Older Individuals Needs Assessment (OINA) Refugee Respondents

March 2025 | Republic of Moldova

Key Messages

- Most respondents reported receiving external sources of income, with 98% receiving either a pension or United Nations High Commissioner for Refugees (UNHCR) cash assistance in the 6 months prior to data collection. 72% of respondents did not have savings, highlighting potential vulnerability to withstand economic shocks.
- At the time of data collection, 84% of respondents reported having healthcare needs, with the most commonly reported being medicine (prescription, subsidized, or over-the-counter), access to specialist doctors, and dental care. Furthermore, the most frequently reported unmet basic need was access to healthcare and medication (75%).
- Among those who did not try to access social support services, 70% of respondents reported it was due to a lack of information, suggesting a potential gap in awareness.

Context & Rationale

As of January 2025, an estimated 23% of refugees from Ukraine residing in Moldova are aged 60 and above. Based on a secondary data review, older refugees were identified as a vulnerable group that constitutes a significant share of the population. However, their specific needs, particularly those related to socio-economic inclusion and livelihoods, have not been comprehensively documented.

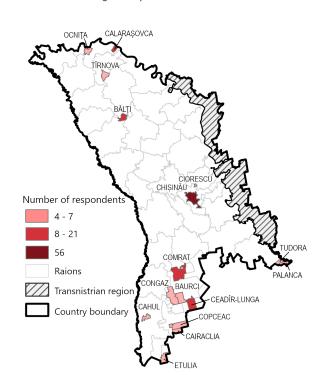
The OINA assesses the socio-economic inclusion and livelihoods needs of older refugees and older members of the host community. By assessing both groups, the OINA seeks to provide a comprehensive understanding of the challenges faced by older individuals in Moldova and inform humanitarian programming.

Assessment Overview

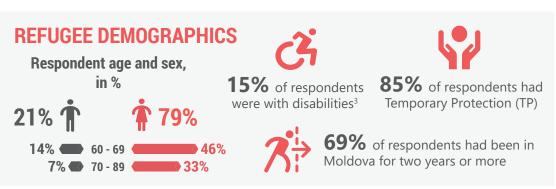
The OINA conducted quantitative individual-level surveys with refugees from Ukraine and host community members aged 60 and above. The OINA employed convenience sampling, where respondents were selected based on the population of interest criteria and accessibility. Interviews were stratified by settlement type (Chiṣinău, urban areas excluding Chiṣinău, and rural areas), and conducted across 16 settlements with the highest number of older refugees. A total of 160 interviews were conducted with refugees and 173 with host community members. Findings in this factsheet cover only refugee respondents, with a sample size of n=160, unless otherwise noted. All results are indicative only. For more details regarding the methodology and limitations, please refer to the Terms of Reference.

GEOGRAPHIC COVERAGE

Location of refugee respondents in Moldova













HOUSING

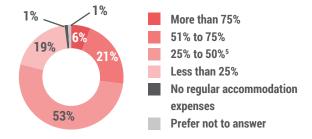


51% of respondents (n=159) were **renting housing without payment.**⁴



68% of respondents (n=159) were **paying** only partially for their utilities.

% of monthly income spent on accommodation (housing and utilities), by % of respondents (n=141)*



SOCIAL SUPPORT SERVICES⁶



70% of respondents who did not try to access social support services (n=77) noted it was **due to a lack of information**.

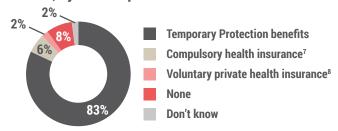
Top 3 most reported social services that would help improve access to employment, financial assistance or community resources, by % of respondents**



Food assistance was the most reported social support service needed, particularly among respondents in **rural areas** (60% of n=53).

HEALTHCARE

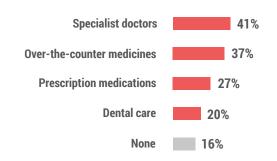
Type of health insurance or health benefits held in Moldova, by % of respondents*





84% of respondents **had healthcare needs** at the time of data collection.

Top 5 reported healthcare needs at the time of data collection, by % of respondents**





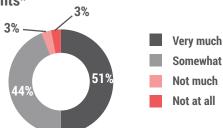
89% of respondents that needed to access healthcare services in the 6 months prior to data collection (n=117) were **reportedly able to access them**.



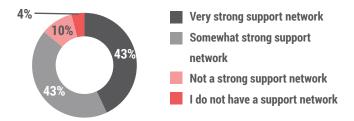
57% of respondents with access to healthcare benefits through TP or with health insurance (n=144) reported healthcare as one of the basic needs they are currently unable to meet.

COMMUNITY INCLUSION

Reported sense of community inclusion, by % of respondents*



Perceived availability of a strong informal support network (friends, family, neighbors) reliable in times of need, by % of respondents



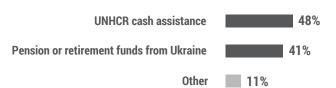






INCOME AND LIVELIHOODS

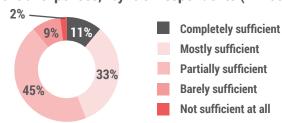
Reported main source of income in the 6 months prior to data collection, by % of respondents





67% of respondents reported that their average monthly income from their reported main source of income was between **2,000-2,999 Moldovan lei (MDL).**

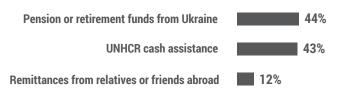
Sufficiency of reported total income in covering essential expenses, by % of respondents (n=159)





26% of respondents reported **owning or having access to livestock or a garden**.

