Regional Assessment Report / Ukraine Crisis Response

Waiting for the Sky to Close: The Unprecedented Crisis Facing Women and Girls Fleeing Ukraine

AMPLIFYING WOMEN AND GIRLS IN CRISES
VOICE

HIAS
Welcome the stranger.
Protect the refugee.

Acknowledgements

First, we must thank the women and girl leaders who contributed their insights and experiences through this assessment. It is for their freedom that we do this work. We exist for them. We must do better for them. We dedicate this report series to their commitment and perseverance in the face of this crisis, and we hope that we have represented their perspectives and priorities faithfully, and with the deepest respect, love, and solidarity for our sister activists.

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Acronyms

- **CMR –** Clinical management of rape
- **CSO –** Civil society organization
- **CVA –** Cash and voucher assistance
- **FDP –** Forcibly displaced person
- **FGD –** Focus group discussion
- **GBV –** Gender-based violence
- **GBViE –** Gender-based violence in emergencies
- **IASC –** Inter-Agency Standing Committee
- **IDP –** Internally displaced person
- **INGO –** International non-governmental organization
- **IPV –** Intimate partner violence
- **KII –** Key informant interview
- **LGBTQIA+ –** Lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual/ally, plus
- **MHPSS –** Mental health and psychosocial support
- **NFI –** Non-food item
- **NGO –** Non-governmental organization
- **OCHA –** United Nations Office for the Coordination of Humanitarian Affairs
- **PFA –** Psychological first aid
- **PSEA –** Protection from of sexual exploitation and abuse
- **PSS –** Psychosocial support
- **RAC –** Refugee Accommodation Center
- **SEA –** Sexual exploitation and abuse
- **SRH –** Sexual and reproductive health
- **UNHCR –** United Nations High Commission on Refugees
- **VAWG –** Violence against women and girls
- **WASH –** Water, sanitation and hygiene
- **WLO –** Women-led organization
- **WRO –** Women's rights organization

A Letter from VOICE

In our rapid assessment of Ukraine and five border countries, we heard women who fled the war say they are watching their daughters grow up too quickly. We witnessed the risks they face of being trafficked for sex or forced labor, or of simply disappearing. We found weary volunteers, active since the first day of the war, welcoming displaced families at their own expense entirely without funding for their work. We even heard from refugee families contemplating returning to Ukraine— an active war zone— because neighboring countries now seem 'too full' to accept them.

We are driven by the principles of delivering humanitarian aid: shelter, food and water, healthcare, education, and protection from the ubiquitous, preventable violence that women and girls face. Many women's rights activists asked us for help getting weapons and ammunition into Ukraine, lest the war continue to play out on women's bodies. As humanitarians, this runs counter to our neutral role. But we acknowledge the women fighters, the frontline responders in harm's way, and the many women crossing in and out of Ukraine to bring medical supplies, food, fuel, and other critical commodities.

We have never seen more money flow into a crisis context than this one, yet despite the fact that international 'duty-bearers' have made many global commitments to uphold the rights of women and girls in emergencies, they are again failing. Even though women make up the majority of frontline responders, and despite the fact they are the most impacted, their solutions and their voices are not being centered. Their organizations should be leading, and we should be listening.

The humanitarian industry has promised, in fancy ceremonies in New York and Geneva, to "localize" its work, by getting more funds to local actors, and giving up some of the control foreigners still exert over how the money is spent. Now is the time to make good on that promise. Women-led organizations need to be trusted, and given multi-year, flexible funding through partnerships grounded in their local expertise and knowledge. We are re-imagining an aid system that is designed and led by the same women and girls it serves. Join us in helping them build it.

Mendy Marsh, VOICE Executive Director

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I. Executive Summary

"We are waiting for the sky to close so then we will go back." — Ukrainian woman in a focus group discussion in Poland

Since Russia's invasion of Ukraine on February 24, 2022, a staggering 12.8 million people have been displaced. Over 5 million have fled the country, and almost 8 million are internally displaced inside the borders of Ukraine.[1] This is the region's largest displacement crisis since World War II.

In every armed conflict, men's violence against women and girls (VAWG) increases rapidly and stays elevated long after the fighting stops. As the war in Ukraine rages on, the region faces an unprecedented crisis of displaced women and children. Like all wars, this one is being fought on the bodies of these women and girls. Conflict-related sexual violence has been documented in the form of Russian soldiers raping Ukrainian women, and women's organizations inside Ukraine report that domestic violence is on the rise as well. Alongside an increasing push for the documentation of war crimes is the need to make sure all survivors of war crimes, domestic violence, and other forms of violence against women and girls get the medical and psychosocial support they need. Gender-sensitive violence prevention measures are urgently needed, but they are trailing behind the response. The strategic erasure of women's rights over time in Eastern Europe created a crisis for women and girls long before the war started, and is now exacerbating the risks they face during the war.

An indomitable network of women's rights organizations (WROs) and civil society organizations (CSOs) exists throughout the region. Struggling to maintain advances in gender equality against increasingly overt attacks on women's rights, these organizations have long been responding to the needs of women and girls. The war has seen these organizations spring into action to support internally and forcibly displaced persons (FDPs),[2] once again woefully underfunded.

Because of their deep expertise and experience, these organizations and groups are best-positioned to build the solutions girls and women urgently need. This has put immense pressure on many WROs who are concerned about their capacity to continue supporting their primary caseload —women and vulnerable populations from their own country— in addition to those displaced by the war.

Local non-government organizations (NGOs) and WROs need sustained, flexible, and long-term funding to increase their capacity and continue working in the region. Instead, a top-down, unequal relationship between capable local actors and international humanitarian agencies is developing, despite standards such as the World Humanitarian Summit's Grand Bargain and its commitments to 'localization,' the Core Commitments to Women and Girls, and the IASC GBV Guidelines. This inequitable approach alienates WROs from humanitarian coordination structures and ultimately fails women and girls, who are not consulted in the design of the aid that is being developed.

As part of a partnership with HIAS, VOICE conducted a four-week rapid assessment of Ukraine and five bordering countries (Hungary, Moldova, Poland, Romania, and Slovakia) to assess the

[1] "Ukraine: Millions of displaced traumatized and urgently need help, say experts." OHCHR, 5 May 2022.

[2] The term forcibly displaced persons (FDPs, or forced migrants) used here is an imperfect one that includes FDPs and asylum seekers, as well as some economic migrants. Some foreigners living in countries neighboring Ukraine are technically economic migrants rather than refugees or asylum seekers; however this is a gray area depending on whether their movement was forced by a loss of livelihood related to the conflict, or other causes.

needs of women and girls affected by the war in Ukraine and the needs of WROs and groups responding to the emergency.

This assessment was conducted from March 25 through April 15, 2022. During the assessment the VOICE Team held 171 key informant interviews including 33 WROs and CSOs inside Ukraine, 22 focus group discussions with over 167 women FDPs, and over 55 site observations at formal, informal and private shelters, train and bus stations, 72-hour transit camps, border crossings and organizational service points.

A critical piece of the assessment validation process, was the review and validation of the findings and recommendations by regional and country-based WROs, CSOs, UN personnel and coordination working group members.

The assessment revealed high risks of trafficking and sexual exploitation and abuse (SEA), as well as conflict-related sexual violence, domestic violence, and other forms of gender-based violence (GBV). It revealed further protection concerns related to shelter and unsustainable housing (often heightening the risk of exploitive labor); a lack of access to livelihoods and cash-based assistance; and inconsistent access to reliable information. Overall, displaced persons throughout the region lack access to GBV services, reproductive healthcare, and psychosocial support services, and Roma and LGBTQIA+ communities face additional discrimination and protection concerns.

In order for any humanitarian interventions to be effective, they must center the needs of women and girls and the security risks they face. Detailed recommendations for region-wide action are provided at the end of this report. Top priorities include the following:

- **Ensure a gender-sensitive humanitarian response by supporting women's movements across the region.** A commitment to sustaining the gains for women and girls made in previous decades must underpin all programming for internally displaced persons in Ukraine and FDPs in all border countries, with robust challenges to the inevitable patriarchal backlash.

- **Fulfill commitments to localization by shifting power to women-led organizations.** The localization agenda is focused on increasing local actors' access to international humanitarian funding, partnerships, coordination spaces, and capacity building.[3] Localization is one key to upholding the rights of women and girls in emergencies, as local women's responses are often more relevant and effective than external ones.

- **Address gaps in the protection of women and children.** Given the unparalleled levels of funding that have gone into this response, along with the high level of humanitarian access to the border countries, it is paramount that essential life-saving protection interventions—detailed further in the report—are prioritized and strengthened.

- **Improve access to essential services.** As lack of access to essential and life-saving services is directly correlated with safety and security risks, all actors must take action to meet reception and integration needs for FDPs—including needs for healthcare, psychosocial support, safe accommodation, cash and voucher assistance, livelihoods support, and education.

[3] Robillard, Sabina, et al. *Localization: A «Landscape» Report*. FeinsteinInternational Center Publication, Tufts University, December, 2021. https://fic.tufts.edu/publication-item/localization-a-landscape-report/.

II. Background

Map of Ukraine

Since the invasion of Ukraine by Russia on February 24, 2022, 12.8 million people have been displaced from Ukraine. Over 5 million people have become refugees, and almost 8 million are internally displaced inside the borders of Ukraine.[4] As the conflict approaches three months of ongoing war, it is increasingly clear that this acute crisis will become a protracted one. While emergency processes and procedures have been established in bordering countries offering basic necessities to people fleeing the war, multiple agency assessments have found large gaps in services, and the risk for trafficking and other forms of gender-based violence (GBV) has never been higher.[5] The largely ad hoc and gender-blind response currently unfolding in and around Ukraine cannot meet the basic needs and protection concerns of internally displaced persons (IDPs) in Ukraine, forcibly displaced persons (FDPs) in neighboring countries, and host communities throughout the region.

"We have been screaming since day one of the war that we need to protect women and girls, and no one is listening."
— Local NGO representative in Slovakia

In every armed conflict, men's violence against women and girls (VAWG) increases rapidly and stays elevated long after the fighting stops. Due to the conscription of Ukrainian men and the re-

[4] "Ukraine: Millions of displaced traumatized and urgently need help, say experts." OHCHR, 5 May 2022. https://www.ohchr.org/en/press-releases/2022/05/ukraine-millions-displaced-traumatised-and-urgently-need-help-say-experts.

