

Movement and Integration Intentions of Ukrainian Refugees

March 2025 | Republic of Moldova

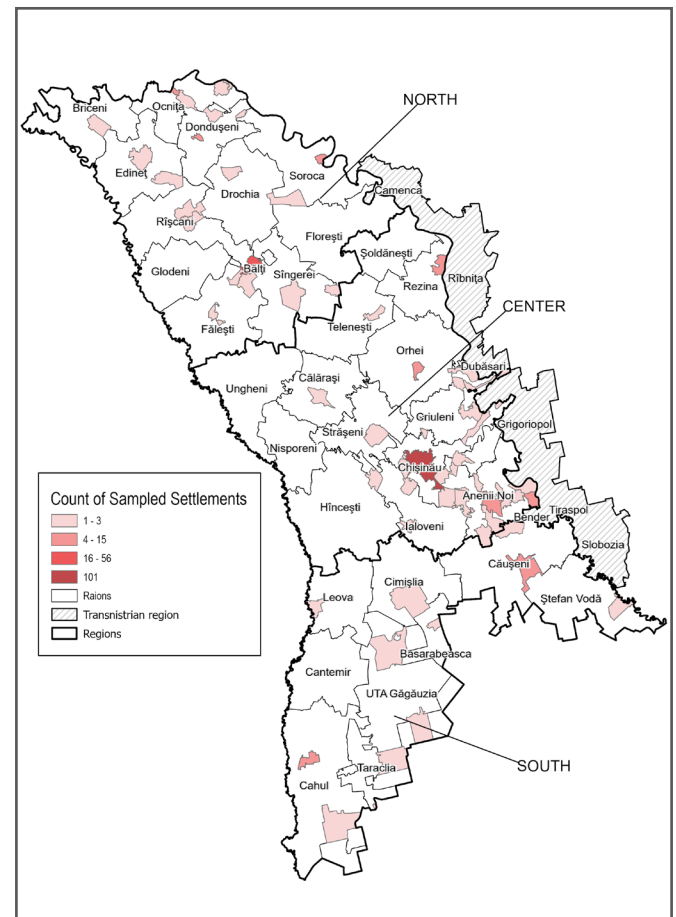
Context & Rationale

Since the onset of the conflict in Ukraine on 24 February 2022, Moldova has seen a significant influx of refugees, with authorities recording a total of 1,244,453 border crossings.¹ As the conflict enters its third year, the humanitarian response in Moldova has transitioned towards a durable-solutions approach, emphasizing long-term solutions that support the integration of refugees. However, longer-term response planning remains challenging due to limited information on the medium- to long-term movement intentions of refugees, as well as a lack of detailed data on the push and pull factors driving refugee movement.

The Intentions assessment seeks to provide a comprehensive understanding of the future plans of refugees from Ukraine in Moldova over the next 12 months. It identifies the factors that influence refugees' decision to stay in Moldova, explores their perceptions of Ukraine as a potential destination for return, and evaluates current refugee response policies and how they are likely to evolve in the next year. By providing up-to-date data on the long-term intentions of refugees, this approach supports evidence-based planning that promotes sustainable outcomes for refugees in Moldova.

It is important to note that data collection for this assessment took place prior to the reduction in humanitarian funding in January 2025 and before discussions began between Russia and Ukraine on a ceasefire in March 2025. Priorities and intentions may have shifted since these developments, but *they are not reflected in this assessment* due to the timing of data collection. Additionally, findings from this assessment should be considered indicative and should not be generalized to the entire population of refugees from Ukraine in Moldova.

Map 1: Geographic coverage of sample



Key Messages

- Nearly two-thirds of surveyed HHs (65%) reported having concrete plans to remain in Moldova in the year following data collection. Among HHs planning to stay, their primary concerns were access to longer-term provision of housing (70%), employment (46%), healthcare (38%), and education (31%).
- Romanian language proficiency did not appear to significantly influence HHs' perceptions of integration. Among HHs where all members had at least fair language proficiency, 56% felt integrated, compared to 59% of HHs where not all members were proficient.
- Among HHs with at least one member proficient in Romanian, 67% reported having at least one employed member. In contrast, only 46% of HHs with no members proficient in Romanian reported having any employed members.
- Employment appeared to have a notable effect on integration. Compared to HHs with no members employed, those with at least one member employed reported higher rates of living in long-term accommodation, a positive income-expenditures gap, and lower rates of humanitarian assistance as a primary income source.
- HHs in the North seemed to face greater challenges with integration compared to other regions, showing the highest rates of returning to Ukraine for healthcare (34%), the highest percentage of HH members (aged 2-18 years) attending online Ukrainian schools (42%), and a slightly lower median income than other regions.

Methodology Overview

The assessment applied a mixed-methods approach by conducting quantitative household (HH)-level surveys with refugees displaced from Ukraine to Moldova and qualitative key informant interviews (KIIs) with high-level representatives of the humanitarian response in Moldova.

For the quantitative component, REACH conducted phone surveys with 290 HHs from 1 to 12 November 2024. Due to the lack of data on the precise numbers and geographic dispersion of refugees in Moldova, it was not possible to randomly select respondents. The quantitative approach therefore implemented non-probabilistic, stratified purposive-sampling. Interviews were stratified by two regions: Chişinău and the amalgamation of the North, South, and Centre regions, to reflect the higher numbers of refugees in Chişinău. To diversify the sample, respondents were identified through an area-based search, recruitment via social media, and through humanitarian partner organizations.

To understand the current and future refugee response policies, REACH conducted 5 qualitative KIIs with UN agencies and international non-governmental organizations (NGOs) from 1 November to 13 December 2024. Key informants were sampled purposively based on their involvement in coordinating the refugee response and knowledge of national strategies and policies. REACH used a qualitative, semi-structured tool, with probes that allowed respondents to elaborate.

