IOM UN MIGRATION | GLOBAL DATA INSTITUTE DISPLACEMENT TRACKING MATRIX

UKRAINE CRISIS RESPONSE

| 2022 - 2023 |

Republic of Moldova

SURVEYS WITH FOREIGN POPULATIONS IN CAHUL AND BALTI MUNICIPALITIES

Joint MGI-DTM Initiative

Data collection: 06 February - 11 March 2023

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List of Acronyms:

CD: Chronic Disease
DTM: Displacement Tracking Matrix
FD: Functional difficulty
HH: Household
L/C FD: at least one family member with high levels of functional difficulties ("L" – a lot of and "C" – cannot do at all), family members with disabilities.
MGI: Migration Governance Indicators
NGO: Non-governmental organization
PLW: Pregnant and Lactating Women
PWD: Person with a disability
RAC: Refugee Accommodation Centre
S/L/C FD: People with "S" – some difficulty, "L" – a lot of and "C" – cannot do at all functional difficulty.
TCN: Third-Country Nationals
UN: United Nations
WA: Washington Group

KEY FINDINGS

Data collection – 6 February to 11 March

84% 16%

Balti = 379

Cahul = 282

99% respondents were Ukrainian. 3 individuals were Third Country Nationals (TCNs)

Survey: 661 respondents.

Age Profile: **Average age** was **43 years for women** and **49 years for men**. Median age was lower than average for women suggesting more younger women travelers. Average age for travelers is higher in Balti, 48 years, than in Cahul, 41 years.

Oblasts(regions) of Origin: Top 3 regions of origin are **Odeska, Mykolaivska** and **Donestka.** 38 per cent originate from other regions in the rest of Ukraine. Proximity to Ukraine and a common language (Russian) are the main reasons for coming to Moldova **(57% proximity, 48% Russian language)**

Accommodation:

Type of Accommodation	Percentage
Private	35%
Refugee Accommodation Centre	22%
NGO\UN Supported	10%
Other (Various)	33%

Household composition:

84% of migrants live in family groups.

Single family households = 16%.

Children under 17 years and elderly persons over 60 years among households

Household Vulnerability:

179 Total cases of disabilities among respondents' households.

38% of disability cases affect persons over 60 years.

16% of disability cases are children between the ages of 5 and 17.

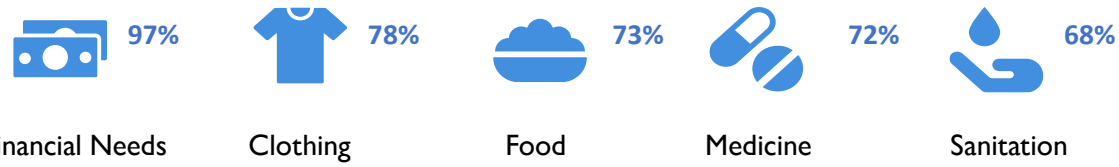
43% of respondents had family members with at least one functional difficulty.

12% had a family member with a disability and a chronic disease,

8% had at least one family member with a chronic illness but no functional difficulty.

Household needs:

Financial support amounted 97 per cent of household needs while other common needs were health services, clothing, food and medicines.



Other significant needs were personal hygiene items, long term accommodation, smartphones, or computers as well as spaces or activities for children. Households with pregnant and lactating women had the highest number of needs followed by households with members with a chronic illness.

Ninety-five per cent of those interviewed reported *no difficulties or challenges in accessing public services* in both municipalities. All respondents indicated having accessed at least one public service although the level of satisfaction with service provision was higher in Balti. The highest level of dissatisfaction with service provision regarded services of employment agencies. Majority also accessed services provided by non-governmental, international, or private organizations with more such services being accessed in Balti than Cahul.

Education and Employment profiles reveal that 47 per cent of respondents obtained a higher education diploma, while 25 per cent had attained technical or vocational training and secondary education, respectively. Only three per cent, reported having a primary education or no education at all.

Only 10 per cent of those who were previously employed or self-employed in their country of origin found employment in the Republic of Moldova. among those seeking employment, 11 per cent reported that they would prefer working in the services sectors while another 11 per cent preferred some other professions.

1. INTRODUCTION

A total of 661 persons were interviewed between 6 February and 11 March 2023, of whom 379 were in Cahul and 282 were in Balti municipalities. The two municipalities were selected specifically based on presence of refugees and TCNs as well as **existing capacity of IOM, local authority, and other partners.** Almost 46 per cent of the respondents were interviewed at nearby public administration buildings (town hall, polyclinic, schools, kindergartens, etc.), 16 per cent were interviewed at refugee accommodation centres, 13 per cent at rented/free accommodations and 10 per cent at information and registration centers for refugees. The remaining 14 per cent were interviewed at other locations such as NGOs (6%), host family accommodation (5%), hotels (2%) and shops (1%). The share of those who were interviewed at nearby public administration buildings was higher in Balti than in Cahul (65% versus 32%) while the share of those who were interviewed at information centers was higher in Cahul than in Balti (17% versus 1%).

Figure 1: Location, number of surveys, gender distribution

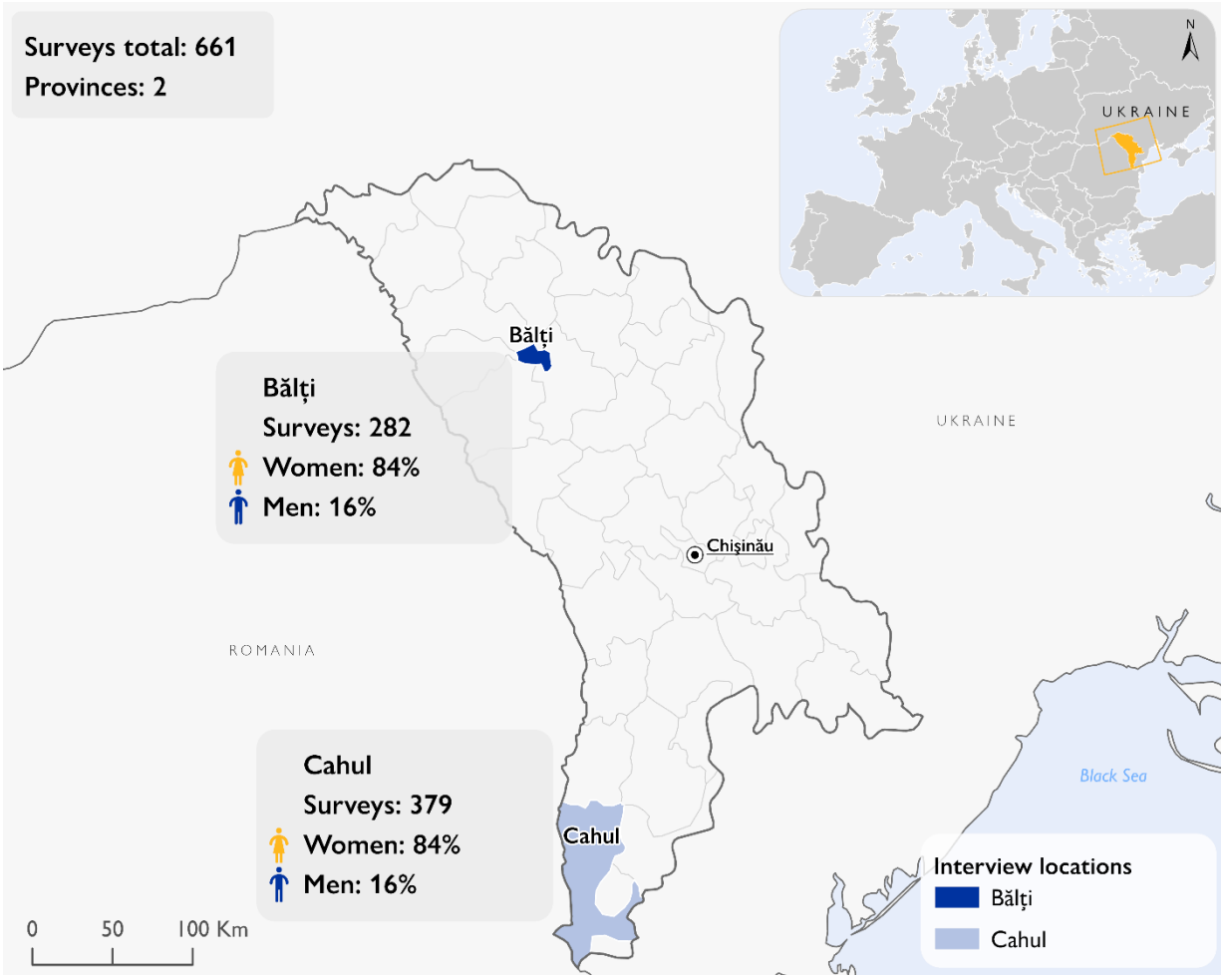
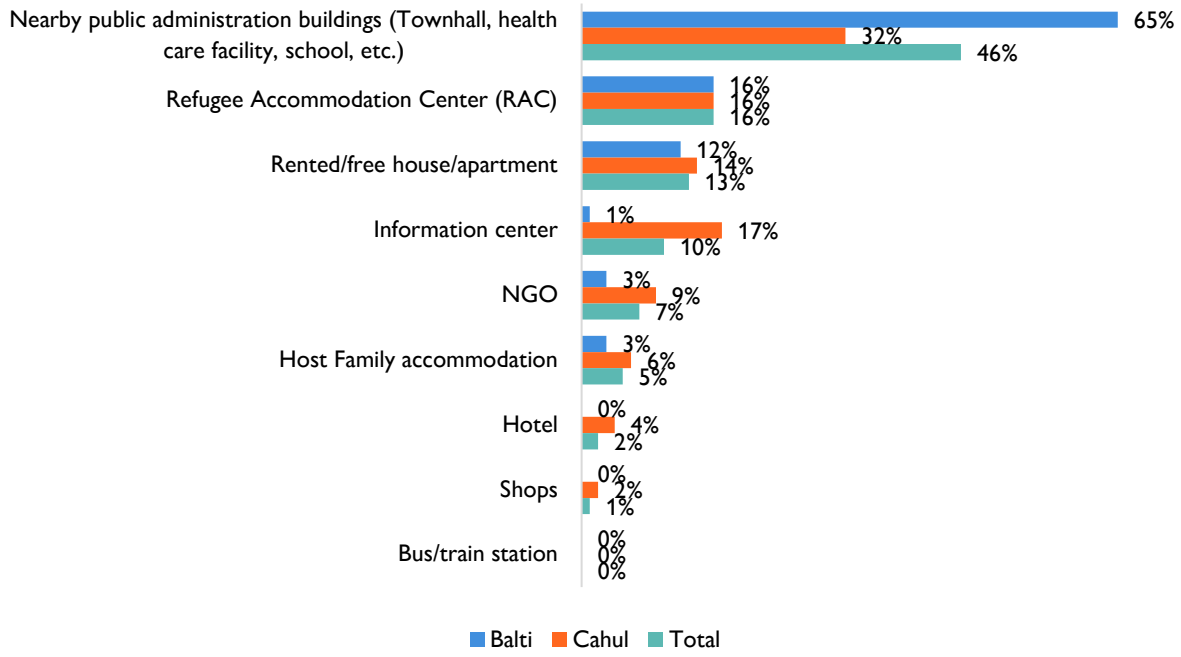


Figure 2: Distribution of respondents by type of location of the interview (%)



Most respondents were Ukrainian citizens (more than 99%) and only three persons declared being citizens of other countries (France, Kazakhstan, and the Russian Federation). When asked about their last country of residence, 98 per cent declared that it was Ukraine, while the remaining two per cent mentioned Albania, France, Germany, Kazakhstan, Poland, Romania, the Russian Federation, and the United Kingdom. About 90 per cent of respondents arrived in the Republic of Moldova in 2022, 9 per cent in 2023 and one per cent arrived before 2022. Regarding the date of leaving their country of residence, 90 per cent responded that they left in 2022, eight per cent in 2023 and two per cent in 2021.

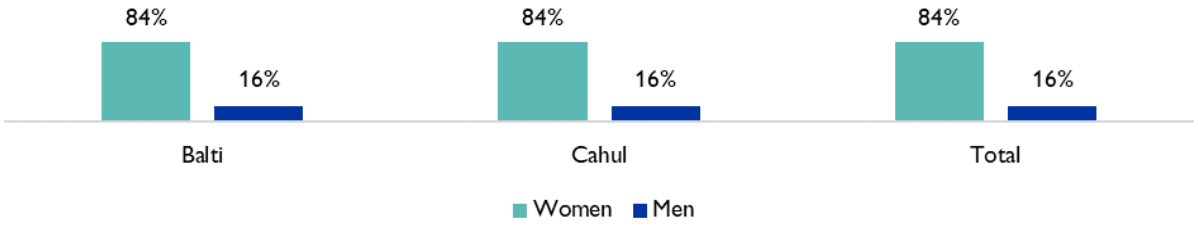
Table 1: Date of arrival in the Republic of Moldova and date of leaving the country of residence of respondents by year (number of respondents)

Year of arriving in the Republic of Moldova / Year of leaving the country of residence	2020	2021	2022	2023	Total
2020	1		1		2
2021		1	8	1	10
2022			584	11	595
2023				54	54
Total	1	1	593	66	661

Most respondents indicated that they left their country of residence because of the conflict in Ukraine (95%), while two per cent left because of the economic situation. The remaining two per cent preferred not to answer this question, and one per cent indicated other reasons (health or family issues). Residence

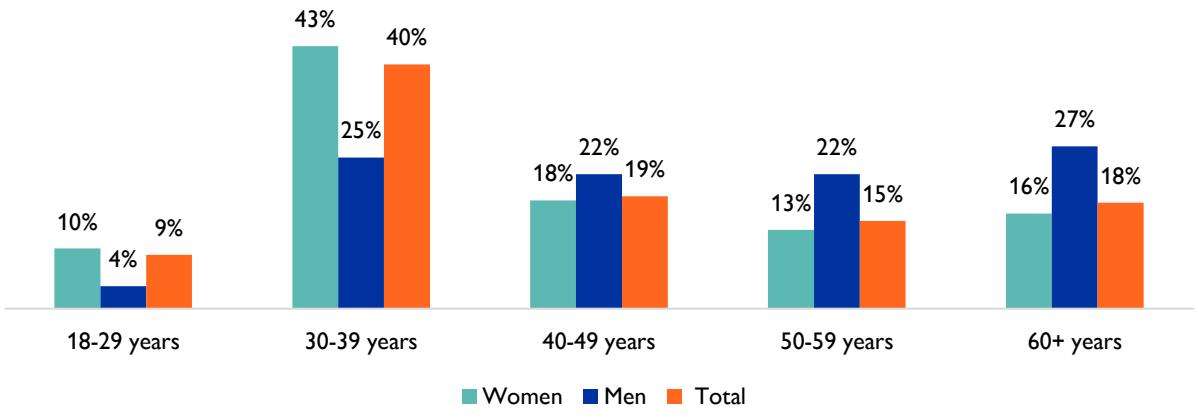
Almost 84 per cent of respondents were women, and 16 per cent were men. Since most of the respondents were Ukrainian citizens, the low proportion of men respondents was likely due to the martial law declared in Ukraine on 24 February 2022 that stipulated that all men between the ages of 18 and 60 were no longer allowed to leave the country. Similar proportions of women (84%) and men (16%) were recorded in Cahul and Balti municipalities.

Figure 3: Distribution of all respondents by sex and location of interview (%)



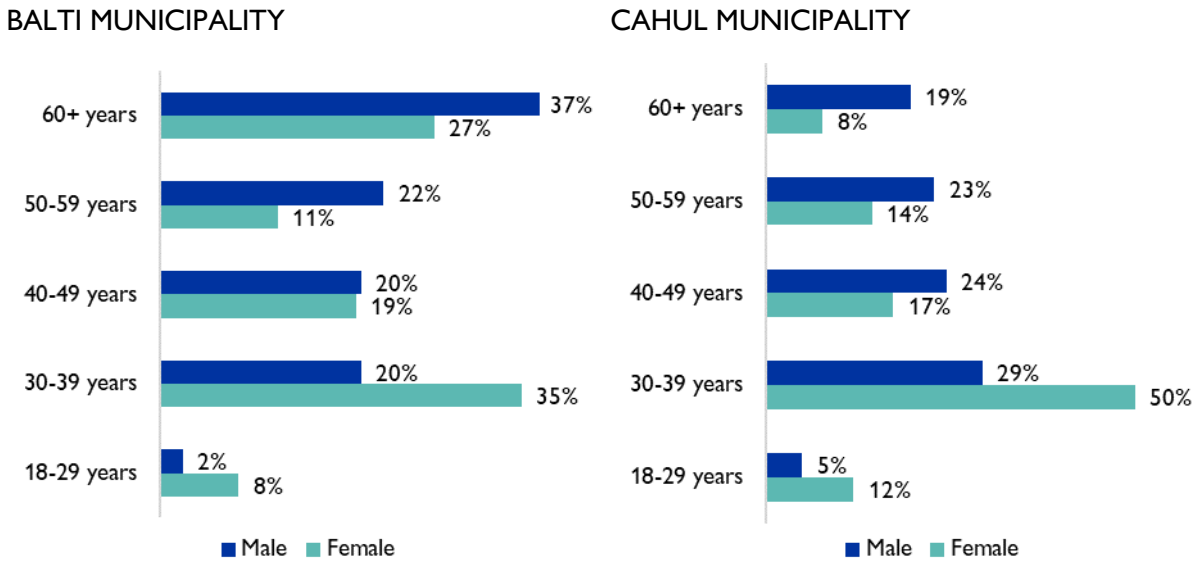
The median age of all respondents was 40 years but the age profiles between men and women were different. On average women were 43 years old, while men were 49 years old. The proportion of older persons was higher among men (27%) compared to women (16%). Almost half of women respondents (43%) were aged between 30-39 years, compared to 25 per cent of men respondents.

Figure 4: Distribution of respondents by sex and age group (%)



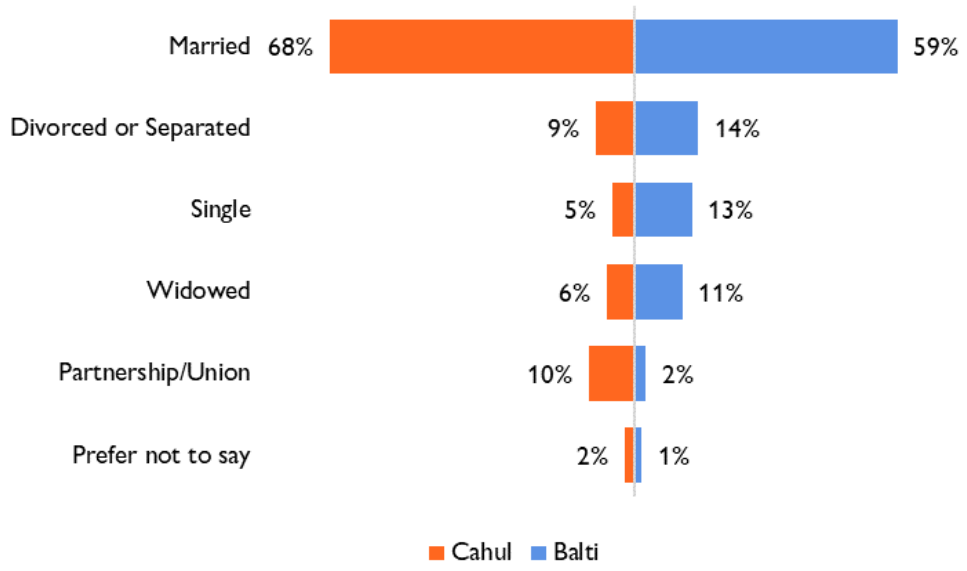
The percentage of older persons was higher in Balti than in the Cahul municipality. One-third of the male respondents in Balti were 60 years old and over compared to a quarter of the female respondents. In Cahul, a fifth of male respondents were 60 years and over, compared to one-tenth of the females.

Figure 5: Distribution of respondents by sex and age group, in Balti and Cahul municipality (%)



Most respondents declared being married (64%), 11 per cent declared being divorced or separated, eight per cent were single and another eight per cent were widowed, seven per cent were in a partnership or in a civil union, and two per cent preferred not to answer this question. In Cahul, the share of married respondents was higher compared to Balti municipality (68% vs 59%).

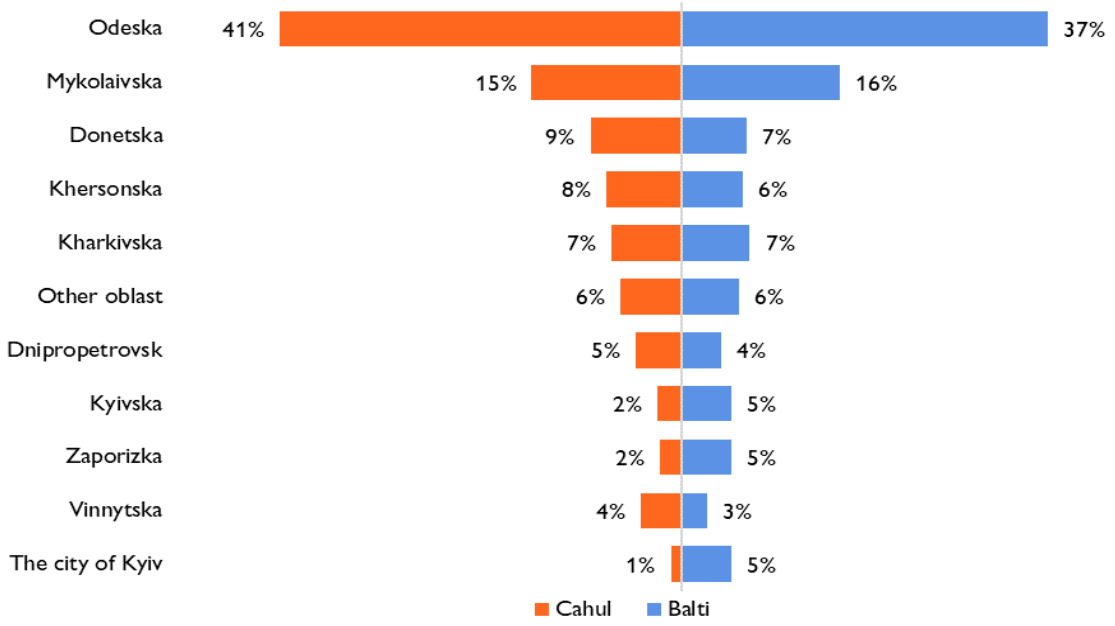
Figure 6: Marital status of respondents by municipality (%)



Among the 646 respondents who declared that their last country of residence was Ukraine, the Top 5 regions of origin or usual residence in Ukraine were Odeska (39%), Mykolaivska (15%), Donetska (8%),

Kharkivska and Khersonska (7% each), with the remaining 24 per cent reporting their habitual residence to have been in other regions of Ukraine. The distribution of responses by region of habitual residence in Ukraine was similar in Cahul and Balti municipalities.

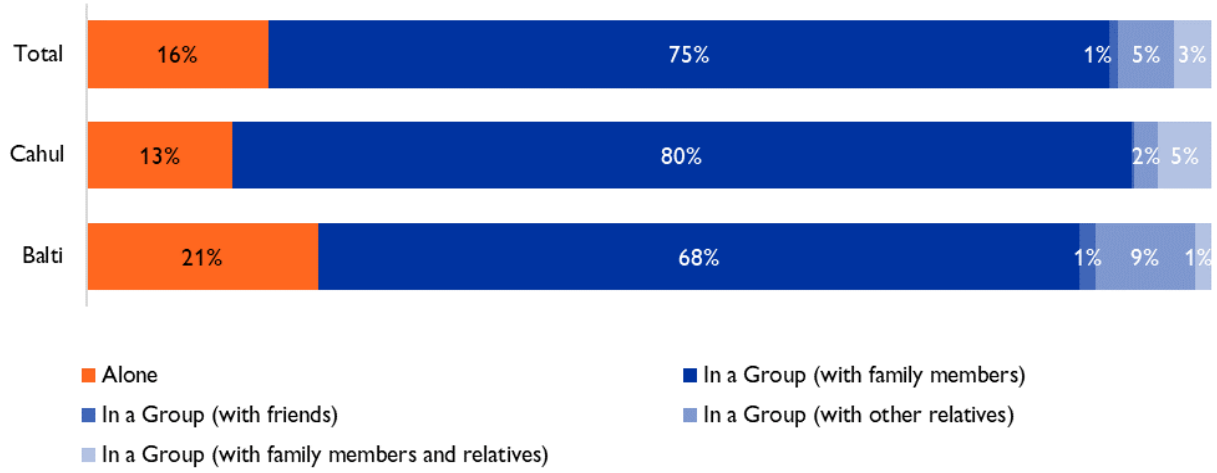
Figure 7: Distribution of respondents by region of habitual residence in Ukraine, by municipality (%)



2. TRAVELLING CHARACTERISTICS

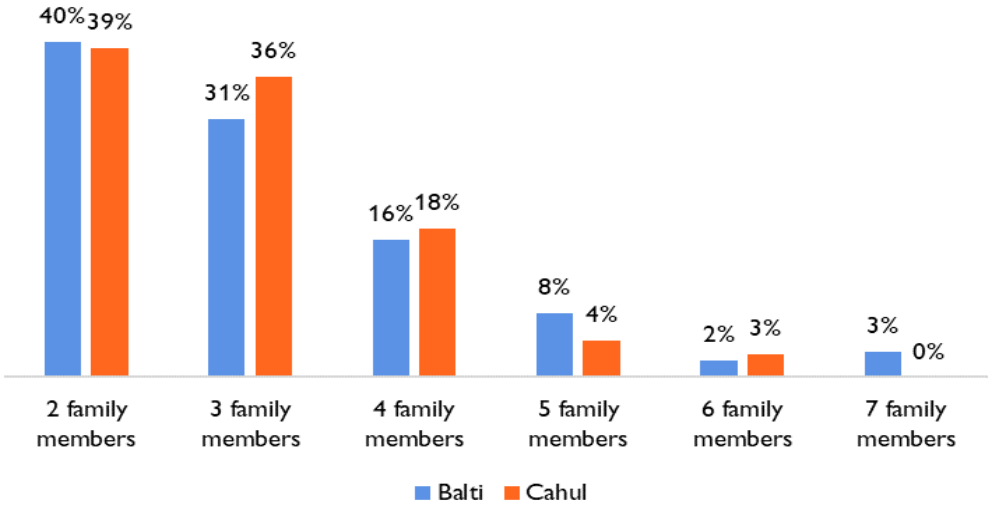
Around 84 per cent of respondents reported living in the Republic of Moldova in a group and 16 per cent alone. The share of those living alone was higher in Balti compared to Cahul (21% vs 13%). Of those who reported living with a group the majority were living with family members (75% out of the total number of respondents).

