

Căușeni Raion

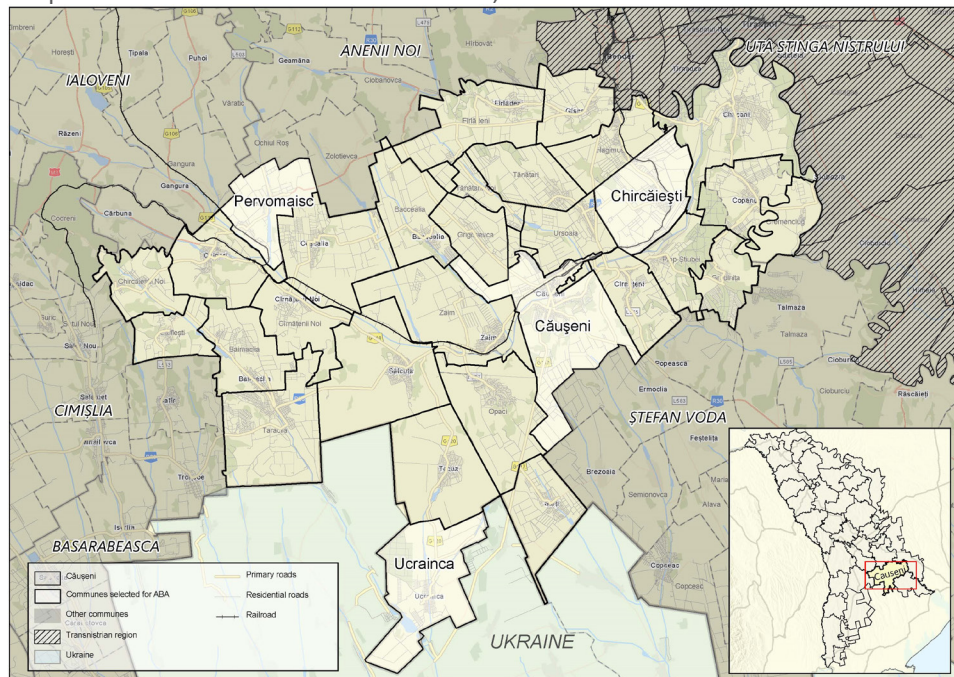
Area Based Assessment (ABA)

December 2024 | Republic of Moldova

Context & Rationale

Considered to be one of most hazard-exposed states in the world,¹ the Republic of Moldova is threatened by many co-existing and co-dependent problems, being also among the most socio-economically vulnerable states in Europe.² As such, the consequences of climatic events are not easily contained; instead, they exacerbate socio-economic deprivation which often cascades down into a reduction in community resilience. This is especially clear given the vulnerability of agriculture to natural hazards and its significance in rural Moldovan communities.³ Furthermore, in the context of displacement and conflict in the neighbouring Ukraine, it is also important to understand the needs of oftentimes isolated refugee communities in rural areas. In this context, the present area-based assessment (ABA) aimed to identify the primary needs of the host and refugee communities in four localities in the Căușeni raion, assessing the availability and accessibility of essential services, evaluating social cohesion and integration among the two communities, and understanding coping capacity and response structures to natural hazards.

Map 1: Assessed localities within the Căușeni raion



Key Messages

- About **a third** of both the refugee and host community households **had a monthly income lower than the minimum wage** indicating significant economic vulnerability.
- Both respondent groups showed clear patterns of need, with **food, health and economic assistance being the highest reported priorities**.
- The relationship between the two communities was described as good** by a majority of households across both surveyed groups.
- Most refugee households indicated they had access to long term accommodation**, which may be partly facilitated by familial and personal connections among the local host community.
- Most refugee households described they had been in Moldova for most of their displacement**, and indicated they were planning on remaining in the mid-term. FGD participants commonly expressed wanting to return to Ukraine when the war ended.
- Surveyed **communities faced significant natural hazards**, with drought, sudden temperature changes, and hail being the most reported risks.
- Schools emerged as a key actor in disaster-risk preparedness**, as all service providers explained that regular trainings and emergency drills were conducted and most mentioned their schools had an emergency plan in place.

METHODOLOGY

This assessment employed a mixed-methods research approach, with data collection taking place between 15 April and 30 April 2024 in four localities: one urban (Căușeni city) and three rural (Chircăiești, Pervomaisc, Ucraina). The localities were selected within the raion based on multiple features, such as their exposure to natural hazards, the presence of refugees, and geographical location.