[5] *Rapid Assessment: Impact of the war in Ukraine on women's civil society organizations*, UN Women, March 22, 2022.

sulting ban on men aged 18 to 60 leaving Ukraine, women and children have fled, alone. And while neighboring countries have welcomed them, many risks remain for women and children as they flee their country. While the first wave of FDPs and IDPs were mostly those who had the financial means to do so, we are now seeing a more desperate situation—and a global community unprepared to match the growing needs as this war rages on. Urgently-needed, gender-sensitive violence prevention measures are trailing behind the response. To make matters worse, the strategic erasure of women's rights over time in Eastern Europe created a crisis for women and girls long before the war started, and is now exacerbating the risks they face during the current emergency.

Women's rights organizations (WROs) throughout the region have been responding to the needs of forcibly-displaced women and girls since the war began, and are best-positioned to build the solutions they need. However, a familiar structure is developing: a top-down, unequal relationship between capable local actors and international humanitarian agencies. This arrangement always fails women and girls, even by these agencies' own standards. International non-governmental organizations (INGOs) and the United Nations (UN) are failing to meet their own commitments to 'localization' of response. Despite growing calls for and commitments to locally-driven solutions,[6] the humanitarian sector still rarely involves women's organizations in program delivery or conflict resolution during emergencies.[7]

Women and girls are alienated from humanitarian coordination structures, and WROs are expected to do more than ever, with little or no extra funding. The often reactive funding of the international community is mostly disconnected from the pre-existing funding realities in the region, ignoring the lived experiences of women and girls and the organizations they lead and presenting major risks for women's movements.

Humanitarian actors, donors, governments, and multilateral agencies are all looking toward and ramping up their response efforts in Ukraine and across Eastern Europe, and there is an acknowledgment of the growing need for large-scale response efforts in this complex humanitarian response. Notably, funding for the humanitarian response efforts related to the war in Ukraine is unmatched by any previous funding appeals, and the outpouring of support has been tremendous.

[6] The world humanitarian summit in 2016 committed donors, funders, NGOs, and bilateral and multilateral organizations to promoting and including local actors in their operations in a humanitarian crisis. The outcome documents of the World Humanitarian Summit are available here: www.agendaforhumanity.org/resources.

[7] Cornish, Lisa. "Calls for women's leadership in humanitarian responses". DEVEX, 18 June 2018, https://www.devex.com/news/calls-for-women-s-leadership-in-humanitarian-responses-92937.

The United States announced on March 24, 2022, that it is donating 1 billion USD to help countries in Europe absorb refugees from Ukraine.[8] This is on top of the 1.1 billion USD initially pledged by donor states to support humanitarian efforts in Ukraine[9] (100% of which has been funded[10]) and the 550 million USD of inter-agency requirements for the Regional Refugee Response Plan. On April 25, the UN announced a revised flash appeal that calls for 2.25 billion USD to provide assistance and protection to nearly nine million people[11] (as of May 14, 58.5% has been funded) and 1.85 billion USD for the regional refugee res-ponse[12] (only 16.2% of that 1.85 billion USD has been funded through this plan). The only other UN response plan/appeal in 2022 that has reached 50% of its funding target is Madagascar, with 97.1% of coverage (62.7 million USD), followed by Libya with 45% (33.9 million USD).[13]

Ukraine is also the highest recipient of the UN's rapid response funding mechanism, with more than 60 million USD going toward its appeal (the next highest recipient is the Republic of Sudan).[14]

However, these funds are not getting into the hands of WROs and they are not being used to prioritize GBV programming, which sadly reinforces one of the largest ongoing failures of the humanitarian system: the failure to fund and prioritize response efforts to meet the unique protection needs of women and girls as lifesaving. Access to food, shelter, and health services is certainly lifesaving; but so is preventing and putting an end to rape, trafficking, domestic violence, and yet these are funded far less.[15] WROs are telling the international community what they need in order to support and protect women and girls, but the funds are not coming. It is time that the international community adheres to its own commitments and realizes that without centering and protecting women and girls, humanitarian response can never achieve what it strives to do.

[8] Alexander, Jessica, and Josie Rozzelle. "Is Ukraine's Aid Bonanza Coming at the Expense of Other Crises?" *The New Humanitarian*, 22 Apr. 2022, www.thenewhumanitarian.org/analysis/2022/03/24/ukraine-aid-funding-media-other-crises.

[9] "Flash Appeal Ukraine." The United Nations Office for the Coordination of Humanitarian Affairs (OCHA) , 1 Mar. 2022.

[10] "Ukraine Flash Appeal 2022." *Ukraine Flash Appeal 2022 | Financial Tracking Service*, 6 May 2022, https://fts.unocha.org/appeals/1102/summary.

[11] "Humanitarians Seek $2.25 Billion for Ukraine Response | | UN News." *United Nations*, United Nations, 25 Apr. 2022, https://news.un.org/en/story/2022/04/1116882.

[12] "Ukraine Situation Regional Refugee Response Plan. March-December 2022" Regional Refugee Response Plan for the Ukraine Situation. *UNHCR*. April 25, 2022. https://reliefweb.int/sites/reliefweb.int/files/resources/Ukraine%20situation-RRP%20plan%20and%20flash%20appeal-March-December-2022_1.pdf .

[13] "Appeals and response plans 2022". *Financial Tracking Service*, https://fts.unocha.org/appeals/overview/2022. Accessed 14 May 2022.

[14] "Allocations by country". *United Nations Central Emergency Response Fund*, https://cerf.un.org/what-we-do/allocation-by-country. Accessed 14 May 2022.

[15] VOICE and International Rescue Committee, 2019. *Where's the Money? How the Humanitarian System is Failing to Fund an End of Violence against Women and Girls*. https://www.rescue.org/sites/default/files/document/3854/whereisthemoneyfinalfinal.pdf.

III. A Partnership Between VOICE and HIAS in Support of Women's Rights Organizations

A. About VOICE

VOICE believes that the humanitarian sector must deliver on its promise to protect women and girls—and that women and girls themselves must lead that revolution. We are confronting one of the world's oldest and most widespread human rights abuses: violence against women and girls. We challenge traditional, ineffectual methods of addressing VAWG in humanitarian emergencies, with a proven but chronically underused resource: the leadership of women and girls themselves.

VOICE's approach, steeped in women's rights practice, offers something new and necessary in the fight to end VAWG. We are working towards a world where girls and women are respected leaders in designing and implementing solutions to eradicate violence—both in their communities and within the halls of power. Ultimately, VOICE's goal is greater direct resourcing of local women's organizations and their solutions to address violence. We help meet the needs of women- and girl-led organizations in a growing number of countries, including Afghanistan, Bangladesh, Colombia, Hungary, Iraq, Moldova, Myanmar, Pakistan, Poland, Romania, Slovakia, South Sudan, Syria, Ukraine, the United States, Venezuela, and Yemen.

The rapid assessment described in this report is part of VOICE's broader response to the war in Ukraine, which includes:

- Tailor-made and context-responsive accompaniment and capacity support for local women's rights and LGBTQIA+ organizations, including both registered and non-registered groups;

- Movement support to foster cross-regional coordination, collaboration, collective strategizing and political agenda setting, mutual learning, and troubleshooting;

- Philanthropic advocacy to move better-quality funding directly into the hands of local organizations and collectives, as well as to shift strategies of philanthropic giving to feminist and gender justice movements;

- Small rapid crisis response grants to WROs' initiatives responding to the war;

- Directly connecting frontline response to currently available philanthropic funding by providing donor accompaniment and collaborations with funders as a strategic advisor from the ground;

- Coordination among local organizers, INGOs, philanthropists, UN agencies, and corporations as relevant and needed; and

- Documenting and amplifying the response, successful strategies, and leadership of frontline responders and local organizers.

A key element of VOICE's work, including but not limited to the Ukraine crisis, is building a global network of local expert practitioners ready to lead and drive humanitarian response in their own communities. Our work with these actors will amplify their voices and leadership, promote their efforts to advocate with humanitarian actors, and bolster their efforts to get the visibility and respect they deserve. VOICE creates lasting relationships with the groups we work with; these relationships do not end once a situation is no longer identified as a crisis context. We were working in the region before the crisis, and we will continue to be in the region long-term to address the protection needs of FPDs from Ukraine, to accompany frontline women's rights and LGBTQIA+ organizations, and to create structural change for women and girls.

B. About HIAS

HIAS, the international Jewish humanitarian organization that provides vital services to refugees and asylum seekers, has been helping forcibly displaced persons find welcome, safety and opportunity for more than 130 years. Currently working in more than 17 countries, HIAS is responding to the war in Ukraine through its core programming areas, including Economic Inclusion, Mental Health and Psychosocial Support, Legal Protection, and Prevention and Response for GBV, with a focus on violence against women and girls and individuals identifying as LGBTQIA+.

HIAS believes that forcibly displaced women, girls and individuals identifying as LGBTQIA+ have the right to pursue their potential and fully access their human and legal rights, free from violence and oppression. Using a survivor-centered approach, HIAS prioritizes the voices and needs of survivors and those disproportionately impacted by GBV: women and girls. HIAS' funding in support of this assessment and subsequent partnership is just one way of acting on its commitment to localization, women, girls, and the leadership of women's rights and civil society organizations.[16]

[16] HIAS has a long history in Ukraine, having established an office in Kyiv in 2001 to help Ukrainian Jews and other religious minorities seeking to migrate to the United States, and later to assist people from across the Middle East, Africa, and Asia seeking asylum in Ukraine. In 2013, HIAS Ukraine helped establish an independent Ukrainian NGO "Right to Protection" (R2P) which is now in the vanguard in the human rights movement in Ukraine, where it is a leading voice in the protection of the rights of IDPs, refugees, and stateless persons.

C. About the partnership

VOICE and HIAS share a vision of supporting WROs and women's groups across the region to lead on the Ukraine humanitarian response.

The partnership aims to help WROs, local civil society organizations (CSOs), and informal groups to shape humanitarian response, recognizing the unique impact of humanitarian emergencies on women, girls, and other at-risk groups in all their diversity. It is critical that humanitarian actions —both within Ukraine and regionally— build upon the advances in gender equality and women's empowerment made by Ukrainian and regional women's rights activists, women-led groups, and CSOs.

In addition to supporting direct service delivery by local organizations, HIAS and VOICE together will continue to advocate for the need to support WROs with un-earmarked crisis funds.

D. What we did: Assessment framework overview

In March and April, 2022, the VOICE assessment team worked throughout Eastern Europe to understand and respond to the urgent needs of women, girls, and LGBTQIA+ communities from Ukraine, with a specific focus on the multiple forms of violence they face during war and crisis, accessibility of facilities and services, legal documentation, and overall sense of safety.

