## PROTECTION NEEDS OF CHILDREN, **ADOLESCENTS AND THEIR CAREGIVERS DISPLACED FROM UKRAINE TO ROMANIA**

### **JUNE 2023**

### **ABOUT**

As of May 2023, the war in Ukraine which escalated on 24 February 2022 has displaced more than 8.2 million people out of Ukraine across Europe. Many of them settled in neighbouring countries, including Romania. Most of the refugees\*, about 85% as of early May 20232, are women and children. Humanitarian and government actors require more robust information on the protection needs and risks that families with children displaced from Ukraine face in Romania. There is a lack of evidence, particularly from children themselves. IMPACT Initiatives, in partnership with Save the Children International (SCI), conducted a mixed-method child protection needs assessment in Romania between November 2022 and April 2023. This included child consultations, focus group discussions (FGDs) with caregivers and host community members, key informant interviews (KIIs) with service providers in relevant sectors, as well as a two-round phone survey with caregivers. The research tools were developed together with SCI. The project is funded by Global Affairs Canada, the Swiss Agency for Development and Cooperation, and SCI.

### **KEY FINDINGS**

- → The most reported well-being and safety risks for Ukrainian refugee children in Romania were the language barrier when interacting with the host community, as well as psychosocial issues.
- → Children highlighted family and friends as their most trusted **protective factors**.
- → Romanian institutions, especially the police and social services, were other protective factors frequently mentioned by both children and caregivers.
- → Respondents stressed the **need** for better access to health services for refugee children, especially by improving access to general practitioners and by reducing the cost and language barriers.
- → Other priority needs reported by children and service providers were improved access to in-person education and extracurricular activities.

\*The term "refugee" is used generically, to refer to all persons who were displaced abroad from Ukraine because of the war since 2022.











### **METHODOLOGY**

Qualitative data was collected in Bucharest, Galati and Suceava between December 2022 and February 2023. Participants were purposively sampled. In total, IMPACT conducted 20 consultations with 115 children and adolescents at child-friendly spaces provided by Save the Children Romania (Salvati Copiii) and partners. The groups were separated by age (8-11, 12-14, 15-17 years) and gender (female, male). Moreover, nine gender-separated FGDs with 54 caregivers and three FGDs with 20 host community members were organised. Finally, IMPACT conducted 16 KIIs with government, the United Nations (UN) and non-government representatives from child protection (CP), healthcare, and education sectors.

This was complemented by quantitative CP data from Romania collected as part of a monthly regional, longitudinal phone survey with several thousand refugees from Ukraine residing in Europe. Sampling was done in partnership with the UN Refugee Agency (UNHCR) at border crossings, transit sites, and reception centres in Poland, Slovakia, Hungary, Romania, and Moldova. Respondents were also sampled through an invitation via social media. The first survey round was conducted with 79 child caregivers in Romania between November and December 2022, and the second round was conducted with 93 caregivers between March and April 2023.

Given the limited sample and purposive sampling method, findings from this study are not generalisable but indicative of the situation of displaced Ukrainian children and child caregivers in Romania. For more details on the methodology, please contact <u>ukraine</u>. refugee-survey@impact-initiatives.org.

### CONTEXT

As of late May 2023, 94,179 Ukrainians were recorded in Romania,<sup>3</sup> and since the beginning of the full-scale war in February 2022, the country granted Temporary Protection (TP) to 133,975 people fleeing Ukraine.<sup>4</sup> Children constituted 33% and women 42% of people displaced from Ukraine that were granted TP in Romania. This also included 1,328 unaccompanied and separated children. Under TP, refugees were entitled to a residence permit, access to the labour market, access to a bank account, housing, medical care, and access to state education for minors.

On 27 February 2022, the Romanian government adopted the 50/20 programme, which aims to ensure the provision of accommodation and food to the refugees with TP, by facilitating the payment of 50 RON\* per person per day for accommodation and 20 RON\* per person per day for food through Romanian citizens hosting refugees. The programme was modified starting 1 May 2023, reducing the aid in two phases. Until the end of 2023, families (not households) larger than one person will be entitled to 2,000 RON\* monthly for accommodation, while single-person households will receive 750 RON\* monthly. Food allowance amounting to 600 RON\* per person per month will be given only for the first consecutive four months.5

Most refugees from Ukraine resided in Bucharest, Maramures, Constanta, Galati and Suceava.<sup>6</sup> Most of them lived in private accommodation: as of May 2023, only 7,688 people resided at collective sites provided by the government, local authorities and civil society.<sup>7</sup>

\*As of 31 May, 1 RON was equivalent to 0.20 EUR and 0.21 USD.