A total of 212 surveys were conducted with host-community households (HHs) and 39 refugee households. A stratified simple random sampling was employed for the host community households, providing representative findings for the assessed locations with a 95% confidence level and 8% margin of error. Refugee households were purposively sampled due to the small number of refugees in the area, thus findings for the refugee sample can be considered indicative only. Unless specified otherwise, the findings reported refer to the full respective sample.

Semi-structured focus group discussions (FGDs) were held with five groups of host community participants and four groups with refugee participants.⁴ Additionally, 20 semi-structured key-informant interviews (KIIs) were conducted across five sectors: education and healthcare providers, members of the local business community, officials in local government, and employees of local non-governmental organisations (NGOs). Findings should be considered indicative, and pertain only to the assessed settlements. For a detailed description of the methodology, please refer to the Terms of Reference of the assessment.

RESPONDENTS PROFILE

Refugee respondents

90%
women



10%
men

46 years old
average age of respondent

Host community respondents

68%
women



32%
men

55 years old
average age of respondent

DEMOGRAPHICS AND HOUSEHOLD DYNAMICS

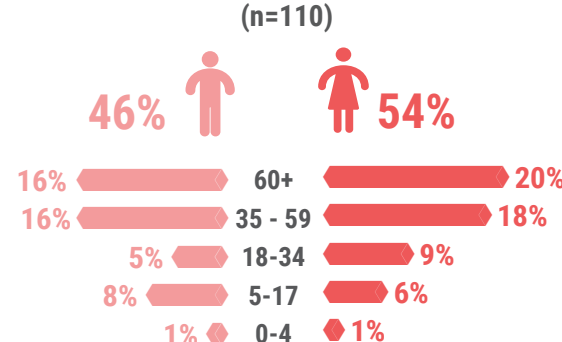
The two population groups surveyed displayed different susceptibility profiles based on their demographics. The surveyed refugee households (n=39) were characterised by a high number (64%) of households with minors (under 18 years old). Among the 25 households that indicated they had minors, 2 had unaccompanied or separated children (UASC) among the minors in their household. Additionally, about half of the households with minors had only one adult caregiver (10 out of n=25).

Respondents were also asked whether household members above 15 years old were involved in caregiving duties,⁵ and about a quarter of refugee household members were reported to be involved in such duties (24% of n=68). Notably, this was more commonly reported for female household members (34% of n=44 were involved in caregiving duties), compared to male household members, for which 24 out of 25 were noted not to be involved in such duties. This contrasts with the host community division of caregiving duties, where the two genders were reportedly involved in similar shares.


Host community households were, contrastingly, characterised by a high presence of older persons (aged 60 years old and above). Almost half of the surveyed households had only older persons (42%), with 55% of all households having older members.

Refugee households (n=39)

% Individuals by age group and gender (n=110)



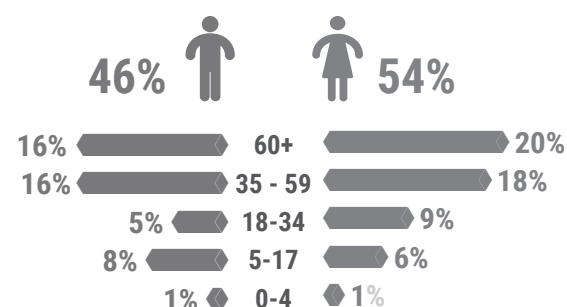

3 average HH size


62% of HHs with single head of HH


 **64%** of HHs with minors

 **36%** of HHs with older persons (60+ years old)

 **15%** of HHs with a person with a disability

Host community households (n=212)**% Individuals by age group and gender (n=478)**


2 average HH size



41% of HHs with single head of HH



41% of HHs with minors



55% of HHs with older persons (60+ years old)



11% of HHs with a person with a disability

The demographic findings mirror FGD reports, as host community participants described that the local communities were getting older as younger persons left abroad, or moved to urban areas, in search for better livelihood opportunities.

DISPLACEMENT & PROTECTION

Similarly to findings of the Anenii Noi ABA,⁶ the large majority of refugee respondents indicated they had been residing in Moldova for a significant time, and that they were planning on remaining in the mid-term. Most FGD participants described being in Moldova for one or two years, while 95% of surveyed households reported they had been residing in the location of their residence for over 6 months. Refugee respondents in the household surveys and the qualitative FGDs described different movement intentions between, with most surveyed households (83%) indicating they were planning on remaining in Moldova in the 6 months following data collection. By contrast, participants in most FGDs noted they desired to return to Ukraine in the future, with few participants in some groups reporting they wished to remain long term in Moldova. However, participants across all FGDs explained that they would stay in Moldova while the conflict in Ukraine was ongoing. This difference in reported movement plans may be attributed to the different scopes between the survey and FGDs, as the survey question was time-bound. The desire to remain in