Limitations

Representativeness: The assessment employed purposive sampling. As a result, findings are *indicative* and *cannot be considered representative* of the entire population.

Data Collection Timing: Data collection was conducted prior to the reduction in global humanitarian funding in January 2025 and before the discussions of a ceasefire between Russia and Ukraine began in March 2025. While recent developments may have influenced the movement intentions of refugee HHs, these changes are not reflected in this situation overview due to the timing of data collection.

Qualitative Sample: The target for the qualitative survey was 8 to 10 interviews. Due to data collection time constraints and the limited availability of respondents, only 5 interviews were completed. Therefore some sectors may not be as well covered.

Data Redundancy: Although KIIs were selected from varying sectors, much of the information they provided overlapped and broadly addressed the questions. As a result, the qualitative analysis could not be conducted by sector and will instead presented in this situation overview as overarching conclusions drawn from all interviews.

For a more detailed overview of the methodology, please consult the assessment [Terms of Reference](#).

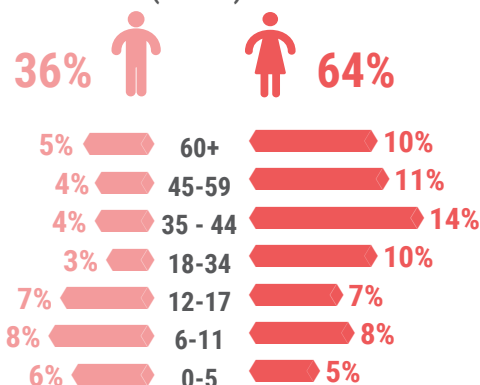
Demographics

Respondent profile

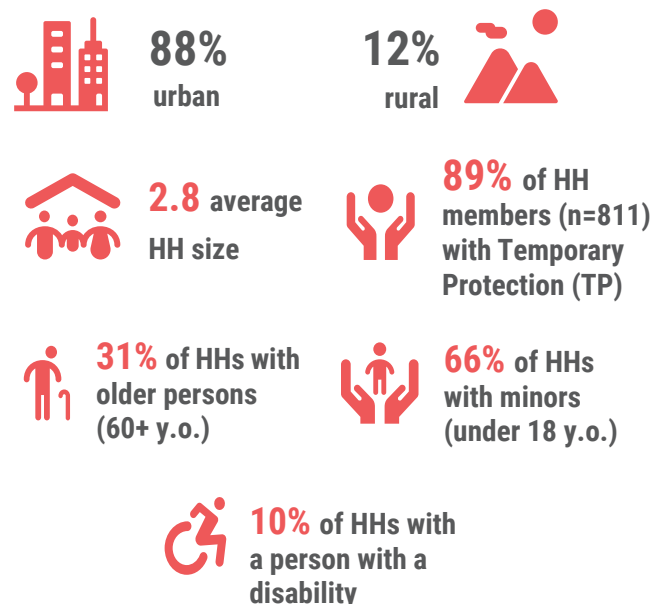


Household demographics

% HH members by age group and gender (n=811)



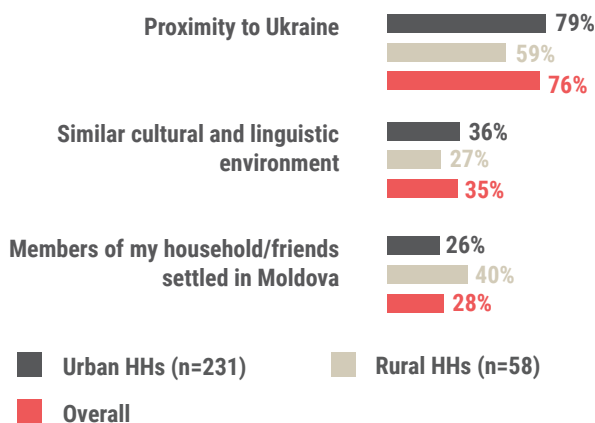
% HHs by type of locality of residence (n=290)



Displacement History

The large majority (90%) of surveyed HHs had been directly displaced from Ukraine to Moldova. HHs primarily chose to settle in Moldova due to its proximity to Ukraine (76%), its similar cultural and linguistic environment (35%), and because HH members or friends had already settled there (28%). Nearly two-thirds of surveyed HHs had been in Moldova since the outbreak of the conflict, with 63% reporting they had been in the country for 25-33 months.

% of HHs by top three most reported reasons for settling in Moldova (n=289)*



Movement between Moldova and Ukraine appeared to be pendular. Slightly more than half of HH members aged 18 years and older (n=484) had reportedly visited Ukraine post-displacement, either once (16%) or more than once (40%). Among those aged 18 years and older who visited (n=268), the most commonly reported reason was to visit relatives (45%). Notably, 26% of respondents indicated that members of their HH traveled to Ukraine to access healthcare. This trend was more pronounced among HH members from the North (34% of n=89) and HH members aged 60 years and above (40% of n=58). The Socio-Economic Insights Survey (SEIS) 2024 found a similar pattern, with 11% of surveyed respondents reporting travel to Ukraine to access healthcare.² The percentage of respondents traveling back to Ukraine for healthcare reasons suggests gaps in the perceived quality or availability of services in Moldova, particularly in the North and among older refugees, who may have more specialized needs.

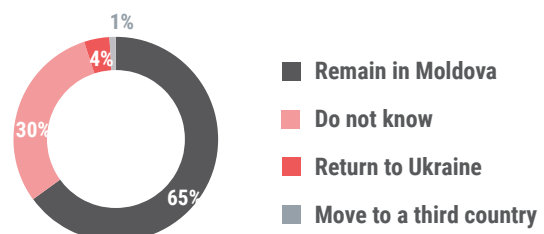
Movement Intentions

Most HHs expressed an intention to remain in Moldova, with nearly two-thirds (65%) reporting concrete plans to stay in the year following data collection. However, 30% of HHs remained uncertain about their movement plans at the time of data collection, with the ongoing conflict in Ukraine cited as the top reason (98% of n=78). The majority of HHs perceived the security situation in Ukraine as very unsafe (73%) or somewhat unsafe (22%), likely contributing to their uncertainty about returning in the

coming year. Despite the differing or uncertain movement plans, findings highlight that households prefer to remain or move together. Respondents indicated that the large majority of HH members aged above 18 years old (95% of n=194) had the same movement intentions as the rest of the household.