Figure 8: Distribution of respondents by travel mode and by municipality (%)



Among those who reported living with family almost 40 per cent were living in a group of two persons, 34 per cent in a group of three persons, and 27 per cent were in a group of 4 or more members. The family size distribution was similar among respondents in Cahul and Balti municipalities.

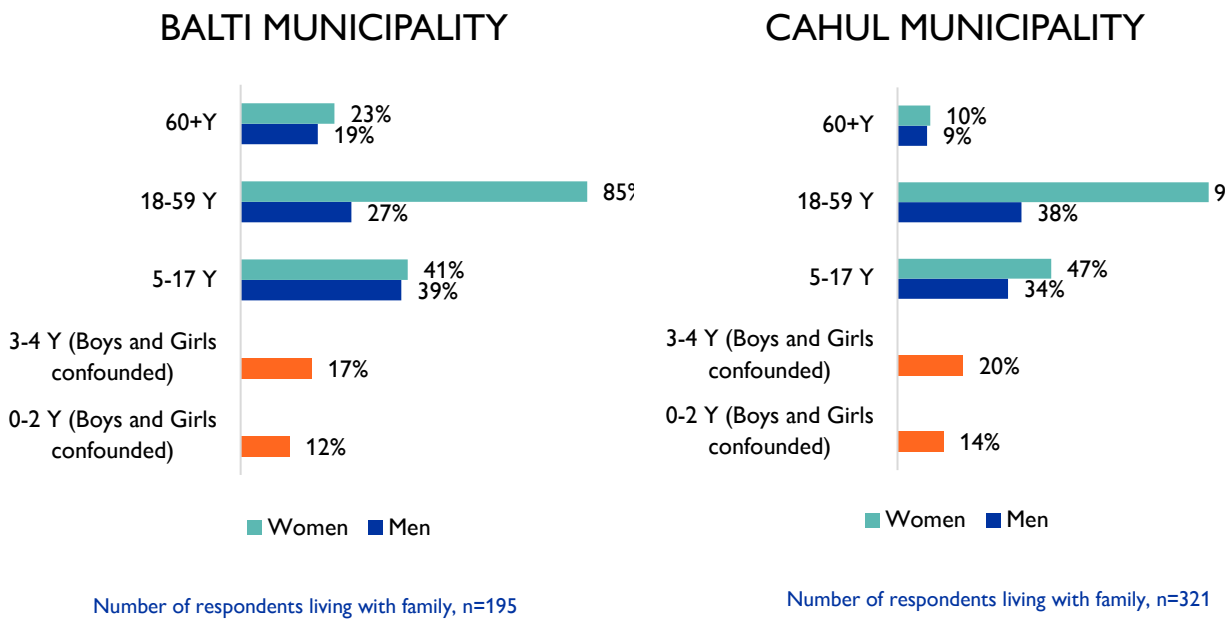
Figure 9: Distribution of respondents living with their family, by number of members (%)



Out of those living with family, 30 per cent were living with babies 0-4 years old (14 per with newborns aged 0-2 years, and 19 per cent with toddlers 3-4 years old). The share of families with babies was similar in Cahul (31%) and Balti (29%). Half of the households reported having girls aged 5-17 years (45%) and one third reported having boys aged 5-17 years (36%). The share of respondents accompanying children was higher in Cahul than in Balti (20 % of children were between 3-4 years and 14% were babies 0-2 years old in Cahul and 17% of children from 3-4 years old and 12% were 0-2 years old in Balti respectively).

Among those living with family, about 20 per cent were accompanying an older person (29% in Balti and 15% in Cahul). About 15 per cent reported living with elderly women (60+) and 13 per cent with elderly men (60+). The share of those living with an older person was higher in Balti than in Cahul (23% in Balti were living with women 60+ and 19% with men 60+, while in Cahul 10% were living with women 60+ and 9% with men 60+).

Figure 10: Family member's gender and age group by municipality (%)



Number of respondents living with family, n=195

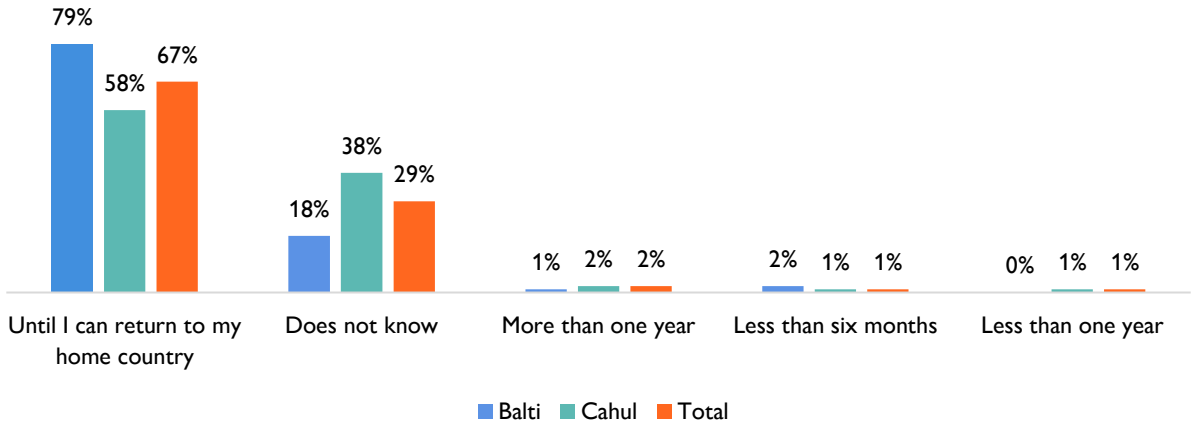
Number of respondents living with family, n=321

Two respondents in Balti and eight in Cahul declared they were living with children to whom they were not a parent or legal guardian. Out of two concerned respondents in Balti, one accompanied one child in this category and the second respondent accompanied two children in this category. Out of 8 respondents in Balti, each of 7 respondents was accompanying 1 child and 1 respondent declared to accompany 3 children in this situation.

3. MOBILITY INTENTIONS

Almost 67 per cent of the respondents declared they intended to stay in the Republic of Moldova until they can return home and 29 per cent were uncertain about their duration of stay, about two per cent intended to stay more than one year, one per cent for less than one year and other one per cent less than 6 months. The two most common answers to this question – "*until I can return home*" and "*does not know*" - prove a high degree of uncertainty regarding respondents' duration of stay in the Republic of Moldova, both in the Cahul and Balti municipalities (96%).

Figure 11: Intended duration of stay in the Republic of Moldova by municipality (%)

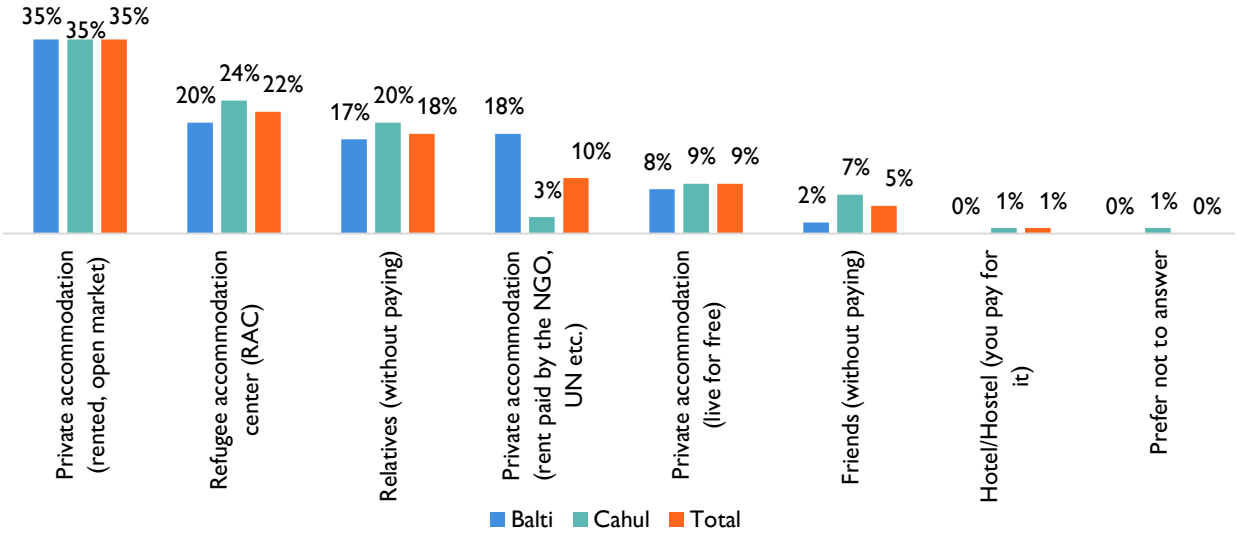


One-third of respondents reported staying in the Republic of Moldova in private accommodation (35%), 22 per cent in RACs, 18 per cent with relatives (without paying), and 10 per cent in private accommodation, rented or paid by NGOs or UN agencies. The remaining 15 per cent reported other types of accommodation (private accommodation for free, staying with friends, staying in hostels or hotels and less than one per cent preferred not to answer to this question. The share of those who reported living in private accommodation, rented by NGO, UN agencies or other organizations, was higher in Balti than in Cahul (18% versus 3%).

This difference is likely due to the method used for selecting individual members of the targeted population for this study. Some enumerators hired for this exercise in Balti were involved in other IOM exercises[1] in the region during which they had to visit Ukrainian refugees at home and provide support to older persons who were not able to come to the registration centre. The differences in sampling methods explain, partly, the differences in respondents' age cohorts observed in the two municipalities but also the reported type of accommodation.

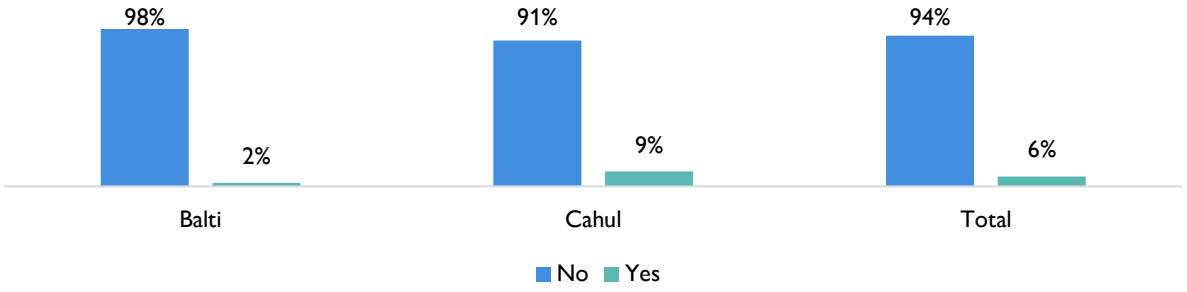
[1] The enumerators hired for this exercise in Balti municipality were part of IOM's Camp Coordination and Camp Management (CCCM) teams. One of their activity was dissemination of information to Ukrainian refugees regarding available assistance, services and protection programs.

Figure 12: Reported type of accommodation in Cahul and Balti municipalities (%)



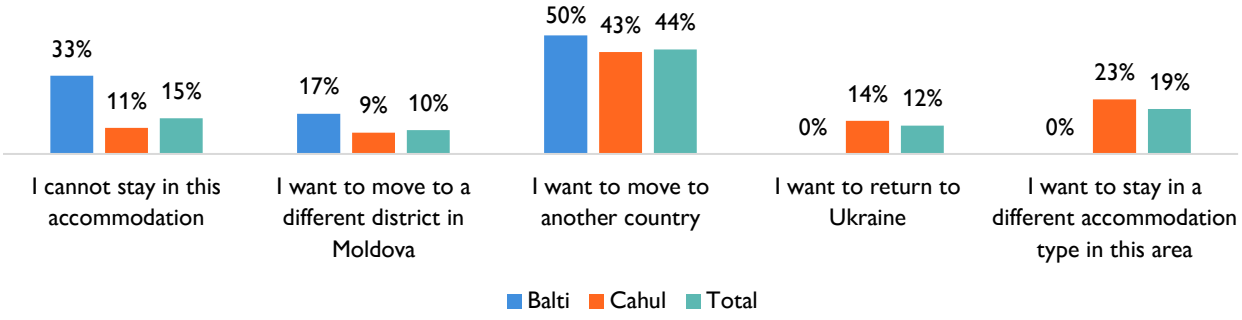
When asked if they intend to leave their actual accommodation 94 per cent answered negatively and 6 per cent positively. The share of those who intended to leave their actual accommodation was higher in Cahul than in Balti (9% versus 2%). The most common reasons for leaving their accommodation were the intention to move to another country (43% in Cahul and 50% in Balti), to stay in a different type of accommodation in the same area (23% in Cahul but 0% In Balti), the impossibility to stay in their accommodation (33% in Balti and 11 in Cahul). About 12 per cent of respondents declared that they want to return to Ukraine (14% in Cahul but 0 % in Balti) and 10 per cent of respondents indicated that they want to move to a different district in the Republic of Moldova (17% in Balti and 9% in Cahul).

Figure 13: Intention to leave their accommodation in Cahul and Balti municipalities (%)



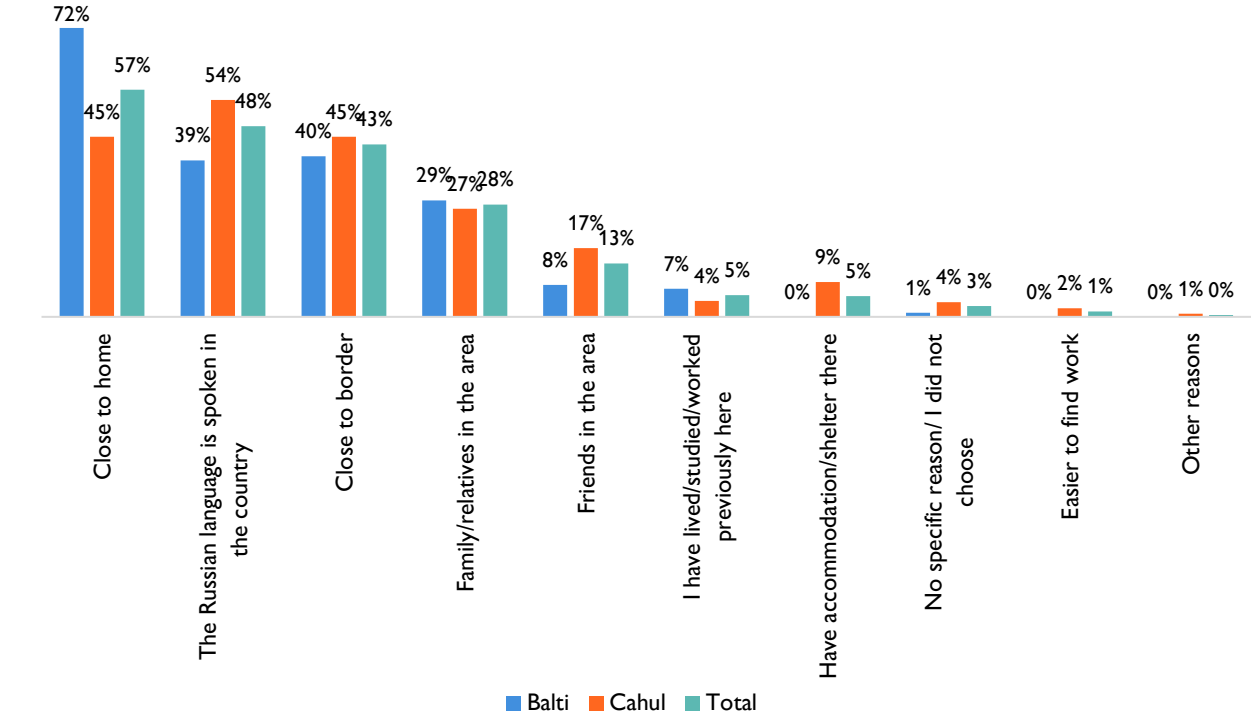
Eighteen respondents intended to move to another country (15 in Cahul and 3 in Balti). Five persons planned to move to Germany (4 from Cahul and 1 from Balti), four to Ireland (all 4 from Cahul), three to the United States of America (2 from Cahul and 1 from Balti), two to Austria (both from Cahul). The other four reported other countries of destination (Bulgaria, Italia, Latvia, Turkey). Four respondents (one in Balti and three in Cahul) intended to move to other districts in the Republic of Moldova and all of them intended to move to the capital city, Chisinau.

Figure 14: Reasons for leaving their accommodation in Cahul and Balti municipalities (%)



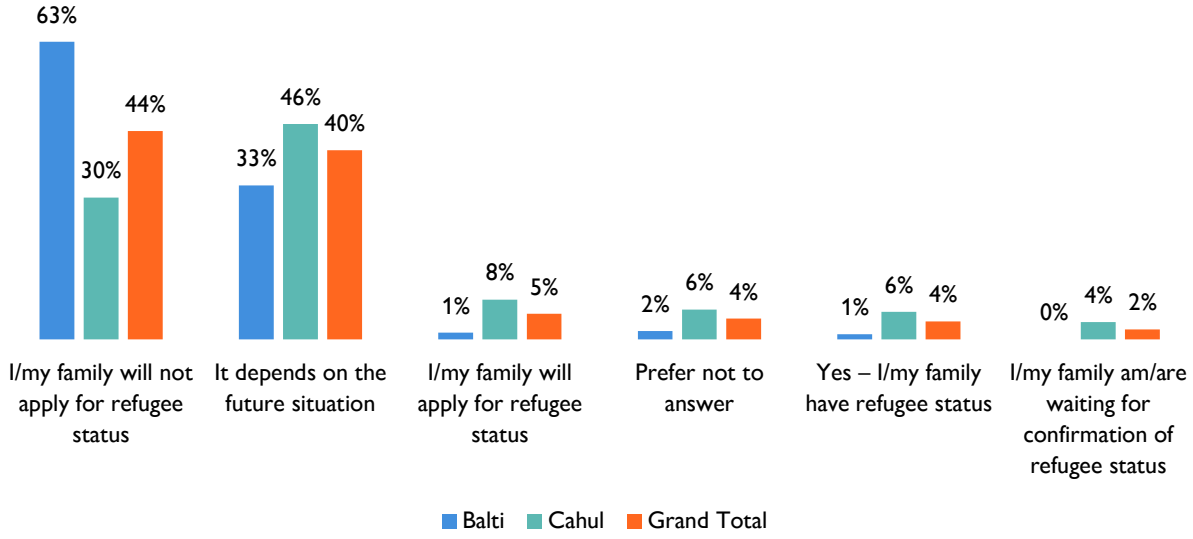
Among the reasons for choosing the Republic of Moldova as a host country, 57 per cent of respondents mentioned that it is close to home, 48 per cent that the Russian language is spoken in the country, and 43 per cent that it is close to the border. Other reported reasons were family or relatives in the area (28%), friends in the area (13%), previous experience of living/studying or working here (5%), accommodation or shelter (5%), no specific reason (3%), easier to find work (1%) and other reasons (less than 1%). The share of those who reported choosing the Republic of Moldova because it is closer to home was higher in Balti than in Cahul (72% versus 45%), while the share of those who declared choosing this location because of the ability to communicate in the Russian language or having friends in the area was higher in Cahul than in Balti (54% versus 39% and 17% versus 8% respectively). The other reported reasons were similarly distributed among respondents in the two municipalities.

Figure 15: Reasons for choosing the Republic of Moldova as a host country (%, multiple options)



When asked about their intention for applying or considering applying for asylum, almost 44 per cent reported that they or their family do not intend to apply for refugee status, 40 per cent reported that it depends on the future situation and only five per cent declared that they or their family will apply for refugee status. Four per cent indicated that they already have refugee status and two per cent that they are waiting for a confirmation of their refugee status. About four per cent preferred not to answer this question. The share of those who declared to be unwilling to apply for refugee status was higher in Balti than in Cahul (65% versus 30%) while the share of those who linked their decision for applying for refugee status to the future situation was slightly higher in Cahul than in Balti (46% versus 33%).

Figure 16: Intention for applying or considering applying for asylum?



4. FUNCTIONAL DIFFICULTIES, CHRONIC DISEASES, PREGNANT AND/OR LACTATING WOMEN

The questionnaire included the Washington Group (WG) Short Set of questions on Functioning (www.washingtongroup-disability.com) that looked into the level of difficulty that the respondents or any member of their household might have with: seeing, hearing, mobility, cognition, self-care and communication. To strengthen the analysis and the use of data, the information collected was disaggregated by age and functional difficulty (see Annex 1).

Due to time limits imposed by an already lengthy questionnaire and the main scope of the research, the study had several limitations in data collection of functional difficulties. The questionnaire has not been configurated to capture detailed information on the specific condition of every household member, therefore:

a) If a respondent declared to have more than one family member in the same age group with the same functional difficulty, only the member with the highest level of difficulty has been considered and counted within the data analyses.
b) The questionnaire setup did not allow us to investigate the correlation between functional difficulties and chronic diseases: a certain number of persons who had a functional difficulty, may have developed an adjacent chronic disease, as well as a certain number of persons who have a functional difficulty may have a chronic disease unrelated to their disability.
c) No disaggregation has been made by sex.
d) There is no disaggregated data on the individual needs of all household members with functional difficulties, chronic diseases, or pregnant/lactating women. The needs expressed by the respondent were presumably for the entire household.

Out of 661 respondents, 43 per cent (or 289 respondents) had family members with at least one functional difficulty (419 functional difficulties reported) and one-fifth (130 respondents) had at least one family member with high levels of functional difficulties ("L" – *a lot of* and "C" – *cannot do at all*), categorized as *disability or person with a disability (PWD)* according to WG Analysis Guidelines. Almost 12 per cent (78 respondents) had at least one person with disability and a chronic disease, and eight per cent (56 households) had at least one family member facing only chronic diseases, without functional difficulty.

Among the 130 households with at least one family member with a disability, 179 cases of disability were reported (140 in Balti and 39 in Cahul). In other words, in 49 cases, there was more than one reported disability per household (several disabled persons per household or a person with several disabilities), including seven cases of severe functional difficulty ("Cannot do at all"). The relatively high share of respondents facing multiple disabilities per household indicates a higher degree of vulnerability and respectively a higher need for additional specialized support.

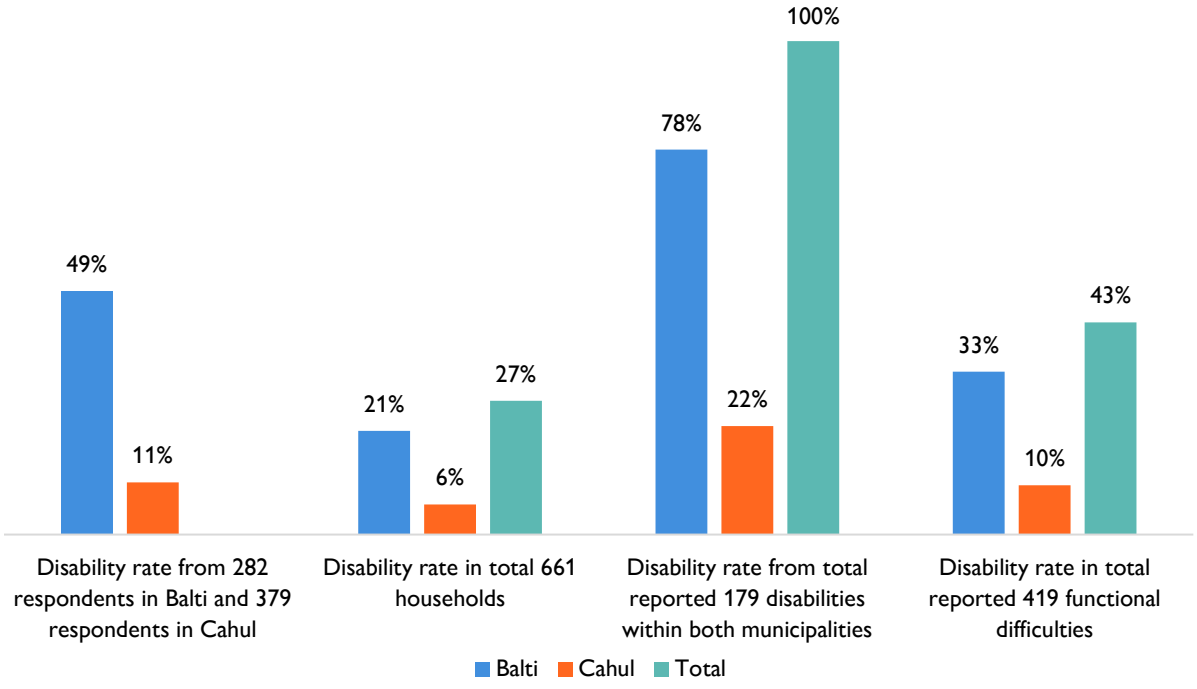
Out of 179 reported cases of disability, 48 per cent concerned older people, 60 years and more. No cases of disability among children under 5 years old were reported while almost 16 per cent of the total number

of disabilities concerned children aged between 5 and 17 years old (28 out of 179 reported disabilities). The prevalence of children with disabilities is very high compared to the overall prevalence of children with disabilities in the Republic of Moldova (3%), in Ukraine (6%) or even worldwide (10%). The explanation for it might consist of the relatively high share of children among refugees from Ukraine. According to Moldovan border police, children constitute 50 per cent of the total number of displaced persons from Ukraine residing in the Republic of Moldova.