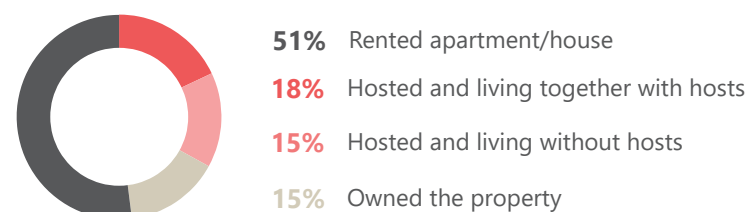
the mid- to long-term in Moldova was also reflected in the legal status of refugee households, as around 31% of surveyed households indicated that none or not all their household members had Temporary Protection (TP). Among these, the large majority explained that they had opted to apply for more regularized statuses, such as for Moldovan citizenship or asylum (10 of n=11).

Refugee respondents also described pull-factors for Moldova and their location of residence. Few FGD participants described that Russian being widely-spoken was a reason they chose to come to Moldova, and that they chose the locality due to its proximity to Ukraine and relatives. About half (51%) of surveyed households indicated that proximity to friends and family was a reason for which they chose their location of residence within Moldova, with accommodation (16%) and proximity to Chisinau (5%) also being noted.

ACCOMMODATION

Most refugee households indicated they had access to long term accommodation, which may be partly facilitated by familial and personal connections among the local host community. About half (51%) of the surveyed households indicated they were renting their accommodation, while over a third (33%) were being hosted, and 15% indicated they owned their accommodation. Among those being hosted, the large majority described their hosts were family, friends or acquaintances (11 out of n=13). Additionally, among these most (8 out of n=13) were paying for utilities only and about a third reported paying for neither rent, nor utilities (4 out of n=13).

The large majority (77%) of refugee households reported they had not faced difficulties in finding accommodation. Those who did report barriers noted the issue of available housing being scarce (15%) and that of the high costs (13%). Few participants in FGDs also highlighted support with rent as a need of refugees. Households who were hosted or renting (n=33) were also asked about their possible length of stay and the large majority (82%) indicated that they could remain in their current accommodation for an undetermined period, while 9% said they could stay for a year, while 6% did not know and 3% indicated they could remain for less than 3 months.

Type of accommodation arrangement (by % of interviewed refugee HHs, n=39)⁷

SOCIAL COHESION

Both community groups consistently described the relationship between the host and the refugee communities as positive. Refugee respondents largely reported they felt they were well-integrated and inter-community conflict was reported to be a rare occurrence. While the large majority of host and refugee respondents across both surveys and FGDs indicated the two communities were in good relationships, a few across both groups also described some tensions. As such, few refugee respondents in FGDs explained they did not have full trust in their communities or that local authorities were not treating them with compassion, while few host community members noted the perception that the aid given to refugees was unfair, or that tensions existed due to previous political conflicts in the area.

Most reported integration strategies of refugee HHs intending to remain for 6 months after survey (n=30)⁸

Learning the language	57%	
Joining community activities	47%	
Looking for employment	20%	
Enrolling children in school in Moldova	20%	

The large majority of FGD respondents, both refugees and host community members, also mentioned that they were comfortable in their communities and that there were no tensions between refugees and the host community, mirroring the survey findings. Those among host community respondents who did describe there being some tensions, attributed them to assistance to refugees being seen as unfair or differing political views, while few refugee respondents expressed they had felt discriminated against.



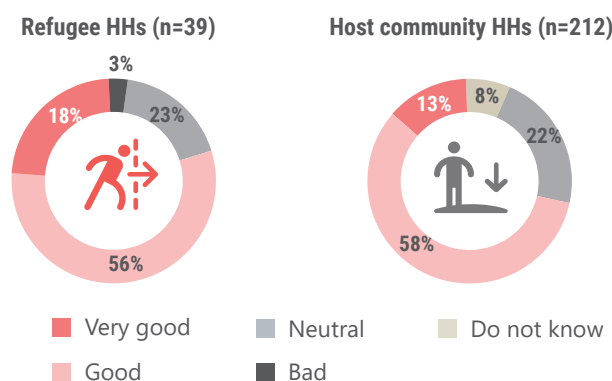
97% of refugee HHs and **98%** of host HHs reported they experienced **no conflicts** between the refugee and host communities

When asked if they were engaging in community decision-making, refugee households reported higher engagement (36%) than host community households (11%). Among those host community households that indicated they were not involved in the community (n=177), 50% reported this was due to the fact that they were content with how their community was being administered. About another third (28%) mentioned they were not interested in community decision making, however 15% said they were not familiar with the process, suggesting that better information could lead to a higher involvement in the community.