Among HHs with concrete plans in the coming year (n=212), 82% preferred to remain settled in their current location. Key reasons for this decision included satisfaction with their settlement in Moldova (56%) and better safety and security compared to Ukraine (47%). While many HHs remain uncertain about their future plans, the high proportion intending to stay and their preference to remain settled suggest that many refugees will likely remain in Moldova, underscoring the importance of incorporating them into the country's broader social and economic policies.

% of HHs by concrete plans to move within the year after data collection (n=290)



Integration

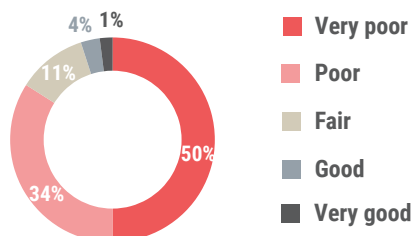
In response to the refugee crisis, Moldova implemented various policies and frameworks to support long-term integration. One approach focused on incorporating refugees into the national system through government programs, while another, established by the United Nations Sustainable Development Cooperation Framework (UNSDCF), was continuously adapted as UN agencies scaled up their presence and response efforts.³ Key informants also described that the Moldovan Government worked with the office of the Prime Minister to estimate the costs of integrating refugees into social services, education, and healthcare. Key informants also highlighted positive developments, such as restructuring the social work system to include refugees in case management and introducing a child protection system compatible with United Nations High Commissioner for Refugees (UNHCR) and United Nations Children's Fund (UNICEF) databases.

The most significant policy introduced by the Moldovan Government was Temporary Protection (TP), which serves as the main legal framework allowing refugees to stay in Moldova. TP grants refugees several rights, including access to employment, primary and emergency healthcare, access to subsidized medications and medical devices, education for refugee children, and other social assistance services.⁴ TP originally granted refugees the right to stay in Moldova until 1 March 2024 and has since been extended

annually, with the latest extension set to expire on 1 March 2026.⁵ Key informants noted that the uptake of TP has been high, due to government measures that streamlined the process of obtaining and regularizing this status. As of 17 February 2025, 88,122 refugees had pre-registered for TP status in Moldova, with 69,031 officially granted this status.⁶ To note that due to limitations identified with this method of monitoring the number of refugees in Moldova, including the inability to account for the border crossing of refugees with more than one passport, this figure is expected not to accurately reflect the total number of refugees from Ukraine currently in Moldova.

In addition to TP, key informants highlighted the importance of Romanian language courses in facilitating the integration of refugees in Moldova. While Russian is widely spoken in Moldova, the official language is Romanian. Language barriers were identified as a crucial challenge for refugee integration in Moldova by key informants, particularly for employment, where Romanian proficiency is often required. To address this, the Ministry of Education and Research (MER) formalized and approved Romanian language courses for adults which were offered through universities and included free spaces for refugees. A significant milestone was the inclusion of Ukrainian refugees in Moldova's national Romanian language training program, which had previously been designed for ethnic and linguistic minorities.

% of HHs members (aged 3 y.o. and above) by Romanian language proficiency (n=764)



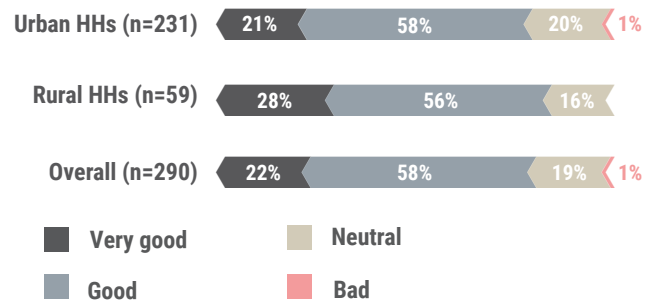
Despite these efforts, self-reported Romanian language proficiency was generally low. Among HH members aged 3 years and above (n=764), The large majority (84%) had poor or very poor proficiency. Only 11% of HH members were described as having fair proficiency. Proficiency progressively decreased with age, with younger HH members showing slightly higher levels of proficiency than older HH members, likely due to school attendance. Among HH members aged 6-11 years (n=132), 21% had 'fair' proficiency, while 19% of those aged 12-17 (n=107) were rated at the same level. Conversely, proficiency was lowest among HH members aged 60 years and older (n=117), with only 7% holding fair proficiency.

Social Cohesion

Most surveyed HHs reported having a positive relationship with the host community, with 22% describing their relationship as 'very good' and 58% as 'good.' While there were no significant differences between how HHs in the

urban and rural areas perceived the relationship between the two communities, nor related to their perceived integration, a larger share of HHs in rural areas (80% of n=59) reported being able to rely on the support of a trusted person in their community compared to those in urban areas (57% of n=231) suggesting stronger ties.

% of HHs by relationship between host and refugee communities²⁷



Among HHs planning to remain in Moldova in the coming year (n=199), 63% expressed an intention to integrate into the community. Of those intending to integrate (n=123), the most common plan was to learn Romanian (38%). The exception was in the North (27% of n=44), which is predominantly Russian-speaking and has the largest Russian-speaking population outside of the Transnistrian region.⁷ Additionally, HHs in rural areas (n=30) were less likely than those in urban areas (n=93) to express an intention to learn Romanian, with 20% of rural HHs and 41% of urban HHs reporting such plans. This could be related to the higher share of HHs in the rural area reportedly having family or friends in their place of settlement, and thus potentially less perceived need for Romanian proficiency, as well as to limited access to language courses and integration programs compared to urban settings. Other long-term steps towards integration included looking for employment (36%), enrolling children in school in Moldova (18%), and joining community activities (17%).