The team also sought to understand and respond —in real time— to the needs of WROs, CSOs, and other groups who have been on the frontlines of this emergency.

VOICE's approach to this assessment is steeped in international best practices and centered on WROs identified through our network. Our focus on WROs is grounded in the recognition that these organizations are and will always be the first to respond, and have the most creative and timely solutions to address the risks of women and girls.

The rapid assessment was designed and conducted by a team of VAWG and women's rights activists and practitioners from Eastern Europe and Ukraine; seasoned gender-based violence in emergencies (GBViE) technical specialists; a conflict-medicine/nurse practitioner with expertise in sexual and reproductive health; LGBTQIA+ practitioners and activists; a trauma-informed stabilization expert; and VOICE Leadership Team members, including the Executive Director and the Emergency Response Director. This dynamic team brought global, regional, and local expertise together with a range of language skills and deep connections to Ukraine and Eastern Europe—building from VOICE's work in the region and from the specific and unique expertise of the assessment team.

Between March 25 and April 15, VOICE conducted in-person missions to Hungary, Moldova, Poland, Romania, and Slovakia with teams of two to three people. In Ukraine, all assessment activities were done remotely to ensure the safety and security of participating staff and organizations.

During the assessment the VOICE Team held 171 key informant interviews including 33 WROs and CSOs inside Ukraine, 22 focus group discussions with over 167 women FDPs, and over 55 site observations at formal, informal and private shelters, train and bus stations, 72-hour transit camps, border crossings and organizational service points.

The aim of this research and the analysis of the qualitative data are grounded in VOICE's feminist values, with an explicit commitment to understanding the specific impacts and implications of the war on women, girls, and the organizations and associations they lead.[17]

The assessment findings have been reviewed and validated through the following ways: 1) presentations during GBV and Protection coordination meetings across border countries; 2) the draft versions of the reports have been shared with many of the women's rights organizations that VOICE interviewed during the assessment and their feedback and validation of the findings and recommendations have been critical to the finalization of these reports; and 3) triangulation across secondary data, primary data collected and available public resources and information in each country.

The assessment included the following elements:

- **Actor mapping:** VOICE identified and mapped key actors providing GBV and related services, including but not limited to WROs, advocacy groups, health service points, mental health and psychosocial support actors, psychological first aid actors, and emergency women's shelters. In addition, VOICE considered the protection risks and concerns surrounding shelter, cash, access to good and decent work, and information sharing and the digital space, ensuring a cross-cutting and multi-sector approach.

- **Key informant interviews (KIIs):** Both in-person and remote KIIs were conducted with members of WROs, frontline workers, local non-governmental organizations (NGOs), UN agency actors, and internally displaced and refugee populations to assess the needs of women and girls and their access to immediate and lifesaving GBV services. Remote KIIs were done across Ukraine through a standardized methodological approach consisting of brief calls to capture the current state of women and girls and the organizations that lead in key areas identified for potential intervention.

- **Site observations:** Using VOICE-developed and adapted tools, structured observations were carried out in informal settlements and cities where populations of displaced persons are congregated—including train stations, bus depots, registration sites, cash distributions points, border crossings, 72-hour transit shelter sites, and private accommodations—with the focus of assessing specific risks for women and girls of different forms of violence, as well as the accessibility of services.

- **Focus group discussions (FGDs):** When relevant and safe, FGDs were held with forcibly displaced people from Ukraine, volunteers, and Ukrainian diaspora groups to gather information on the needs of women, girls, and WROs, as well as the risks they face.

[17] This research was focused on women's voices and experiences and in reducing the power asymmetry between researchers and participants; analyzing data to uncover sites of resistance and opportunities for social change; creating a practical difference with the women engaged in the assessment; carrying out data collection that affects and challenges social policy; and undertaking research that improves our own reflexivity in becoming catalysts for social change. This research and the associated analysis sought to understand the impact of the war on women and girls in the context of wider global gender inequalities, with an understanding of GBV as a central mechanism in the maintenance of this inequality.

A total of 141 KIIs and 15 FGDs were conducted across the six countries. The VOICE team conducted the assessments in Ukrainian, Polish, and Russian. All information shared was treated as confidential to ensure principles of Do No Harm.

The assessment questions focused on the following areas of inquiry:

- Concerns for women and girls at border crossings and while on the move;
- Overall safety concerns in their current location;
- Any discrimination experienced by specific groups;
- GBV risks for women and girls (including sexual exploitation and abuse);
- Availability and accessibility of facilities and services;
- Access to cash assistance and distributions, and remaining levels of financial resources;
- Shelter sites and private accommodations and the risks and concerns associated with each;
- Legal documentation and access to legal services;
- Access to health services, including sexual and reproductive health care such as the clinical management of rape, abortion, and pre- and post-natal care;
- Access to good and decent work; and
- Language accessibility through existing service provision.

E. Limitations

Due to the rapid nature of data collection in a complex and fluid environment, this was a rapid needs assessment and not intended to be a comprehensive risk and needs assessment. There were limitations of time and safety and security concerns. The approach was grounded in and directed by adherence to ethical considerations, which at times prevented interviews and discussions from happening. In many instances, the level of visible trauma was such that it would not have been ethical to ask different protection questions. Lastly, information was challenging to obtain throughout the region, and while official numbers and data were triangulated, it was almost impossible to find consistent and reliable sources of information.

In interviews across the five border countries assessed (Hungary, Poland, Romania, Moldova and Slovakia), forcibly displaced Ukrainian women were often reluctant to share or 'complain,' and they expressed gratitude for the support they were receiving. This raises the question of whether women were under-reporting instances and risks of violence.

IV. Regional Findings

This report details overarching findings common to most or all of the countries included in the six rapid assessments conducted by VOICE (Hungary, Moldova, Poland, Romania, Slovakia, and Ukraine). Additional assessment reports are also available for each country, providing more in-depth findings specific to the individual country context.

The complexity of this response demands the international community go beyond the often simplistic humanitarian discourse on GBV to different ways of thinking about power, violence, male privilege, movement building, and healing. Like other parts of the report, this Findings section is informed by an intersectional feminist analysis of violence as deeply rooted in women's oppression and an understanding of how it intersects with race, antisemitism, class, sexual orientation, and gender identity. It is hard to deny, three months after the war in Ukraine started—with a response to over 2 million people, 90% of whom are women and children—that there is a failure of duty-bearers (including INGOs and the UN) to adhere to their own global commitments to localization of the humanitarian response and their mountains of commitments to women and girls, including systematically creating ways for them to design and lead responses and incorporate their views into all phases of the humanitarian programme cycle. It is critical that the international community understands the trade-off women will continue to face, if urgent action is not taken, between their own safety and well-being and the ability to meet their most basic needs.

A. Needs and risks of women's organizations, groups and collectives

WROs, CSOs, and local NGOs have largely been on the forefront of the response since the first day of the crisis, providing support and services to IDPs and FDPs before international agencies arrived. Even prior to the war, organizations throughout the region were working in challenging funding and operational environments. Many of these groups have now expanded or shifted their activities in response to the war and displacement crisis. In order to work effectively, they need to be included in humanitarian response planning and supplied with flexible core funding that is responsive to their needs and ensures their ongoing existence and ability to continue serving their target communities.

"War on women's bodies has been happening on Hungarian women, and now the international community is coming in and only focused on FDPs from Ukraine when we have been ringing the bell for years on the need for a focus on women's rights in Hungary." – Local women's rights organizations

This region was a crisis for women's rights before the war

Even prior to the war, organizations in the region faced significant challenges. Between 10 and 15 years ago, almost all progressive funding was pulled out of the region; as a result, many organizations (and WROs in particular) went dormant or became more project-focused. In Hungary, for example, the number of people involved in human rights work over the last decade has declined significantly due to the government's anti-democratic rhetoric and actions.

Feminist initiatives and WROs have seen their funding cut, even as their workload has ballooned in a hostile operating environment. In Poland, civil society is actively working on a wide range of social justice issues in light of governmental anti-rights politics and the shrinking space for CSOs.

Working in the face of constant pushback on human rights from government, religious, and reactionary forces, local feminist and gender justice activists—especially abortion and LGBTQIA+ activists—are targeted for harassment, censorship, and violence. In Slovakia, the recent backlash against women's rights has resulted in a massive increase in caseloads for many organizations across the country, especially those providing support to survivors of domestic violence. Across the region, COVID-19 has placed additional strain on organizations providing services for women who experience violence. Because of these pre-existing challenges, most WROs, CSOs and local NGOs are drastically underfunded and operating in survival mode, and staff is at a high risk of burnout.

"Women's organizations [in Hungary] have been suffocating for a long time."
— Local women's rights organization

"This impacts the situation [for how we do our work] because we are exhausted. It has been exhausting to hold the front."
— KII with women's organization leader in Slovakia

In the current crisis, organizations on the frontlines of the response face an array of funding challenges that threaten their ability to respond effectively. As the crisis continues, funding is increasingly shifted to a refugee response, without due attention to the general operational costs that organizations need to maintain their integrity and very existence. Many of the available funds are also restricted, which robs organizations of their agency and does not allow them to determine how best to respond to the constantly- and rapidly-changing needs of displaced persons. Instead of the multi-year flexible funding that local women- and girl-led organizations say they need, overworked grassroots groups find themselves chasing grants that may cover only one to three months, for humanitarian work they may not be trained for[18] and that ultimately derails their core missions.

[18] We must acknowledge that refugee crises in the region are not new, considering the displacement caused by the previous conflict in Ukraine in 2014 and the large displacement caused by the conflict in Syria in 2015.

"We, women who stay in Ukraine, are not just victims, we are also fighters, we are actively resisting and defending ourselves. We need help. If there is an intention to help us, it's important to accept our agency." — WRO representative, Ukraine

Many NGOs complain about time-consuming proposal and application processes, as well as the administrative burden of donor reporting, which often diverts valuable staff time just for this function. Groups within Ukraine report that donors are requiring burdensome "business as usual" reporting and due diligence, which is very difficult to achieve in the war context; for example, some WROs do not have access to their offices and files due to intense bombing and limited mobility. The lack of long-term funding, the constant hoop-jumping, and what WROs see as donors' lack of trust and listening are stretching organizations thin and exacerbating staff burnout. In response, several Moldovan WROs explained that they would rather turn down funds than be "exploited and brought further from the original mission and work."