Most reported reasons for not being involved in community decision making (by uninvolved host community HHs, n=177)¹⁰

1	Content with administration of community	50%
2	Disinterested	28%
3	Not familiar with decision making in community	15%

Perception of relationship between refugee and host community households (by % of interviewed HHs)⁹



The majority of refugee households (72%) described feeling integrated, indicating that having a common language (20 out of n=28), and sharing similar cultures and values (n=20) were factors that facilitated their integration. More than half of the refugee households that felt integrated also noted that the host community being welcoming to refugees also facilitated them feeling this way (16 of n=28). Opinions of refugee participants in FGDs regarding their integration were more split. Some refugee FGD participants noted that integration was individual, while few described enrolling children in school, learning Romanian and finding employment as improving their integration, mirroring the most reported integration strategies by survey respondents. School integration and employment were similarly highlighted as integrative for refugees by host community FGD participants.

EDUCATION

A majority of host and refugee school-going children were reported to be accessing education though some refugee children continue to attend online Ukrainian school. Most school aged refugee household members (6-18 years old) were noted to be attending class regularly (24 out of n=29), with those for whom respondents indicated they were not being explained by them attending kindergarten instead. Similarly almost all school aged children (6-18 years old) in host community households (98% of n=69) were noted to be attending school classes regularly, with the few who were not reportedly attending university.



Most refugee HH members aged 6-18 years old enrolled in education were **reportedly attending Moldovan school** (13 out of n=20)¹¹

Service providers also expressed that both communities had access to education, with survey findings mirroring this. As such, more than half of the refugee school aged household members were reported to be attending Moldovan school (13 out of n=20)¹² and of these all were officially enrolled. When asked about enrolment plans for September 2024, respondents indicated for most school aged minors following Moldovan schooling (12 out of n=13) that they will continue doing so.

Service providers also explained different ways in which they tried to increase access to education and integration of refugee children, such as setting up additional Romanian language classes, including them in extracurricular activities or providing space for online learning. A diversity of other measures were also described such as providing free food, allowing students to choose their preferred classes to attend, or allowing parents to be present during classes. Extracurricular activities were described by service providers as the top integration facilitator for children, followed by the common language and the familiarity of the host community with Ukrainian culture due to the proximity.

The need for socialisation and integration was the most highlighted need of refugee students by two service providers. They also described different needs for the refugee students, such as tailored educational activities, having additional Romanian language classes or separate learning spaces for online learning. One of the service providers highlighted that the needs of refugee children are the same as those of the Moldovan children, and another highlighted that needs are age-specific. The service providers also noted that children with health issues and those who are socio-economically vulnerable have increased needs.

HEALTHCARE

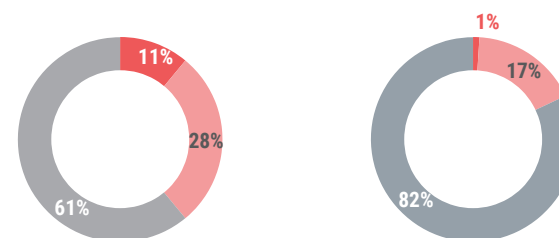
Refugee household members were reported to have needed healthcare more than host community household members, but their access was lower. In the 3 months before the survey, a higher percentage of individual refugee household members (39%, n=110) reportedly needed and wanted to access healthcare by comparison to the host-community (18%, n=478). Furthermore, for refugee household members indicated healthcare needs were more evenly distributed across age groups and were consistently higher than those needs reported among the host population. This discrepancy mirrors previous findings¹³ and may relate to potential differences in seeking healthcare. Another reason which may explain this difference is the different levels of chronic illness present in the two communities, as almost half of the refugee households surveyed (46%, n=18) reported that at least one member of their HH suffered from a chronic illness, compared to 30% of host-community HHs reporting the same.