### **SURVEY DEMOGRAPHICS**

This section reports on the demographic characteristics of the households included in the quantitative component of the assessment in Romania (i.e., caregiver survey). Survey respondents were overwhelmingly women, 95% in late 2022 and 92% in early 2023. The larger share of women reflects the gender distribution of Ukrainian refugees crossing the border to Romania (59% female vs. 41% male).8 The over-representation of women in the sample could be due to a larger share of female caregivers in the refugee population.

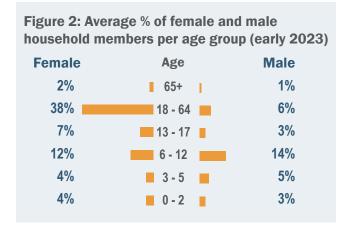
Most respondents were between 31 and 40 years old (61% end of 2022 / 54% early 2023), followed by 41 to 50 year-olds (18% / 23%) and 18 to 30 year-olds (14% / 16%). The survey respondents reported being well educated. The large majority of respondents had received university education (64% / 63%) and a third had completed technical or vocational training (30% / 29%).

The respondents interviewed in early 2023 had, on average, 3.9 members in their household, while the survey respondents in late 2022 reported an average household size of 3.6. This is higher than the 2.6 average in Ukraine before the invasion, as reported by the Ukrainian government, which could be because mostly families with children fled Ukraine.<sup>9</sup>

Figure 1: % of respondents per household size (early 2023)

HH size	% of respondents
2	26%
3	26%
4	23%
5 or more	26%

Due to the CP focus of this assessment, the subset of this survey only included households with children. In early 2023, 27% of those households included infants and toddlers that were between 0 and 2 years old (24% in late 2022), 85% included children that were between 3 and 12 years old (81% in late 2022), and 28% included adolescents between 13 and 17 years (30% in late 2022).



The survey highlights the presence of vulnerable groups among the displaced Single-caregiver population. households made up 43% of surveyed households in late 2022 and 47% in early 2023. In early 2023, 14% of households included a person with disabilities, which was relatively consistent with the previous survey round (11%). The share of households that included pregnant or breastfeeding women also remained constant (8% / 6%). Very few respondents reported having separated children in their care, 5% in late 2022 and 1% in early 2023 respectively. However, due to a lack of reference data for Romania, it is unclear to what extent the share of separated children in the sample corresponds to the refugee population.

### **RISK FACTORS**

The main reported risk factors for the safety and well-being of children and caregivers were largely consistent across qualitative and quantitative interviews. The most reported concern by children and adolescents\* was they did not know the language of the host community. They noted this made it more difficult to navigate by themselves in unknown

\*'Adolescents' refers to children between 15-17 years old. Unless the age range is specified, 'children' is used to refer to children between 0-17 years old.









surroundings, as they could not orientate themselves or ask for help. This was also the second most frequent risk reported by caregivers in the survey, however, caregivers in the FGDs did not highlight the language barrier as a main concern for their children. The importance attributed to the language barrier as a concern, therefore, seemed to vary between children and caregivers, and among caregivers themselves.

"Once I got lost and couldn't explain to anyone that I was lost." - Boy, 12-14 years old

The emotional and mental health issues caused by either the war, the displacement or both were the other main risk for children and caregivers, highlighted across all types of interviews. This was often linked to the separation from the persons previously providing support to them, particularly from other family members. Many children and adolescents mentioned missing Ukraine or missing family, friends or pets left behind.

"I am worried whether we will be able to return to Ukraine to my dad and my kitten." - Girl, 8-11 years old

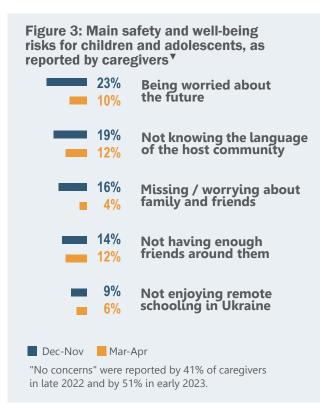
Some of the children, mostly young boys (8-12 years old) talked about being concerned about the current situation of the war or following news related to it. Some of the girls mentioned they were worried about whether their family will return or not to Ukraine in the future. Children being worried about the future, missing or worrying about family, particularly fathers, and friends left in Ukraine was also among the most reported concerns by caregivers during the FGDs and in the survey (see figure 3). Caregivers in the FGDs also mentioned they were worried about their future situation in Romania, fearing the assistance would be suddenly stopped.