"Older donors, who are our partners, simplified their rules and regulations [due to the conflict], helped us with documents, and checked to see if we needed anything. They keep an eye out to see if we are alive. Other donors just send letters asking to immediately send them reports with documents. They must think that we have access to our office and are able to continue business as usual." — Ukrainian WRO representative

Despite their extensive experience on the ground, local WROs have little opportunity to participate in shaping the humanitarian response. A familiar, unequal, and gendered dynamic is playing out between professional humanitarian actors, local service providers, and affected populations. Instead of partnerships driven by and grounded in local expertise and knowledge, the humanitarian enterprise is again creating parallel processes that sideline or alienate local actors, including WROs.

"I got my master's in International Relations, and I don't understand what is happening in these meetings." — Leader of a women's rights organization in Krakow

Women's groups and other de facto humanitarian

workers have not been asked what roles they would like to play as partners in the response, and barriers to their participation in decision-making have not been addressed. For example, Moldovan WROs have built relationships with security forces and have been involved in delivering anti-trafficking training for them; however, they were not consulted or integrated into training sessions planned by INGOs. In Hungary, WROs are suspicious of the larger NGOs affiliated with the government —so-called "GONGOs"— whom they accuse of co-opting civil society spaces and soaking up limited resources.

"There was a critical attitude toward [our local NGO] workshops from the INGOs, who come in with their ideal solutions that are impossible in the reality of the situation here in this country. [Instead] what we need is for the international community to push our government to provide access to these services."
— KII with local NGO in Slovakia

Some WROs are concerned about their capacity to continue to support their primary caseload —women and vulnerable populations from their own country— while so much emphasis is now going toward FDPs. In Slovakia, some WROs have explicitly decided not to respond to the refugee crisis, citing reasons such as their existing high caseload; a lack of organizations providing services to host communities; a lack of Ukrainian speakers on their teams; and staff shortages in general.

"I receive 50 to 100 calls every day about refugees and try to help, but I do not know how much longer I can keep it up."
— Polish Town Council representative, in tears

In spite of these restrictions, WROs throughout the region are providing life-saving services and developing innovative models for service provision. In Moldova, WROs are designing programs to position mobile GBV case management systems and mobile trafficking protection units at the borders. In Ukraine, WROs and civil society have built solid mutual aid systems that have been functioning to support internally displaced women and girls for over eight years now, and WROs and local organizers heavily depend on these informal systems. The work these groups are doing is especially vital because a lack of humanitarian corridors means that most programs must be implemented by organizations already inside the country. These local organizations are able to access areas where most INGOs cannot go, and also bring a deep knowledge of networks within Ukraine that are crucial for effective service provision.

B. Trafficking and other GBV risks

There is a high risk of trafficking, exploitative labor, and sexual exploitation and abuse (SEA) for women and girls throughout the region, and especially at border sites where FDPs are fleeing the war.

Trafficking

The assessment team heard from volunteers, key anti-trafficking organizations, UN and INGO actors, and other key informants about ongoing visible trafficking risks and observed trafficking attempts at all five border countries and within Ukraine. Assessment team members themselves also observed significant risks in each country, including people at border crossings offering signs for free rides and accommodation.

The ad hoc, volunteer-reliant nature of the current emergency response creates significant opportunities for traffickers. Volunteers are generally applauded for helping with registration, offering rides, providing accommodation, and offering other services. With this narrative in the media, a trafficker can pretend to be just another selfless person providing support.

The reliance on volunteers by government and NGOs is a considerable risk, as they are not always screened or trained. At the registration office in which women may be standing in line for hours, 'volunteers' are asking for personal data and information, underscoring the need for professionalized services, deep screening of personnel, interpreters, and accompaniment. Many organizations at border crossings and shelters reported seeing male drivers prowling and offering rides to women. They saw families getting into unverified vehicles and leaving for unverified destinations. Most shelters visited by the assessment team in the region did not seem to have security controls in place for visitors or protection measures for FDPs, making it easy for bad actors to enter.

"I see trafficking potential everywhere."
— Anti-trafficking expert in Romania

Some CSOs and cities have implemented minor controls to address trafficking risks at the borders; however they are often location-dependent, without formal or written agreements and without any central coordination. Along the border in Slovakia, for example, there is a system in place where minimally trained volunteers check the cell phones of women and girls looking for trafficking risks; however, this is not a mandated function. In Romania, efforts have been made to systematize anti-trafficking and anti-exploitation activities by registering volunteers, organizations, and those providing transportation services; however, there have

been many inconsistencies reducing the overall effectiveness, and the registration process does not include a background check. There are also efforts to provide comprehensive information to FDPs on trafficking risks and access to basic services. Despite the availability of this information, WROs say that without constant psychosocial and protective services, women and girls remain highly vulnerable.

Risk of exploitation and trafficking is also significant beyond the borders. Private accommodation for FDPs (see 'Shelter, sustainable housing, and food insecurity risks,' below) is an area of especially acute risk. In many locations, offers of shelter in private homes can be fronts for trafficking and abuse. In Moldova, forced labor was visible and presented as 'volunteering' in some private shelters housing women and children. Exploitative labor is taking many shapes: given the language barriers and the lack of access to shelter and food, FDPs are at a significant power disadvantage with potential employers (see 'Lack of cash-based assistance, livelihoods, and access to decent work,' below). There were direct reports of women being offered jobs and then being forced to work through unpaid 'probationary' periods. In several countries, there is a black market of labor that exploits and underpays forcibly displaced women and children.

Domestic violence

As in every conflict, there has been a major increase in the level of domestic violence in Ukraine, which is likely to remain elevated for years after the fighting stops. The obligation of Ukrainian men to fight and the easy access to weapons has increased stressors and tension in households, increasing the risk of intimate partner violence. Respondents report that as women are displaced and forced to stay with friends or family, they may be brought back into contact with former partners who had been violent in the past. Similarly, women may be unable to leave an abuser because the lack of housing/shelter means they have nowhere to go, or because they have concerns about surviving on their own.

"Domestic violence has really increased. They [men] come home from territorial defense and he is a hero, while she has to do everything [around the house]. He has great stress on his mind [from the war] and he takes it out on her." — Organization working on domestic violence, Ukraine

"We went to the police to report a domestic violence case that happened in an IDP shelter [for those who have been displaced from the east for eight years] and the police said, 'we have bigger problems.'" — Organization working on domestic violence, Ukraine

Sexual violence, exploitation and abuse

Despite the multitude of reports coming out of Ukraine referencing women and girls who have been subjected to rape, sexual torture, and other forms of GBV, VOICE found that no unified measures have been taken to address the needs of these survivors. While there have been countless media stories about the rising incidences of sexual assault perpetrated by the Russian military in Ukraine, the actual number of cases is unknown. Some grassroots efforts report being aware of "hundreds of survivors," while others report fewer than ten. Abortions Without

Borders recently reported having over 50 women pregnant in Poland reaching out for abortive care after rape.[19] While some survivors have publicly discussed their attacks, stigma and fear of repercussions often lead to underreporting.

Conflict-related sexual violence (CRSV) is a manifestation of patriarchy, and it cannot be disconnected or de-politicized from the everyday violence that women and girls face. The assessment team heard concerns expressed by several WROs and CSOs that the media, the UN, and humanitarian actors are shining a spotlight on CRSV rather than on the multiple types of GBV being exacerbated by the war. While bringing attention to the issue of CRSV is essential, prioritizing this over other forms of GBV—such as domestic violence or sexual exploitation—creates a hierarchy of GBV that is damaging to all survivors and to efforts to eliminate all forms of violence against women and girls. Survivors of other forms of violence may be further sidelined if there is less funding for GBV services that are not CRSV-related, and survivors of CRSV could face increasing levels of stigma.

The situation is worsened by problematic reporting practices by both human rights organizations and the media, especially in relation to CRSV. Journalism which does not follow a survivor-centered approach can do considerable harm to the survivor; for example, in sharing detailed stories of individual survivors, journalists and human rights organizations can expose these survivors and violate their confidentiality—which can be stigmatizing to them and is not centered on their care and well-being. Some GBV service providers shared that media outlets and journalists have pressured them to secure survivors for feature interviews in exchange for giving these organizations airtime.

> While survivors should be given autonomy and agency to make the choice to go public, this is so often done in a way that is not survivor-centered, and many do not understand that it is unethical to ask questions about sexual assault when adequate response services are not available.

In addition, many WROs are concerned about survivors' experiences being used for political gain, particularly by governments as part of the information war. Journalists and human rights documentation organizations need to be aware of the harm they can cause and should be guided by people with expertise on GBV in emergencies.

As more actors join the response efforts in the region, there is a growing risk of sexual exploitation and abuse (SEA).[20] As in most —if not all— emergencies globally, some volunteers and agency staff who are meant to be helping the displaced are instead taking advantage of their positions of power to abuse and exploit people—highlighting one of the underlying failures of the humanitarian-development enterprise. In Hungary, for example, there was a direct report of a volunteer promising to bring food to people in temporary housing; upon arrival he asked the mother for sex and for her to be his wife in exchange for the food. In most locations, there were no visible efforts to address this risk, and at the time of the assessment, the team did not come across any volunteers working with FDPs who had been trained on the prevention of sexual exploitation and abuse (PSEA). There was also no available

[19] *Ukrainian Women Are Not Allowed to Terminate Unwanted Pregnancies in Poland, and Their Assistants Face Jail, Zaborona's report*, April 21, 2022.

[20] Sexual exploitation and abuse by humanitarian actors is a prominent issue in humanitarian emergencies and has received increasing attention over the last several years, as noted and reviewed in The New Humanitarian's article published on February 11, 2021: "Then and Now: 25 Years of Sexual Exploitation and Abuse. A timeline of repeated scandals, reform, pledges and impunity." published in the New Humanitarian. www.thenewhumanitarian.org/feature/2021/2/11/25-years-of-sexual-exploitation-and-abuse .

information for FDPs on PSEA, risks for SEA, and/or reporting of SEA.

C. Shelter, sustainable housing, and food insecurity risks

"I find myself crying for two weeks at a time. Why isn't there any kind of [emergency response] structure that is usable?" — KII with volunteer in Hungary

Access to safe and sustainable shelter is a challenge for the majority of displaced persons in the region, and no long-term solutions are currently being shared.

Within Ukraine, most IDPs (66%) live with relatives, friends, or in self-rented housing; another 6% live in private housing provided by strangers; and only 4% live in collective accommodation centers. Most neighboring countries in the region have a mix of official government-run shelters, privately-run shelters (often hastily established in hotels, warehouses, or shopping centers), and individual private homes offered by citizens of the host country. In many places, there is an overall lack of information on where FDPs are staying, who is providing which services, and what needs and gaps in services exist.