Of those who tried to access healthcare from both communities, access was overall high though disparities can still be observed between the communities. As such, 97% of the host community household members who needed healthcare (n=83) were able to access healthcare while a lesser majority of 72% (31 of n=43) of refugee respondents were able to do the same. In contrast, healthcare service providers in all localities expressed that both the host community and refugees have access to healthcare, with some explaining the range of medical services available locally. However, they also highlighted barriers to access, such as the unavailability of certain

Access to healthcare in the 3 months prior to survey (by % of individual members above 5 years old in surveyed HHs)

Refugee HH members (n=110)

Host community members (n=478)



- Needed but could not access healthcare
- Needed and could access healthcare
- Did not need access to healthcare

medical services in the locality or the long waiting time which lead to cases being referred to larger hospitals, or patients seeking care in cities. Distance to services could explain the difference in access between the host and refugee communities, as over a third of the household members who needed healthcare reportedly had to travel to access it (42% for refugee household members, and 31% of host community members). Notably, during FGDs respondents described issues with roads and poor access to public transport, and the majority of refugee households indicated they had no cars (74%), suggesting the lack of appropriate transportation as a main barrier to accessing healthcare. This barrier might not affect only refugees, but also older host community members, as they might have difficulties driving or lower access to a car. The cost barrier may also explain challenges in accessing healthcare, being described by participants in FGDs, as well as reported in the quantitative survey. Of those who accessed healthcare in the 3 months prior to the survey in the host community (n=67), 19% reported that they had paid to access such services. Of those refugee households who accessed healthcare in the past 3 months (n=21), 5 households reported the same.

LIVELIHOODS

Low levels of income in both the host and refugee households indicate socio-economic vulnerability across the assessed communities in Căușeni. In particular, participants in FGDs from the host community expressed that the economic situation of the local community was perceived as bad or average, highlighting the poor pay and low pensions, as well as the few good work opportunities. Few groups explained that community members, especially young persons were leaving to work abroad. Some refugee FGD respondents also mentioned that they were living off their savings or that they were in a difficult economic situation. Mirroring these descriptions, about a third of both refugee and host community households indicated that their monthly income was under the national minimum (4,000 MDL).¹⁴ Additionally, the reported average income per household member in the month before data collection was also low. Among those host-community households who reported their income (n=170), the average income per household member was 3,889 MDL per month, which is noticeably higher than that reported by refugee households (n=26), which stood at 2,304 MDL per month.

Sources of income also partly differed between groups with host community households (n=212) highlighting employment (56%), pension (54%) and support from local family and friends (18%) as their sources of income. By contrast, the majority of refugee households (71% of n=39) noted cash support was one of their sources of income. Similarly to host households, about half (54%) of refugee respondents also described employment as one of their households' sources of income, and only 17%

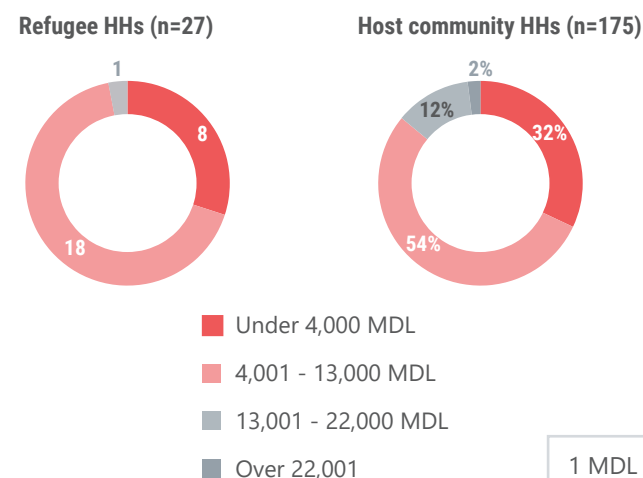
noted relying on pension.

Regarding employment, 39% of refugee household members aged between 15-70 years old (n=70) were reportedly working, and so did 55% of host household members of the same age group (n=110). A considerable share of both groups was reportedly unemployed and not looking for employment, being mostly pensioners or students (43% of refugee household members, and 74% of host household members respectively). Among those working, the majority was reported to hold permanent jobs, which suggest increased stability in income (17 out of n=27 working refugee household members, and 72% of n= 99 working host household members).

During FGDs, both refugees and host community members noted that employment opportunities were scarce locally, or that wages were low and some explained that better opportunities were otherwise available in Chisinau or abroad. Refugee participants also described facing diverse barriers in finding employment, such as the lack of childcare options available, discrimination based on age, prioritization of acquaintances when hiring, and employers avoiding to hire refugees because of perceived bureaucratic difficulties.

Regarding opportunities available locally, jobs in agriculture were mentioned by participants across most groups, however some highlighted that these were largely informal jobs. Availabilities in the manufacturing, service and public sectors were also noted upon.

Average monthly income in the month before data collection





NEEDS AND HUMANITARIAN ASSISTANCE

Overall, both refugee and host communities showed clear patterns of need, with food, health, and economic assistance being the highest priorities. Access to information and services, particularly through social media and community networks, emerged as a crucial factor in addressing the needs of refugees.