Another psycho-social issue that both children and caregivers frequently mentioned was a lack of friends and loneliness. This concern

was mostly discussed by adolescents. Some children and adolescents said that they did not go out much, spending most of their time at home. They mentioned they did not want to go out or could not go out without their family. Few mentioned they were not able to do the activities they used to in Ukaine.

The difficult financial situation of the refugee household was also noted by children and adolescents as a key concern to them. They sometimes mentioned that their households could not afford the appropriate access to certain services, quality or enough food. Some children also said that they had noted how stressed their parents were due to financial worries.

Children and adolescents also frequently reported instances of psychological or physical violence. The instances of verbal violence were often cases of xenophobia, with locals (children or adults) reportedly saying upsetting things about Ukrainian refugees or the war. While gender did not seem to be a factor with regards to verbal bullying, either by peers or local children, instances of physical violence were reported mainly



Respondents could select multiple options.









by boy groups. There is also an age aspect, with younger children having reported more instances of violence - as these episodes were noted to take place most often on the playground.

Service providers highlighted additional risks that children and caregivers did not mention being concerned about. CP practitioners explained that there was an elevated risk of exploitation of both children and caregivers due to human trafficking networks in Romania and Ukraine, but also because of the lack of awareness among refugees and them being in a new unknown environment. This may be particularly notable as no caregivers reported being concerned about this risk, neither through the FGDs, nor through the survey.

Some KIs in the CP sector mentioned unaccompanied minors to be at particular risk because of the limited capacity of the Romanian state to manage the significant increase in cases. Others emphasized the lack of communication between Ukrainian and Romanian governmental CP services that led to a lack of overview of the case-load of unaccompanied minors. This issue was illustrated by testimonies of unaccompanied minors reporting serious concerns regarding lack of care and maltreatment.

### PROTECTIVE FACTORS

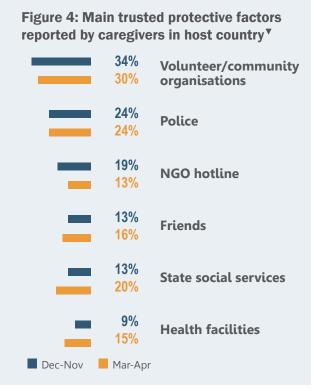
Protective factors have been greatly affected by the displacement, with both children and caregivers having lost their main support system. The consultations with children in Romania demonstrated that they overwhelmingly saw family as the main protective factor.

This was especially highlighted by those children aged 8-14, as parents and particularly mothers were most often considered the first and main person to seek support from. Friends were the second most reported

source of help and comfort - despite the lack of friends and loneliness being one of the main concerns, as discussed above. Caregivers did not discuss family as a key protective factor - neither during FGDs nor the survey (see figure 4). One explanation could be that many caregivers come to Romania only with their children and therefore cannot rely on a family support network in the host country.

"I trust my friend with secrets and talk about my small problems. But I talk to mom about serious problems." - Girl, 8-11 years old.

Feeling welcomed by the host community was another important protective factor, mentioned by both children and caregivers. Children said that they felt their local communities were overall supportive of them being there. Some of the children even reported being comfortable with asking any adult for help. During FGDs, caregivers explained that they or their children had received help from the host community when they could not manage by themselves, but also that locals supported them with food and money, and particularly offered



Respondents could select multiple options.









pocket money to children. The positive attitude of locals towards the refugees was also reflected by testimonies from host community members themselves. In the survey, caregivers particularly highlighted that they trusted volunteer and community organisations (30% in late 2022 / 34% in early 2023).

State services were another important protective factor reported by children and caregivers alike in the FGDs and the survey. They particularly highlighted their trust in the police as well as the health services. Similarly, the government's 50/20 programme aimed at covering accommodation and food-related costs was a crucial protective factor for refugee households which was highlighted in FGDs with caregivers. Most caregivers reported that their household accessed the programme and some expressed concern with regards to their stay in Romania if the programme were to be stopped.

Overall, children and caregivers expressed feeling safe in Romania. Half of the groups of children and adolescents reported feeling safe everywhere or in general in the host country, while others reported feeling safe in particular places. The places reported were mostly those where they spent a considerable amount of time, such as home, parks, schools, malls or non-governmental organisations (NGO) hubs. During the FGDs,

most caregivers noted that they felt safe in Romania, and caregivers in Bucharest also mentioned they considered the city to be safe enough to allow their children to go to school by themselves. This mirrors the survey findings, as about 40% of caregivers in both early 2023 and late 2022 reported having no concerns regarding their well-being or that of the children in their care.