Some government-run shelters are well-organized and provide access to essential information and services for FDPs. In Romania, there are hybrid shelters run by government-NGO partnerships, and these had solid protection measures in place, relying greatly on the NGOs' experience and expertise in working with vulnerable populations. Some shelters facilitate access to psychosocial support, registration, medical support, and case management for FDPs. Others across the region, however, are overcrowded and lack many essential services, such as legal services, safe spaces for women and girls, and adequate referral systems. Many have little protection or security systems in place, provide limited or no training for volunteers, and risk spreading communicable diseases, including COVID-19.

In general, access to services and assistance is much more limited for displaced persons residing in privately-run shelters or private accommodations, which are typically not registered leading to increased protection risks including exploitation and abuse. Some privately-run centers are unregistered, which is of concern, as there is some perception that these sites are purposefully not registering so that they can exploit women. Many vary in quality and access to food.

It is unclear how many FDPs are living in private accommodations or where these accommodations are located – although in Romania it is estimated that 80% of FDPs are hosted in private homes, and in Moldova, this figure is closer to 90%.[21] The governments of Slovakia and Romania offer incentives for hosts and have made efforts to properly screen private hosts including fines for those who do not register on the government website. Across the region, however, the well-being of FDPs in private accommodations cannot easily be verified. Some NGOs shared concerns that as the tourist season starts in a few months, some hosts may want to sublet their accommodations to paying customers, leaving FDPs with nowhere to go. The housing market and lack of affordable housing in several countries also makes it difficult or impossible for FDPs to access sustainable housing options.

Some local organizations have comprehensive strategies to meet the needs of Ukrainian FDPs

[21] WFP Romania and Moldova Factsheets, March 2022, https://data2.unhcr.org/en/documents/details/91637.

for accommodations, safe transport for onward movement, hot meals, and safe spaces for children to play however, they lack the funding and specific technical support to implement them. Their progress is not sustainable without the international community and government buy-in.

Displaced people are in need of food as well as hygiene products. In Ukraine, food and water scarcity are placing women and girls at higher risk of violence due to heightened tensions in the household and communities. Humanitarian corridors have not been able to allow for the delivery of aid, and in some regions women must travel long distances to larger markets, often encountering military personnel on the way, which makes them feel unsafe.

"You might literally spend your whole day hunting for food." — Interview with WRO in Ukraine

Food insecurity was reported in several neighboring countries as well, and CSOs reported an increase in food cost, along with an overall dwindling supply of staples. In Hungary, before FDPs can access cash assistance, there is a delay that one person interviewed called "the hunger period." Even when the cash distributions begin, this informant continued, "it's never enough." There is a center in Budapest where FDPs can receive hygiene products and a parcel of basic foodstuffs, but not everyone can feasibly reach this center, and they are only allowed to access this assistance once. Food insecurity leaves displaced women vulnerable to labor exploitation, SEA, or resorting to harmful strategies just to meet the basic needs of themselves and their families.

"In the evening, people keep coming to us and we have already run out of food." — Volunteer running a food kitchen in Budapest, Hungary

D. Cash assistance, livelihoods, and access to decent work

Overall, it is unknown whether displaced persons will be able to obtain meaningful well-paid work or secure cash-based assistance. Displaced women and their families are running out of financial resources to cover their basic needs, and thus are at much greater risk of exploitive labor, engaging in sex work, and falling prey to trafficking or SEA.

Many in Ukraine have lost their jobs and incomes because of the war, and unemployment rates among all categories of the population will likely increase. Some lost their cash savings in destroyed houses, and others spent their savings to help themselves or others in need. In neighboring countries across the region, legal access to employment varies greatly. In Moldova, FDPs have the right to work without obtaining a residence and work permit for the period of the state of emergency. While the Government of Hungary opposes immigration in its rhetoric, it is taking substantial steps behind the scenes to entice Ukrainian labor to the country—including currently offering stipends to Hungarian employers who hire Ukrainian refugees. In Poland, all Ukrainian FDPs who crossed the border after February 24 have a right to work without special permissions—although third-country nationals do not necessarily qualify for the same benefit. In

Romania, Ukrainian FDPs are not required to have temporary protection status or a work permit to gain legal work for the first 90 days of their stay. FDPs in Slovakia often need to obtain a license for work in their trained specialty, and those who could do professional work in well-paid sectors are thwarted by legislation that gives preference to citizens of Slovakia or the European Union.

Despite having legal access to employment in several countries, FDPs face many obstacles to accessing meaningful and decent work to support themselves and their families. These obstacles include language barriers, lack of childcare, rural location, poor job markets, and high local unemployment rates. Further, Ukrainian diplomas are not always recognized, forcing FDPs to take lower-paying jobs, some of which appear to be illegal and exploitative.[22] Some NGOs responding to the crisis have hired FDPs with English language skills to help with the humanitarian response; however, these opportunities are few and often only provide short-term work. Women cannot work if they do not have access to schooling for their young children or daycare options—putting further strain on them to provide for their families. While some governments in the region guarantee access to education to all displaced children, language and overcrowding are considerable obstacles for many, across the region. All of these obstacles result in Ukrainian women accepting low-paid jobs, without a contract, and where risks of exploitation are high.

Unfortunately, access to adequate cash assistance remains out of reach for the majority. In most countries, cash and voucher assistance (CVA)[23] programs are either inconsistent, just getting started, challenging for displaced persons to access, or entirely lacking. In some places where CVA programs were supposedly in place, many displaced women, as well as staff and volunteers working with them, were not aware of their existence.

E. Access to good information

In most areas, FDPs lack consistent and reliable information on the services and support that are available to them, including legal services and information about temporary protection status (TPS) and asylum. Without good, credible, and trusted information, FDPs cannot make informed decisions about their lives or fully access services and support. This exacerbates a culture of fear and also presents major protection risks for women and girls, who —in the absence of access to services— may take riskier actions to meet their basic needs. In Hungary, Romania and Slovakia, for example, FDPs specifically reported confusion around the ramifications of TPS or asylum on their ability to return to Ukraine or move onward into another country —and because of this fear and lack of information, many do not apply. Language is another obstacle faced.

Governments in Slovakia, Moldova, and Romania have launched tools including hotlines and websites to provide FDPs with essential information about housing/shelters, healthcare, education, TPS and asylum, and other rights and benefits.[24] Some registered shelters across the region have

[22] Job advertisements are appearing on social media that require a 13- to 14-hour working day (versus a normal 8-hour working day), five to six days per week with minimal salaries. Typically these jobs also provide housing, so many FDPs may be very tempted to take them.

[23] CVA is now the most-evaluated type of anti-poverty intervention globally, with a huge base of evidence from gold-standard research around the world, including in acute crisis contexts. CVA is a proven means of GBV prevention that mitigates many kinds of exploitation and deprivation. However, CVA carries the risk of community jealousy, stigma, bullying and theft, and must be provided with an integrated gender protection approach.

[24] FDPs can access the website dopomoga.gov.md in Moldova; dopomoha.ro in Romania; and pomocpreukrajinu.sk in Slovakia.

informational flyers, while others completely lack information.

According to many interviews and focus groups, informal networks —such as Facebook groups, Telegram chats and Viber chats– remain the main sources of information for FDPs, especially when they search for information on local matters. While these informal networks risk spreading misinformation, they are also based on the trust of fellow Ukrainians, and this trusted way of obtaining information should be better understood and built upon by the international community.

F. Access to essential services

Health, reproductive health, and GBV services

While extensive resources for the support of trauma-related surgical needs have flowed into Ukraine and surrounding regions, the needs of women and girls, and particularly the needs of survivors of sexual violence, have seemingly been ignored. Those limited services that do exist are being provided solely by civil societies, existing welfare systems, and charitable entities, seemingly without the regional coordination and financial and government support required of such a large-scale emergency.

> In Hungary, when asked about risks for women and children, one volunteer offered, *"They are very vulnerable here and there is a lot of violence, physical abuse, sexual assault… What am I not worried about?"*

There is insufficient access to health services of all kinds, at all levels. There is an overall lack of access to primary healthcare in all bordering nations, as well as inside Ukraine. Major concerns exist around the delivery and accessibility of services for dental care, primary pediatric care, adult primary care, vaccination programs, reproductive health, transgender health, oncologic care, COVID-19 screening, multidrug resistant tuberculosis (MDR-TB) treatment, and HIV programs. While bordering regions have set up basic access to emergency services, the health infrastructure of these regions is unlikely to be able to support the basic health needs of 5 million people without significant multinational logistical, personnel, and financial support. Failure to provide that support will create incredible health throughout the region.

Further concerns exist regarding the rights and needs of survivors of sexual violence, including their right to autonomy, access to clinical management of rape (CMR) post-assault, and access to abortive services when there is pregnancy as a result of rape. VOICE found that no unified measures have been taken to address the needs of these survivors. Moldova is the only country to implement a country-wide CMR policy, as well as to provide legal access to both medical and surgical abortive care, although actual access remains unclear.

Stigma, language barriers, lack of knowledge of available resources, and financial barriers are all clearly limiting factors for survivors to access resources. Additionally, while many support organizations have experience with intimate partner violence, and some have experience with sexual harassment and assault, the entity of rape within the context of war is comparatively unique, and no organization (in or out of Ukraine) indicated having formalized training in, or experience with, the needs of survivors within this specific context.

Additional concerns exist around the number of international organizations supporting the medical efforts within Ukraine, and whether or not they have created internal pathways for

survivors of GBV. This is particularly concerning because survivors may only have the ability to access health resources through volunteer support organizations, and how these organizations handle—or don't handle—survivors of sexual violence and their medical and emotional needs has a significant impact on the patient.

Another significant concern is the management and lack of screening of volunteers working directly with vulnerable populations, and the related risk factors for SEA. The assessment team did not identify any clear options for mechanisms for reporting SEA by volunteers working inside the region. In contrast, many volunteers, when asked, noted that this would be a good idea—with some volunteer women explaining that they had observed sexual exploitation happening by their male counterparts.

Finally, the assessment demonstrated a lack of holistic understanding of how the multifaceted needs of displaced persons impact overall health. Shelter, food distribution, and social services are all being treated as distinct and separate entities; this lack of a collaborative approach, in combination with an overall lack of access to resources and major delays in onward planning, is the breeding ground for an impending health catastrophe of inordinate proportion. Once out of hand, it will be considerably more challenging (and costly) to address.

Mental health and psychosocial support

The need for psychosocial support for IDPs and FDPs is palpable, as most have been exposed to trauma from the invasion and may have been subject to various protection risks or human rights abuses while in displacement and/or in their temporary accommodations in host countries.