Low levels of Romanian language proficiency did not appear to affect surveyed HHs perceptions of social cohesion or integration. There was little difference between HHs where all members (aged 3 years and above) had Romanian proficiency (n=87) and HHs where not all members did (n=203) in terms of perceived integration. Among HHs where all members had at least fair language proficiency, 13% felt very integrated, compared to 8% of other HHs where not all members were proficient. Additionally, 56% of HHs where all members had at least fair language proficiency reported feeling integrated, which was slightly lower than the 59% of HHs where not all members were proficient. This suggests that factors other than language proficiency may be more influential in shaping refugees' sense of integration in Moldova.

The limited impact of language proficiency on integration may be due to the widespread use of Russian within the host community. According to the preliminary Population and Housing Census 2024, 15% of respondents reported

speaking Russian regularly, and 11% considered it their native language.⁸ Additionally, Russian is the primary language in the autonomous region of Gagauzia in the South, including in the school system.⁹ While Romanian is the official language of Moldova and often required for employment, Russian remains widely used in daily and social interactions, potentially contributing to a stronger sense of integration. As a result, the impact of Romanian proficiency on integration and their feelings of inclusion may be perceived differently by key informants compared to refugees' actual experiences.

Harassment was also reported to be low. Nearly all HH members (99.6%) reportedly did not experience physical violence or harm in the year before data collection. Men and women reported similar rates of not experiencing physical violence or harm, with 99% of men (n=294) and 100% of women (n=517) indicating they had not experienced such incidents.

Factors influencing movement intentions

Around half of the HHs planning on remaining in Moldova for the year following data collection (n=199) described being satisfied with their place of settlement (56%) and safety and security (47%) as the primary reasons for choosing to remain in the country. Access to accommodation and minors being enrolled in education were also reported by around a third of these HHs (32% and 27% respectively). When asked about their main concerns related to remaining in their location of settlement, access to long-term accommodation, to employment and to basic services emerged as the most important factors influencing their stay, mirroring previous findings.¹⁰

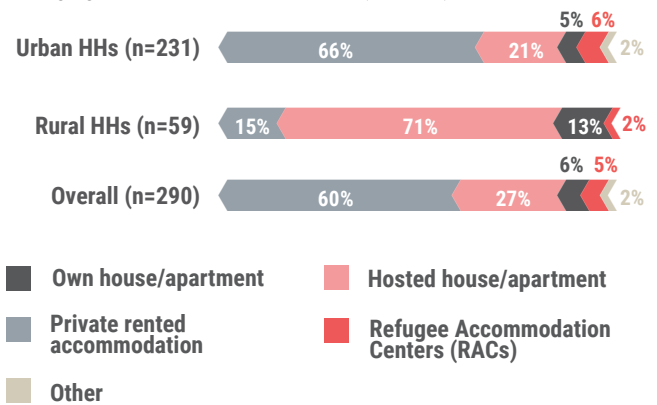
% of HHs by priority concerns to remain in current location (n=199)*



Accommodation

Accommodation emerged as among the most significant factors influencing refugees' movement plans in the year following data collection. Among HHs intending to remain in Moldova (n=199), 70% identified access to longer-term or permanent housing as their primary concern. Although 66% of HHs reported living in long-term accommodation, including private rented accommodation (60%) and homeownership (6%), 34% were still living in temporary housing. The most common temporary housing arrangements included living in another person's accommodation without hosts (14%), residing with members of the host community (12%), and staying in Refugee Accommodation Centers (RACs) (5%).

% HHs by type of accommodation (n=290)



Surveyed HHs showed a need for more permanent, long-term housing in various ways. For example, many HHs lacked written documentation for their housing. Among those living in hosted or privately rented accommodation (n=249), only 45% reported holding a written and signed contract, while 22% had a verbal agreement but could not obtain a signed contract if needed, and 19% had no agreement at all. The absence of formal contracts seemed to be a common arrangement, as the SEIS 2024 also found that just 36% of surveyed HHs held a formal, written agreement for their accommodation. The lack of formal housing agreements could be attributed to many HHs in hosted accommodations staying with people they knew. Among HHs living in hosted accommodation (n=99), 42% reported living with friends or acquaintances and 30% with family or relatives. These arrangements may not require a formal contract. On the other hand, HHs residing with hosts they did not know prior to their stay (28%) may be more vulnerable to changes in host support, especially if they are relying on verbal or informal agreements.

Slightly more than half of HHs (59%) anticipated being able to stay in their accommodation long-term, either indefinitely (37%) or for one year or longer (22%). However, 20% of HHs reported not knowing how much longer they could remain in their current accommodation, highlighting underlying vulnerabilities in housing security and a need for longer-term housing solutions. HHs in urban areas expressed higher levels of uncertainty (21%) compared to rural HHs (10%), possibly due to the higher cost of living in urban areas.

HHs living in hosted accommodation generally believed they could stay in their accommodation long-term. Among HHs living with hosts (n=48), 57% anticipated they could stay indefinitely and 24% for one year or longer. HHs living in another person's house without hosts (n=52) reported the highest rates of expecting to stay indefinitely (65%), likely because many of these HHs reported staying with people they know. Although these HHs anticipate they can remain in their accommodation long-term, they may still prefer a more permanent housing solution, such as private accommodation. This is reflected by how 70% of HHs reported access to more permanent and long-term housing as their top concern.

Housing affordability emerged as a key factor affecting access to more long-term or permanent housing. When asked about the challenges they faced in securing their current accommodation, 41% of HHs cited the cost of accommodation as a barrier. This concern was particularly pronounced in Chisinau (n=106), where 50% of HHs identified cost as a challenge.