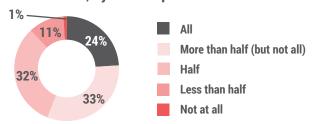
Reported additional source of income in the 6 months prior to data collection, by % of respondents**





48% of respondents (n=147) reported that their average monthly income from their reported **additional source(s) of income** was between **2,000-2,999 MDL**.

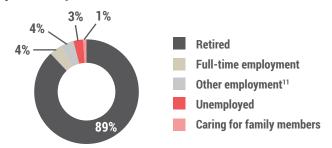
Reported ability to meet basic needs⁹ at the time of data collection, by % of respondents*



Among respondents reporting that they were unable to meet all their basic needs (n=122), the **top 3 reported unmet basic needs** were access to healthcare services and medication (75%), access to sufficient and nutritious food (34%), and appropriate clothing for different weather conditions (24%).

EMPLOYMENT

Main employment status at the time of data collection, by % of respondents*





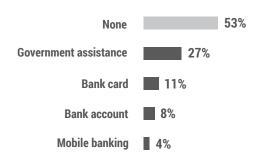
15% of respondents reported **facing barriers when trying to access employment** opportunities in Moldova. The top 3 reported barriers were disability, chronic or long-term illness (7%), age discrimination (6%), and language barriers (6%).

FINANCIAL INCLUSION



77% of respondents were reportedly **not using financial services** (i.e. bank accounts, bank cards, formal money transfers, government assistance, and mobile banking services) at the time of data collection.

Top 5 financial services respondents would like to access, by % of respondents**









HUMANITARIAN ASSISTANCE



95% of respondents reported **receiving humanitarian assistance**¹² in the 6 months prior to data collection.

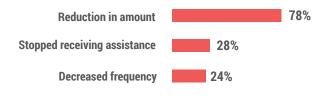


91% of respondents that reported experiencing challenges or difficulties in receiving their cash assistance in the 6 months prior to data collection (n=65) reported **delays or inconsistencies in payment as a challenge.**



68% of respondents reportedly **experienced changes in humanitarian assistance received** in the 6 months prior to data collection (n=148).

Top 3 changes experienced in humanitarian assistance received in the 6 months prior to data collection, by % of respondents (n=100)**



COPING STRATEGIES



39% of respondents (n=158) **perceived their main source of income to be very secure**.

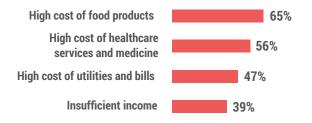


18% of respondents (n=158) perceived their main source of income to be somewhat insecure (15%) or very insecure (3%).



72% of respondents reportedly **did not have access to savings or emergency funds** for unforeseen expenses.

Top 4 financial challenges faced in the 6 months prior to data collection, by % of respondents**



Endnotes

- * Percentages may not sum up to 100% due to rounding.
- ** Respondents could select multiple responses.
- ¹ UNHCR, <u>Regional Refugee Response Plan 2025-2026</u>, p.115, accessed on 14 01 2025
- ² For a full overview of sources under in the secondary data review, please refer to the <u>Terms of Reference</u>.
- ³ The <u>Washington Group Short Set (WGSS) on Functioning</u> was used to determine respondents with disabilities. Individuals with reported difficulty levels of 3 and 4 were considered to potentially have disabilities.
- ⁴ Renting without payment means that respondents are being hosted and not paying for their accommodation. This indicator does not include the payment of utilities.
- ⁵ The proportion of respondents spending 25-50% of their monthly income on housing likely indicates that, even with reduced or no payment arrangements for accommodation and utilities, housing costs remain disproportionately high relative to the average income of older individuals.
- ⁶ Defined as public services (those provided by the government, international organizations or non-governmental organizvations) intended to provide assistance and improve well-being, stability, and inclusion.
- $^{7}\,\mbox{Health}$ insurance purchased or offered through the National Medical Insurance House.
- ⁸ Health insurance purchased from a private insurance company.
- ⁹ Essential expenses refer to basic, necessary costs for daily living, including housing such as rent, and utilities, food, healthcare, any required medication or treatments, and transportation.
- ¹⁰ Basic needs include food, water and sanitation, housing, healthcare, and other resources/conditions required for individuals to sustain their livelihoods.
- ¹¹Other employment includes ad hoc jobs (2%), employed part-time (1%), and seasonal employment (1%).
- ¹² Humanitarian assistance included cash assistance or vouchers, humanitarian distributions (non-food items, clothing, food), humanitarian protection services, and social support services provided by humanitarian organizations (NGOs, CSOs, UN agencies).

Funded by the European Union. Views and opinions expressed are however those of REACH only and do not necessarily reflect those of the European Union or the European Civil Protection and Humanitarian Aid Operations (ECHO). Neither the European Union nor ECHO can be held responsible for them.

ABOUT REACH

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).