Access to mental health and psychosocial support (MHPSS) services, however, is sporadic at best. In Moldova, Romania and Poland, MHPSS services were being offered in some government-run shelters, but private centers

generally lack these services. Many displaced persons reported interest in receiving psychosocial support, but there is also a great deal of stigma.

Language is a barrier, and services that do exist are often not tailored to the needs of women and girls who are at risk of or have experienced violence. While some NGOs have experience providing MHPSS in their own mission and context and are working to provide services to FDPs, they note that they need training to respond more appropriately in a refugee-trauma-crisis context and feel a little outside of their depth.

G. Double discrimination against populations of concern

Roma, LGBTQIA+, people of color, and other marginalized people who already face discrimination across the region are likely to be those most greatly impacted by the current crisis.

"The racism was massive." — Key informant in Warsaw referring to the treatment of non-white, non-Ukrainian FDPs

Transgender and gender non-conforming people face difficulties with crossing the border, especially if their passport notes they were born male, as men are currently prohibited from leaving Ukraine. Transgender women are reportedly undergoing humiliating 'bio-medical' checks at some border sites, and those who have not undergone gender-affirming surgery are immediately conscripted and sent back into Ukraine. Multiple cases of transphobic discrimination were reported, as well as challenges with finding safe housing and accessing hormone therapy.

The Roma community faces generalized discrimination and ostracization across Europe, with implications for registration, identification documents, and access to jobs, housing and other services. Roma families are sometimes brought to specific Roma shelter sites to "ease tensions in more mixed sites," and these shelters are often of significantly lower quality. The majority of the Roma population in Ukraine lacks civil status documents, creating difficulties with accessing employment, health services, and education, and also putting them at heightened risk of trafficking. Not only do they tend to have fewer resources than white ethnic Ukrainian FDPs, but they are often prevented from accessing private accommodations or diverted to remote areas with limited access to services. In Hungary and Slovakia in particular, there is a generalized attitude that the Roma are not "real" refugees – that they are poor and they can be poor anywhere.

Finally, there have been additional reports of racist treatment of third country nationals from Afghanistan, Cameroon, Pakistan, Nigeria, Russia, and other countries who fled Ukraine at the start of the war.

V. Recommendations and ways forward

These regional recommendations are foundational for the UN, Donor/Member States, the European Union, philanthropy, host country governments, INGOs, and local NGOs to implement. They are complementary to the country-specific recommendations included in this report.

ICON KEY			
United Nations (UN) Entities	European Union (EU)	Host Country Governments	Government of Ukraine
Feminist Philanthropy/ Feminist Funds	Member State Donors	LNGO (Local Non Governmental Organization)	INGO (International Non Governmental Organization)

1. Ensure a gender-sensitive humanitarian response by supporting women's movements across the region

A commitment to sustaining the gains for women and girls made in previous decades must underpin all programming for internally displaced persons (IDPs) in Ukraine and FDPs in border countries, with robust challenges to the inevitable patriarchal backlash. For a gender-sensitive humanitarian response to be successful, women's and girls' organizations and other feminist and gender justice groups providing specialist services must be supported to sustain their networks, systems of solidarity, and collective peer care.

Recommendations:

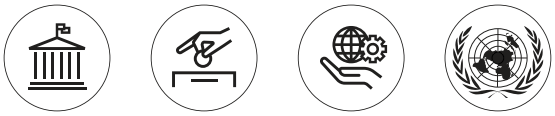
- **Fund programming tailored to the specific needs of the women and children fleeing Ukraine, as well as host communities in all border countries and beyond.** Funding should prioritize the prevention of and re-

sponse to trafficking and GBV, as well as access to healthcare, childcare, CVA and education. Funding must be flexible enough to support the core operations of WROs to ensure their stability both during and after the current emergency.

- **Design programs that will not rely on women and girls to provide unpaid or underpaid labor.** In most parts of the world, women are socially expected to care for other people in their homes, families and communities. Emergency program interventions must be built in ways to reduce the burdens of unpaid care work on women and girls, making every effort not to exploit them further. Make this a core principle of all programming, and ensure donors understand this as well.

- **Support local/national feminist priorities,** ranging from legal reforms and political participation to gender mainstreaming in public policies, ending VAWG, economic empowerment, and more. Look from a systemic perspective at how to best support local activism and political agendas of women's rights, feminist, and LGBTQIA+ organizations.

- **Understand the linkages between emergency response and women's rights movement-building work.** Donors who fund movements (rather than emergency response) need to understand that organizations' emergency response activities are inextricably connected to their movement-building work. Conversely, donors who fund emergency response and not women's rights work need to understand that to divorce funding from this reality will have major shortcomings in the outcomes of the response. The localization agenda must be supported and adhered to, cou-



pled with a critical lens that deeply understands why funding and linkages across the Humanitarian-Development Nexus[25] are essential to the goals we share of alleviating suffering and meeting humanitarian **needs, while strengthening existing systems and structures long term.**

[25] The Humanitarian-Development Nexus is the concept of increased collaboration between organizations working in short term humanitarian aid and long term international development promoted since 2016. Strand, Arne. "Humanitarian–development Nexus". *Humanitarianism*. Leiden, The Netherlands: Brill, 2020. https://doi.org/10.1163/9789004431140_049; and Stamnes, Eli. "Rethinking the Humanitarian-Development Nexus". *Norwegian Institute of International Affairs*, vol. 24, 2016, https://ethz.ch/content/dam/ethz/special-interest/gess/cis/center-for-securities-studies/resources/docs/NUPI-Rethinking%20the%20Humanitarian-Development.pdf.

2. Fulfill commitments to localization by shifting power to women-led organizations

Localization became a formal part of the mainstream humanitarian reform agenda through its inclusion in the 2016 Grand Bargain, a major reform agreement between humanitarian actors. The localization agenda is focused on increasing local actors' access to international humanitarian funding, partnerships, coordination spaces, and capacity building.[26] Localization is one key to upholding the rights of women and girls in emergencies, as local women's responses are often more relevant and effective than external ones.

[26] Robillard, Sabina, et al. *Localization: A «Landscape» Report*. Feinstein International Center Publication, Tufts University, December, 2021. https://fic.tufts.edu/publication-item/localization-a-landscape-report/.

Recommendations: Ethical partnership

- **Engage with local organizations and WROs as equal partners toward the enhanced protection of FDPs.** The meaningful participation of women and girls, including those from marginalized groups, should be facilitated in all decision-making processes, including in planning, coordination, implementation and monitoring.

- **Ensure WROs and other local actors are part of the (re)design of coordination structures from the beginning.** Structures should complement local efforts rather than create parallel processes, which traditionally keep power in the hands of UN entities and INGOs.

- **Avoid treating women's groups as homogenous,** and understand groups' intersectional diversity based on age, religion, ethnicity, sexual orientation, disability status, etc.

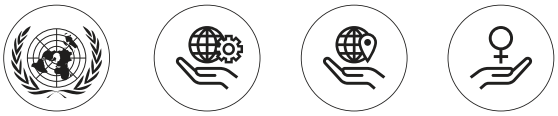
- **Enable women-led organizations and activists as leaders and change-makers at all decision-making platforms,** including them within the cluster system, the UNHCR Refugee Response Plan, and all coordination structures. UN agencies and INGOs should take action to employ staff members who understand how to engage women-led organizations in a positive and productive manner.

- **Provide access to technology and address other barriers to WROs' participation.**

The VOICE-UNICEF Partnership Assessment Guide (PAG) provides an intersectional and feminist approach to partnership building that leverages both the resources that large funding agencies can bring, as well as the local presence and specialized knowledge that women-led organizations provide. Developed through a consultative process with women leaders in Afghanistan, Bangladesh, Kenya, Liberia, Sri Lanka and South Sudan, it provides a blueprint for a new format of partnership that centers the roles of groups and organizations that are often marginalized due to arbitrary criteria.

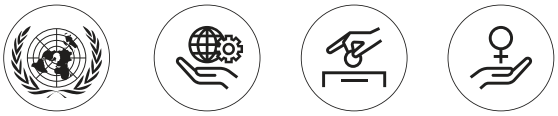
- **Hire bilingual coordinators to enhance locally-led coordination structures.** This not only enhances localization, but is also important for government and private shelters to ensure quality service delivery in health and psychosocial support. The coordinator can act as an interlocutor between the international and local actors.

- **Support and promote safe spaces (virtual or actual) for staff and volunteers in women- and girl-led organizations to meet, share experiences, and support each other.** Ensure these are focused on care for staff and volunteers and not implementation of activities, and ensure they are regular and prioritized events.



Recommendations: Funding

- **Increase stable and predictable funding for GBV programming, and support its expansion and accessibility by FDP women and girls.** This will help civil society actors respond more effectively to all forms of GBV, including sexual violence, intimate partner violence, trafficking, and SEA.



- **Provide flexible, multi-year, and unrestricted funding to local women-led organizations, including WROs, feminist organizations, and those who have been responding to the crisis in Ukraine. Include allocations for organizational strengthening and support to keep organizations sustained and healthy.** Organizations need to be trusted to determine how to spend funding according to evolving needs; just as INGOs and UN entities prefer unearmarked core funds, WROs and networks need access to the same funding flexibility. Funding and resources for WROs must be ring-fenced from the beginning and used to bolster the work these organizations are doing, especially at a time when the region's women's rights movements are facing historic threats. Include funds to reimburse WROs for costs they have incurred since the beginning of the crisis, allowing them to backdate expenditures as needed.

- **Fund both registered organizations and unregistered groups who are providing critical and urgent frontline response and services.** Supporting the sustainability of local response directly impacts the quality and scope of FDP crisis response.

- **Make it easier for WROs to access funding by reducing bureaucratic and administrative burdens.** Decrease the amount of paperwork required, and make funding mechanisms available in relevant languages as well as English so that English proficiency is not required (e.g., in Poland surrounding this emergency response, make funding mechanisms available in Polish and Ukrainian). Establish definitions and criteria for tracking against these commitments.[27]

[27] *Feminist Humanitarian System Building Block I: Advancing Gender-Transformative Localization*. Women Deliver, 2018, https://womendeliver.org/wp-content/uploads/2019/09/WD_Humanitarian-Paper-WEB.pdf.

- **Invite WROs to lead on defining their scope of work, and take care not to incentivize 'NGO-ization'28 of local groups,** which threatens to derail them from their core missions. WROs should be asked what they need and what roles they would like to play as partners in the coordinated response. Work with them to unpack any unintended risks that could come with their participation.