Surveyed refugee households predominantly reported receiving cash (82%) and vouchers (47%) as humanitarian aid, with non-food items (32%) and food (24%) being less commonly mentioned. The majority of this assistance was noted to come from international NGOs (62%), followed by UN agencies (29%) and a smaller proportion from local authorities (9%).

Despite the aid received, refugees still faced significant unmet needs. Food was the most reported unmet need, reported by 50% of refugee households (n=38), followed by economic assistance (37%) and health (34%) and non-food items (31%). In terms of priority, food remained the top concern for 61% of refugee households that indicated priority needs (n=33), with health (49%) and economic assistance (46%) also highlighted as critical needs. These largely mirror reports from refugee FGD participants who described diverse needs, with most highlighting the need for non-food items, food, housing and financial assistance. The need for increased access to education was also indicated, along with mental health and psycho-social (MHPSS) needs related to the war and displacement.

Most reported main sources of information on humanitarian aid for refugee HHs (n=39)¹⁷

1	Social media	
2	Community meetings	28%
3	Relatives, neighbours, friends	23%
3	Local community leaders	23%

Awareness of available services varied among refugees. About half of refugee households (n=39) indicated they were familiar with psychological and mental health care services (46%) and education services (46%), while legal advice and childcare services were known to 44%. Employment services were known by 41%. More than a quarter (26%) of refugee households also indicated they knew where to access gender-based violence (GBV) services. When it came to learning about humanitarian aid, social media was the primary source of information, with 64% of refugee households relying on it. Community meetings (28%) and local leaders (23%) also played important roles in disseminating information. Regarding additional information needs, half (50%) of the

Most reported unmet needs by refugee HHs (n=38)¹⁶

1	Food	50%
2	Economic assistance	37%
3	Health	34%

refugee households reported that they did not require further assistance, while others sought guidance on how to access humanitarian aid (33%), obtain financial support (19%), and access healthcare (14%).

Within the host community households (n=212), more than half (55%) reported no unmet needs, but those who did expressed similar types of needs as refugee households: health (23%), food (14%), and economic assistance (14%). The priority needs for the host community were focused on health (46%), followed by food (26%) and economic assistance (25%). Host community households also demonstrated varying levels of knowledge about available services. Almost half indicated they were aware of legal advice (49%), administrative services (47%), and financial assistance (47%). However, awareness of child protection services (15%) and GBV protection services (9%) was notably lower. In FGDs, the most mentioned needs by members of the host community related to access to healthcare, to water, sanitation and hygiene (WASH), as well as the need for better infrastructure, particularly roads, employment opportunities and support for older individuals.



WASH

Among both surveyed groups most reported they were not experiencing any WASH-related issues (74% of host community households, n=212, and 76% of refugee households, n=37). This figure was higher among urban household community households (n=110), at 80%, than among rural ones (n=102), at 68%, indicating better access to infrastructure in the urban areas.

Host community households also indicated some issues: 10% reported issues with the waste-water systems, 8% noted problems with access to drinkable water from the mains pipelines, 6% noted problems with solid-waste management, 5% noted problems with sanitation facilities, and 2% noted problems with bathing facilities. Issues with the sanitation facilities were most reported by refugee households (16%), followed by those with sewerage (11%) and bathing facilities (8%).

DISASTER RISK REDUCTION

Surveyed communities faced significant natural hazards, with drought, sudden temperature changes, and hail being the most reported risks. Local authorities mentioned being actively engaged in mitigation and adaptation efforts such as reforestation, improving infrastructure, and providing financial support to those affected by natural hazards, but surveyed communities still face gaps in disaster-risk preparedness and shelter options.

A considerable share of sampled households were observed to be particularly vulnerable to hazards due to their reliance on agricultural land and the environment, which are highly exposed to natural and man-made hazards. More than half of the host community households (66%) were involved in agricultural activities, either for their own consumption or commercial purposes, with 49% engaging in farming strictly for personal consumption. The involvement in agriculture was notably higher in rural areas (n=102), where 89% of respondents practiced agriculture, compared to only 59% in urban areas (n=110). Among refugee respondents, about a quarter (26%) were engaged in agriculture for personal consumption, and an additional 3% combined personal and commercial farming.