Findings suggest a relationship between a HH's employment status and their accommodation arrangement. Among HHs with at least one employed member (n=131), 75% lived in private rented accommodation, compared to just 46% of HHs without employed members (n=159). In contrast, HHs without employed members were more likely to be hosted by members of the community. 20% of HHs without employed members resided with members of the host community, compared to only 4% of HHs with at least one member employed. Increasing access to employment opportunities and addressing cost of accommodation barriers could help refugee HHs secure more long-term, permanent housing and become less reliant on host support.

Employment

According to the UNHCR concept of self-reliance, access to employment can help enable refugees to achieve financial independence and reduce their reliance on external aid over time.¹¹ Among HHs intending to remain in Moldova (n=199), 46% cited employment as a primary concern for remaining in their current location. In order to work legally in Moldova, Ukrainian refugees must either be beneficiaries of TP or have another legal status that grants them the right to work.¹² Although TP status grants refugees full access to formal employment, key informants have noted the slow pace of employment, with only a small number officially employed. Among HH members aged 16 years and older (n=516), only 16% reported being employed full-time. HHs with no members with vulnerabilities¹³ present (n=72) were more likely to have at least one member employed (56%) compared to HHs with at least one member with vulnerabilities present (45% of n=218).

% of HHs with at least one member with any form of employment (n=290)



Additionally, men were more likely to be employed full-time, with 26% of men aged 16 years and above (n=143) employed full-time compared to just 12% of women aged 16 years and above (n=373). According to a labor

market assessment by HIAS Moldova, female refugees face distinct challenges in accessing employment, including balancing work with family responsibilities, overcoming language barriers, and navigating a new cultural and professional environment.¹⁴ Similarly, the SEIS 2024 found that female HH members (n=182) faced higher barriers to employment, with 66% citing caregiving responsibilities as a challenge compared to just 20% of men (n=80).

Among HH members aged 16 years and older (n=262) who were part of the workforce (excluding students, caregivers, and retirees), 51% reported no barriers to finding a job. Among the barriers reported, HH members cited a lack of proficiency in Romanian (25%), high competition and limited job availability (11%) and the availability of only low-skilled, socially degrading, or low-paying jobs (11%). Key informants corroborated these findings, reporting language barriers and limited job opportunities as reasons for the low level of employment among refugees. Additionally, they mentioned that employers were often reluctant to hire refugees due to the unpredictability of their stay.

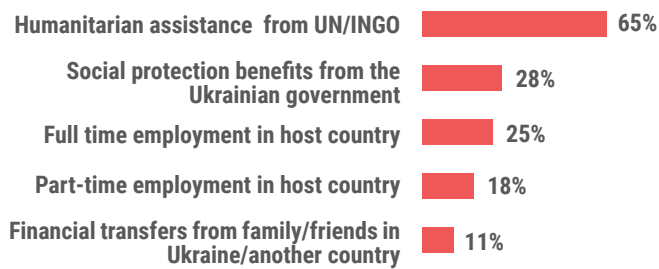
Russian can be used in daily or social interactions, and according to key informants, refugees can work with Russian language skills in some regions. However, Romanian is often required for securing employment in Moldova. Proficiency in Romanian had a noticeable impact on a HH's employment status. Among HHs with at least one member with 'good' Romanian language skills (n=29), 67% reported having at least one employed member. In contrast, only 46% of HHs with no members proficient in Romanian (n=261) reported having any employed members.

Both surveyed HHs and key informants highlighted the limited availability of suitable job opportunities as a barrier to employment. While many refugees seeking employment in Moldova are highly educated, the Moldovan labor market primarily offers jobs that are more suited to manual or unskilled labor.¹⁵ Among HH members aged 18 years and older (n=484), the majority had completed secondary education, vocational training, or higher education (e.g., Bachelor's degree, Master's degree, or Doctoral degree), with only 0.2% reporting no formal education. This mismatch between education levels and the types of jobs available likely contributes to the perception of a lack of suitable employment opportunities.

Income and Livelihoods

Surveyed HHs appeared to experience financial vulnerability and challenges integrating economically in Moldova. Over half of the respondents (65%) reported relying on humanitarian assistance from the UN or international non-governmental organizations (NGOs) as one of their main sources of income. Around a third (28%) also noted social protection benefits from the Ukrainian government as a source of income.

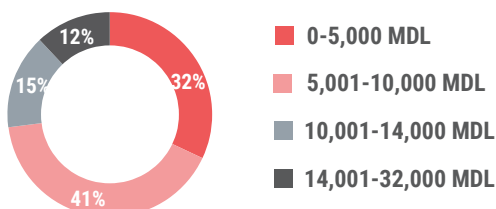
% of HHs by main sources of income in the 30 days prior to data collection (n=290)*



The proportion of HHs receiving humanitarian assistance suggests that many rely on external support as their primary income source. While humanitarian assistance can address short-term needs, it is not a sustainable long-term income source and can leave HHs more susceptible to changes in financial support, particularly if such programs are scaled back or terminated. Consistent with the UNHCR concept of self-reliance, key informants noted that the focus of the response has shifted to helping refugees become self-sufficient through employment and income-generating activities, ultimately reducing dependency on aid.¹⁶ This shift is reflected in the gradual reduction of humanitarian cash assistance programs, which heightens the risk for HHs that rely on this form of support. As the humanitarian response transitions to implementing durable solutions, prioritizing a transition to more sustainable sources of income will be instrumental to supporting refugees' long-term integration in Moldova.

Among HHs that reported income in the 30 days prior to data collection (n=202), the median HH income was 7,000 Moldovan lei (MDL). However, average HH expenditures during the same period were 9,000 MDL, exceeding the median income by 2,000 MDL. This discrepancy suggests that, overall, HHs face a negative income-expenditure gap. This was further supported by the survey data, where 27% of surveyed HHs (n=152) reported expenses exceeding their income, while 61% reported expenses equal to their income. These HHs are more likely to struggle with unforeseen expenses and limit their ability to accumulate savings in Moldova.