[28] 'NGO-ization' refers to the professionalization, bureaucratization, and institutionalization of social movements as they adopt the form of nongovernmental organizations (NGOs), which often leads to the de-politicizing of their social movements.

- **Convene current and potential grantees to discuss ways that donors (INGOs, international organizations, government/donor entities, and philanthropists) can sus-**

tainably fund local, women-led, and other feminist groups and organizations. These convenings should be non-burdensome to grantees, using approaches they agree on. Topics should include how donors can work to level the playing field.

- **Make emergency funds accessible so that WROs can redistribute aid to women at greater vulnerability.**

3. Address gaps in the protection of women and children

Given the unparalleled levels of funding that have gone into this response, along with the high level of humanitarian access to the border countries, it is paramount that essential life-saving protection interventions —detailed below— are prioritized and strengthened.

Recommendations:

- **All Call to Action on Protection from Gender-based Violence in Emergencies**[29] **(CTA) partners —especially donor/member states and international organizations— should continue to strengthen donor accountability to the Road Map**[30] to promote increased transparency around what each government/donor entity is investing in GBV or, at minimum, the efforts they are undertaking to influence their investments so that they are applied to GBV response and prevention efforts.

[29] The Call to Action is a multi-stakeholder initiative specifically aimed at driving change and increasing accountability of the humanitarian system on its response to GBV in emergencies.

[30] *The Road Map* is the Call to Action's overarching guiding framework that sets out common objectives, targets, and a governance structure to ensure that pledges are translated into concrete and targeted action on the ground. www.calltoactiongbv.com/what-we-do

- **Incorporate the views and contributions of FDPs into program monitoring to ensure Accountability to Affected Populations (AAP),** which all coordination systems (clusters/working groups), INGOs, and UN agencies have endorsed commitments to. In the preparatory stage, ensure that: women and girls participate in discussions on indicators and targets; mechanisms are developed for girls and women to provide feedback safely; and findings are used and disseminated. Anonymous feedback is also a key component of the prevention of SEA. Feedback can be collected by installing complaint boxes, distributing feedback forms, offering a website to visit or a toll-free number to call or text, and other means.[31] Communication with affected people should come through their preferred and trusted channels and media. Ensure participatory program design and continuous monitoring to ensure the response adapts to meet changing protection needs.

[31] Paragraph redacted from: IASC, *With us & for us: Working with and for Young People in Humanitarian and Protracted Crises*, UNICEF and NRC for the Compact for Young People in Humanitarian Action, 2020.

- **Bring a gender power analysis to all interventions to expose the specific risks and vulnerabilities of women and girls within the response.** Design interventions and poli-cies that take into account women's and girls' greater exposure to SEA, trafficking, and other protection concerns. Ensure the specific risks faced by double-marginalized groups of women and girls —such as women and girls with disabilities, LGBTQIA+, and Roma— are taken into account and advocated for.

- **Increase action to regulate unofficial transportation in the region to limit risks of SEA and trafficking.**

- **Support governments to collect and responsibly share FDP demographic data** disaggregated by age, gender, origin, and other factors to strengthen PSEA, anti-trafficking, and integration efforts. Lobby governments to collect and share data on FDP movement and aid delivery.

- **Expand implementation of and compliance with the existing Humanitarian Country Team Framework on Protection from Sexual Exploitation and Abuse (PSEA).** Maintain the inter-agency community-based complaints mechanism, and disseminate information to both host and FDP communities on what PSEA is, what their rights are, and how they can access the complaints mechanism. All actors in humanitarian response, including staff and volunteers, must be aware of their responsibilities and obligations related to PSEA, including reporting cases of SEA and maintaining adherence to codes of conduct. INGOs, local NGOs, and women's organizations should be engaged to monitor the risks of SEA, with specific attention to women and girls.

* with a focus on UNHCR

- **Institutionalize the use of the Guidelines for Integrating GBV Interventions in Humanitarian Action, the Interagency Minimum Standards for GBV in Emergencies Programming, and the Interagency Standing Committee Gender Handbook for Humanitarian Action** to inform service delivery.

- **Host governments should be pressured to treat third country nationals, people of color, LGBTQIA+ people, and the Roma commu-**

nity fairly and without discrimination, including in accessing safe accommodation; providing adequate reception conditions; and receiving protection and integration support if unable to return to their countries of origin.

4. Improve access to essential services

As lack of access to essential and life-saving services is directly correlated with safety and security risks, all actors must take action to meet FDP reception and integration needs—including needs for healthcare, psychosocial support, safe accommodation, cash and voucher assistance, livelihoods support, and education. As discussed above, an effective response must be grounded in local CSOs and especially WROs by investing in their capacity to scale existing services.

Recommendations: Overall

- **Each border country government should develop long-term, gender-informed strategies for response to the Ukrainian crisis, with participation of WROs, feminist groups, local NGOs, INGOs, and the EU.** In recognition of limitations of government response capacities across the different countries, the international community should help close gaps in life-saving services, including those listed below.

- **Systematize translation and interpretation services across border countries.** The lack of interpreters has been cited as a barrier in all service categories. Translators can be sourced from inside all border countries, as well as within the Ukrainian population, and could provide jobs that are desperately needed.

- **Border countries should consider the creation of humanitarian hub facilities where services can be co-located to reduce bar-**

riers to access, especially for protection, health, and MHPSS.

- **Address legal constraints that inhibit those who entered border countries before February 24, 2022 (both Ukrainians and third-country nationals) from being eligible for TPS.**

- **Raise awareness among journalists, human rights documentation organizations, and government entities on survivor-centered principles and approaches to prevent them from doing unintentional harm.** This should include the importance of taking every action to protect survivors who choose to go public; and the risks of prioritizing support and care for conflict-related sexual violence (CRSV) over other forms of GBV. All actors should be guided by people with expertise on GBV in emergencies, including CRSV.

Recommendations: Health, reproductive health, and GBV services

▸ **Ensure medical care and reproductive health services are accessible, free and holistic.**

▸ **Facilitate the use of multinational medical NGOs and local volunteer services to help create direct pathways for FDP patients to obtain primary medical care.** Ideally, medical service delivery can be co-located with major FDP reception and shelter locations, as well as supported by mobile clinics at smaller shelters and apartment complexes. This will also decrease the amount of emergency room utilization and decrease emergency needs.

▸ **Protect and enhance reproductive health services through ring-fenced funding,** in recognition of their essential and life-saving functions for women and girls. Build capacity of reproduc-

tive health services to include responsive and survivor-centered GBV services, and ensure the provision of menstrual hygiene materials.

- **Offer additional training and education on the clinical management of rape (CMR) to providers, referral services, and volunteers working with sexual assault survivors.** Include information on the difference between forensics evidence gathering for instances of rape (i.e., 'rape kits'), and the medical and mental health service provisions involved in CMR.

- **Employ Ukrainian medical personnel who have been displaced.** Process and permit transfer of licensing and accreditation from Ukraine for medical and mental health personnel, educators, and other essential staff in short supply. Ministries of Health should establish prescriptive permissions for foreign providers and medical INGOs to increase equitable access to medication.

- **Ensure testing and vaccinations for communicable disease (including COVID-19 and tuberculosis) are widely available at shelter sites and public areas.**

- **Establish dental clinics to provide services free of charge.**

- **Explore models of outreach or mobile services to reach those confined at home.**

Recommendations: Mental health and psychosocial support

- **Continue to provide comprehensive information related to trafficking risks, access to basic services, registration processes, legal rights, and other essential information** through the distribution of flyers, informational posters, and government websites.

- **Provide direct and ongoing training to mental health providers and volunteers on recognizing risk factors for trafficking, as well as how to safely intervene and report.**

- **Create safe spaces for women —particularly those in private accommodations— to gather** to build healthy social connection and support, as well as to share comprehensive information on risks and protection issues.

- **Provide technical capacity in trauma/crisis psychological response, including specialized rapid training on trauma/crisis intervention.**

Recommendations: Food, shelter and sustainable housing

- **Operationalize immediate programming to address the food insecurity of FDPs in the region.** Work with women's organizations to mitigate negative coping mechanisms and prevent risks of violence to women and girls in relation to their increased insecurity due to not being able to meet their basic needs.

- **Develop and support strategies for long-term accommodations across all border countries.** Government-run reception centers need to provide more long-term accommodations and establish them as shelters following international standards.

- **Advocate for all shelter managers —whether hosting FDPs in a house, local business, hotel, or elsewhere— to adhere to this GBV AoR guidance note**,[32] which aligns with international standards and considers the GBV and protection risks of women, girls, and other marginalized groups. The guidance note advises why and how to be aware

[32] Michelis, Ilaria. *Supporting Women and Girls Fleeing Ukraine: Guidance and Tips for Private Accommodation Hosts*. GBV AoR HelpDesk, April 13, 2022, https://www.sddirect.org.uk/media/2485/gbv-aor-helpdesk_guidance-and-tips-for-private-accommodation-hosts-20042022.pdf.

of power dynamics, to provide basic emotional support, and to link to support services.

- **Ensure secure shelter facilities by conducting resident registration and restricting access to public visitors.**

- **Provide basic training for shelter volunteers on GBV risk reduction and PSEA.**

- **Ensure appropriate spacing of cots (in line with SPHERE standards), quantity of handwashing stations, and available COVID-19 testing.**

- **Provide regular information sessions for all residents on shelter plans, programs, and where to report complaints and find available support.**

- **Provide access to job counseling and labor market information.** Establish programs for FDPs to obtain new professional skills needed in the labor market.

Recommendations: Cash and voucher assistance

- **Ensure that any cash assistance is coordinated with the Cash For Protection Taskforce in Ukraine and Neighboring Countries,[33] and is distributed equitably without discrimination against any groups of FDPs, with simple and convenient procedures.**

- **Blend CVA with other services (such as health or protection).** This has been shown to be more effective than standalone interventions.

- **Follow best practices for reducing risks of GBV in cash programming.** Agencies should assess and mitigate the risks from cash as-

[33] Contact information and situation analysis can be found here.

sistance using The Cash Learning Partnership Programme Quality Toolbox.[34]

- **Sensitize women on how to access CVA.** Some may struggle without accompaniment to distribution points, particularly the elderly or disabled and those caring for them.

- **Design cash and voucher disbursements to meet the needs of all household members, including children and older people.**

[34] "Programme Quality Toolbox". CALP Network, https://www.calpnetwork.org/resources/programme-quality-toolbox/. Accessed May 17, 2022.