# ACCESS TO SERVICES AND UNMET NEEDS

Children, caregivers and service providers all noted that refugees had access to a diversity of services, which largely mirrored the results of the survey (see figure 5). At the same time, the main needs of children, adolescents and caregivers, all related to overcoming barriers to service access.

"I had a fever. I took medical tests and they treated me in a hospital." - Boy, 12-14 years old.

Compared to other services, caregivers and their children tried most frequently to access physical health services, but had one of the least success rates in accessing them, compared to the other services the respondents reported trying to access (see figure 5).

KIs and caregivers noted that refugees often benefited from the support of NGOs, that facilitated access to services. Some KIs noted

Figure 5: Services with most reported attempted access

Services	% of caregivers that reported they/their children tried accessing this service		% of caregivers that reported they/their children accessed and afforded this service*	
	Nov-Dec	Mar-Apr	Nov-Dec	Mar-April
Physical health services	48%	65%	76%	80%
Schools/Universities	34%	37%	81%	82%
Childcare	20%	23%	75%	95%
Extra-curricular activities	18%	46%	79%	81%
Emergency health services	11%	16%	100%	93%
Government social services	6%	10%	100%	100%
MHPSS	5%	5%	100%	100%
Non-government social services	4%	15%	100%	100%

\*Of those caregivers that reported trying to access the service.











that the refugees had the same level of access as the host population and that often the barriers they encountered were similar to those faced by Romanians. Among health services, caregivers and KIs highlighted mental health and psycho-social services (MHPSS) as the most accessible, mainly through psychologists or art therapy offered by NGOs. However, caregivers in Galati mentioned that there was no child psychologist available in the city.

Refugees faced significant barriers to health services. Caregivers noted that the high cost of private healthcare, especially dental care, prevented them or their children from accessing them. High costs were also the most reported barrier in the survey (see figure 6). Caregivers and KIs noted that, in particular, access to general practitioners (GPs) was challenging for refugees. They stressed that the difficult access to a GP prevented them from accessing other services, specialised care, vaccination, or the necessary documentation for enrolling children into school. Caregivers also mentioned instances when their registration was refused because they were not employed, despite TP granting refugees the right to be registered without employment.

Some caregivers and KIs also noted that the language barrier, the lack of information and the reluctance to trust doctors or medication in the host country prevented refugee caregivers from accessing healthcare. Some KIs mentioned that not only refugees were sometimes not aware of their rights, but

Figure 6: Main reported barriers to accessing services ♥

Barrier	Nov-Dec	Mar-Apr	
Long waiting time	38%	27%	
Cost of services	25%	53%	
Information barrier	25%	0%	
Unavailability of staff	19%	33%	
Language barrier	13%	27%	

Respondents could select multiple options.

also that some service providers lacked information on which services the refugees are entitled to. This led to some people returning to Ukraine to get prescriptions or the medicine they need, as testified by several caregivers. Therefore, it is not surprising that better access to medical services remained one of the main needs reported by caregivers in the survey (20% of respondents in early 2023 / 19% in late 2022) and in FGDs, as well as by service providers. KIs specifically saw access to MHPSS as among children's main unmet needs. Similarly, adolescents frequently mentioned wanting to talk to a psychologist. They sometimes noted that they did not know where to find one or that their family might not be supportive.

"I like that there is a Ukrainian school. It is boring to be online without friends." - Girl, 8-11 years old.

Caregivers, children and KIs commonly said that most of the refugee children had access to some form of education. Most children reported that they followed online schooling in Ukraine, which they noted to be challenging, mainly because of connectivity issues. Some children also reported attending in-person education, mainly in informal Ukrainian schools, "hubs". These, however, often covered only a limited number of classes compared to Ukraine. Some service providers also noted that the type and quality of education varied greatly among hubs. Some children also attended Romanian schools and most of them explained that they were able to do so as they spoke Romanian. Similarly, during FGDs, caregivers noted that not speaking the local language was a significant barrier particularly with regards to enrolling children in the local education system. Some children said they were attending both online Ukrainian classes and a form of in-person education, which was often noted to come at the expense of the children's free time or other activities.