Almost one-third of respondents reported having at least one family member with seeing difficulties (35% or 229 households), and 13 per cent reported having a person with walking difficulties (83 households). Lower shares were reported for households with hearing difficulties (8% or 50 households), remembering difficulties (3% or 23 household with self-care difficulties (2% or 12 households) and less than one per cent were facing communication difficulties (less than 1% or 2 households).

Most interesting findings are related to the differences in functional difficulties, as well as chronic disease prevalence in each of assessed municipalities. Thus, in Balti the proportion of functional difficulties relative to the number of households is 82 per cent and of households with chronic disease is 40 per cent, while in Cahul the proportion is 50 per cent and 20 per cent respectively. Subsequently, even if Balti and Cahul share 43 per cent and 57 per cent of the total number of 661 assessed households, Balti has 55 per cent of total functional difficulties. More than that, with a relatively similar prevalence of some functional difficulties in Balti (33%) and Cahul (39%), the prevalence of disabilities in Balti is five times higher than in Cahul (49% versus 10%).

Figure 17: Disability rate, functional difficulty rate, by municipality (%)



A cross-cutting analysis by type of functional difficulty shows that the rate of persons with multiple functional difficulties was seven times and respectively five times higher among persons with communication and remembering difficulties, compared to persons with seeing difficulties. In other words, households with communication or remembering difficulties usually cumulated more than one disability.

Table 2: Households having at least one member with functional difficulties (number and prevalence)

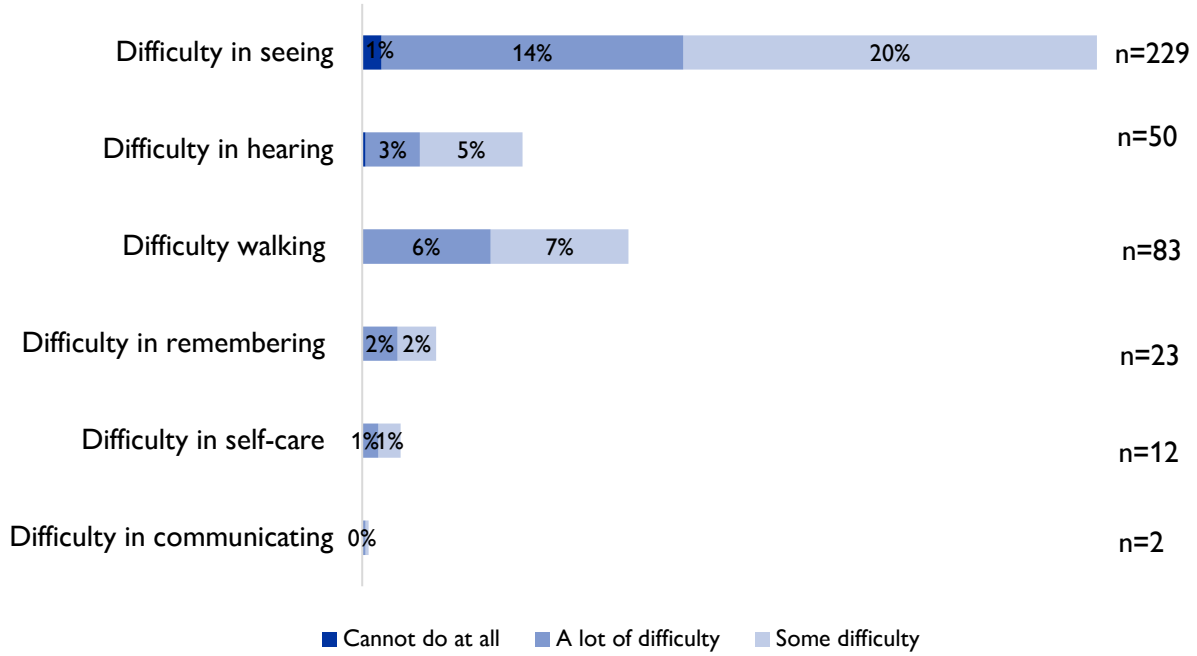
#/% of HHs with FDs	Seeing		Hearing		Walking		Remembering		Self-care		Communicating		Total
	#	%	#	%	#	%	#	%	#	%	#	%	%
Cumulative %		**44%**		**136%**		**202%**		**217%**		**158%**		**300%**	
Seeing	229	100%	33	66%	43	52%	18	78%	5	42%	1	50%	**288%**
Hearing	33	14%	50	100%	20	24%	11	48%	3	25%	1	50%	**161%**
Walking	43	19%	20	40%	83	100%	16	70%	5	42%	1	50%	**220%**
Remembering	18	8%	11	22%	16	19%	23	100%	4	33%	1	50%	**132%**
Self-care	5	2%	3	6%	5	6%	4	17%	12	100%	2	100%	**131%**
Communicating	1	0%	1	2%	1	1%	1	4%	2	17%	2	100%	**25%**

An analysis of the number of family members and number of disabilities per household shows that out of 130 respondents who reported having family members with disabilities, 77 per cent had only one person with a disability. At the same time, almost 23 per cent of those reporting living alone reported a disability (25 respondents out of 107) which indicates high exposure to vulnerability. In addition, households with five family members and those composed of friends and relatives reported high shares of disability per household (24% or 7 of 29 households with 5 family members and 39% or 15 of 38 households composed of friends and relatives).

Table 3: Household size and number of cases of disability

Number and % of HHs with 0 – 4 L/C FDs / Number of family members in HH	0		1		2		3		4		1+2+3+4		Total HH
	#	%	#	%	#	%	#	%	#	%	#	%	#
Alone	82	77%	19	18%	4	4%			2	2%	25	23%	107
2 family members	174	85%	27	13%	2	1%			1	1%	30	15%	204
3 family members	143	82%	25	14%	5	3%			2	1%	32	18%	175
4 family members	71	80%	13	15%	4	4%	1	1%			18	20%	89
5 family members	22	76%	5	17%	2	7%					7	24%	29
6 family members	11	85%	2	15%							2	15%	13
7 family members	5	83%	1	17%							1	17%	6
Living with friends /relatives	23	61%	8	21%	2	5%	2	5%	3	8%	15	39%	38
Grand Total	**531**	**80%**	**100**	**15%**	**19**	**3%**	**3**	**0,5%**	**8**	**1,5%**	**130**	**20%**	**661**

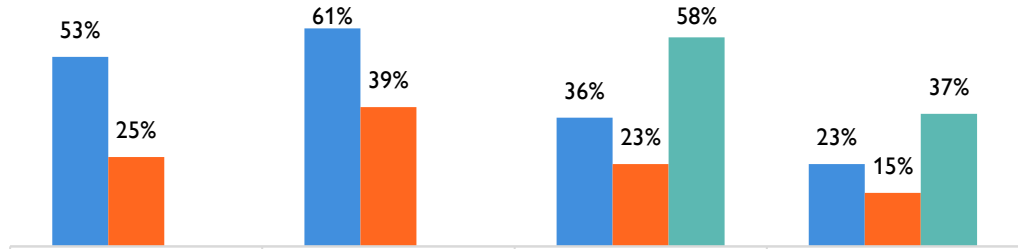
Figure 18: Respondents reporting at least one family member with seeing difficulties severity indicator of disability[2] per respondent's household (%)



Out of 661 respondents, over one-third declared to have at least one family member with seeing difficulty (35% or 229 households). Sixteen respondents declared having more than one family member with seeing difficulties in different age categories thus, 245 persons with seeing difficulties were identified. Out of these 245 people, 98 people (40%) were reported as having a lot of difficulty in seeing and 6 people cannot see at all, while 141 persons (58%) had some difficulty in seeing. Most of those having seeing problems are over 60 years old (43%), followed by 18-59 years old (42%) and 5-17 years old (14%).

[2] The highest degree of severity indicator per household was reported.

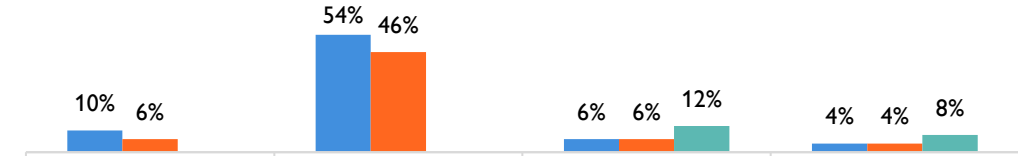
Figure 19: Functional Difficulty (Seeing), by municipality (%)



	FD rate from 282/379 FDs within Municipalities	FD rate in total same FD	FD rate in total 419 FDs	FD rate in total 661 HH
Seeing Balti	53%	61%	36%	23%
Seeing Cahul	25%	39%	23%	15%
Seeing Total			58%	37%

Around eight per cent out of 661 respondents declared one member of the households with hearing difficulty (50 respondents). When disaggregated by the level of difficulty, most of the reported cases had a mild severity indicator "some difficulty" (64% or 32 respondents), while one-third of reported cases had *a lot of difficulty* indicator (34% or 17 respondents), and one person *cannot hear at all*. Of those concerned, two-thirds (33 household members) were aged 60 years and more, almost one-third were 18-59 years old (15 persons) and 2 persons were reported to be 5-17 years old.

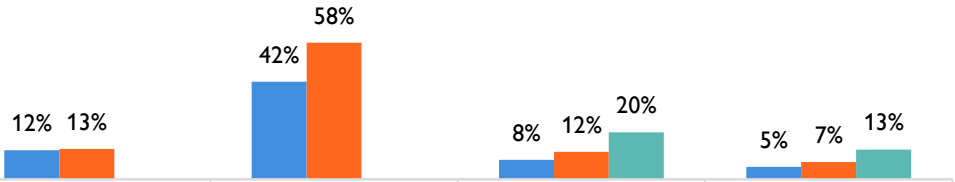
Figure 20: Functional Difficulty (Hearing), by municipality (%)



	FD rate from 282/379 FDs within Municipalities	FD rate in total same FD	FD rate in total 419 FDs	FD rate in total 661 HH
Hearing Balti	10%	54%	6%	4%
Hearing Cahul	6%	46%	6%	4%
Hearing Total			12%	8%

Out of 661 households, 13 per cent declared to have at least one member having difficulty walking or climbing steps - 83 households, of whom 40 persons have indicated a lot of difficulties, including 8 persons under 60 years old and 2 children. Like the age distribution of persons with hearing difficulties, two-thirds (56 persons) of those facing difficulties walking are 60 or more years old, and almost one-third (25 persons) are 18-59 years old. Of the concerned 83 respondents, one had 2 family members in different age categories, so data on 84 persons were analyzed.

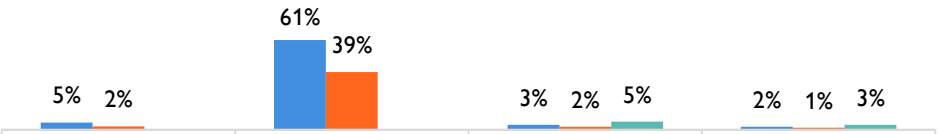
Figure 21: Functional Difficulty (Walking), by municipality (%)



	FD rate from 282/379 FDs within Municipalities	FD rate in total same FD	FD rate in total 419 FDs	FD rate in total 661 HH
Walking Balti	12%	42%	8%	5%
Walking Cahul	13%	58%	12%	7%
Walking Total			20%	13%

Twenty-three (4%) out of 661 respondents reported having one member of their household with difficulty remembering or concentrating, most of those concerned being 60 and more years old (70% or 16 persons). Eleven persons from 23 declared having a *lot of difficulties*, including one 18 – 59 years old adult and one 5 – 17 years old child.

Figure 22: Functional Difficulty (Remembering) by municipality (%)



	FD rate from 282/379 FDs within Municipalities	FD rate in total same FD	FD rate in total 419 FDs	FD rate in total 661 HH
Remembering Balti	5%	61%	3%	2%
Remembering Cahul	2%	39%	2%	1%
Remembering Total			5%	3%

About two per cent (12 respondents) out of 661 reported having at least one member of their household with difficulty in self-care such as washing all over or dressing, 3 respondents of the 12, having family members in different age categories with this reported difficulty, so 15 persons from different age categories were analyzed. Almost two-thirds of identified persons had *some difficulty* in self-care, while out of the 5 persons with *a lot of difficulty,* 3 were over 60 years old and 2 were children over 5 years old.

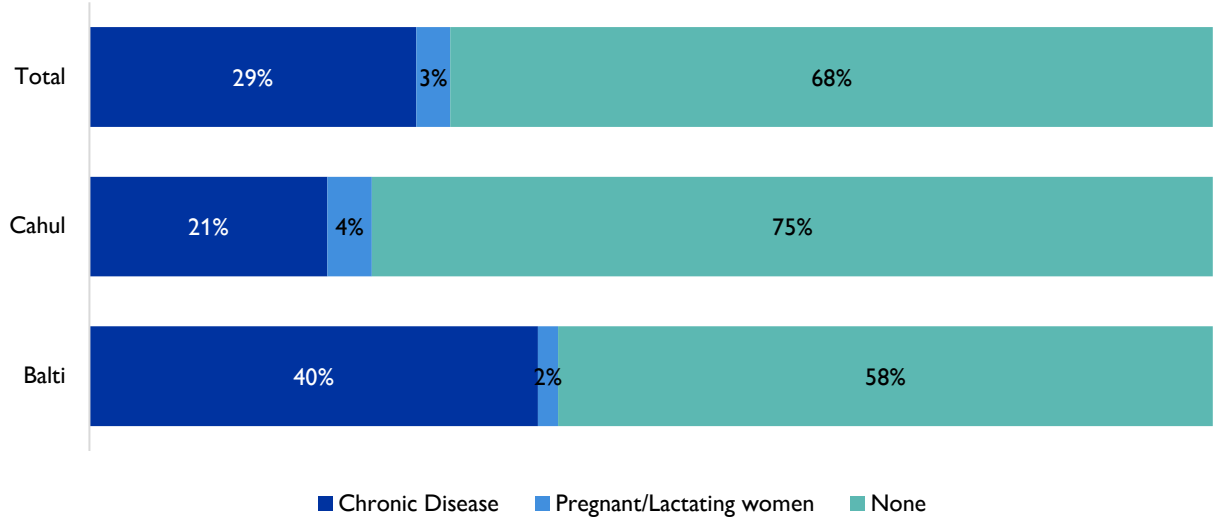
Figure 23: Functional Difficulty (Self-care), by municipality (%)

	FD rate from 282/379 FDs within Municipalities	FD rate in total same FD	FD rate in total 419 FDs	FD rate in total 661 HH
Self-Care Balti	1%	27%	1%	1%
Self-Care Cahul	3%	73%	3%	2%
Self-Care Total			4%	2%

Out of 661 respondents, one child over 5 years old was reported as having *a lot of difficulties* communicating, for example, understanding or being understood, and one person of 60 years or more, facing *some difficulty* in that functioning area – both from Balti municipality.

About 29 per cent of the respondents (193 out of 661) declared having a chronic disease and 21 respondents (3%) stated to be/have a pregnant or lactating woman in their household.

Figure 24: Prevalence of chronic diseases and pregnant or lactating women

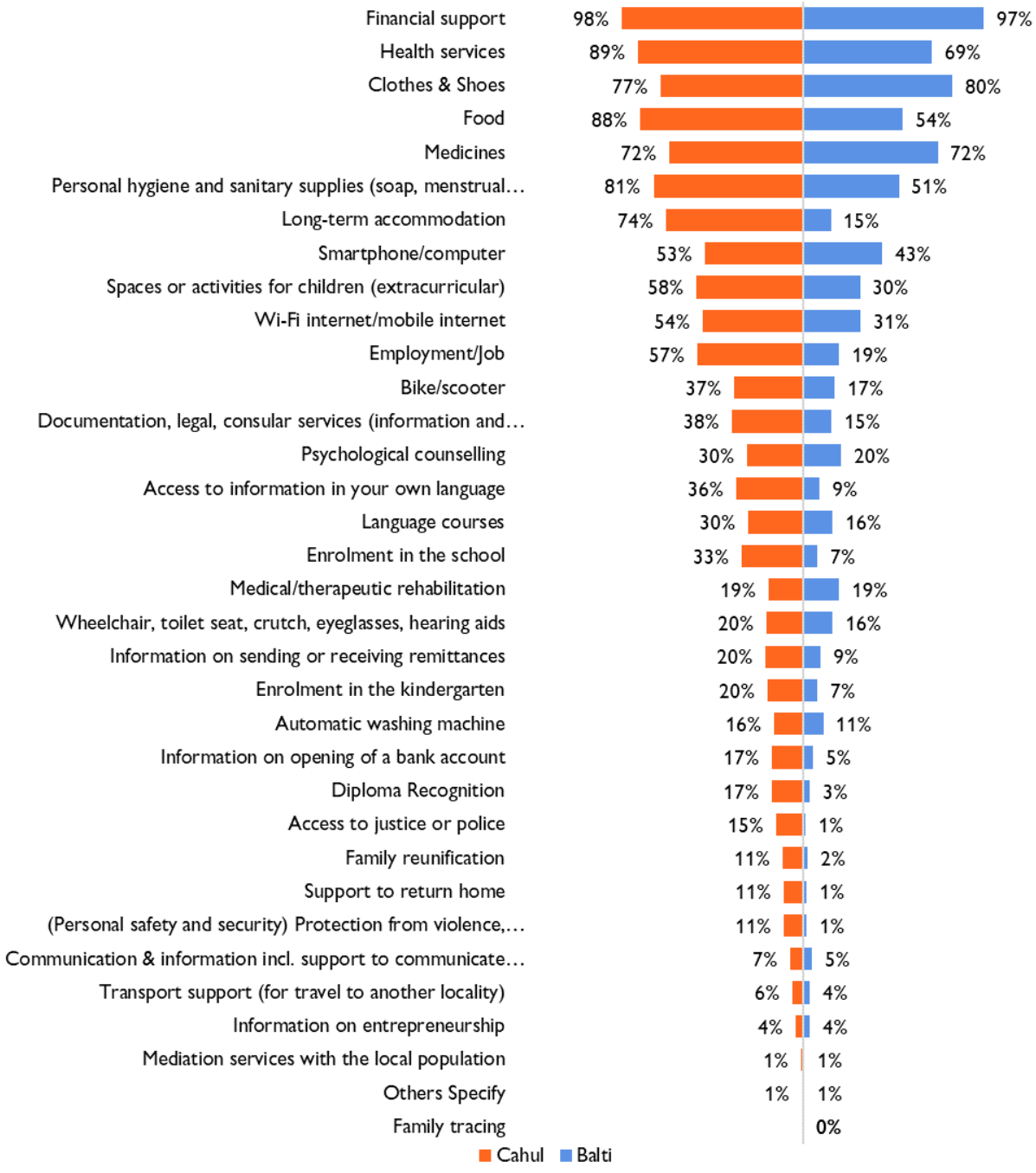


The reported share of those with CDs is twice higher in Balti than in Cahul municipality (40% vs 21%), while the share of pregnant/lactating women is twice higher within Cahul than within Balti municipality.

5. GENERAL AND SPECIAL NEEDS

The Top 10 reported needs among all respondents were financial support (97%), health services (81%), clothes and shoes (78%), food (73%), medicines (72%), personal hygiene items (68%), long-term accommodation (49%), smartphone or computer (49%), spaces or activities for children (46%), Wi-Fi or mobile internet (44%).

Figure 25: Main reported needs in Balti and Cahul municipalities (%, multiple options)



The share of those declaring to have financial needs was equally high in Cahul and Balti municipalities (98% and 97%), while the share of those declaring a need for health services was higher in Cahul than in Balti (89% vs 69%), and the need for medicines was identical (72%). The need for food, personal hygiene, and sanitary supplies was higher in Cahul than in Balti municipality (88% vs 54%, and 81% vs. 51%) and similar was the need for long-term accommodation (74% vs 15%). The need for clothes and shoes was identically high in both municipalities (77% in Cahul, and 80% in Balti). On average the need for humanitarian aid was greater in Cahul than in Balti (for more information see Annexe 1).

When health issues or disabilities were compared to needs for medicines, health services, and medical therapeutic rehabilitation, most of those with seeing difficulties (88%) reported the need for medicine, and 87 per cent - a need for health services. While 34 per cent reported a need for medical therapeutic rehabilitation. Out of those who declared having in their household at least one member with difficulty in hearing, 92 per cent reported the need for medicines, 82 per cent - need for health services and 46 per cent - need for medical therapeutic rehabilitation.

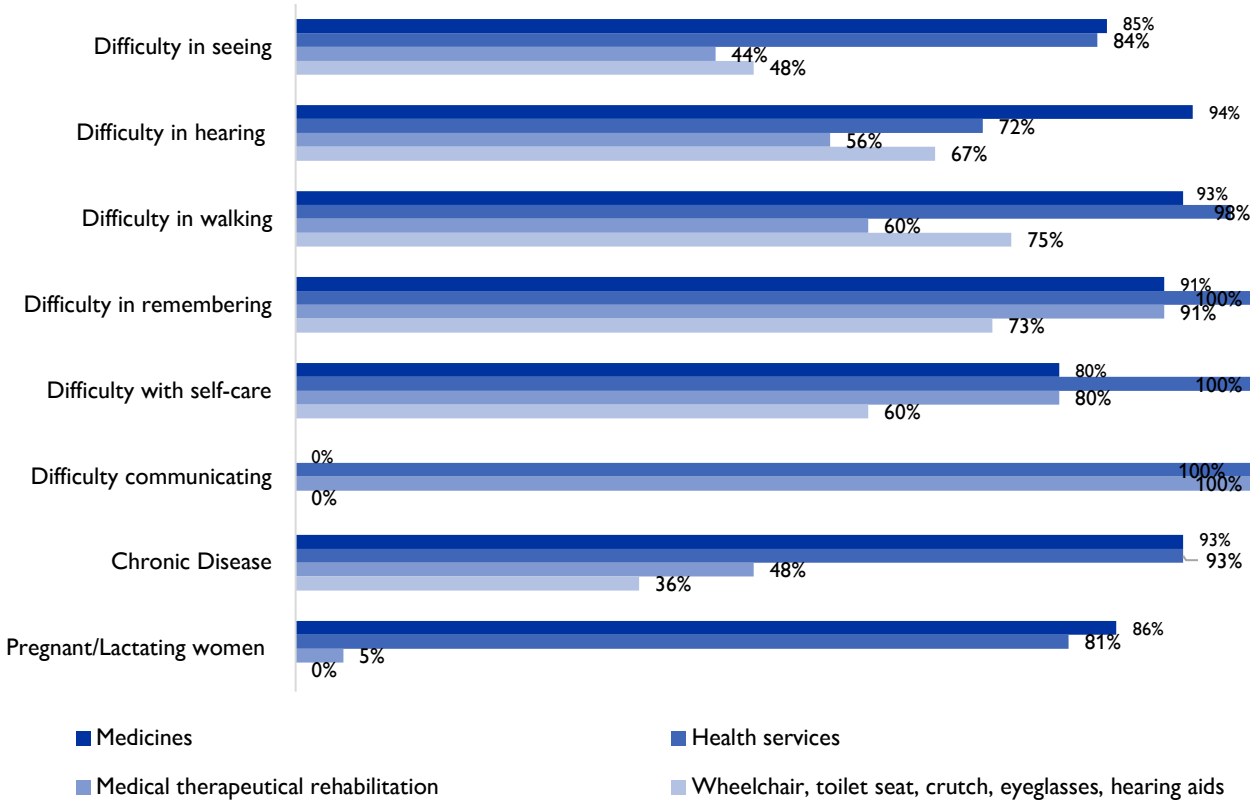
Among those who reported difficulties in walking, 96 per cent declared being in need for medicines, 97 per cent for health services, and 49 per cent for medical therapeutic rehabilitation. Out of those who reported difficulty in remembering 91 per cent declared being in need for medicines and health services and 78 per cent for medical therapeutic rehabilitation. Among the 75 per cent of respondents who reported having household members with difficulty in self-care declared needing medicines, 100 per cent for health services and 42 per cent for medical therapeutic rehabilitation. Two respondents reported difficulty in communication, one declared needing medicines and both declared needing health services and one needed medical therapeutic rehabilitation. Almost 84 per cent of those reporting having a chronic disease needed medicine and as much for health services, while 43 per cent declared needing medical therapeutic rehabilitation. Among respondents who reported having at least one family member pregnant/lactating, 86 per cent were in need for medicines, 81 per cent for health services and only 5 per cent declared needing medical therapeutic rehabilitation.

As can be seen from Figure 26 below, health services are the highest-level need among households with members with a disability, or chronic disease as well as for pregnant or lactating women (ranking 100% among less numerous groups (remembering, self-care, communicating, though with a slightly lower rate 72% related to hearing). Similarly, high shares (over 80%) required medicines, with a demand of 94 and 93 per cent among households with members with disability of hearing and walking functional disease respectively. Also, among less numerous disability groups (remembering, self-care, communicating) there was a higher need for medical therapeutical rehabilitation (from 80% to 100%). Except for persons with communicating difficulty, all other groups with disability reported needing assistive devices (wheelchair, toilet seat, crutch, eyeglasses, hearing aids, etc.): 75, 73 and 60 per cent of those with walking, remembering and self-care disability, as well as 67 per cent of persons with hearing disability and 48 per cent of the most numerous group - persons with seeing disability.

Table 4: Reported need for medicines, health services, medical rehabilitation, assistive devices and difficulty level L/C FD, CD, PLW (#, %).