% of HHs by reported income in the last 30 days before data collection, in ranges (n=202)



Financial strain was more pronounced among certain subgroups. HHs in the North experienced slightly higher rates of financial hardship compared to other regions. In the 30 days prior to data collection, the North reported the lowest median income at 6,500 MDL, which fell 500 MDL below the national average. Additionally, 39% of HHs in the North (n=52) reported expenses exceeding their

income, 12 percentage points higher than the national average. HHs with older members aged 60 years and above exhibited higher rates of financial hardship as well. HHs without older members (n=107) were more likely to accumulate savings, with 14% reporting expenses lower than income, compared to only 6% of HHs with older members (n=45). HHs with older members may face increased financial vulnerability, as older members are more likely to be retired.

Income vulnerability was further reflected in households' (HHs) ability to meet their basic needs, including housing, food, basic commodities, school, and medical expenses, in the 3 months prior to data collection. Over half of households (53%) reported that their income was insufficient to meet their basic needs, indicating that HH income is low relative to the cost of living in Moldova and inadequate to cover essential expenses.

Employment had a moderate effect on HHs' economic security and socioeconomic integration in several ways. First, HHs with at least one employed member and HHs without employed members reported different main income sources. Among HHs with no employed members (n=159), the most commonly reported income source was humanitarian assistance (71%), compared to just 58% of HHs with at least one member employed (n=131). In contrast, 51% of HHs with at least member employed received their primary income from full-time employment compared to just 0.4% of HHs with no members employed. This suggests that HHs with employed members are more likely to have long-term, sustainable income sources and be more socioeconomically integrated in Moldova. It is possible that HHs with no members employed primarily consisted of retired members who are eligible for social protection benefits, and therefore may not be seeking full-time employment. Nonetheless, the differences in income sources between these two HH types suggest that employment plays a key role in fostering socioeconomic inclusion.

HHs with at least one employed member also exhibited slightly higher rates of economic security. 17% of these HHs (n=73) reported having expenses lower than their income, compared to just 7% of HHs with no employed members (n=79), suggesting that HHs with at least one employed member are more likely to accumulate savings and withstand economic shocks. Employment also had a modest impact on HHs' perception of their ability to meet their basic needs in the 3 months before data collection. Among HHs with no members employed (n=159), 57% reported being unable to meet their basic needs at all, 10 percentage points higher than HHs with at least one member employed (47% of n=131). These findings underscore the role of employment in reducing HHs' economic insecurity and fostering their economic integration into the host country.

Healthcare

Access to healthcare was considered the third most

important concern influencing HHs movement intentions in the year following data collection. Among HHs intending to remain in Moldova, 38% identified access to healthcare as a primary concern. Refugees with TP status have access to a range of medical services covered by the national health insurance system. These services include free emergency medical assistance, primary medical assistance (including compensated medicines and medical devices), specialized outpatient medical assistance, and free medical examinations for public health reasons.¹⁷ Beneficiaries of TP are also eligible to register with a family doctor in Moldova. However, only refugees who are formally employed, hold Moldovan citizenship, or have permanent or temporary residence status have the right to access compulsory health insurance.¹⁸

Over half of HH members (56% of n=811) reportedly needed to access healthcare services for a health-related issue in the 3 months prior to data collection, with those aged 60 years and older (n=117) showing the highest level of need at 77%. Overall, access to healthcare was reported to be high. Among HH members who needed healthcare in the 3 months prior to data collection (n=437), 97% were able to access services. Access was consistent across rural areas (99% of n=82) and urban areas (97% of n=355), as well as across HHs with vulnerable members (97% of n=342) and those without vulnerable members (95% of n=95). Additionally, barriers to healthcare access were reportedly low, with 81% of HH members who accessed healthcare (n=421) facing no barriers. The SEIS 2024 also found that 86% of HH members who needed healthcare services were able to access them, suggesting healthcare is largely accessible to refugees in Moldova.

Although healthcare access remains high, challenges persist regarding the types of services available to refugees and concerns about their long-term access to healthcare in Moldova. Key informants emphasized that regardless of TP status, refugees faced challenges accessing healthcare services under Moldova's refugee crisis response plan. Although TP beneficiaries are eligible for certain free medical services, 48% of HH members who accessed healthcare (n=421) reported needing to pay for services. This discrepancy may be due to limitations in the TP health benefits package, which does not cover all healthcare needs. Key informants confirmed that specialized care is not covered under TP, with the government only covering basic medications. More serious treatments are often inaccessible, making healthcare access problematic for those needing specialized or advanced medical services. As a result, HH members requiring specialized care may need to pay out-of-pocket, which could help explain why 26% of HH members reported returning to Ukraine for healthcare.

Gaps in healthcare coverage and high levels of healthcare needs underscore the importance of integrating refugees into the Moldovan social protection system and expanding access to specialized services. Since TP is a temporary legal framework, and considering the prevalence of healthcare needs, refugees could face longer-term

vulnerabilities accessing healthcare services, especially if TP is discontinued.

Education

Education was highlighted as a primary concern among both surveyed HHs and key informants. Among HHs intending to remain in Moldova (n=199), 31% identified education as a top concern for remaining in their current location.

According to key informants, access to education for refugee children is a priority in the response and has been facilitated through various initiatives. School enrollment has been supported by policies and orders from the Ministry of Education and Research (MER), which removed administrative barriers that previously hindered refugee children's access to Moldovan schools. On 4 September 2023, MER issued an instruction announcing that a Ukrainian child's legal status does not hinder their access to education in Moldova. As a result, all Ukrainian children became eligible to enroll in Moldovan schools, regardless of whether they or their parents held TP status.¹⁹ Key informants noted that an order eliminating the requirement for official school records, which many refugee children lacked, was particularly impactful in simplifying enrollment procedures and increasing access to Moldovan schools. Additionally, the Moldovan government, in cooperation with UNICEF, focused on providing options for both in-person schooling and online learning, with the flexibility to accommodate the needs of displaced families. Schools provided computer labs where children could continue studying their home country's curriculum online, ensuring a smoother transition into the Moldovan education system.