KIs highlighted better access to education as a significant need, particularly in the context of unstable online education from Ukraine and the difficult integration of refugee students in the Romanian educational system. The need for in-person education was particularly stressed, as it reportedly increased children's well-being and helped with their integration. Some consulted children also said they would like to be able to attend school in person, explaining that because of connection issues, online classes are not providing much learning.

While few survey respondents reported accessing social services, FGD participants commonly mentioned high access to social services for refugees, particularly nongovernmental ones. NGOs were noted to provide a variety of services, from educational support and extracurricular activities to interpretation, facilitating access to other services, as well as providing financial or in-kind aid. The high prevalence in social service access of FGD participants compared to survey respondents could be explained by the fact that most caregivers invited to FGDs were beneficiaries of SCI or partners.

Among the least accessed services were childcare and extra-curricular activities (see figure 5), based on the survey. Access to more diverse extracurricular activities was a priority need mentioned by most children and adolescents, as well as caregivers. There was a notable increase in the share of households that tried accessing extra-curricular activities between late 2022 (18%) and early 2023 (46%). At the same time, the level of access among those who tried remained at around 80%. Caregivers explained that the limited availability of kindergartens but also extracurricular courses and activities for children were major barriers to access. Another barrier to extracurricular activities, particularly sports clubs, were the high costs.

### **INTEGRATION**

Most children and caregivers interviewed reported feeling welcomed by Romanians in the host community. Similarly, host community members considered Romanians empathic towards refugees and open to welcoming them, mentioning instances of locals showing support through donations, hosting, or volunteering. They were optimistic about Ukrainian children's integration into Romanian communities, reporting that it was easier for children to integrate than adults due to their ability to interact and adapt to new environments.

Caregivers, host communities, and KIs agreed that learning Romanian was key for integration. According to FGDs with caregivers and host communities, speaking English also helped communication with locals. Caregivers and host community members highlighted that children's language skills improved through interaction with local children. According to hosts, finding employment and having financial stability would help the integration of adults because it would make them more independent from assistance. The host community members also noted that adult refugees should receive emotional/psychosocial support from the host community or specialists to be able to recover from their experience of war. More generally, host participants noted that refugees' interest in integrating was crucial.

Mirroring the findings regarding the main facilitator of integration, the principal barrier to integration reported by caregivers and host community members was not knowing Romanian. Although Romanian language courses were deemed widely available by participants of caregiver FGDs, only 19% of the survey respondents in early 2023 took them. The lack of childcare options was another barrier mentioned by caregivers, particularly for single caregivers and those

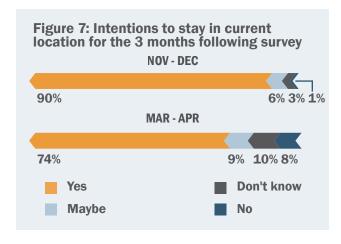








with young or many children. This also affected their ability to find employment. Host community members noted that difficulties finding employment made integration more difficult for refugees.



Service providers and host community mentioned members also barriers integration related to refugees' and hosts' reciprocal perceptions and attitudes. KIs reported that refugees' uncertainty about their long-term stay and perceived lack of interest in integrating were major barriers. Similarly, host community members stated that caregivers' negative attitudes towards integration hindered children's integration and that refugees' fear of their new environment and reluctance to ask for help were significant obstacles. Host community factors such as not being used to new populations, unwillingness to integrate refugees, being upset about unequal aid, and discrimination towards refugees were also reported by KIs and host community members. According to the latter, limited interaction between refugees and hosts partially explained negative attitudes, as did the host community's lack of experience in integrating new people.

### **INTENTIONS TO RETURN**

Participants in most caregiver FGDs reported wanting to return to Ukraine when the situation would stabilise, but intended to stay in their host location short-term. The share of survey respondents not wanting to return to Ukraine decreased from 87% to 77% between late 2022 and early 2023. Lack of safety was the main reason (78% and 83%, respectively).

Reasons for wanting to return included reuniting with family (50% and 24%) and better medical access (30% and 24%). The majority of respondents wanted to stay in their host location during the next three months following the survey, with the share decreasing from 90% to 74% between late 2022 and early 2023. The security situation in Ukraine became slightly less important as a motivation to stay (46% and 39%, respectively), while the share of respondents mentioning benefits/assistance (20% and 28%) and employment (17% and 20%) in the host location slightly increased between the two survey rounds.