HHs with L/C FDs, CDs, PLW	Medicines		Health services		Medical therapeutical rehabilitation		Assistive devices (Wheelchair, toilet seat, crutch, eyeglasses, hearing aids)		Total # L/C FDs, CDs, PLW
	#	%	#	%	#	%	#	%	#
Seeing	88	85%	87	84%	46	44%	50	48%	104
Hearing	17	94%	13	72%	10	56%	12	67%	18
Walking	37	93%	39	98%	24	60%	30	75%	40
Remembering	10	91%	11	100%	10	91%	8	73%	11
Self-care	4	80%	5	100%	4	80%	3	60%	5
Communicating	0	0%	1	100%	1	100%	0	0%	1
Chronic disease	179	93%	180	93%	92	48%	70	36%	193
Pregnant and lactating woman	18	86%	17	81%	1	5%	0	0%	21

Figure 26: A crosscutting matrix of functional difficulties and vulnerabilities versus needs in medicine or medical apparel (%)



As a general perspective, the conventional division of 32 needs in 4 Groups (Basic, Health, Education & Employment and Other) has been applied for the analysis, as well as disaggregation of the total number of 661 households in 7 sub-groups, in order to try to look for differences in the prevalence of needs in households with functional difficulty and/or chronic disease, but also in households with pregnant or lactating women:

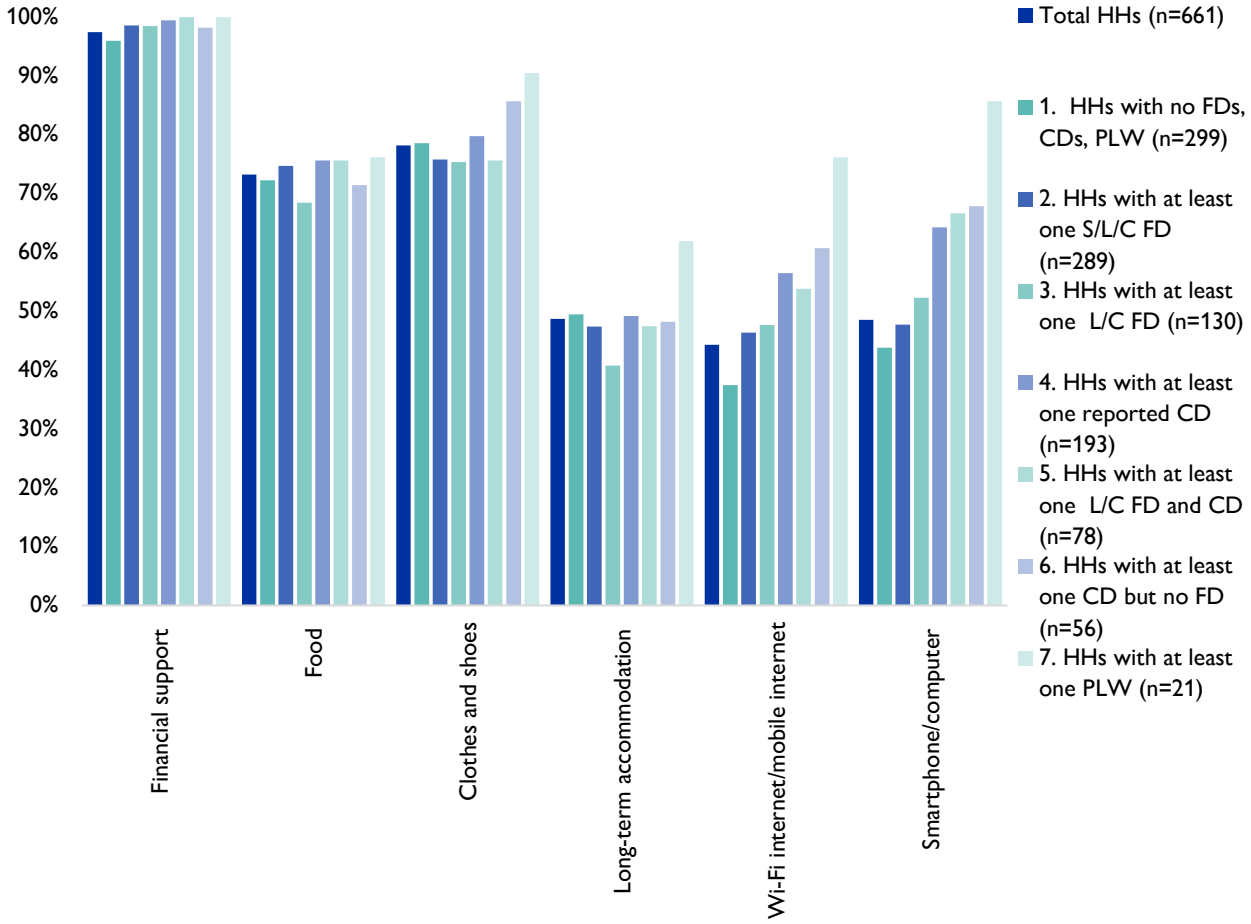
1. *Households with no functional difficulty, chronic disease, pregnant or lactating woman* (n=299)
2. *Households with at least one functional difficulty* (n=289)
3. *Households with at least one disability* (n=130)
4. *Households with at least one chronic disease* (n=193)
5. *Households with at least one disability and chronic disease* (n=78)
6. *Households with at least one chronic disease but no functional difficulty* (n=56)
7. *Households with at least one pregnant or lactating woman* (n=21)

The main finding is that households with pregnant and lactating women registered the highest number of needs (average prevalence of 32 needs per household) of 47,63 points in comparison with the lowest 29,92 points in households with no functional difficulty, chronic disease, pregnant or lactating woman. The second highest average needs prevalence has been registered within households with at least one member with a chronic illness and no functional difficulty, but this could not be attributed to increased demand for health services in this group as that was similar among other vulnerable groups.
The need for financial support was equally high among all 7 vulnerable groups. However, there was a slightly lower need for food, clothes and shoes and long-term accommodation in households with at least one disability, even lower than in households with no functional disease, chronic disease, or pregnant or lactating women.
The need for Wi-Fi internet/mobile internet and smartphone/computer seemed to be in the highest demand in all 7 vulnerable groups, especially in households with at least one chronic disease but no functional difficulty (61% and 68%), compared to 37 per cent and 44 per cent in households with no functional difficulty, chronic disease, pregnant or lactating woman.

Table 5: Basic need versus functional difficulties and vulnerabilities (%)

Nr	Basic Needs	Total HHs (n=661)	1. HHs with no FDs, CDs, PLW (n=299)	2. HHs with at least one S/L/C FD (n=289)	3. HHs with at least one L/C FD (n=130)	4. HHs with at least one CD (n=193)	5. HHs with at least one L/C FD and CD (n=78)	6. HHs with at least one CD but no FD (n=56)	7. HHs with at least one PLW (n=21)
1	Financial support	97%	96%	99%	98%	99%	100%	98%	100%
2	Food	73%	72%	75%	68%	76%	76%	71%	76%
3	Clothes and shoes	78%	79%	76%	75%	80%	76%	86%	90%
4	Long-term accommodation	49%	49%	47%	41%	49%	47%	48%	62%
5	Wi-Fi internet/mobile internet	44%	37%	46%	48%	56%	54%	61%	76%
6	Smartphone/computer	49%	44%	48%	52%	64%	67%	68%	86%

Figure 27: Basic needs households with functional diseases, chronic diseases, pregnant and lactating woman (%)



Within the Health Needs Group, as expected, the rates are high, and the insufficiency of targeted humanitarian interventions is obvious. The overall request for support in satisfying the Health Needs is higher in the households with at least one disability and chronic disease and households with at least one chronic disease. About 95 per cent of households with at least one disability and chronic disease and 93 per cent of households with at least one reported chronic disease need health services, and the rate gets slightly down to the" lowest" demand of 85 per cent in households with at least one disability.

From 85 to 93 per cent of households with functional difficulty and/or chronic disease need medicines – compared to 53 per cent of need in households with no reported health vulnerabilities.

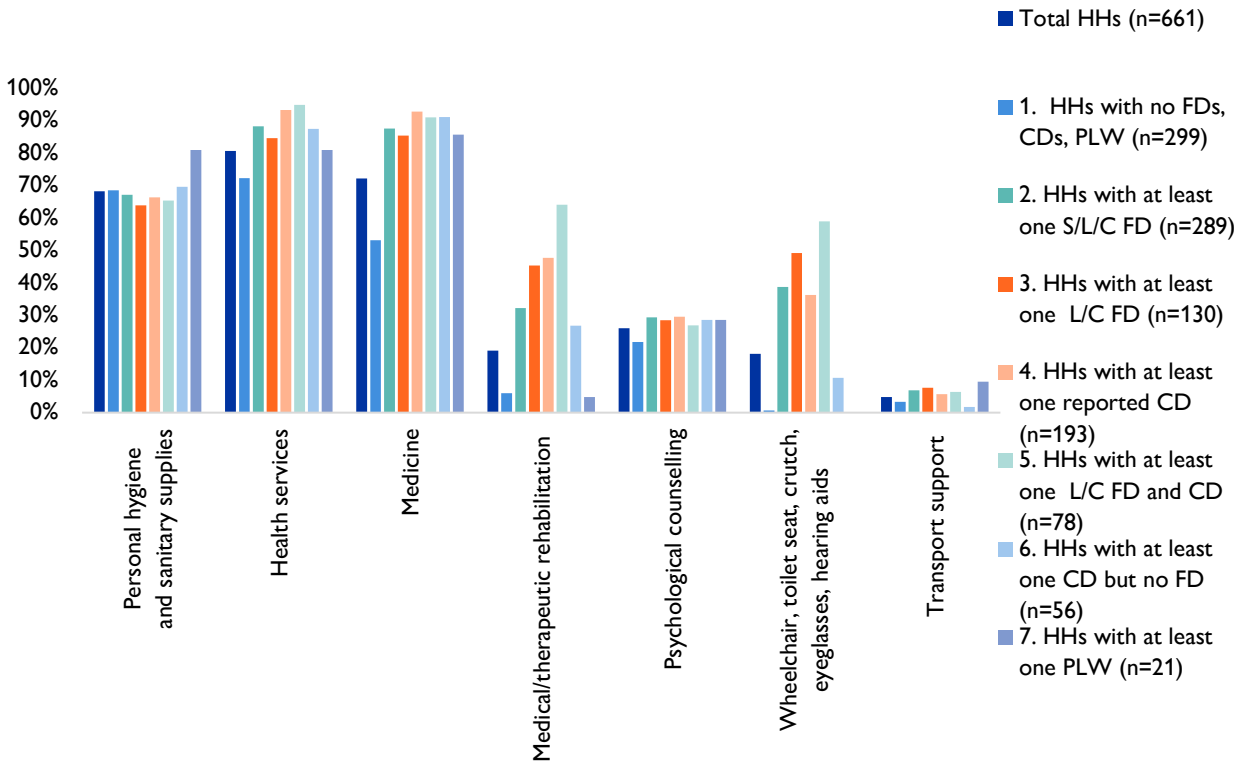
Medical/therapeutic rehabilitation is needed (at varying intensity) by all 5 sub-groups of households with functional difficulties and/or chronic diseases, scoring 64 per cent in households with at least one disability and chronic disease, as well as 48 per cent and 45 per cent in households with at least one reported chronic disease and households with at least one disability respectively. More than half or 59 per cent of households with at least one disability and chronic disease, followed by 49 per cent of households with at

least one disability need assistive devices (Wheelchair, toilet seat, crutch, eyeglasses, hearing aids, etc.). A demand for assistive devices (although smaller - 11%) has been indicated as well by the households with at least one chronic but no functional difficulty. Probably, due to the stresses caused by war and relocation, the need for psychological counselling has been indicated by 22 per cent of households with no functional difficulty, chronic disease, pregnant and lactating women. However, the request for this kind of support is higher in all 6 vulnerable households' sub-groups (27% to 30%).
The overall request for support in satisfying the health needs is higher in the households with at least one disability and chronic disease and households with at least one chronic disease.

Table 6: Health needs versus respondents functional difficulties or vulnerabilities (%)

Nr	Table 2 Health Needs	Total HHs (n=661)	1. HHs with no FDs, CDs, PLW (n=299)	2. HHs with at least one S/L/C FD (n=289)	3. HHs with at least one L/C FD (n=130)	4. HHs with at least one CD (n=193)	5. HHs with at least one L/C FD and CD (n=78)	6. HHs with at least one CD but no FD (n=56)	7. HHs with at least one PLW (n=21)
1	Personal hygiene and sanitary supplies	68%	69%	67%	64%	66%	65%	70%	81%
2	Health services	81%	72%	88%	85%	93%	95%	88%	81%
3	Medicine	72%	53%	88%	85%	93%	91%	91%	86%
4	Medical/therapeutic rehabilitation	19%	6%	32%	45%	48%	64%	27%	5%
5	Psychological counselling	26%	22%	29%	28%	30%	27%	29%	29%
6	Wheelchair, toilet seat, crutch, eyeglasses, hearing aids	18%	1%	39%	49%	36%	59%	11%	0%
7	Transport support	5%	3%	7%	8%	6%	6%	2%	10%

Figure 28: Health needs : households with functional difficulties, chronic diseases, pregnant and lactating woman (%)



The need for enrolment in the kindergarten is on average 3 times lower in all 5 sub-groups of households with functional difficulties and/or chronic disease (3% - 8%) compared to 19 per cent of this need in households with no functional difficulty, chronic disease, pregnant and lactating women. Similarly, enrolment in the school is less indicated as a need in the abovementioned sub-groups (11% - 18%) compared to 29 per cent of this need in households with no functional difficulty, chronic disease, pregnant and lactating women. Space or activities for children also has a lower level of request in households with functional difficulty and/or chronic disease (36% in average) than in households with no functional difficulty, chronic disease, pregnant and lactating women – 55 per cent. In this context, a low demand for space or activities for children is indicative of a smaller number of children in households with functional difficulties and/or chronic disease than in households with no functional difficulties, chronic disease, pregnant and lactating women and specifically, in households with at least one disability and chronic disease.

The need for employment and jobs was mentioned by 52 per cent of households with no functional difficulty, chronic disease, pregnant and lactating women and 46 per cent of households with at least one chronic disease but no functional difficulty, but only by 22 per cent of households with at least one disability and by 23 per cent of households with at least one disability and chronic disease respectively.

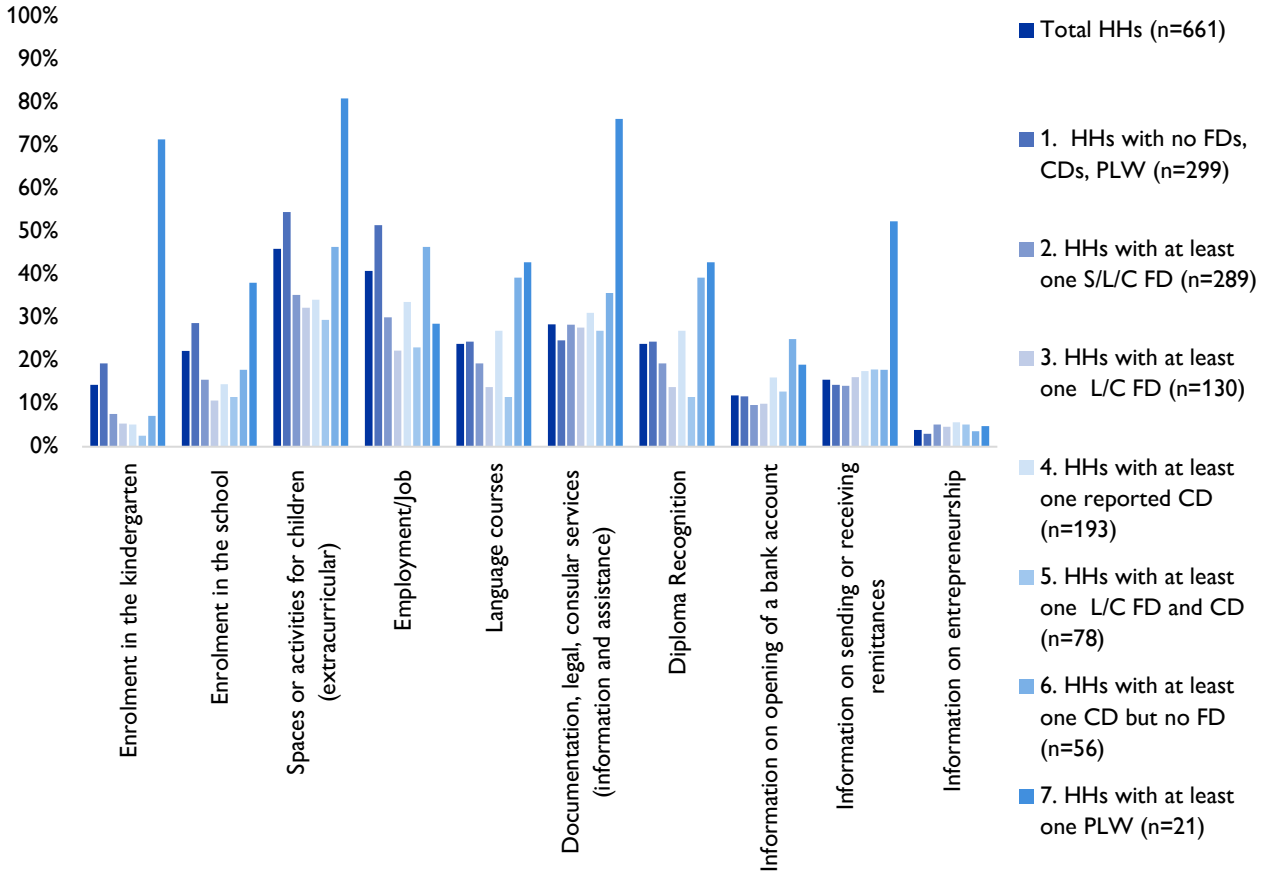
Higher shares of education and employment needs were identified in households with at least one chronic disease, but no functional difficulty followed by households, among which documentation, legal, consular

services and diploma recognition. The need for information on sending or receiving remittances was identically relevant for all.

Table 7: Education and employment needs versus respondents' functional difficulties or vulnerabilities (%)

Nr	Education & Employment Needs	Total HHs (n=661)	1. HHs with no FDs, CDs, PLW (n=299)	2. HHs with at least one S/L/C FD (n=289)	3. HHs with at least one L/C FD (n=130)	4. HHs with at least one CD (n=193)	5. HHs with at least one L/C FD and CD (n=78)	6. HHs with at least one CD but no FD (n=56)	7. HHs with at least one PLW (n=21)
1	Enrolment in the kindergarten	14%	19%	8%	5%	5%	3%	7%	71%
2	Enrolment in the school	22%	29%	16%	11%	15%	12%	18%	38%
3	Spaces or activities for children (extracurricular)	46%	55%	35%	32%	34%	29%	46%	81%
4	Employment/Job	41%	52%	30%	22%	34%	23%	46%	29%
5	Language courses	24%	24%	19%	14%	27%	12%	39%	43%
6	Documentation, legal, consular services	28%	25%	28%	28%	31%	27%	36%	76%
7	Diploma Recognition	24%	24%	19%	14%	27%	12%	39%	43%
8	Info on opening of a bank account	12%	12%	10%	10%	16%	13%	25%	19%
9	Info on sending or receiving remittances	16%	14%	14%	16%	18%	18%	18%	52%
10	Info on entrepreneurship	4%	3%	5%	5%	6%	5%	4%	5%

Figure 29: Education and Employment: households with functional diseases, chronic diseases, pregnant and lactating woman (%)



Households with functional difficulties and/or chronic diseases reported higher need for access to information in their own language than households with no functional difficulties or vulnerabilities: 34 per cent of households with at least one chronic disease but no functional difficulty and 30 per cent of households with at least one member with chronic disease.

There were high needs for access to justice or police services among households with at least one chronic disease but without functional difficulty – 30 per cent, compared to eight per cent in households with no functional difficulties nor vulnerabilities.

The need for personal safety and security is quite low and similar among all 5 sub-groups of households with functional difficulty and/or chronic diseases and households with no health issue or vulnerability, with a fluctuation between four and seven per cent.

Between four and five per cent of households with functional difficulties and/or chronic diseases look for family reunification, while this share was twice as high in households with no health issue or vulnerability. Only two per cent of households with at least one chronic disease but no functional difficulty need support to return home compared to five and six per cent respectively in the rest of households with functional difficulty and/or chronic disease and seven per cent in households with no health issue or vulnerability.

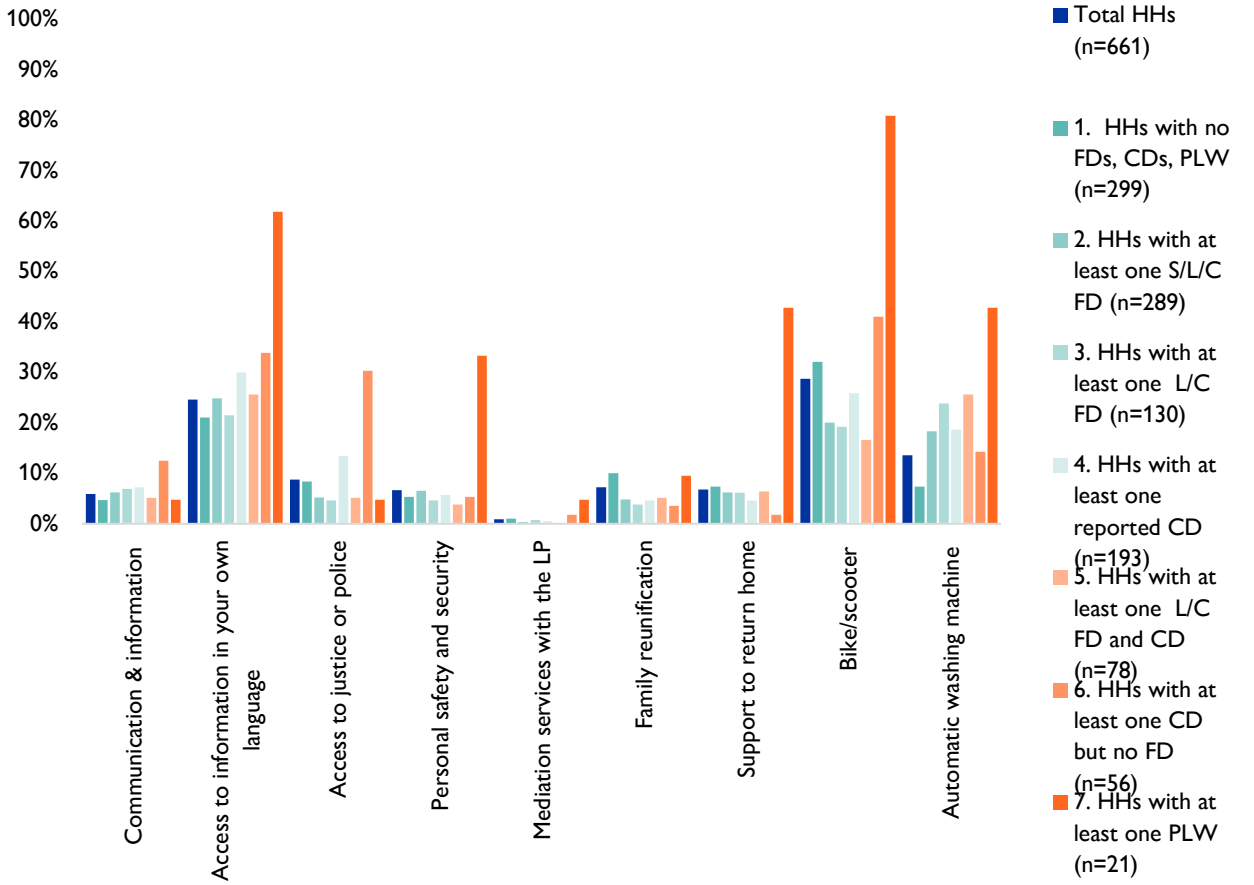
Almost one quarter (26% and 24%, respectively) of households with at least one disability and chronic disease and households with at least one disability would need an automatic washing machine, compared to seven per cent in household with no health issue or vulnerability.

On the other hand, 41 per cent of households with at least one chronic disease but no functional difficulty would need a bike or scooter – more than double than most other households with functional difficulties and/or chronic disease and higher than households with no health issue or vulnerability (32%).