Recommendations: Livelihoods support

- **Address any legal barriers to the right to work that FDPs are facing.**

- **Improve and enhance all control of work conditions for FDPs in accordance with host country labor legislation to reduce risks of sexual and labor exploitation.**

- **Continue efforts to relocate and create new Ukrainian businesses in border countries to create jobs for FDPs and host communities.**

Recommendations: Access to information

- Ensure information platforms for refugees include detailed information on how to access services, including locations, phone numbers, and related social media platforms. Ensure those providing services have clear information related to how FDPs can access verified services to facilitate information-sharing with refugees.

- **Develop localized information platforms that support information-sharing to specific**

geographic areas, particularly in cases in which the refugee response is decentralized to local governments.

- **For all platforms, include information for how refugees can file complaints and grievances, who they can call, and or where they can go in emergencies—including for incidences of SEA.**

- **Verify information that is physically posted in shelters or other places accessed by FDPs, and remove unverified information that could increase risk of trafficking and exploitation.**

Recommendations: Education

- **Integrate all displaced children into the host country's education system to ensure their educational attainment remains in accredited institutions.** Ministries of Education should work with local and international NGOs to meet the specific needs of displaced children in the areas of language, trauma recovery, parental/guardian engagement, and any catch-up or readiness support. If online learning is needed or preferred, then access to appropriate technology should be a focus.

- **Coordinate any and all education responses with the Education Cluster.**[35]

[35] For contact information and situation analyses, see: https://www.educationcluster.net/Ukraine.

Annexes

A. Links to Country Reports

Ukraine: https://voiceamplified.org/ukraine_report

Moldova: https://voiceamplified.org/moldova_report

Poland: https://voiceamplified.org/poland_report

Slovakia: https://voiceamplified.org/slovakia_report

Hungary: https://voiceamplified.org/hungary_report

Romania: https://voiceamplified.org/romania_report

C. Key Terms

- **Case Management –** GBV case management, which is based on social work case management, is a structured method for providing help to a survivor. It involves one organization, usually a psychosocial support or social services actor, taking responsibility for making sure that survivors are informed of all the options available to them; that issues and problems facing a survivor and her/his family are identified and followed up in a coordinated way; and providing the survivor with emotional support throughout the process.

- **Conflict-related sexual violence –** Conflict-related sexual violence includes "rape, sexual slavery, forced prostitution, forced pregnancy, enforced sterilization, or any other form of sexual violence... against women, men, girls or boys. Such incidents or patterns occur in conflict or post-conflict settings or other situations of concern (e.g. political strife). They also have a direct or indirect nexus with the conflict or political strife itself, i.e. a temporal, geographical and/or causal link."36 Sexual violence is perpetrated in the context of men's power over women, and is perpetrated primarily by men against women and girls. In conflict, however, boys and men are also targeted. Sexual violence may be commanded or condoned as a tactic of war.

- **Decent work –** The International Labor Organization defines "decent work" as work that sums up the aspirations of people in their working lives. Decent work is productive and delivers a fair income; security in the workplace; social protection for families; better prospects for personal development and social integration; freedom for people to express their concerns, organize and participate in the decisions that affect their lives; and equality of opportunity and treatment for all women and men.[37]

- **Discrimination –** Actions taken to exclude or treat others differently because of their race, ethnicity, gender, sexual orientation, disability, or other identitying factor.[38]

- **Domestic violence (DV) –** Violence that takes place within the home or family (between intimate partners or other family members).

- **Empowerment –** A process through which people gain greater control over decisions and actions affecting their health and well-being. Empowerment may be a social, cultural, psychological, or political process through which individuals and social groups are able to express their needs, present their concerns, devise strategies for involvement in decision-making, and achieve political, social and cultural action to meet those needs.[39]

- **Forcibly displaced persons (FDPs) –** Forced displacement (also forced migration) is an involuntary or coerced movement of a person or people away from their home or home region. The

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[36] UN Action against Sexual Violence in Conflict. Analytical and conceptual framing of conflict-related sexual violence, p. 3.

[37] https://www.ilo.org/global/topics/decent-work/lang--en/index.htm.

[38] Rychetnik L & Todd A. (2004). VicHealth mental health promotion evidence review: A literature review focusing on the VicHealth 1999-2002 Mental Health Promotion Framework. Victoria, VicHealth.

[39] WHO. (1998). Health Promotion Glossary, p:6. Geneva:World Health Organization.

UNHCR defines 'forced displacement' as being displaced "as a result of persecution, conflict, generalized violence or human rights violations." A forcibly displaced person may also be referred to as a 'forced migrant,' a 'displaced person' (DP), or, if displaced within the home country, an 'internally displaced person' (IDP). While some displaced persons may be considered as refugees, the latter term specifically refers to such displaced persons who are receiving legally-defined protection and are recognized as such by their country of residence and/or international organizations.

- **Gender-based violence (GBV) –** An umbrella term for any harmful act that is perpetrated against a person's will and that is based on socially ascribed differences between males and females (i.e., gender). GBV includes acts that inflict physical, sexual, or mental harm or suffering; threats of such acts; coercion; and other deprivations of liberty. Gender-based violence also includes violence against lesbian, gay, bisexual, transgender, queer and intersex (LGBTQI+) persons, based on perceptions that they defy gender norms.

- **Intersectionality –** Intersectionality is a term that was coined in 1989 by Kimberlé Crenshaw, a civil rights activist and legal scholar in the United States, as a way to help explain the specific oppression of African-American women.[40] This concept has become more widely used as a tool to examine how experiences of structural inequalities based on race, gender, sexual orientation, age, and citizenship status intersect and compound experiences of oppression.

- **Intimate-partner violence (IPV) –** Any type of GBV that happens between intimate partners (married, cohabiting, boyfriend/girlfriend, or previously any of those things).

- **Mental health –** A state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community. Mental health and psychosocial supports are essential components of the comprehensive package of care and aim to protect or promote psychosocial well-being and/or prevent or treat mental disorders among survivors of sexual violence.

- **Perpetrator –** A person who directly inflicts or supports violence or other abuse inflicted on another against their will.

- **Mental health and psychosocial support (MHPSS) –** A term used to emphasize the interaction between the psychological aspects of human beings and their environment or social surroundings. The term 'psychosocial' is used in place of 'psychological' to recognize that a person's mental well-being is not just determined by her/his psychological makeup, but also social factors. The 'social' and 'psychological' factors also influence each other. In humanitarian settings, the composite term 'mental health and psychosocial support' (MHPSS) is often used to describe any type of support that aims to protect or promote psychosocial well-being and/or prevent or treat mental disorders. MHPSS interventions in humanitarian settings are categorized according to a layered system of complementary support that can meet the needs of people affected by crises.[41] Mental health and psychosocial supports are essential components of the comprehensive package of care

[40] WHO. (2001-a). Mental Health: New understanding, new hope. Geneva: WHO. http://www.who.int/whr/2001/en/whr01_en.pdf. Retrieved October, 7, 2010).

[41] Interagency Standing Committee. (2007). IASC guidelines on mental health and psychosocial support in emergency settings. Geneva: IASC. http://mhpss.net/iasc-guidelines-on-mental-health-and-psychosocial-support-in-emergency-settings/.

and aim to protect or promote psychosocial well-being and/or prevent or treat mental disorders among survivors of sexual violence.

- **Protection from sexual exploitation and abuse (PSEA) –** A term used by the UN and NGO community to refer to measures taken to protect vulnerable people from sexual exploitation and abuse by UN/NGO staff and associated personnel.

- **Rape –** Physically forced or otherwise coerced penetration – even if slight – of the vagina, anus, or mouth with a penis or other body part. It also includes penetration of the vagina or anus with an object. Rape includes marital rape and anal rape/sodomy. The attempt to do so is known as attempted rape. Rape of a person by two or more perpetrators is known as gang rape.

- **Sexual abuse –** An actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.

- **Sexual assault –** Any form of non-consensual sexual contact that does not result in or include penetration. Examples include: attempted rape, as well as unwanted kissing, fondling, or touching of genitalia and buttocks.

- **Sexual exploitation –** Any actual or attempted abuse of a position of vulnerability, differential power, or trust for sexual purposes, including but not limited to profiting monetarily, socially or politically from the sexual exploitation of another.

- **Sexual harassment –** Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature.

- **Survivor or victim –** The person who is, or has been, sexually exploited or abused. The term 'survivor' implies strength, resilience, and the capacity to survive. This document mostly uses the term 'victim' to mean the victim of the alleged perpetrator's actions. However this is not intended to negate that person's dignity and agency as an individual.

- **Sexual violence –** Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic a person's sexuality, using coercion, threats of harm, or physical force, by any person, regardless of relationship to the victim, in any setting, including but not limited to home and work. This is an umbrella term that takes many forms, including rape, sexual slavery and/or trafficking, sexual harassment, sexual exploitation and/or abuse, and forced abortion.

- **Trafficking for the purposes of sexual exploitation –** The recruitment, transportation, transfer, harboring, or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power, of a position of vulnerability, or of the giving or receiving of payments or benefits to achieve the agreement of a person having control over another person, for the purposes of sexual exploitation.

- **Transgender –** Transgender is the state of one's gender identity not matching one's sex assigned at birth based on physical or genetic traits. A transgender identity does not imply any specific form

of sexual orientation, and transgender people may identify as heterosexual, homosexual, bisexual, pansexual, polysexual, asexual, or any other sexual orientation.[42]

- **Trauma –** Traumatic experiences usually accompany a serious threat or harm to an individual's life or well-being and/or a serious threat or harm to the life or well-being of the individual's child, spouse, relative or close friend. When people experience a disturbance to their basic psychological needs (safety, trust, independence, power, intimacy and esteem), they experience psychological trauma.[43]

- **Women's Rights Organization (WROs) –** At VOICE we define WROs as feminist groups, collectives, formal organizations, informal groups, and registered and unregistered organizations that are committed to gender equality and explicitly work towards the well-being of women and gender minorities. While not all groups or organizations may want to identify as feminist for a plethora of reasons, we acknowledge organizations that uphold and embody feminist values and principles in their work and their aspirations. These organizations are working on and are led by people from various intersecting identities LGBTQIA+, migrants, and refugees for example).

[42] Layton, Lynne. (1996). In Defense of Gender Ambiguity: Jessica Benjamin. Gender & Psychoanalysis. I. Pp. 27–43. USI LGBT Campaign - Transgender Campaign.

[43] Herman, J. Trauma and Recovery: The Aftermath of Violence from Domestic Abuse to Political Terror, Basic Books, New York, 1992, p. 7.

AMPLIFYING WOMEN AND GIRLS IN CRISES
VOICE

HIAS
Welcome the stranger.
Protect the refugee.