Figure 8: Main reasons for being unsure whether to stay in current location the 3 months following survey\*

Reason	Nov-Dec	Mar-Apr
Situation in habitual place of residence	43%	29%
Security and safety situation in Ukraine	14%	35%
Accommodation	0%	29%
Benefits and support from national government	0%	29%
Employment	0%	18%

<sup>\*</sup>n=7 for late 2022; n=17 for early 2023.











<sup>▼</sup>Respondents could select multiple options.

### CONCLUSION

The Ukraine response has suffered from a lack of visibility of the voices of children throughout their journey. To address this data gap, IMPACT, in partnership with SCI, conducted a mixed-method CP needs assessment in Romania between November 2022 and April 2023.

The assessment found that while most children adolescents and Romania generally reported feeling safe and welcomed in their host country, they were often deeply affected by feelings of separation, loneliness, and sometimes also discrimination. The psycho-social issues caused by the war, the displacement or both were among the most reported wellbeing and safety risk for Ukrainian refugee children in Romania. Another main concern for children and caregivers was the language barrier which prevented them from accessing services and from socialising with the host community.

The study also showed that, although Ukrainian refugee children and caregivers generally had access to a diversity of services in Romania, they needed better access to health services, extra-curricular activities, childcare and in-person education. Key barriers to accessing those services were related to high cost, lack of availability, lack of information, as well as the language barrier.

Beyond the value of the study's findings on CP needs of Ukrainian refugees in Romania, the inherent value of direct consultations as a method of assessing children's and adolescents' needs was illustrated by the young participants' urge to express their concerns and work on solutions together with peers and adults.

The following key recommendations for those supporting Ukrainian children and adolescents in Romania are based on the solutions suggested by children, caregivers and service providers:

- 1. Strengthen and expand MHPSS services with a focus on dealing with worries about the situation in Ukraine and general uncertainty in the children's life;
- Decrease financial and time constraints in access to healthcare, as well as extracurricular activities;
- 3. Provide opportunities for a greater variety of extra-curricular activities;
- 4. Provide age and gender-appropriate information to refugees on existing activities and services;
- 5. Improve communication between service providers on those initiatives.









### **ENDNOTES**

- 1 <u>Operational Data Portal: Ukraine Refugee</u>
  <u>Situation.</u> UNHCR/Government. Accessed in mid May 2023.
- 2 <u>Ukraine Situation: Regional Protection Profiling</u> and Monitoring. UNHCR. Accessed in early June 2023
- 3 <u>Ukraine Situation: Romania. Population Movement Trends</u>. UNHCR/General Inspectorate for Border Police. Accessed in early May 2023.
- 4 Ukraine Situation: Romania. Overview of Temporary Protection Directive. UNHCR/General Inspectorate for Immigration. Accessed in early May 2023.
- 5 <u>Temporary Protection. Dopomoha</u>. Accessed in early May 2023.

- 6 <u>Ukraine Situation: Romania. Overview of Temporary Protection Directive. UNHCR</u>/General Inspectorate for Immigration. Accessed in early May 2023.
- 7 <u>Ukraine Situation: Romania. Overview on sites</u> and locations. <u>UNHCR/Department for Emergency Situations</u>. Accessed in early May 2023.
- 8 <u>Ukraine Situation: Romania. Overview of Temporary Protection Directive. UNHCR/General Inspectorate for Immigration. Accessed in early May 2023.</u>
- 9 <u>2021 Social and Demographic Characteristics of Households of Ukraine</u>. Government of Ukraine. 2021.

#### **IMPACT INITIATIVES**

IMPACT Initiatives is a leading Geneva-based think-and-do tank which aims to improve the impact of humanitarian, stabilisation and development action through data, partnerships and capacity building programmes.

Our mission is to shape practices and influence policies in humanitarian and development settings in order to positively impact individuals and communities. We, as a think and do-tank, enable better and more effective decision-making by generating and promoting knowledge, tools and best-practices for humanitarian and development stakeholders. We believe that by understanding settlements through the lens of community dynamics, governance structures and socio-economic relationships, we can positively impact the lives of people, improve communities' development pathways and contribute to a fairer world.

### **SAVE THE CHILDREN**

Save the Children is an NGO that believes that every child deserves a future. In Europe and around the world, we work every day to give children a healthy start in life, the opportunity to learn and be protected from harm. When crisis strikes and children are most vulnerable, we are always among the first to respond and the last to leave. We ensure children's unique needs are met and their voices are heard. We deliver lasting results for millions of children, including those hardest to reach. We do whatever it takes for children – every day and in times of crisis – transforming their lives and the future we share.