Table 8: Other needs versus respondents' functional difficulties (%)

Nr	Table 4 Other Needs	Total HHs (n=661)	1. HHs with no FDs, CDs, PLW (n=299)	2. HHs with at least one S/L/C FD (n=289)	3. HHs with at least one L/C FD (n=130)	4. HHs with at least one CD (n=193)	5. HHs with at least one L/C FD and CD (n=78)	6. HHs with at least one CD but no FD (n=56)	7. HHs with at least one PLW (n=21)
1	Communication & information	6%	5%	6%	7%	7%	5%	13%	5%
2	Access to information in your own language	25%	21%	25%	22%	30%	26%	34%	62%
3	Access to justice or police	9%	8%	5%	5%	13%	5%	30%	5%
4	Personal safety and security	7%	5%	7%	5%	6%	4%	5%	33%
5	Mediation services with the LPA	1%	1%	0%	1%	1%	0%	2%	5%
6	Family reunification	7%	10%	5%	4%	5%	5%	4%	10%
7	Support to return home	7%	7%	6%	6%	5%	6%	2%	43%
8	Bike/scooter	29%	32%	20%	19%	26%	17%	41%	81%
9	Automatic washing machine	14%	7%	18%	24%	19%	26%	14%	43%

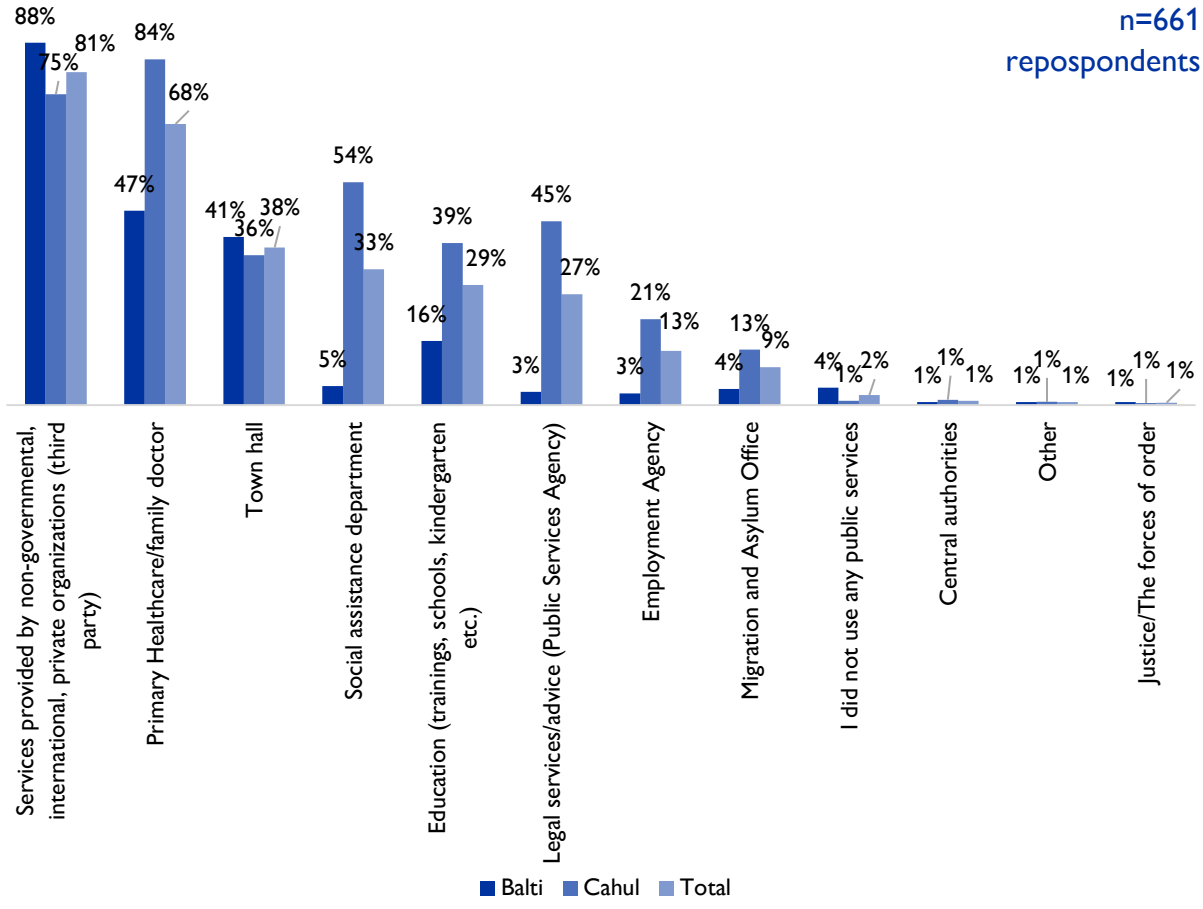
Figure 30: Other needs: households with functional diseases, chronic diseases; challenges for pregnant and lactating woman (%)



6. ACCESS TO PUBLIC SERVICES

All respondents reported that they or their family members accessed at least one public service since they are in the Republic of Moldova. About 81 per cent of respondents reported that they or members of their family have accessed services provided by non-governmental, international or private organizations (third party), 68 per cent of respondents visited a family doctor or primary healthcare facility, 38 per cent sought support from local Town Halls, 33 per cent accessed services provided by the social assistance department, 29 per cent accessed educational services, 27 per cent sought legal services or advice at Public Service Agency, 13 per cent visited an employment agency, nine per cent contacted the General Inspectorate for Migration[3]. About two per cent did not use any public service, one per cent declared to have contacted the judicial authorities or the police and one per cent accessed other kinds of public services. Five respondents reported contacting a vehicle insurance company and car rental agencies.

Figure 31: Access to public services, type of public services (%, multiple options)



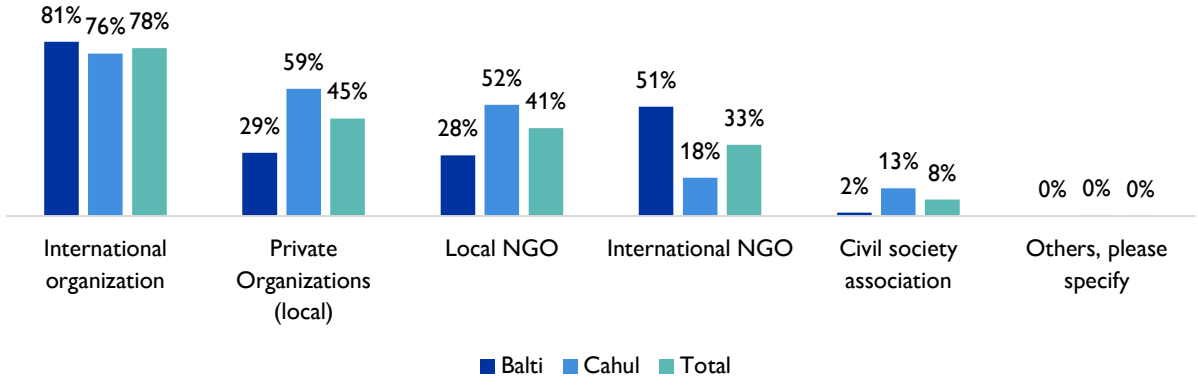
[3] The General Inspectorate for Migration is an administrative authority subordinated to the Ministry of Internal Affairs, which ensures the implementation of state policies in the fields of migration, asylum, statelessness, and integration of foreigners, as well as the legislation relevant to these domains.

Common types of public services accessed were different in Balti and Cahul municipalities. In Balti, the share of those who reported accessing services provided by NGOs and international or private organizations was slightly higher than in Cahul (88% vs 75%), a similar trend was the observed regards access to Town halls (41% vs 36%). In contrast, the share of those who reported visiting a family doctor or primary healthcare facilities was considerably higher in Cahul than in Balti (84% vs 47%), the same is observed for the services provided by the social assistance department (54% vs 5%). The demand for education, legal services/police and employment was also higher in Cahul than in Balti (39% vs 16%, 45% vs 3%, and 21% vs 3% respectively). The share of those who reported approaching the Migration and Asylum Office and the central authorities was relatively low in both Balti and Cahul municipalities (3% and 13%, 1% and 1% respectively).

Out of 534 respondents who indicated accessing services provided by non-governmental, international, or private organizations, 78 per cent accessed services from international organizations, 45 per cent accessed services from local private organizations, 41 per cent local NGOs, 33 per cent international NGOs, and 8 per cent civil society organisations. Only one respondent in Cahul indicated to access services provided by other institution and indicated that it was the church.

The share of those who received humanitarian assistance from international organizations was equally high in Balti and in Cahul (81% and 76%), while the share of those who indicated accessing aid from private organizations was higher in Cahul (59%) versus 29 per cent in Balti and same as was the share of those who indicated accessing services from local NGOs (52% versus 28%) and civil society organizations (13% versus 2%). On the contrary, the share of those declaring accessing services from international NGOs was higher in Balti than in Cahul (51% versus 18%).

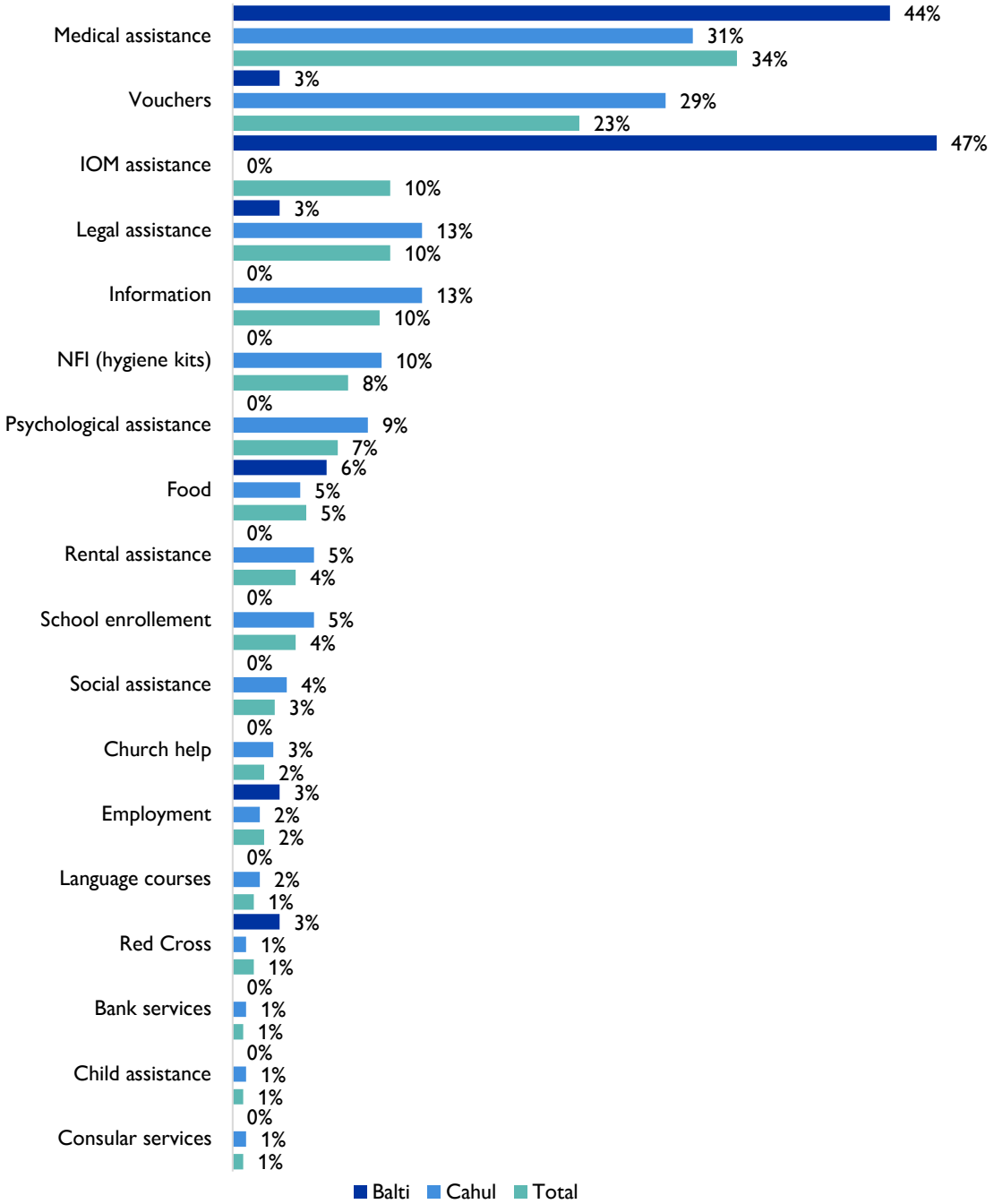
Figure 32: Access to services provided by third parties, (%, multiple options)



Out of 143 respondents who accepted to specify the type of services they received from third party institutions (of whom 111 were from Cahul and 32 from Balti), 48 persons indicated that they received medical assistance, 33 persons received vouchers, 15 persons received IOM assistance, 15 persons legal assistance, 14 persons information, 11 persons NFI, 10 persons psychological assistance and 36 persons indicated other services. The share of those declaring accessing medical assistance from third parties was higher in Balti than in Cahul (44% versus 31%) similarly, the share of those declaring to have received IOM assistance (47% versus 0%) was higher in Balti than Cahul but as mentioned earlier the differences in those

who reported accessing IOM assistance is most probably due to differences in sampling method. The share of those who reported accessing legal assistance, information, psychological assistance was higher in Cahul (13% versus 3%, 13% versus 0%, and 9% versus 0%) and the share of those who reported receiving NFI kits was also higher in Cahul (10% versus 0%).

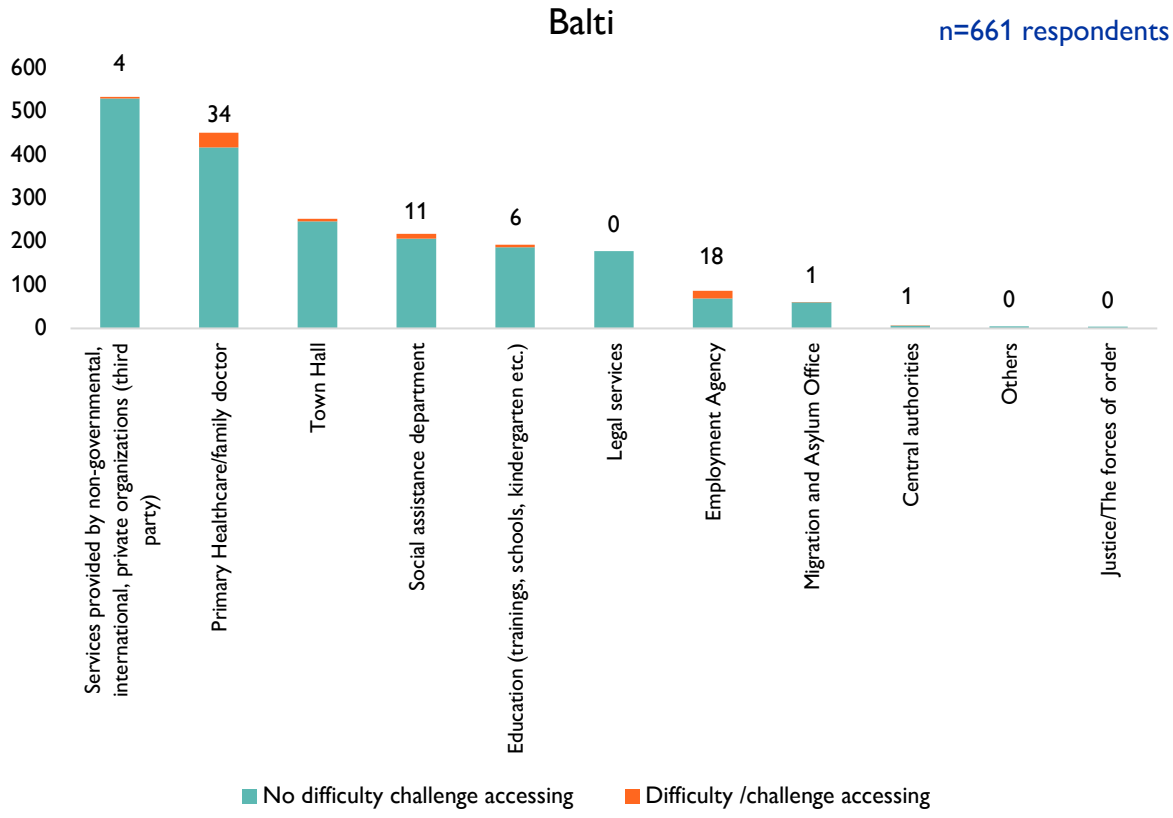
Figure 33: Type of services provided by third parties, 143 respondents (multiple options)



Out of 661 respondents, 96 per cent reported no difficulty or challenge in accessing public services and this share was identically high in Balti and Cahul (95% and 96% respectively). However, in Balti a part of

respondents declared some issues while accessing primary healthcare or visiting a family doctor (19 respondents or 14% of those who accessed this service), an employment agency (one respondent out of 8 who accessed this service), central authorities (1 respondent out of 2 who accessed this service) and education such as training, schools, kindergarten (4 out of 44 respondents who accessed this public service or 9%).

Figure 34: Difficulty/challenge accessing selected public services in Balti and Cahul, (multiple options)



In Cahul, the highest share of those who reported having some issues while accessing public services mentioned the employment agency (17 respondents out of 79 who accessed this service or 22%), primary health care or family doctor (15 out of 318 respondents who reported to access this service or 5%), social assistance (11 out of 205 who accessed this service or 5%), Town hall (6 out of 138 respondents who accessed this service or 4%), Migration and Asylum Office (1 out of 50 who accessed this service or 2%). Three respondents in Balti and one in Cahul encountered some challenge or difficulty while accessing the services provided by non-governmental, international, or private organizations.

Figure 35: Difficulty or challenge accessing selected public services in Balti (multiple options)

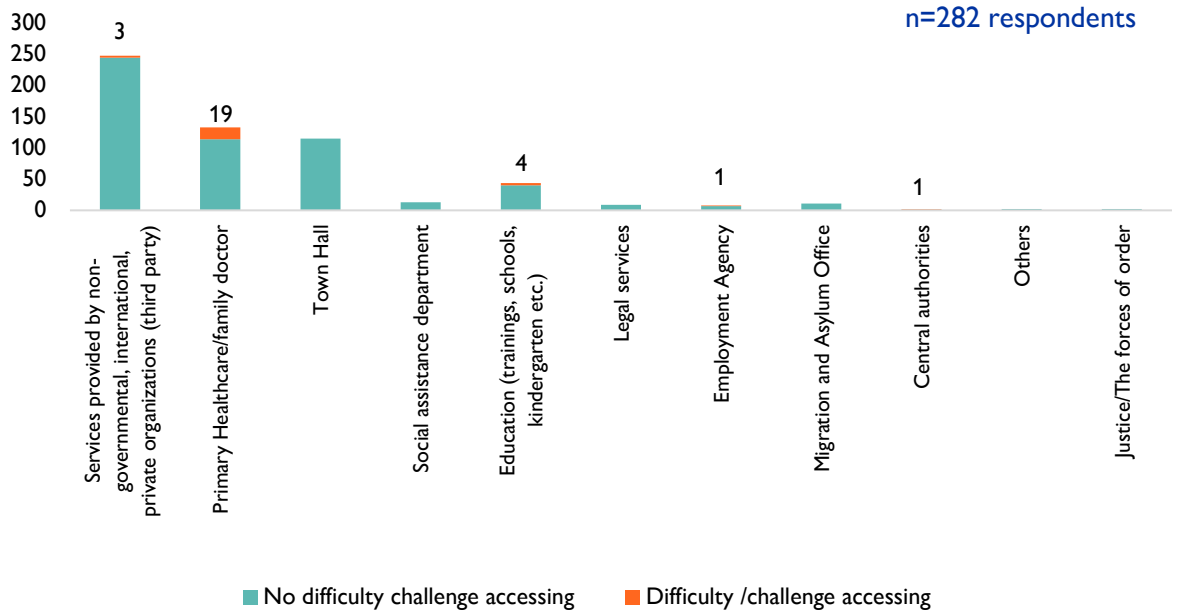
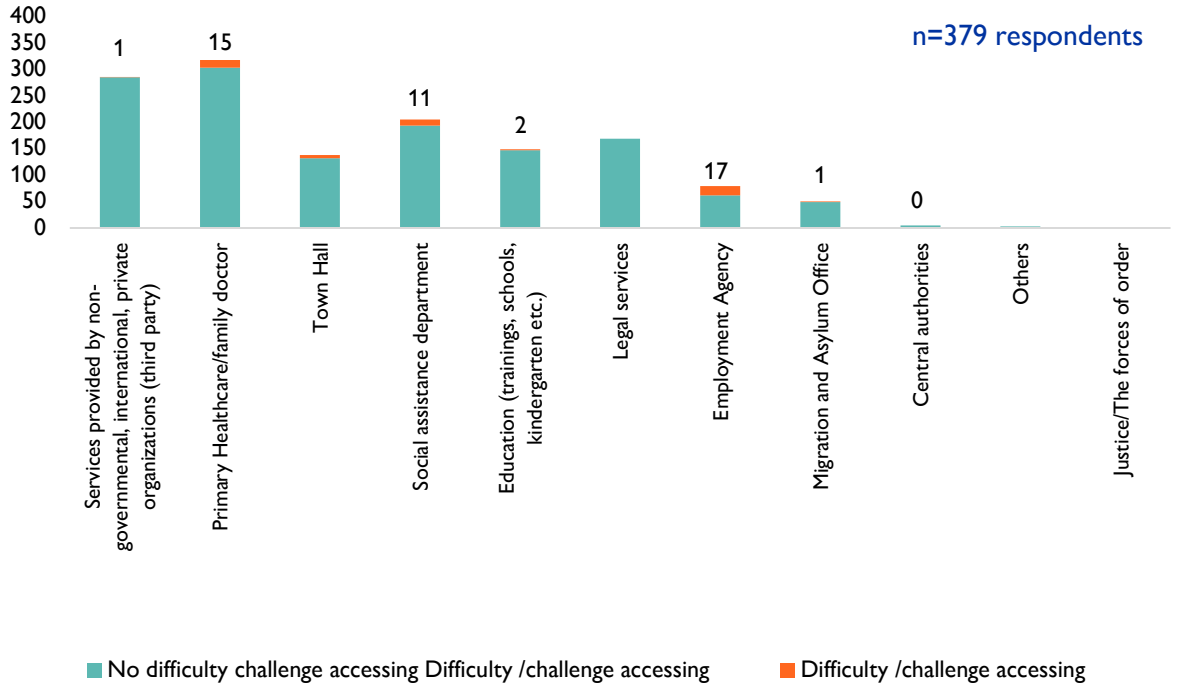


Figure 36: Difficulty or challenge accessing selected public services in Cahul (multiple options)



Almost 57 per cent in Cahul, and 83 per cent in Balti were much or very much satisfied with the quality of public services received. About 40 per cent in Cahul and 11 per cent in Balti were neither much, nor little satisfied while three per cent in Cahul and four per cent in Balti were not satisfied. The highest level of unsatisfaction concerned the employment agency (21 % unsatisfied respondents in Cahul and 13% in Balti), followed by primary healthcare but the share of those unsatisfied with this service was much higher in Balti (12%) than in Cahul (3%). The share of those unsatisfied with the quality of education was higher in Balti (7%) than in Cahul (1%). The share of those who were unsatisfied with the quality of services provided by third parties was very low both in Cahul and Balti (2% and 1%) while the share of those unsatisfied with the services provided by Town Hall was slightly higher in Cahul (5%) than in Balti (0%).

Figure 37: Satisfaction with quality of services provided in Cahul (more than one reported service per respondent)