Despite efforts to simplify the enrollment process, key informants reported that enrollment remains low. According to Temporary Protection (TP) data, there are an estimated 16,000 refugee children in Moldova. Enrollment data has shown year-over-year increases, with figures doubling between 2022 and 2024. In November 2022, MER reported that 1,158 children were enrolled in Moldovan kindergartens, primary schools, and secondary schools.²⁰ By December 2023, this number had risen to 2,237 and by December 2024, to 3,314.^{21, 22}

While the enrollment figures of Ukrainian refugee children have repeatedly been highlighted as low,²³ this was based on TP figures which may have overestimated the total refugee population in Moldova, due to frequent refugee movement between Ukraine and Moldova, and from Moldova to other countries. The 2024 Refugee Population Profiling (RPoP) Assessment estimated that as of May/June 2024, 32,188 refugees from Ukraine were living in Moldova, including children.²⁴ Through triangulation of official databases and KIIs, the assessment also found that the number of refugees is often overrepresented in official statistics. As a result, the official number of 16,000 refugee children is likely an overestimate, suggesting that the actual enrollment rate may be significantly higher than



initially thought.

Data from surveyed HHs also suggest that more refugee children are enrolled in Moldovan schools than previously thought, although some children remain unenrolled. Among HH members attending primary or secondary school (n=273), 35% were attending Moldovan schools in-person, 23% were attending Ukrainian schools online, and 11% were participating in hybrid in-person and online classes. In-person school attendance varied by age group, with online learning being more prevalent among older refugee children. Children aged 6-11 years were more likely to attend in-person schools (66% of n=113) compared to children aged 12-17 years (31% of n=77). Conversely, children aged 12-17 years were more likely to attend Ukrainian schools online, with 52% enrolled in online Ukrainian education compared to 17% of children aged 6-11 years. Key informants corroborated these findings, noting that families preferred to keep their children enrolled in Ukrainian online schools, especially for children in secondary education (ages 12-17 years). This preference was driven by familiarity with the Ukrainian system and its ease of navigation, as the transition to a new system was perceived as more challenging for older children.

To encourage in-person enrollment, key informants noted that the Taras Shevchenko School, a Russian-speaking institution offering Ukrainian language classes, had adapted parts of the Moldovan curriculum into Ukrainian. This initiative had led to a significant increase in enrollment, with approximately 150 additional children joining. However, many children still preferred online learning to in-person classes, as online opportunities allowed them to continue their Ukrainian curriculum. This preference contributed to low enrollment, particularly in secondary education. Children aged 12-17 years had higher rates of deciding not to apply (26%) compared to children aged 0-5 years (13%) and those aged 6-11 years (6%).

Although some children remain unenrolled in Moldovan school, key informants highlighted that facilitating refugee children's access to education has generally been successful. Initiatives aimed at reducing barriers to education also seemed to be recognized by surveyed HHs, with two-thirds (67%) reporting no barriers to accessing Moldovan schooling. Despite low reported barriers, challenges persist, with key informants citing language barriers, a preference for online learning options, and limited opportunities for refugee children with disabilities as ongoing issues.

Language difficulties, particularly low levels of Romanian proficiency, were identified as a significant barrier, especially for children aiming to enroll in Romanian-speaking schools. Both parents and educators noted the lack of intensive Romanian courses and the complexity of adapting to the local curriculum as obstacles. However, this issue is likely only relevant for children aiming to enroll in Romanian-speaking schools, as language barriers were reported by just 4% of HH members aged 2-18 years

(n=324). Among HH members aged 2-18 years attending in-person schools or participating in a hybrid model of instruction (n=137), 82% attended schools where Russian was the primary language. As a result, surveyed HHs may not perceive proficiency in Romanian as a major barrier to accessing education in Moldova, given the availability of Russian-speaking schools.

Findings suggest a modest increase in the number of children attending Moldovan schools in-person during the 2025-2026 school year. Among HH members aged 2-18 years who were not enrolled in in-person Moldovan schools (n=59), respondents indicated that 23% intended to begin attending Moldovan schools in-person, while 51% intended to continue attending online Ukrainian schools in autumn 2025. The anticipated enrollment rate in Ukrainian schools represents a slight decrease from the SEIS 2024 findings, where among children aged 3-18 years learning remotely or online in the 2023-2024 school year, 56% would reportedly continue attending Ukrainian schools. These trends suggest that while enrollment in Moldovan schools is gradually increasing, enrollment in online Ukrainian schools will persist in the 2025-2026 academic year. Given the low reported barriers to accessing Moldovan schooling, continued enrollment in Ukrainian schools is likely driven by family preference rather than policy-related obstacles.

Future policies

Key informants noted that many refugees, especially those from eastern Ukraine, were expected to remain in Moldova even if the war ends. As a result, they emphasized the urgent need for policies that support the long-term integration of refugees in Moldova. This is consistent with the UNHCR concept of self-reliance, which refers to refugees' ability to meet their basic needs through their own efforts, resources, and capacities, reducing dependency on external humanitarian aid.²⁵ Promoting self-reliance involves providing refugees with the tools, opportunities, and support needed to progressively become more independent. By strengthening existing social structures, refugees can be given the tools to progressively become more self-reliant, paving the way for durable solutions.

The 2025-2026 Refugee Response Plan (RRP) outlines a continued shift from short-term aid to long-term solutions, with a focus on improving TP policies, expanding national protection systems, and advocating for the inclusion of refugees in state services. While involvement from international organizations remains crucial, there is also a planned transition towards government-led coordination structures.

