partners held regional meetings in the frontline regions of Zaporizhia, Dnipro, and Kharkiv oblasts. The TWG brings together a diverse group of stakeholders, including international humanitarian organizations, national actors representing vulnerable communities (such as HIV-positive women, women using drugs, GBV survivors, wives of soldiers, and IDPs), police, social services, the Department of Health, and medical service providers. Key discussions focused on the integration of SRH and GBV services, emphasizing a survivor-centered, one-stop-shop approach for GBV survivors, with pilot services in Donetsk oblast and social accompaniment at health facilities for two-way referral.
- As part of interagency efforts to address Conflict-Related Sexual Violence, two Training of Trainers sessions were conducted on 9-11 May and 13-15 May. A total of 27 participants attended these sessions and were certified as trainers. UNFPA will continue providing technical support to 7 newly certified trainers to fully implement the training. Two 5-day comprehensive Clinical Management of Rape (CMR) training workshops were also conducted in collaboration with the World Health Organization (WHO) for Health Cluster Partners, aiming to enhance the clinical management capabilities of health professionals dealing with rape and sexual violence cases. More than 40 participants, comprising service



providers, NGO personnel, and academic professionals, participated in intensive training sessions.

- A session was organized with SRH TWG Partners, followed by another with the Health Cluster, including a representative from the Ministry of Health to present the SRH TWG Desktop Review Findings. Potential gaps in service provision and negative trends affecting SRH indicators across the country were identified. These critical issues were brought to the attention of health partners, encouraging them to address these gaps and trends.
- An extended coordination meeting of the SRH TWG was conducted, led by the Deputy Minister of Health and the Head of Medical Services of the Ministry of Health. The meeting focused on increasing the Ministry's attention to challenges in SRH service provision, resulting in the creation of an SRH Committee. Representatives from various vulnerable groups, national and international humanitarian partners, and national health-related institutions (National Health Service of Ukraine NHSU and Centre for Public Health) were invited to join this committee. This initiative aims to strengthen SRH coordination efforts and address service provision challenges more effectively.

Moldova

• UNFPA continues to prioritize SRH and GBV issues in the discussions and actions of the bi-monthly meetings of the **Health Working Group**, attended by representatives of the Ministry of Health, the National Health Insurance Company, most UN agencies, and other relevant humanitarian actors.

EU neighboring countries

• In Romania, UNFPA has strengthened its long-standing partnership with EEIRH to provide **technical and coordination support to the Romanian Government's** humanitarian response related to SRH. In addition, the organization continues to actively participate in the **SRH and Health Technical Working Groups.**

K Other working groups led by UNFPA

EU neighboring countries

- UNFPA played a strong coordination role in partnership with UNHCR in order to analyze the data collected in December 2023 during the MSNA and write the findings, recommendations and conclusions related to both reports on <u>Health and Wellbeing</u> and <u>Protection and</u> <u>Accountability</u> covering Bulgaria, Czech Republic, Hungary, Moldova, Poland, Romania, and Slovakia.
- UNFPA's partner EEIRH, in Romania, became a member of the newly set-up Inter-Agency Working Group (WG) to improve the health system response to gender-based and sexual violence (led by ANES). The general objectives of the WG are to: ensure access to information on the rights of GBV survivors, health professionals and the general public, so as



to increase the level of trust in health system capabilities to respond to GBV; increase capacities of health professionals in identifying and managing GBV cases; develop or improve policies, guidelines, protocols and procedures for intervention on GBV cases at primary, secondary and tertiary health care levels, and; strengthen inter-institutional cooperation for the monitoring and implementation of policies, guidelines and operational standards on GBV response. The first meeting of the WG took place on 22 May 2024. The membership includes representatives of the Ministry of Health, National Health Insurance House, National College of Physicians, National Institute for Public Health, Ministry of Education), NGOs and academia.

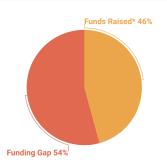
Belarus

• As a part of the **Inter-Agency Refugee Taskforce**, UNFPA took the lead to address specific complex cases related to the provision of support to older people from Ukraine in collaboration with other international and national counterparts. UNFPA will facilitate training on gender/age/disability responsive services for the frontline workers to build capacity and ensure effective support and protection services for women, older people and people with disabilities, equip first responders with skills to enhance their emotional resources and overall well-being.

Funding Status

EECA region	Ukraine	Moldova	Belarus	Poland	Romania	Slovakia	Regional Coordination	Total
Funding required	\$75,000,000	\$23,649,264	\$660,000	\$2,000,000	\$1,000,000	\$1,000,000	\$1,752,000	\$105,061,264
Funding received	\$35,513,549	\$11,535,837	\$370,641	\$230,992	\$187,492	\$112,500	\$1,392,457	\$49,343,468
% Funded	47%	49%	56%	12%	19%	11%	79%	46%

Ukraine Funding Requirement



UNFPA needs \$105 million to reach its target populations, with \$55 million currently available, leaving a \$50 million gap.