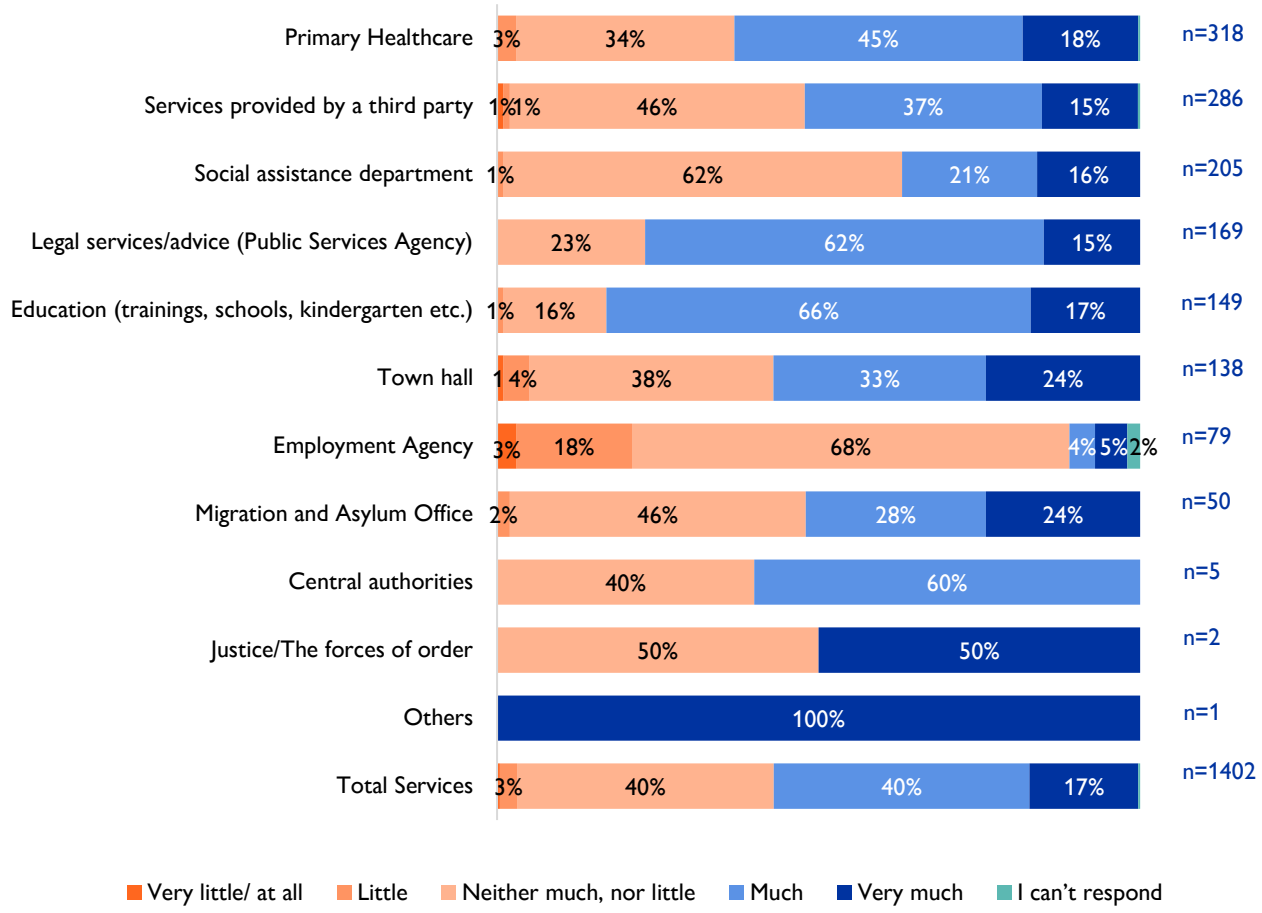
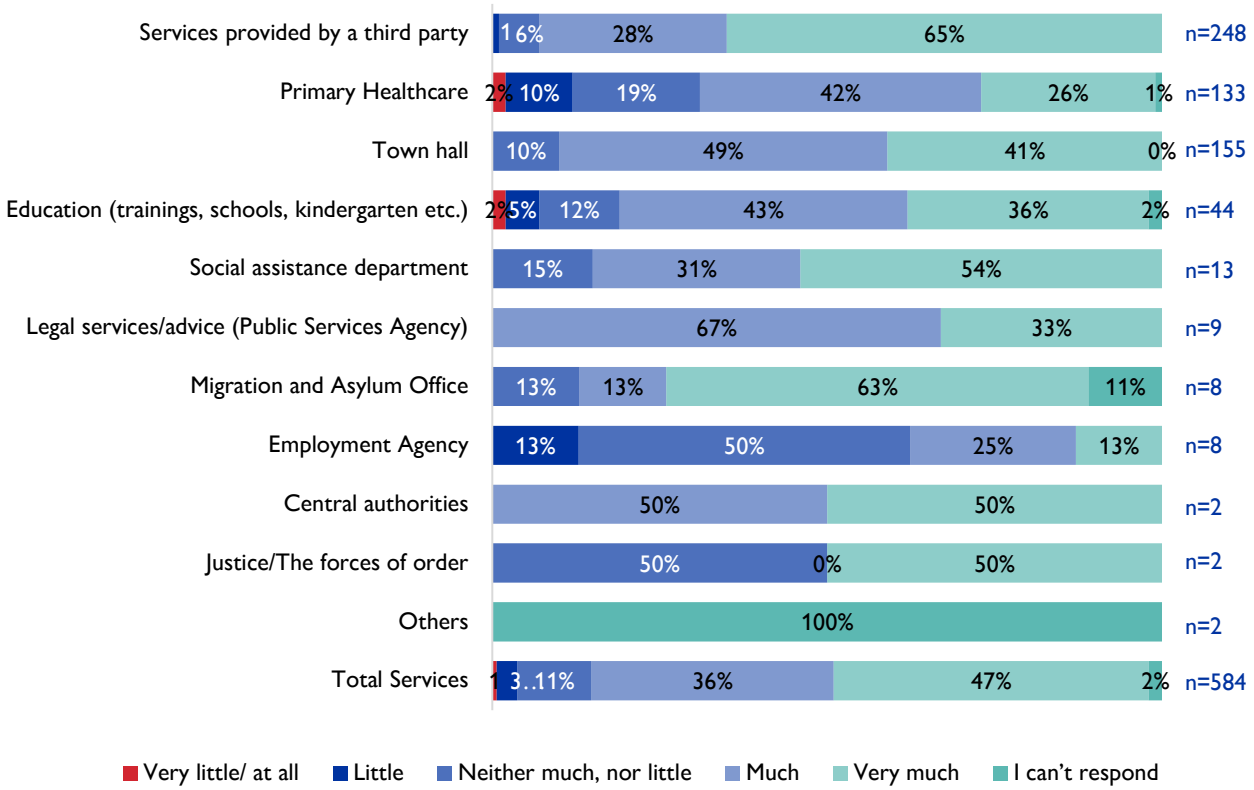
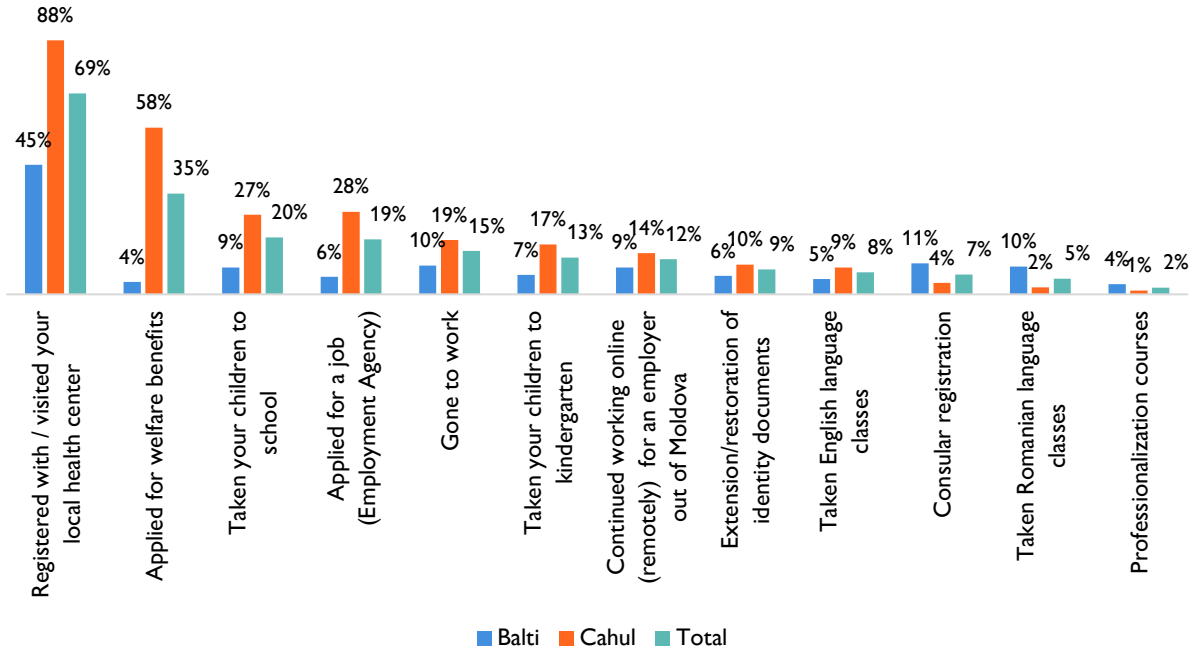


Figure 38: Satisfaction with quality of services provided in Balti (multiple options)



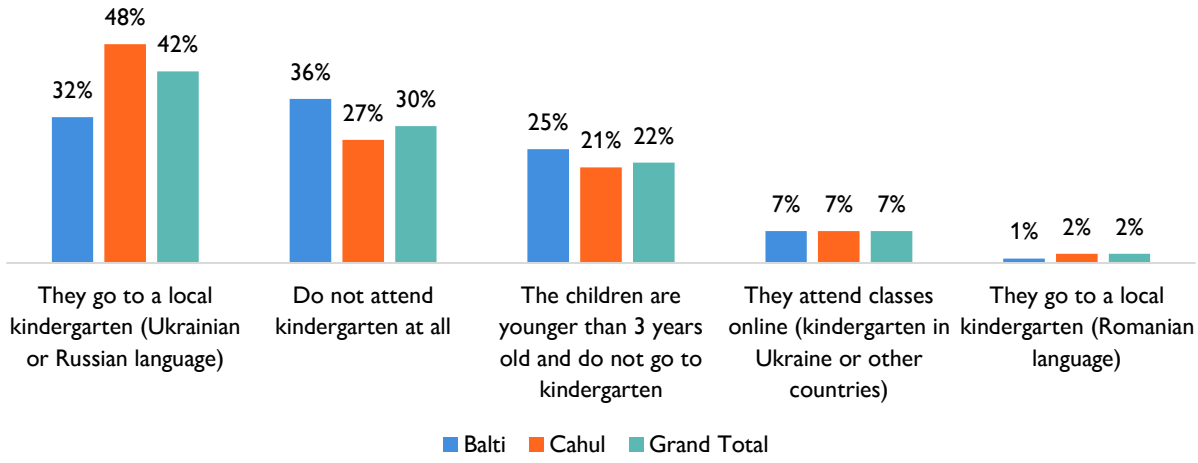
When asked about which of the essential activities they have undertaken while in the Republic of Moldova, 69 per cent out of 661 respondents reported visiting a local health centre, 35 per cent reported applying for welfare benefits, 20 per cent have taken their children to school, 19 per cent applied for a job (through the National Employment Agency), 15 per cent went to work, 13 per cent have taken their children to kindergarten and 12 per cent continued working remotely for an employer out of the Republic of Moldova. The remaining reported activities were extension/restoration of identity documents (9%), English language classes (8%), consular registration (7%), Romanian language classes (5%), professionalization courses (2%). For almost all reported essential activities undertaken by the respondents, the share of beneficiaries was higher in Cahul than in Balti.

Figure 39: Essential activities undertaken by respondents while in the Republic of Moldova (multiple options)



Half of the respondents reported having children (331 people), of whom 218 (58%) in Cahul and 113 in Balti (40%). About 59 per cent reported that their children attend online classes offered by a school in Ukraine, 40 per cent reported that their children go to a local school in Ukrainian or Russian language. Much smaller shares reported that their children attend classes online offered by a school in the Republic of Moldova or by schools in other countries (1%) or reported taking their children to a local school in Romanian language (1%). Eleven respondents declared that their children do not attend school at all (9 in Cahul and 2 in Balti). When asked to explain the reason for not sending their children to school, five reported that they prefer not to answer to this question, 4 said that their child is too small to attend school (all 4 respondents were in Cahul), 1 said that it is due to lack of information (in Balti) and one respondent in Balti reported that the child studied abroad.

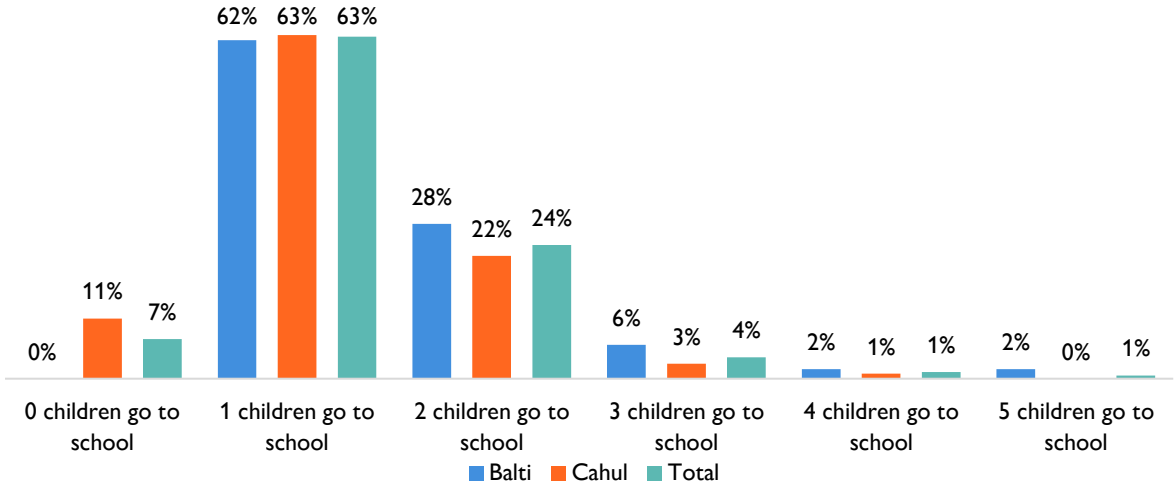
Figure 40: Type of schooling of studied foreign populations in the Republic of Moldova (%, multiple options)



The share of those who declared that their children attend classes online in a Ukrainian school was higher in Balti than in Cahul (74% versus 50%), while the share of those who go to a local school in Russian language was higher in Cahul than Balti (46% versus 28%). The share of those who do not attend school at all was slightly higher in Cahul than in Balti (4% versus 2%), while the share of those who reported that their children attend online classes in a Moldovan school and of those who reported that their children go to a local school in Romanian language was equally small in both Balti and Cahul municipality (2% versus 0% and 1% versus 1% respectively). It is worth mentioning that respondents who had more than one child could report more than one type of schooling.

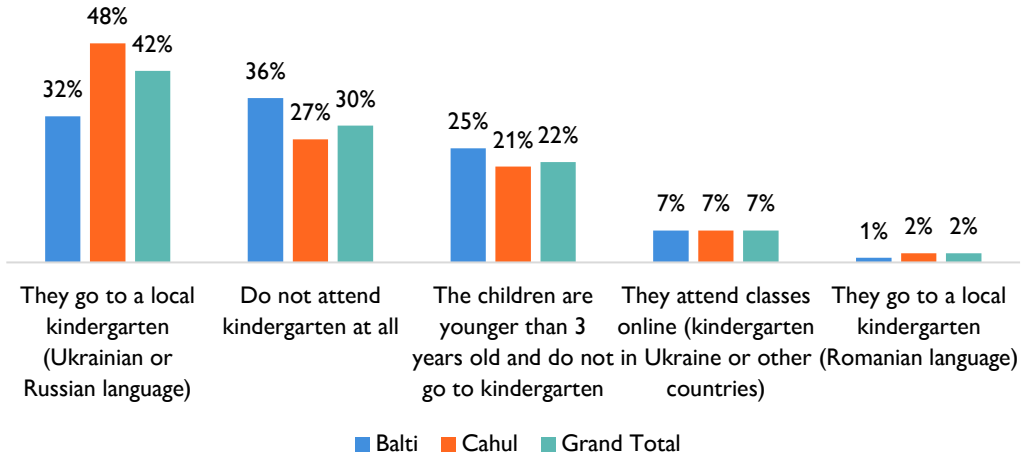
Out of 331 respondents who reported that they had children at school, 63 per cent declared that they had only one child who attended school, 24 per cent reported 2 children and 4 per cent reported 3 children. Only one per cent reported having 4 or 5 children each. Seven people reported that none of their children was attending school.

Figure 41: Number of respondents' children who attend school in the Republic of Moldova (%, more than one child per household)



Out of 661 respondents, 192 reported that they had children enrolled in kindergarten, of whom 120 in Cahul, and 72 in Balti. Almost half of those respondents were bringing their children to local kindergartens in Ukrainian or Russian language (81 respondents of whom, 58 in Cahul and 23 in Balti). Almost 30 per cent reported that their children do not attend kindergarten at all (58 respondents of whom 32 in Cahul and 26 in Balti), 22 per cent declared that their children are younger than 3 years old and do not go to kindergarten (25 in Cahul and 18 in Balti), 7 per cent reported that their children attend classes online given by a kindergarten in Ukraine or other countries and only two per cent reported that their children go to a local Romanian language kindergarten. The reported type of preschool system was similar among respondents in Balti and Cahul.

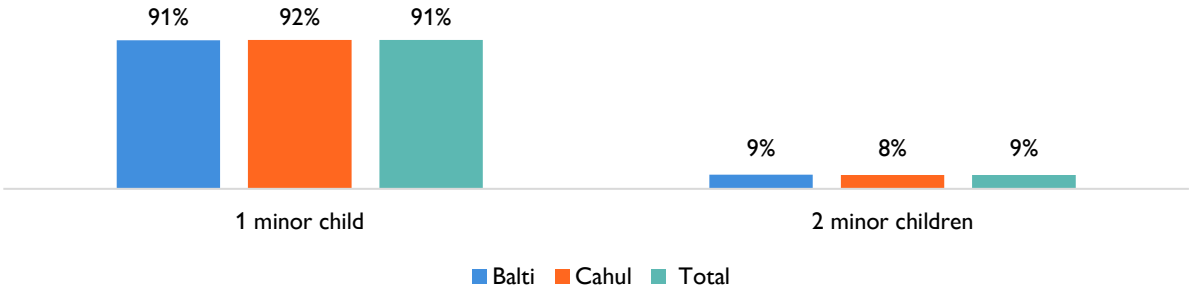
Figure 42: Households with children who attend kindergarten in the Republic of Moldova (%, more than one child per household)



Out of 58 respondents who reported that their children do not attend kindergarten (of whom 32 in Cahul and 26 in Balti), 71 per cent didn't explain the reason (41 respondents of whom 17 in Balti and 24 in Cahul). Out of the remaining 17 respondents, 5 respondents declared that it was due to lack of information (4 in Balti and 1 in Cahul), 4 respondents declared that it was due to health issues (2 in Cahul and 2 in Balti), 3 reported too long waiting times (2 in Cahul and 1 in Balti), and another 5 reported other reasons (intending future enrolment, waiting for a confirmation of enrolment etc.). No respondent reported any case of discrimination, financial issue, language barrier, employee negligence, bribery, or bureaucracy.

Out of 117 respondents who reported having children enrolled in pre-primary education, 91 per cent declared having only one child attending kindergarten and 9 per cent 2 children.

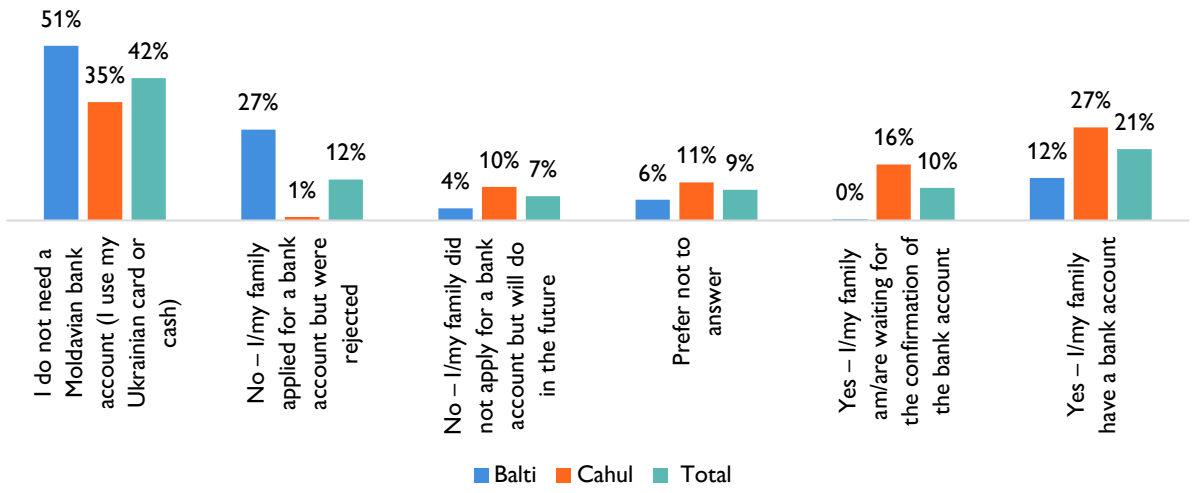
Figure 43: Households with children who attend kindergarten in the Republic of Moldova (%)



When asked if they have a phone number, 98 per cent answered positive and only 2 per cent reported having none. Nevertheless, when asked if they have a Moldovan bank account, only 21 per cent declared that they or their family members were having one. About 10 per cent declared to be waiting for a bank account confirmation letter[4], 42 per cent declared not needing it because they were using their Ukrainian credit cards or are paying cash, 12 per cent reported that they applied for a bank account but were rejected, seven per cent mentioned that they or their family did not apply for a bank account but intended to do so the future. The share of those who declared to have a Moldovan bank account was higher in Cahul than in Balti (27% vs 12%), so was the share of those who reported waiting for a bank account confirmation (16% vs 0%).

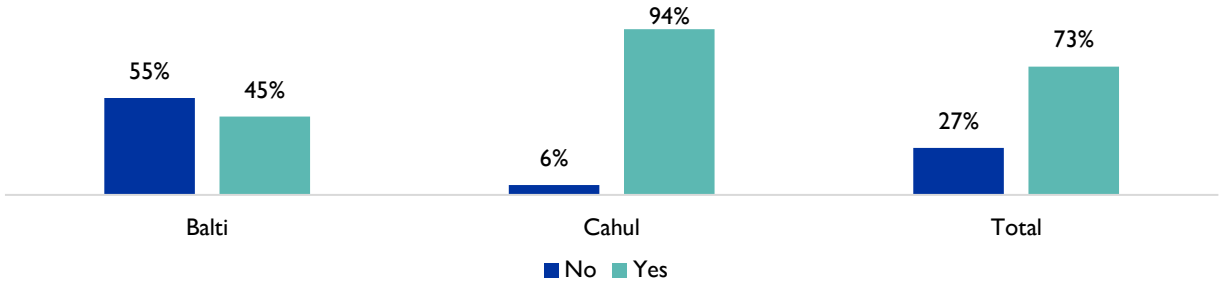
[4] A bank account confirmation letter is a letter from the bank confirming thatl a person has made all the relevant and necessary submissions for a bank account application and is waiting for the bank to give an outcome of the application.

Figure 44: Reported share of households who have a Moldovan bank account (%)



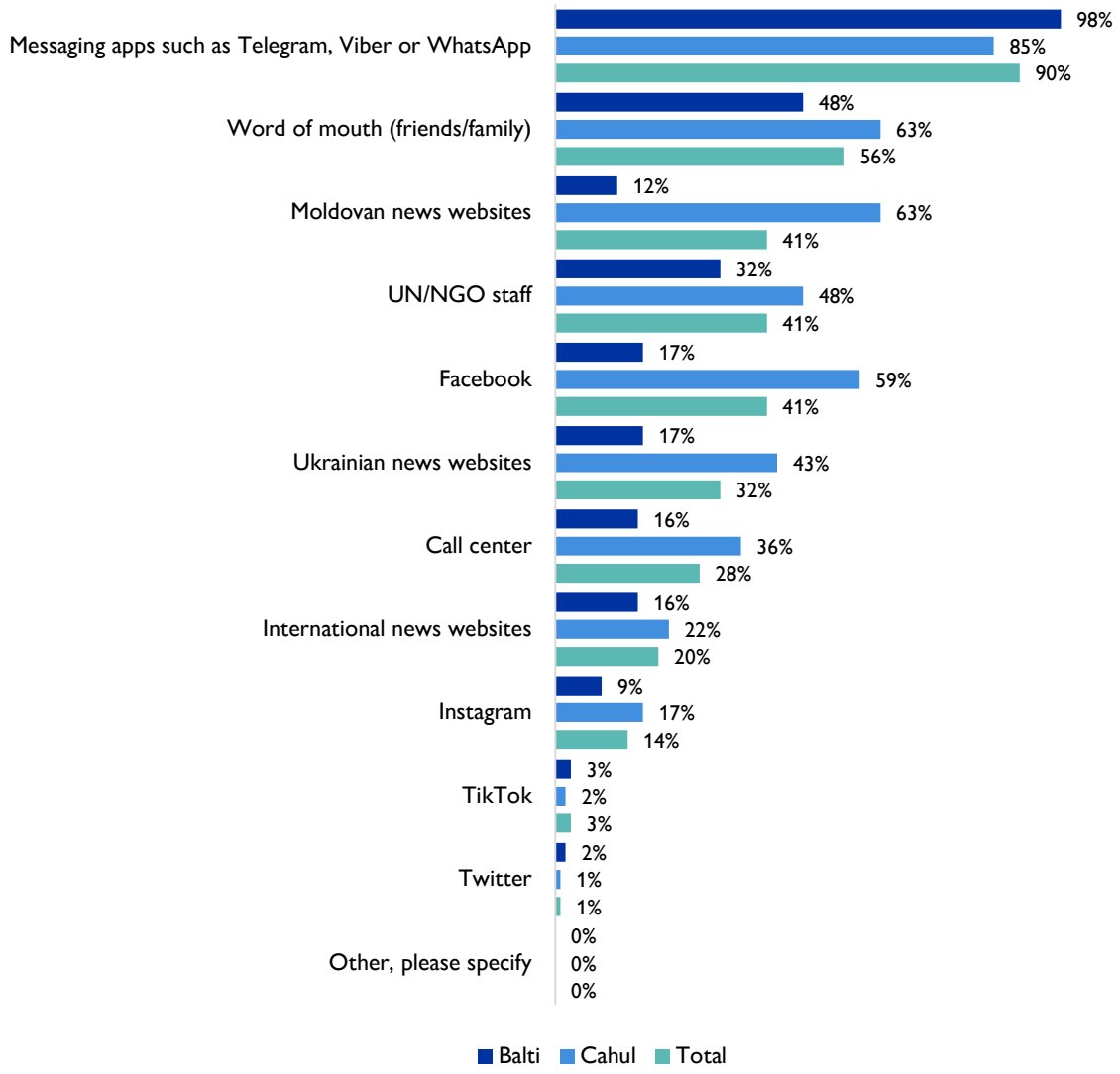
About 73 per cent of respondents reported having a valid bank account and credit card in their last country of residence and 27 per cent did not. The share of those who reported having a bank account and card in their last country of residence were significantly different in the two municipalities. In Cahul, 94 per cent of respondents declared to hold a valid bank account and credit card in their last country of residence, while in Balti this share was only of 45 per cent.

Figure 45: Households who have a valid bank account and credit card in their last country of residence (%)



When asked about what information sources they use to find about their status, rights and opportunities in the Republic of Moldova, 90 per cent reported using Telegram, Viber or WhatsApp, 56 per cent declared that they acquire information by word-of-mouth (from friends or family), 41 per cent identify valuable information from Moldavian news websites, 41 per cent from UN or NGO staff, 41 per cent from Facebook, 32 per cent from Ukrainian websites and 28 per cent from Call Centres. The other reported sources of information were international news websites (20%), Instagram (14%), TikTok (3%) and Twitter (1%). One respondent reported receiving useful information from hotel administration and another - from the Town Hall. The share of those who reported the messaging apps as their primary source of information was higher in Balti than in Cahul (98% versus 85%), while the respondents from Cahul were accessing more diversified information resources.