Uncertainty remains about the future of TP in Moldova. TP originally granted refugees the right to stay in Moldova until 1 March 2024 and has since been extended annually, with the latest extension set to expire on 1 March 2026. Key informants viewed indefinite extensions as unsustainable and stressed the importance of preparing



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for long-term solutions to allow refugees to remain in the country. Some key informants suggested that policymakers consider pathways to more permanent legal statuses, such as humanitarian protection or eventual naturalization, to provide greater stability for refugees who planned to stay in Moldova long-term.

In addition to legal status, key informants noted that future policies will focus on strengthening the education and social protection systems as a means of integrating refugees. Key informants emphasized that the long-term goal is to incorporate refugees into national social programs as humanitarian assistance, such as direct cash support, is gradually phased out. This shift reflects the government's increased commitment to bolstering its own capacity to support both refugees and vulnerable Moldovans, with an emphasis on expanding access to services and benefits. The design of assistance programs for the next two years aimed to align with the country's national development plans, ensuring that refugee inclusion remained a core element of Moldova's broader social and economic strategy.

According to key informants, strengthening the education system remains a top priority, in order to build resilience to future shocks. A key measure in this effort is the implementation of an Educational Roadmap, developed by UNICEF in collaboration with MER, which aims to fully integrate refugee children into Moldova's education system by 2026. The roadmap includes a detailed costing exercise, covering both direct enrollment costs and additional support for language classes, psychosocial services, and catch-up programs. Key informants saw the roadmap as essential for improving Moldova's education system and ensuring it could absorb future refugee influxes.

Key informants also noted that reforming Moldova's social protection system is a priority for enacting future policies. In particular, key informants described the Restart Program as a pivotal initiative for fully integrating refugees and vulnerable Moldovans into existing support mechanisms. Through this program, the Ministry of Labour and Social Protection (MLSP) aims to establish 9 territorial social assistance agencies, increase access to social services for the vulnerable population by 35% annually, guarantee state funding for an extended minimum package of social services with national coverage, and ensure that at least 70% of social services meet minimum quality standards.²⁶ The Restart Program aims to not only address immediate needs but also to create a sustainable framework for the future. One key informant expressed that the program's success could set a precedent for refugee integration in Moldova, potentially becoming a model for harmonizing social support for both refugees and Moldovan citizens.

In addition to focus on improving integration of refugees, the transition towards durable solutions would be to promote self-reliance, or providing refugees with the tools, opportunities, and support they need to become economically, socially, and psychologically independent without relying primarily on external humanitarian aid.

Challenges to policy implementation

Key informants identified several challenges to implementing planned policies and frameworks. A key concern was political risks. One respondent noted that the upcoming 2025 parliamentary elections could lead to a change in leadership, potentially affecting the country's commitment to refugee integration. The ongoing conflict in Ukraine was also seen as a geopolitical risk, due to the uncertainty of its outcomes. The influx of refugees, driven by the Russian army's progress, has strained the government's social protection system, and a further increase in the number of refugees could exacerbate this pressure. Many key informants emphasized the need for contingency planning in response to a potentially worsening situation.

Another concern was financial constraints, due to the government's limited capacity to invest in large-scale projects, as well as declining EU funding and donor support. As the number of refugees decreases, available funding and resources for ongoing support have also decreased. The reduction in funding has led to the closure of international NGOs, with some organizations either leaving Moldova or scaling back their operations due to limited resources. Cash assistance programs, particularly from UNHCR and the International Organization for Migration (IOM), were scaled back, reducing the number of beneficiaries and leaving some vulnerable individuals without support. Additionally, many international organizations, such as the United Nations Development Program (UNDP) and the World Health Organization (WHO), began scaling down emergency programs and embedding refugee responses into long-term development strategies. Key informants raised the reduction in aid as a major concern, as refugees would face decreased support or lose access to services, potentially forcing them to seek alternative solutions.

Finally, key informants highlighted capacity challenges in Moldova's ability to address refugee needs. They noted that gaps in financial and human resources would hinder the government's ability to support refugees, especially as the demand for services grows. Key informants pointed to limited institutional capacities, particularly in sectors like social housing and infrastructure, where responsibilities overlapped between ministries without sufficient resources. Additionally, local plans were reported to face coordination issues due to the autonomy of local governments in designing their policies. Respondents emphasized the need for a clear path for integrating more people and expanding existing systems, noting the push from international communities and local actors' willingness to build the integration process.



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Endnotes

* Multiple answer options could be selected.

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² REACH Moldova, [Socio-Economic Insights Survey 2024 Situation Overview](#), accessed on 26 February 2025.

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¹⁰ IMPACT Initiatives, [Back, but not necessarily home: refugee experiences upon returning to Ukraine and becoming IDPs](#), accessed on 21 March 2025.

¹¹ UNHCR, [Handbook for Self-Reliance](#), accessed on 26 March 2025.

¹² UNHCR, [Temporary Protection Update No. 3](#), accessed on 7 March 2025.

¹³ Vulnerabilities include chronic illness, disability level 3 and above in the Washing Group Short Set of questions, or pregnant or lactating.

¹⁴ HIAS Moldova, [Labor Market Assessment for Refugees and Asylum Seekers in the Republic of Moldova](#), accessed on 7 March, 2025.

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²⁴ REACH Moldova, [Refugee Population Profiling Assessment 2024. Refugee Estimates and Trends Database](#), accessed on 3 March 2025.

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²⁶ Ministry of Labour and Social Protection (MLSP), [Ministry of Labour and Social Protection launched the reform of the social assistance system "RESTART"](#), accessed on 5 March 2025.

²⁷ 'Very bad' was also a possible answer option, but it was not selected by any respondents.

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REACH Initiative facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. The methodologies used by REACH include primary data collection and in-depth analysis, and all activities are conducted through inter-agency aid coordination mechanisms. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT).



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