Households who were involved in agriculture were asked which natural hazards had a significant impact on their livelihoods, with 56% of host community respondents identified drought as a prevalent natural hazard, 36% sudden changes in temperature, followed by hail (15%), all of which are detrimental to agriculture. In urban areas (n=61), 51% of households cited sudden changes in temperature as a critical environmental risk, significantly more than the 9% households reporting this in rural areas (n=91). Notedly, around a third (33%) of the host households reported no natural hazards, suggesting that some areas may have less exposure to extreme weather events or a understanding perception of what natural hazards among respondents. In contrast, FGD participants revealed that floods and heavy rain were the natural hazards affecting host communities most. These events were noted to cause significant destruction to infrastructure and homes, and crop losses led to financial damage. Host community members also noted that sewage systems were often blocked during heavy rains. Man-made hazards, such as gas explosions and garbage accumulation during storms, were also mentioned, albeit less frequently. The difference in the natural hazards reported may stem from the different perspectives of those involved in agriculture and the larger public, but also highlights how the frequency and nature of these hazards may impact different groups in the same communities very differently.

Local authorities identified drought as the most significant natural hazard affecting the community, followed by hailstorms and floods. The most commonly reported



89% of host community households residing in Căușeni city (n=110) and **97%** refugee households (n=32) **were not aware** of the existence of **official emergency shelters**

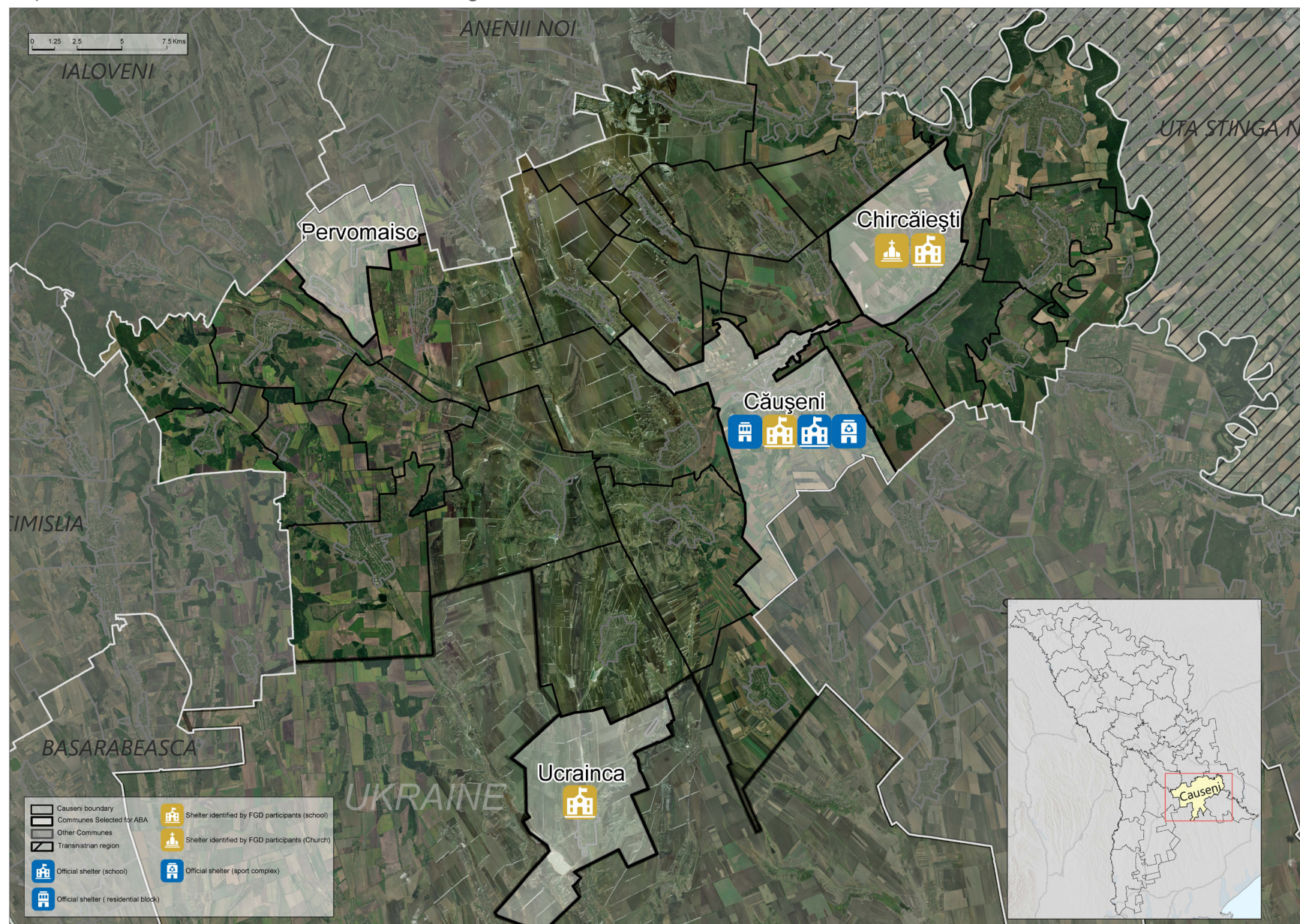
impacts included income loss, due to reduced crop yields, and property damage. Many local authorities highlighted the vulnerability of agriculture to these natural hazards, with the deterioration of irrigation systems cited as a key factor in exacerbating the situation.