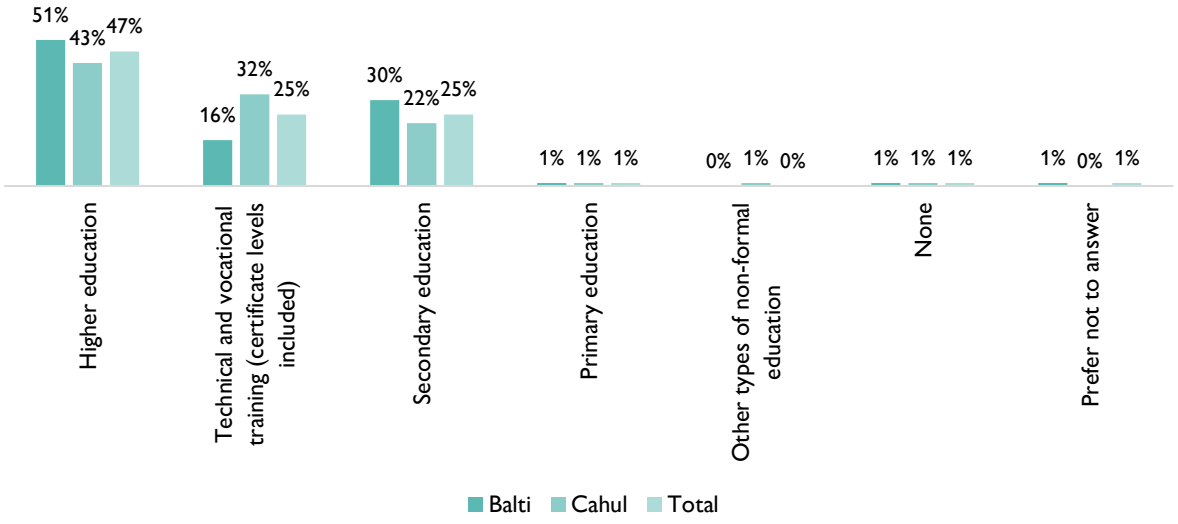
Figure 46: Sources of information regarding respondents' status, rights, and opportunities in the Republic of Moldova (%, Multiple options)



7. EDUCATION AND EMPLOYMENT

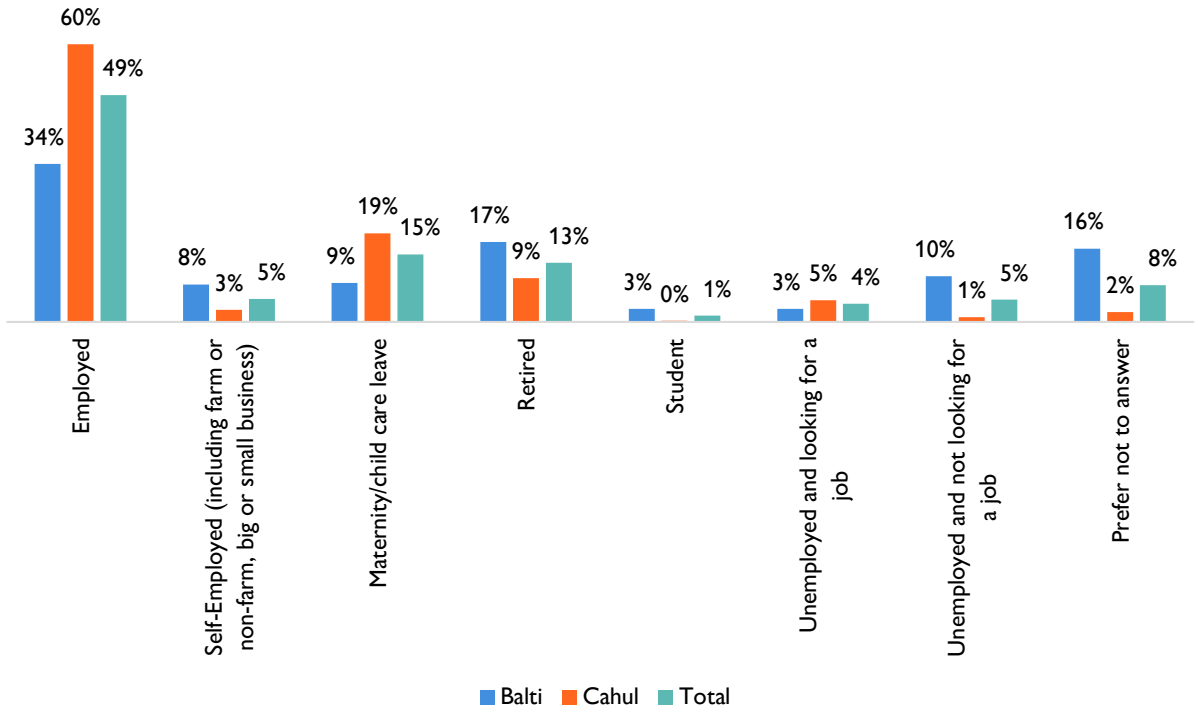
Almost half of all respondents declared having higher education (47%), one quarter declared to have technical or vocational training and only secondary education (25% each). Much lower shares reported having a primary education and none (1% each), preferred not to answer (less than one per cent) or reported other types of non-formal education (also less than 1%). The share of respondents who reported having higher and secondary education was higher in Balti than in Cahul (51% versus 43% and 30% versus 22%), while the share of those who declared having technical and vocational training was higher in Cahul than in Balti (32% versus 16%). The shares of other reported types of education were equally low in both municipalities.

Figure 47: Reported level of respondents' highest education (%)



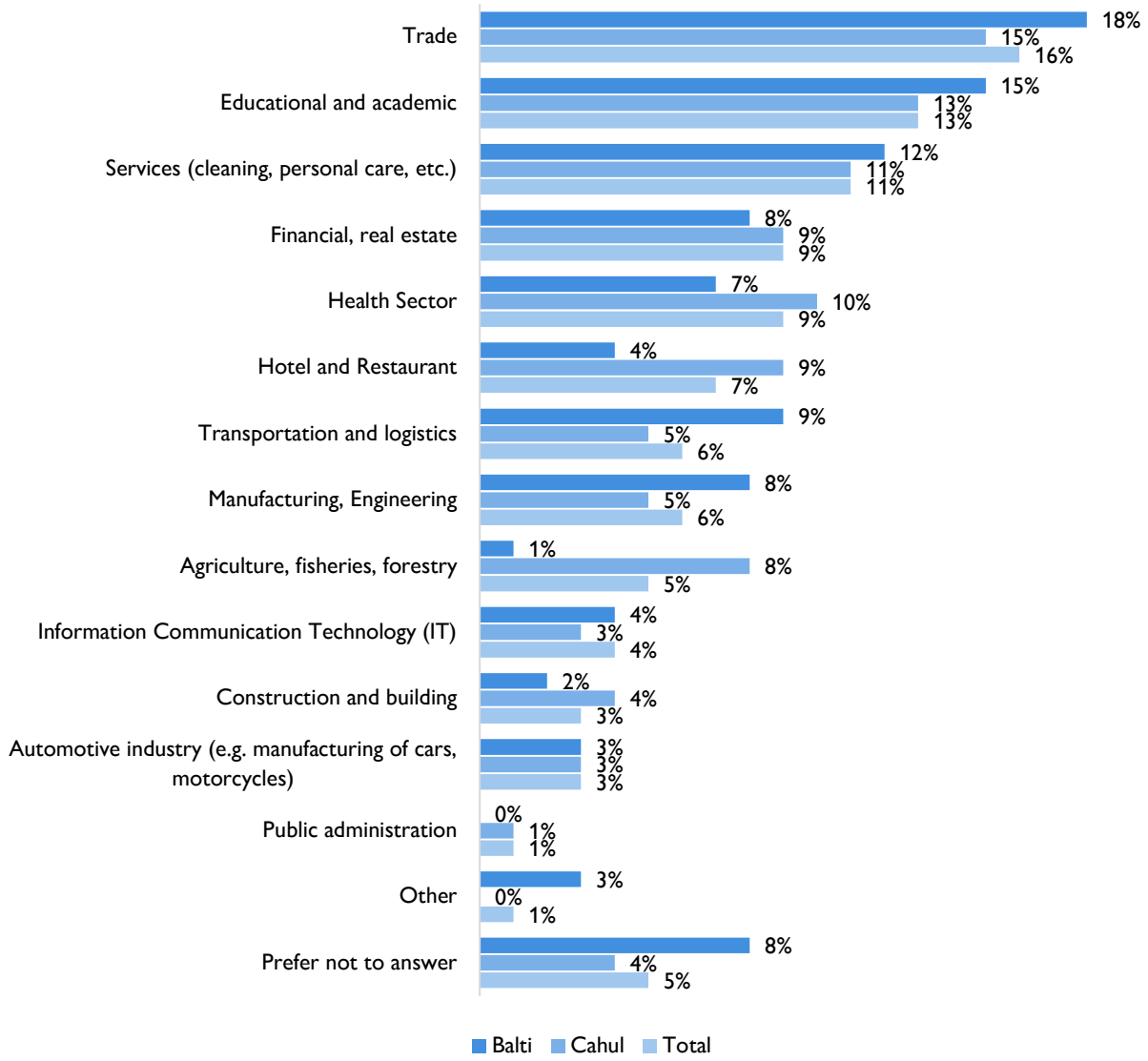
Half of all respondents reported that they were employed in their country of origin before arriving in the Republic of Moldova (49%), five per cent were self-employed, 15 per cent were on a maternity leave, one per cent retired and one per cent were students. Only four per cent were unemployed and looking for a job, five per cent were unemployed and not looking for a job, and eight per cent preferred not to answer. The share of those who reported being employed in their country of origin was higher in Cahul than in Balti (60% versus 34%), while the share of those who reported being self-employed was higher in Balti than in Cahul (8% versus 3%). Higher shares were reported for those who preferred not to answer in Balti than in Cahul (16% versus 2%).

Figure 48: Most recent employment status in their country of origin (%)



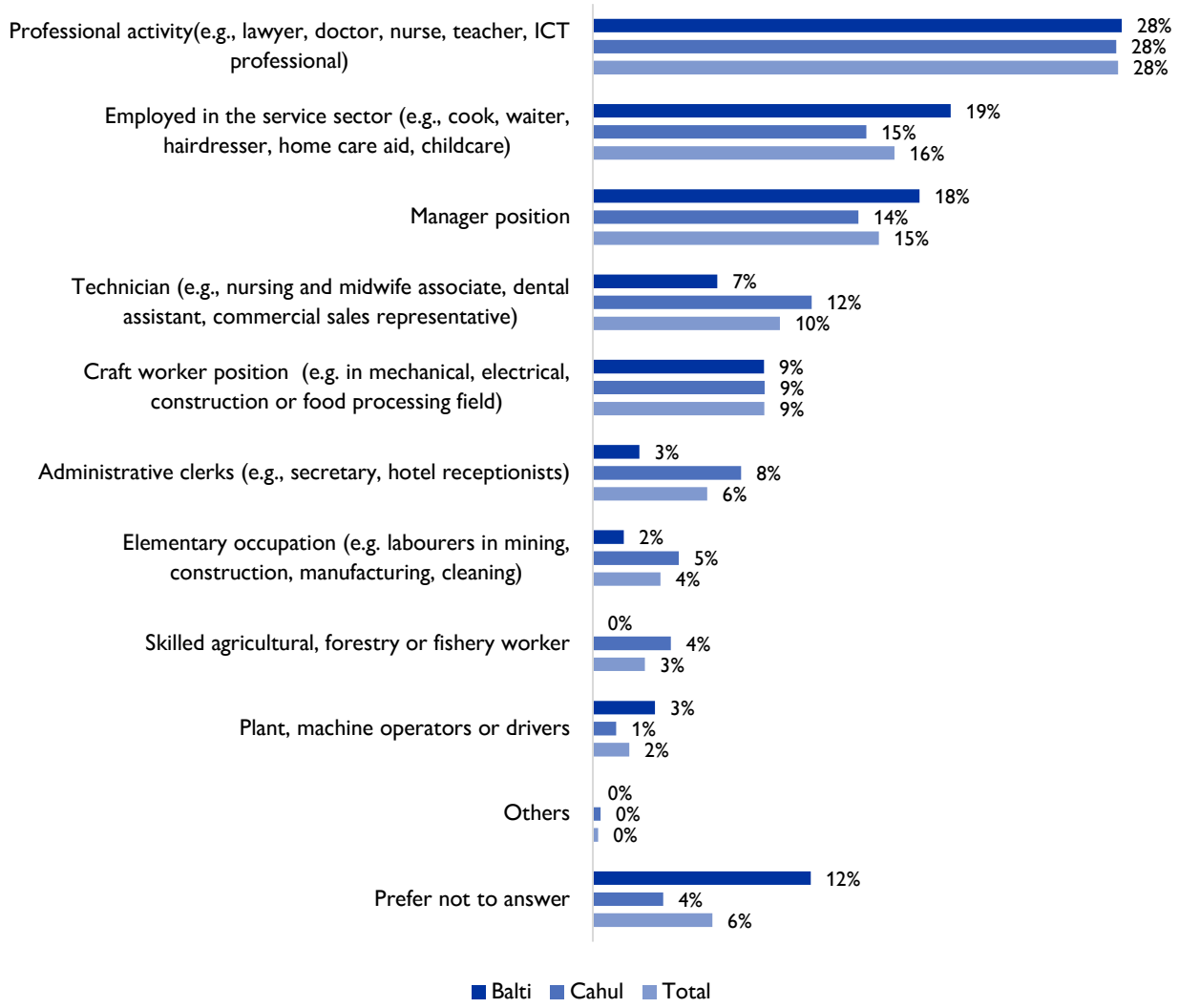
Out of 359 respondents who reported being employed or self-employed in their countries of origin (of whom 120 were in Balti and 239 in Cahul), 16 per cent declared that their most recent profession was in the trades, 13 per cent in educational and academic sectors, 11 per cent in services (cleaning, personal care, etc.), nine per cent in financial and real estate sectors, same as in the health sector, seven per cent in hospitality sector, six per cent in transportation and logistics and other six per cent in manufacturing. The other reported sectors of activity were agriculture, fisheries, forestry (5%), Information Communication Technology (4%), construction and building (3%), automotive industries (e.g. manufacturing of cars, motorcycles, (3%), public administration and other sectors (1% each) and 5 per cent preferred not to answer. The distribution of respondents by most recent professional activity was similar between Balti and Cahul.

Figure 49: Most recent professional activities in country of origin, sector (%)



When asked about what was their last occupation, 28 per cent reported that they were exercising a professional activity (e.g., lawyer, doctor, teacher, ICT professional), 16 per cent were employed in the service sector (e.g., cook, waiter, hairdresser, home care aid, childcare), 15 per cent declared holding a managerial position, 10 per cent were a technician in their chosen profession (e.g., nursing, dental assistant, commercial sales representative), nine per cent were holding craft worker position (e.g., in mechanical, electrical, construction or food processing field) and six per cent were administrative clerks (e.g. secretaries, hotel receptionists. Other reported occupations were workers in elementary occupation (e.g., labourers in mining, construction, manufacturing, cleaning) (4%), skilled agricultural, forestry or fishery labourer (3%), plant, machine operators or driver (2%), other occupations (less than 1%), about six per cent preferred not to answer. The distribution of respondents by type of occupation in their country of origin was similar in Balti and Cahul districts.

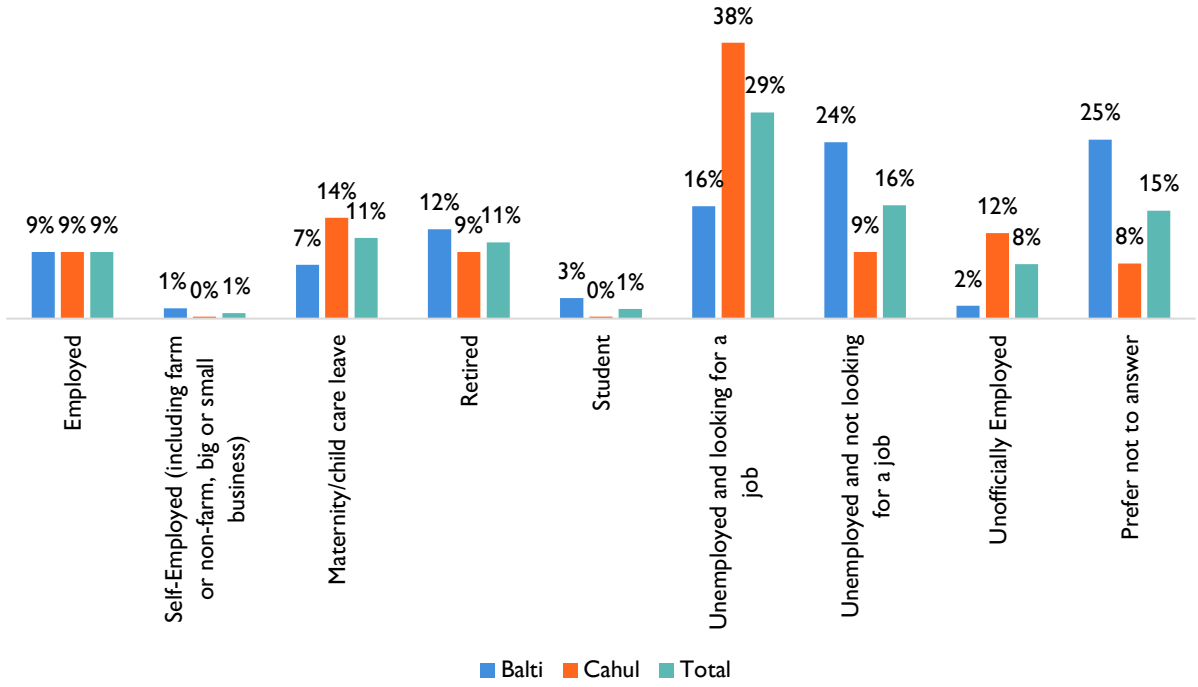
Figure 50: Distribution of respondents by type of occupation in their country of origin (%)



A comparative analysis between the previous and actual employment status of respondents shows that only low share of those who were employed or self-employed in their country of origin found a job in the Republic of Moldova (9% reported being employed and 1% self-employed). About 29 per cent reported being unemployed and looking for a job, and 16 per cent reported being unemployed and not looking for a job. Almost 11 per cent reported being on maternity leave, and 11 per cent reported being retired. One per cent declared being a student and 15 per cent preferred not to answer to this question. The shares of those who reported being unemployed and looking for a job were higher in Cahul, so were the shared of those who were unofficially employed (38% versus 16% and 12% versus 2%).

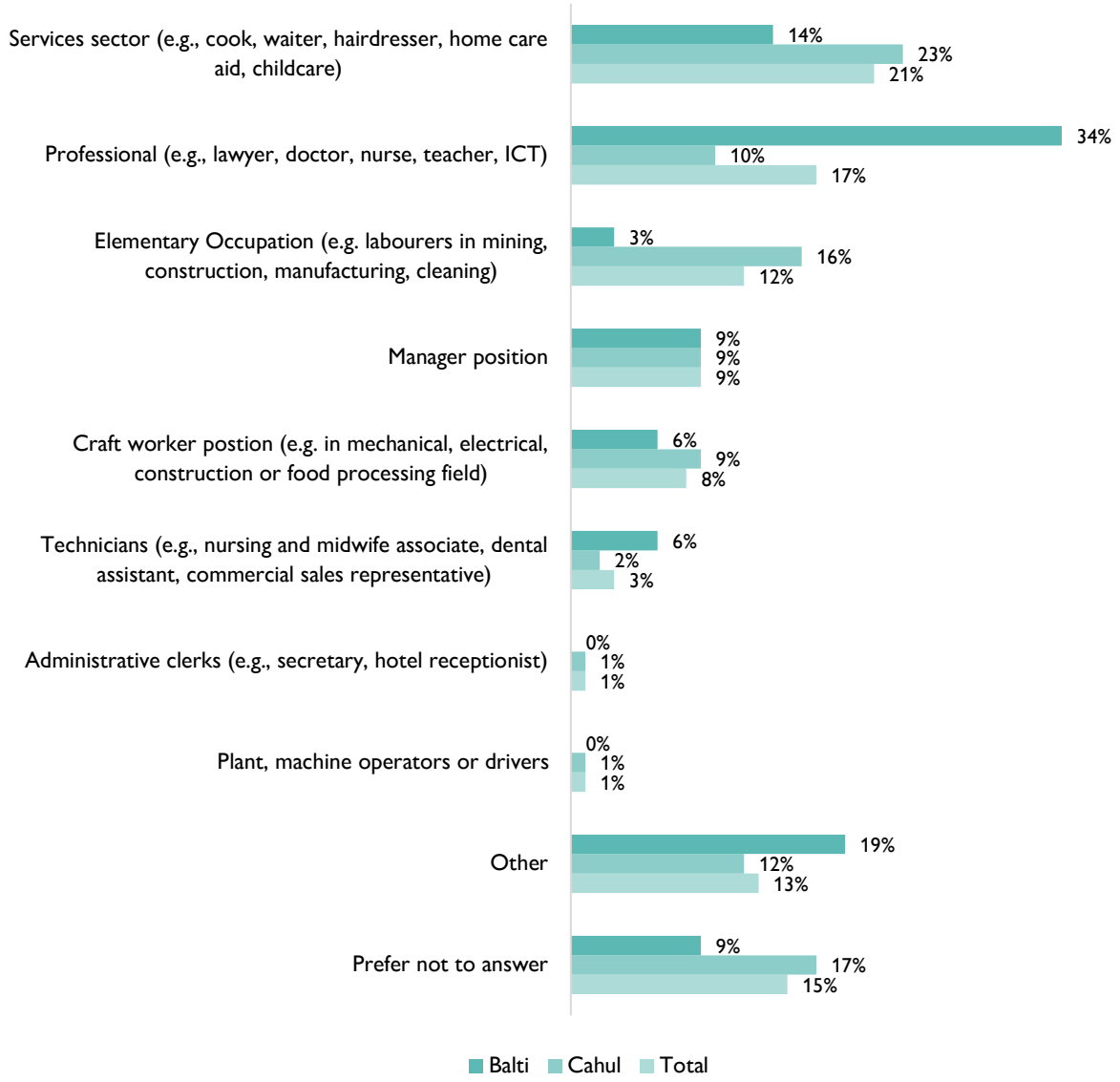
The relatively high percentage of those who could not find employment in the Republic of Moldova suggests loss or disruption of livelihoods leads thus the high need for financial and other kinds of material support. It must be emphasized that almost 8 per cent reported being unofficially employed.

Figure 51: Employment status in the Republic of Moldova (%)



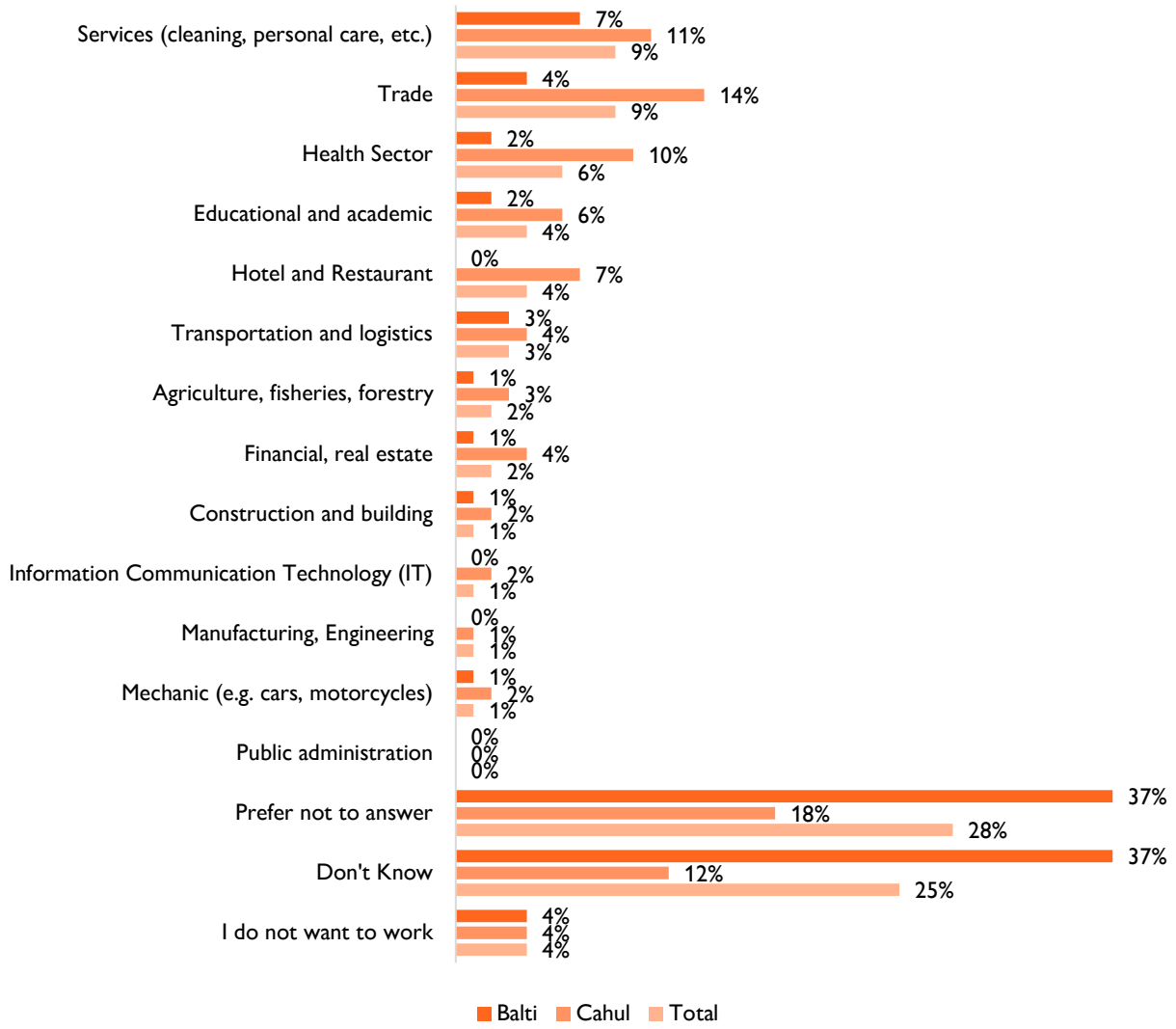
Out of 116 respondents who declared being employed, self-employed or informally employed (of whom 81 in Cahul and 35 in Balti), 21 per cent reported being in service sector (e.g. cook, waiter, hairdresser, home care aid, childcare), 17 per cent were professional (e.g. lawyer, doctor, nurse, teacher, ICT, professional), 12 per cent reported being in elementary occupation, nine per cent being in a manager position, eight per cent being a craft worker, three per cent technicians, being an administrative and working in a plant, as a machine operator or a driver (1% each). Almost 15 per cent preferred not to answer to this question, and 16 respondents reported other occupations (9 in Cahul and 7 in Balti). The proportion of respondents with a professional qualification was higher in Balti than in Cahul (34% versus 10%), while the share of those employed in the in the services sectors was higher in Cahul than in Balti (23% versus 14%). The share of those employed in elementary occupations was 16 per cent in Cahul and three per cent in Balti. The share of those who preferred not to answer to this question was higher in Cahul than in Balti (17% versus 9%).

Figure 52: Distribution of respondents by current occupation in the Republic of Moldova (%)



Out of 401 respondents who reported being unemployed in the Republic of Moldova, being a student or who preferred not to report their present occupational status (210 in Cahul and 191 in Balti), nine per cent of respondents would prefer to work in the services sectors and in trades, six per cent in the health sector, four per cent in the education or academic sector and in the hospitality sector, other 83 per cent in transportation and logistics sectors. Lower shares were reported for: agriculture, fisheries, forestry, financial, real estate (2% each), construction and building, Information Communication Technology, manufacturing, engineering mechanic (1% each), public administration (one respondent). High shared of respondents preferred not to answer to this question (28%), did not know (25%) or declared that they did not want to work (4%). The share of those who preferred not to answer to this question or were undecided was higher in Balti than in Cahul (37% versus 18%, and 37% versus 12%).

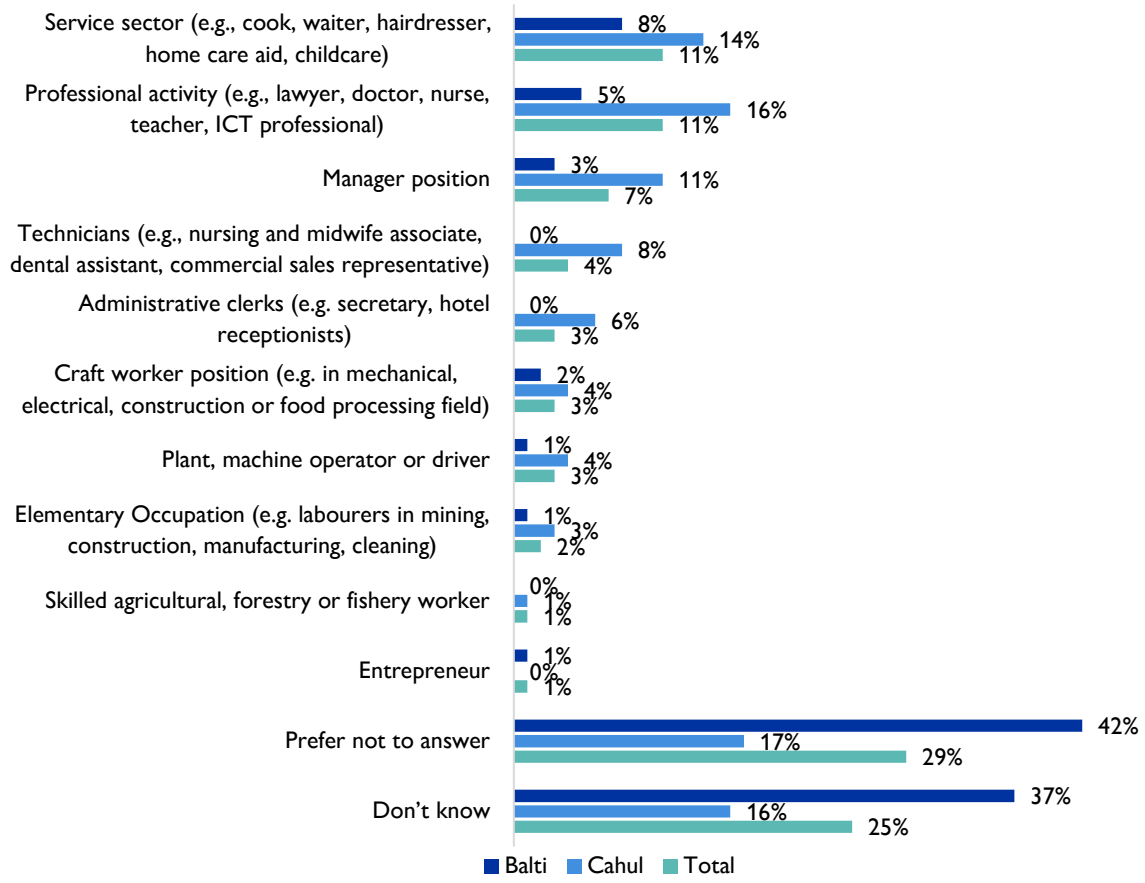
Figure 53: Desired sector of occupation in the Republic of Moldova (%)



When asked about the type of occupation they would prefer in the Republic of Moldova[5], 11 per cent would prefer working in the service sector or in a professional activity and seven per cent a manager position. About four per cent would opt for a technician position, three per cent for an administrative activity, or to hold a plant, machine operator or drivers' position, two per cent would prefer an elementary occupation, one per cent would prefer skilled agricultural, forestry or fishery position and only one per cent declared they would like to establish their own business. Relatively high share of respondents preferred not to answer to this question (29%) of did not know (25%). The share of those who preferred not to answer or did not know were superior in Balti than in Cahul (42% versus 17%, and 37% versus 16%).

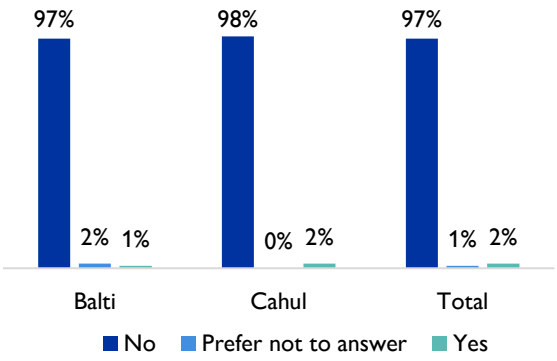
[5] The respondents who reported not willing to work in the Republic of Moldova did not answer this question. The total number of respondents who hard their desired occupation status was 385 people (of whom 202 were in Cahul and 183 in Balti).

Figure 54: Respondents desired occupation type in the Republic of Moldova (%)



When asked if they have tried or planned to open their own enterprise in the Republic of Moldova, the majority indicated that they did not have such intention, and only two per cent gave a positive answer (10 respondents of whom 7 in Cahul and 3 in Balti). One per cent preferred not to answer to this question. The shares of those who did not intend to open their own business in the Republic of Moldova was equally high in Balti and Cahul districts.

Figure 55: Share of respondents who tried/planned to open their own enterprise in the Republic of Moldova (%)

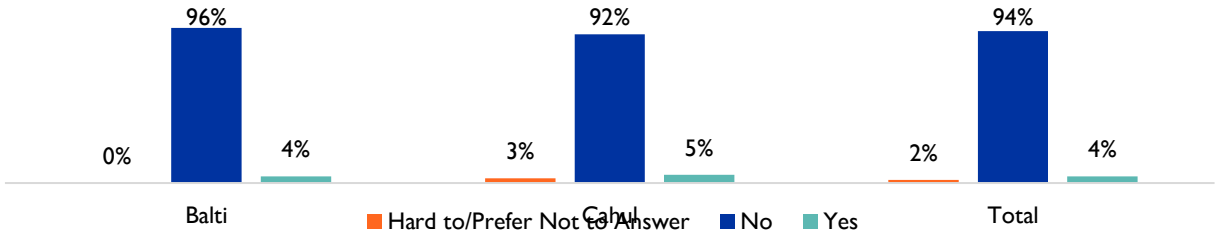


Out of 10 respondents who expressed their intention to open their own business in the Republic of Moldova, most wanted to open a small enterprise in the services sector (beauty or massage salon, clothing boutique, transport, or logistics company, farming or ranching enterprise, events, or sports enterprise).

8. PROTECTION

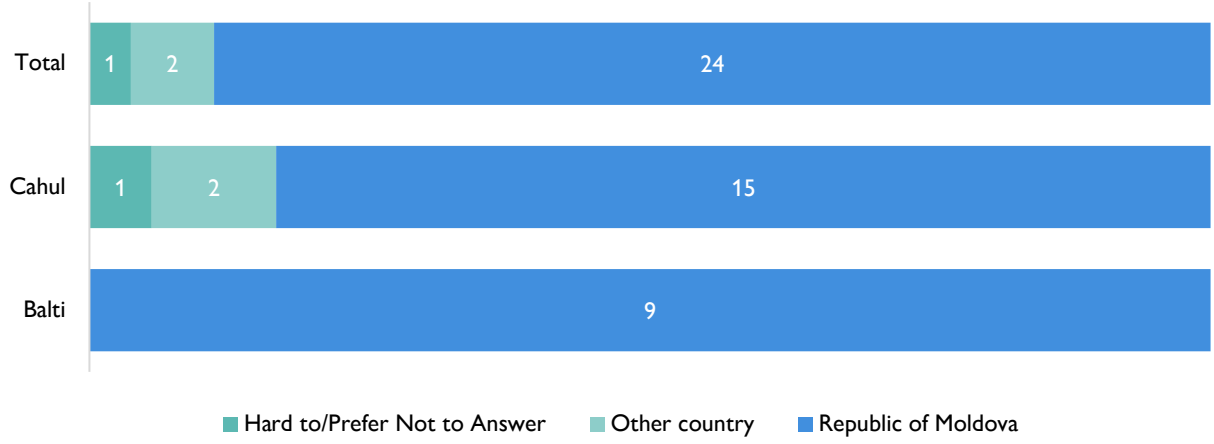
Around four per cent of respondents reported that they or their family members received offers of doing informal work (i.e., without contract, unregistered business, etc.), two per cent preferred not to answer to this question and 94 per cent reported no such cases.

Figure 56: Share of respondents whose family members received offers of informal work in the Republic of Moldova (%)



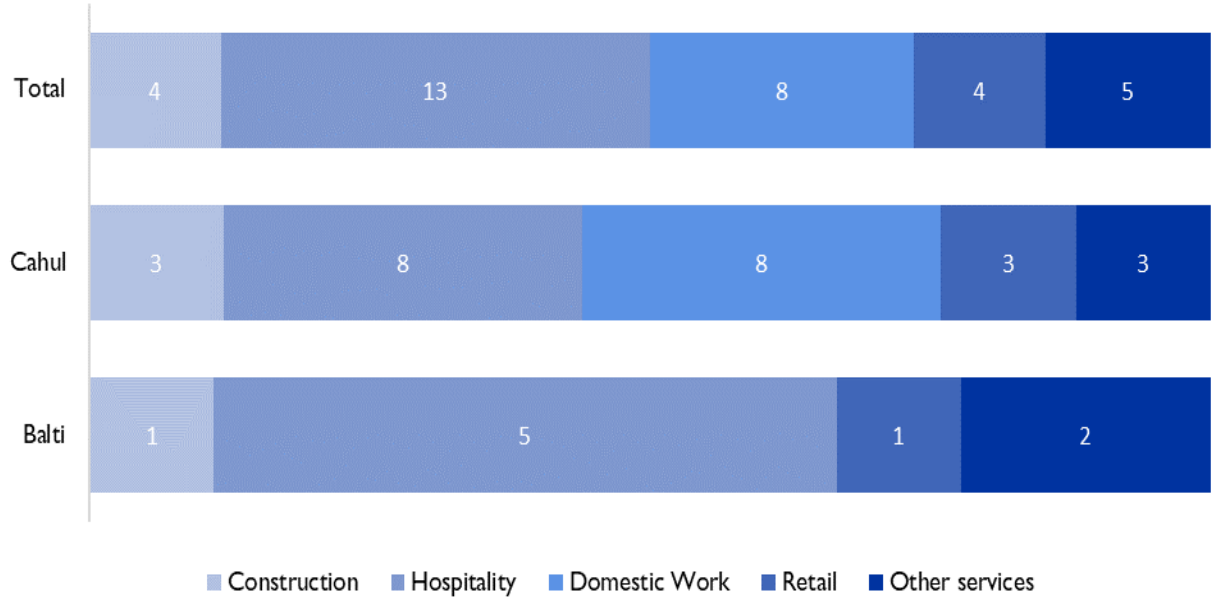
Out of 27 respondents who reported receiving offers of informal work (18 in Cahul and 9 in Balti), 89 per cent declared that the intended country of employment was the Republic of Moldova, seven per cent indicated it was another country, and one respondent did not answer. Two respondents in Cahul reported that the intended country of destination was a country other than the Republic of Moldova (Romania for one respondent, and the United Kingdom for another) and 15 declared that it was the Republic of Moldova, while one preferred not to answer to this question. Out of nine respondents who gave a positive answer to this question in Balti, all nine said the final country of destination was the Republic of Moldova.

Figure 57: Respondents'/family members offered informal work in the Republic of Moldova or intended country of employment (%)



When asked about the nature of the work/services they were offered to provide, 13 respondents out of 27 declared that it was in hospitality sector, 8 were asked to provide domestic work, 5 to work in other services, 4 to work in the retail sector and 4 in construction. More than one possible option was offered to respondents while answering this question.

Figure 58: Nature of informal work/services offered to respondents (%, multiple options)

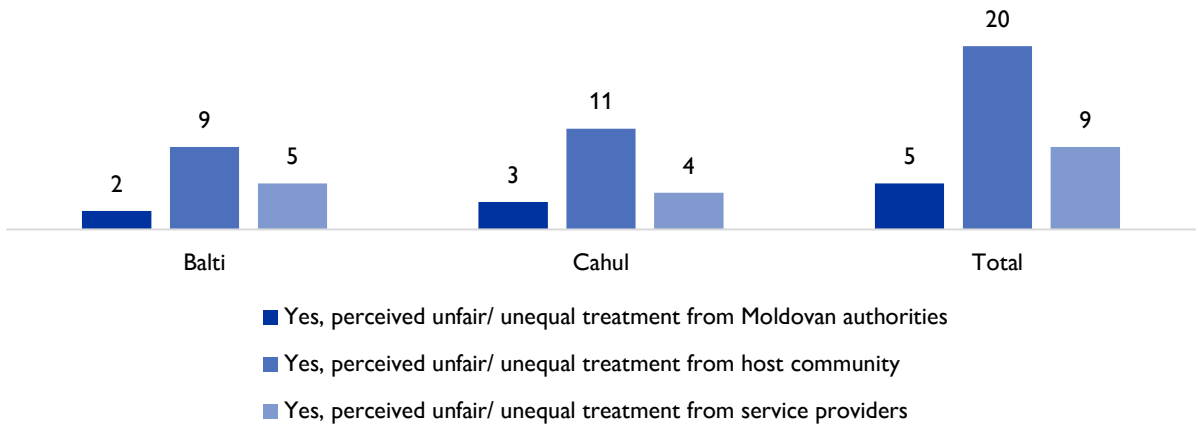


Of all respondents who answered the question on whether they or their family members worked or provided any services under threat or without getting the expected or agreed-upon payment since arriving in the Republic Moldova, 99 per cent declared that they received no such offer, one respondent answered positive and two declared that it was hard to answer this question.

There was one case of a minor in Balti employed under an employment or services contract in the Republic of Moldova. One woman in Cahul and another in Balti, reported that they or members of their family had been contacted by previously unknown people (in person or online) with offers of uncomfortable or disturbing activities which could involve transactional sex online or offline and the sale of blood/body organs etc. Three respondents out of 661 (of whom all three in Cahul) preferred not to answer to this question and the rest 656 reported no such incidents.

Thirty-one respondents declared that they or members of their family experienced unfair or unequal treatment based on nationality, ethnicity, gender, or their current status since they arrived in the Republic of Moldova (of whom 15 in Balti and 16 in Cahul). Thirty-seven respondents preferred not to answer this question (of whom 10 were in Balti and 27 in Cahul) and 593 respondents did not experience any unfair treatment (of whom 257 in Balti and 336 in Cahul). Out of 31 people who reported experiencing an unfair treatment, 20 declared that it was from local communities, 9 from service providers and 5 from Moldovan authorities.

Figure 59: Reported unfair or unequal treatment (%, more than one possible option)



Only one respondent out of 31 who experienced unfair or unequal treatment submitted a complaint to the local authorities.

9. SURVEY METHODOLOGY

The findings presented in this report draw on a survey of sociodemographic characteristics, mobility, vulnerability, needs, and access to public services among migrant populations namely Ukrainian refugees and Third-Country Nationals within Cahul and Balti municipalities in the Republic of Moldova.

The DTM survey aims to complement the Migration Governance Indicators (MGI) analysis and contribute to a better understanding of migration within the two regions, strengthen the capacities of local authorities, promote sustainable interventions, and improve the well-being of migrants and host communities.

The survey was conducted by nine trained enumerators using a Kobo toolbox. Only adults (18+) were interviewed using the random sampling method or a snowball approach[6] and those interviewed in the survey were only Ukrainian refugees or TCNs who arrived or settled in Cahul and Balti municipalities after 24 February 2022 when the conflict in Ukraine started although there were a few respondents who settled before then. Enumerators conducted interviews at public administration buildings (town halls, polyclinics, schools, kindergarten, etc.), bus or train stations, refugee accommodation centres, NGOs and other locations. Local authorities were very helpful in identifying and reaching targeted immigrants.

The questionnaire consisted of 6 parts as follows:

Section 1 - Survey location, enumerator details and respondent's consent to participate in the survey.

Section 2 - Demographic and social profile of the respondents (citizenship, reasons for travelling to the Republic of Moldova, gender, age, marital status and spoken languages).

Section 3 - Travel characteristics and the mobility of target populations, their intended destinations, length of stay in the Republic of Moldova, reasons for choosing the country of destination as well as the size and composition of their households.

Section 4 - Living conditions, vulnerabilities and needed support.

Section 5 - Access to public services and their economic, social and cultural integration, providing insight into possible needs for services and integration programmes based on migrants' socioeconomic and professional profile analyses, including programmes for recognizing informal skills, psychosocial and emotional counselling, and children's integration services.

Section 6 - The last part of the survey comprises the protection components related to unfair or unequal treatment (due to race, nationality, or ethnicity).

All indicators collected under this exercise are aligned with DTM guidelines and data dictionary to ensure further cross-analysis and triangulation with other assessments conducted in the country and the region.

[6] The snowball approach is a non-probability sampling method where each new interviewed respondent was requested to introduce further respondents from among their networks

Annex 1: Reported functional difficulty cases by type, level, age group in Balti and Cahul municipality

Age group	Type/Level of FD	Seeing			Hearing			Walking			Remembering			Self-Care			Communicating			Total 6 FDs per AG		
		BL	CH	Total	BL	CH	Total	BL	CH	Total	BL	CH	Total	BL	CH	Total	BL	CH	Total	BL	CH	Total
0-2	S	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	L	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	C	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3-4	S	1	2	3	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	1	3	4
	L	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	C	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total	1	2	3	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	1	3	4
	T % fd/FD	25.0%	50.0%	75.0%	0.0%	0.0%	0.0%	0.0%	25.0%	25.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.2%	0.7%	1.0%
5-17	S	2	10	12	1	1	2	0	0	0	0	3	3	0	3	3	0	0	0	3	17	20
	L	17	5	22	0	0	0	1	1	2	1	0	1	2	0	2	1	0	1	22	6	28
	C	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total	19	15	34	1	1	2	1	1	2	1	3	4	2	3	5	1	0	1	25	23	48
	T % fd/FD	39.6%	31.3%	70.8%	2.1%	2.1%	4.2%	2.1%	2.1%	4.2%	2.1%	6.3%	8.3%	4.2%	6.3%	10.4%	2.1%	0.0%	2.1%	6.0%	5.5%	11.5%
18-59	S	34	39	73	4	8	12	2	17	19	1	1	2	0	5	5	0	0	0	41	70	111
	L	23	4	27	3	0	3	5	1	6	0	1	1	0	0	0	0	0	0	31	6	37
	C	1	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2
	Total	58	44	102	7	8	15	7	18	25	1	2	3	0	5	5	0	0	0	73	77	150
	T % fd/FD	38.7%	29.3%	68.0%	4.7%	5.3%	10.0%	4.7%	12.0%	16.7%	0.7%	1.3%	2.0%	0.0%	3.3%	3.3%	0.0%	0.0%	0.0%	17.4%	18.4%	35.8%
60+	S	29	24	53	7	11	18	6	18	24	3	4	7	1	1	2	1	0	1	47	58	105
	L	38	11	49	11	3	14	21	11	32	9	0	9	1	2	3	0	0	0	80	27	107
	C	4	0	4	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	5	0	5
	Total	71	35	106	19	14	33	27	29	56	12	4	16	2	3	5	1	0	1	132	85	217
	T % fd/FD	32.7%	16.1%	48.8%	8.8%	6.5%	15.2%	12.4%	13.4%	25.8%	5.5%	1.8%	7.4%	0.9%	1.4%	2.3%	0.5%	0.0%	0.5%	31.5%	20.3%	51.8%
GT & PP	S	66	75	141	12	20	32	8	36	44	4	8	12	1	9	10	1	0	1	92	148	240
	S% M FD	23.4%	19.8%	58.8%	4.3%	5.3%	13.3%	2.8%	9.5%	18.3%	1.4%	2.1%	5.0%	0.4%	2.4%	4.2%	0.4%	0.0%	0.4%	32.6%	39.1%	57.3%
	S% G/HH	10.0%	11.3%	21.3%	1.8%	3.0%	4.8%	1.2%	5.4%	6.7%	0.6%	1.2%	1.8%	0.2%	1.4%	1.5%	0.2%	0.0%	0.2%	13.9%	22.4%	36.3%
	L	78	20	98	14	3	17	27	13	40	10	1	11	3	2	5	1	0	1	133	39	172
	L% M/FD	27.7%	5.3%	57.0%	5.0%	0.8%	9.9%	9.6%	3.4%	23.3%	3.5%	0.3%	6.4%	1.1%	0.5%	2.9%	0.4%	0.0%	0.6%	47.2%	10.3%	41.1%
	L% G/HH	11.8%	3.0%	14.8%	2.1%	0.5%	2.6%	4.1%	2.0%	6.1%	1.5%	0.2%	1.7%	0.5%	0.3%	0.8%	0.2%	0.0%	0.2%	20.1%	5.9%	26.0%
	C	5	1	6	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	6	1	7

	C% M/FD	1.8%	0.3%	85.7 %	0.4 %	0.0 %	14.3 %	0.0%	0.0%	0.0%	0.0 %	0.0 %	0.0 %	0.0 %	0.0 %	0.0%	0.0 %	0.0 %	0.0 %	2.1%	0.3%	1.7%
	C% G/HH	0.8%	0.2%	0.9%	0.2 %	0.0 %	0.2%	0.0%	0.0%	0.0%	0.0 %	0.0 %	0.0 %	0.0 %	0.0 %	0.0%	0.0 %	0.0 %	0.0 %	0.9%	0.2%	1.1%
	Total FD	149	96	245	27	23	50	35	49	84	14	9	23	4	11	15	2	0	2	231	188	419
	T%fd/FD	35.6 %	22.9 %	58.5 %	6.4 %	5.5 %	11.9 %	8.4%	11.7 %	20.0 %	3.3 %	2.1 %	5.5 %	1.0 %	2.6 %	3.6%	0.5 %	0.0 %	0.5 %	B55.1 %	C44.9 %	100.0 %
	T% M/FD	52.8 %	25.3 %		9.6 %	6.1 %		12.4 %	12.9 %		5.0 %	2.4 %		1.4 %	2.9 %		0.7 %	0.0 %		81.9%	49.6%	
	T% G HH	22.5 %	14.5 %	37.1 %	4.1 %	3.5 %	7.6%	5.3%	7.4%	12.7 %	2.1 %	1.4 %	3.5 %	0.6 %	1.7 %	2.3%	0.3 %	0.0 %	0.3 %	34.9%	28.4%	63.4%
	T HH	282	379	661	282	379	661	282	379	661	282	379	661	282	379	661	282	379	661	282	379	661

Legend	S - Some difficulty	L - A lot of difficulty	C - Cannot do at all	S/L/C/T % M/FD - share of FDs in municipality and in total 419 FDs
	BL - Balti municipality	CH - Cahul municipality	GT & P - Grand Total and Prevalence	S/L/C/T % G/HH – relative share of FDs in Total 661 HH

Annex 2: Reported needs at Balti and Cahul municipality (%, more than one possible option)

	Balti	Cahul	Total
Financial support	97%	98%	97%
Health services	69%	89%	81%
Clothes & Shoes	80%	77%	78%
Food	54%	88%	73%
Medicines	72%	72%	72%
Personal hygiene and sanitary supplies (soap, menstrual products, diapers, etc.)	51%	81%	68%
Long-term accommodation	15%	74%	49%
Smartphone/computer	43%	53%	49%
Spaces or activities for children (extracurricular)	30%	58%	46%
Wi-Fi internet/mobile internet	31%	54%	44%
Employment/Job	19%	57%	41%
Bike/scooter	17%	37%	29%
Documentation, legal, consular services (information and assistance)	15%	38%	28%
Psychological counselling	20%	30%	26%
Access to information in your own language	9%	36%	25%
Language courses	16%	30%	24%
Enrolment in the school	7%	33%	22%
Medical/therapeutic rehabilitation	19%	19%	19%
Wheelchair, toilet seat, crutch, eyeglasses, hearing aids	16%	20%	18%
Information on sending or receiving remittances	9%	20%	16%
Enrolment in the kindergarten	7%	20%	14%
Automatic washing machine	11%	16%	14%
Information on opening of a bank account	5%	17%	12%
Diploma Recognition	3%	17%	11%
Access to justice or police	1%	15%	9%
Family reunification	2%	11%	7%
Support to return home	1%	11%	7%
(Personal safety and security) Protection from violence, harassment, exploitation; Reporting incidents, grievances, assault	1%	11%	7%
Communication & information incl. support to communicate with others in Ukraine and elsewhere	5%	7%	6%
Transport support (for travel to another locality)	4%	6%	5%
Information on entrepreneurship	4%	4%	4%
Mediation services with the local population	1%	1%	1%
Others Specify	1%	1%	1%
Family tracing	0%	0%	0%

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International Organization for Migration

Regional Office for South-Eastern Europe, Eastern Europe and Central Asia

Dampfschiffstrasse 4/10-11, 1030 Vienna, Austria +43 1 581 22 22

Website: https://rovienna.iom.int/

Contact: ROViennaDataResearch-Newsletter@iom.int

International Organization for Migration

Country Office Republic of Moldova

9th floor Le Roi Business Center, Strada Sfatul Tarii 29 Chisinau, MD 2012, Republic of Moldova

+373 68003311

Website: https://moldova.iom.int/

Contact: iomchisinau@iom.int

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