Efforts to mitigate exposure to natural hazards included reforestation, the procurement of specialized machinery, and efforts to discourage illegal fires. However, some local authorities expressed a lack of awareness about the availability of disaster management coordination structures and identified a range of needs for improving long-term resilience. These included the repair or expansion of critical infrastructure, the purchase of additional equipment, and the establishment of better coordination between public bodies and subject-matter experts in disaster response. To reduce the impact of natural hazards, host community members described various mitigation and preparedness efforts, such as unclogging wells, increasing afforestation, and providing financial support to affected individuals. They also expressed several needs to enhance resilience, including the construction of hail defense systems, road quality improvements, and information campaigns on the risks of illegal fires.

Schools emerged as a key actor in disaster-risk preparedness, as all service providers explained that regular trainings and emergency drills were conducted and most mentioned their schools had an emergency plan in place. However, they also noted diverse needs for better disaster risk preparedness, such as that for emergency supplies, that for a fire alarm system, functioning fire extinguishers or appropriate furniture. In terms of available facilities, most service providers noted the basement of the institution could be used as shelter but that they were unequipped. When discussing shelter options, many FGD respondents mentioned using basements, specifically the basement of the local school or their own homes (see Map 2). However, some groups noted that no information was available about official shelters, mirroring survey findings, and others considered basements unsafe during emergencies due to structural concerns.

DISASTER RISK REDUCTION

Map 2: Official and informal shelters identified through FGDs in the assessed localities¹⁸



LIMITATIONS

- While initially a GPS randomized sampling method was planned on being used for host community households, due to delays in receiving GIS data it was not possible to have the mapping finalized before the start of data collection. To mitigate this, the enumerators were asked to go to follow a systematic sampling approach going to every fourth house and start from different sides of the localities to warrant randomization as well as complete coverage of the assessed localities.
- Due to difficulties in finding refugee respondents in rural areas, some of the refugee respondents were identified with the support of social workers in the locality, thus increasing the possible bias in sampling, as these respondents were more likely to have a legal status in Moldova or be more dependent on social support services.

ENDNOTES

- 1 [FAO, Comprehensive Analysis of the Disaster Risk Reduction System for the Agriculture Sector in the Republic of Moldova, Budapest, 2023, vii](#)
- 2 [BBC, "Moldova Country Profile", May 2023.](#)
- 3 [World Bank, "Climate-Smart Agriculture in Moldova", June 2019.](#)
- 4 FGDs with host community members were organised in each assessed locality, with an additional one organised in Căuşeni city. The four FGDs with refugee participants were organised as such: one in Pervomaisc, one in Ucrainca, and two in Căuşeni city. No FGD with refugees in Chircăieşti could be organised due to the limited number of refugee respondents there.
- 5 During the data cleaning process, households for which any household member was indicated to be involved in caregiving duties were verified based on their composition. As such, in households with no minors, PwDs or older persons, no household member was considered to have a need to provide caregiving duties.
- 6 [REACH, "Anenii Noi Raion Area Based Assessment", December 2023.](#)
- 7 The sum does not add up to 100% due to rounding.
- 8 Respondents could select multiple options.
- 9 Sum may exceed 100% due to rounding.
- 10 Respondents could select multiple options.
- 11 Due to inputting errors during data collection, this question was filled in for part of the subset only.
- 12 Due to inputting errors during data collection, this question was filled in for part of the subset only.
- 13 [REACH, "Anenii Noi Raion Area Based Assessment", December 2023.](#)
- 14 [The Government of the Republic of Moldova, "Salariul minim pe țară în anul](#)

[2024 va constitui 5000 lei, mai mare cu 1000 de lei decât în 2023".](#)

15 [National Bank of Moldova, Exchange rate.](#)

16 Respondents could select multiple options.

17 Respondents could select multiple options.

18 The official shelters were mapped in accordance with [the mapping provided by the Moldovan Inspectorate for Emergency Situations \(IGSU\)](#). The informal maps were those identified by FGD participants through a participatory mapping exercise. Participants in Pervomaisc did not identify any places where they could seek shelter in their commune. For more detailed maps of the other three localities, please consult the [IMPACT Resource Center](#).

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).