



POLAND
ACCESS TO HEALTHCARE SERVICES
FOR REFUGEES FROM UKRAINE

2023 ANNUAL REPORT

The opinions expressed in this publication are those of the authors and do not necessarily reflect the views of the International Organization for Migration (IOM). The designations employed and the presentation of material throughout the report do not imply expression of any opinion whatsoever on the part of IOM concerning the legal status of any country, territory, city or area, or of its authorities, or concerning its frontiers or boundaries.

IOM is committed to the principle that humane and orderly migration benefits migrants and society. As an intergovernmental organization, IOM acts with its partners in the international community to: assist in meeting the operational challenges of migration; advance understanding of migration issues; encourage social and economic development through migration; and uphold the human dignity and well-being of migrants. This publication was made possible through the support provided by U.S Department of State Bureau of Population, Refugees, and Migration (PRM) and the German Federal Foreign Office.

Publisher

International Organization for Migration

International Organization for Migration

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

Country Office Poland

Dampfschiffstrasse 4/10-11, 1030 Vienna, Austria

Wiejska 12 str., Warsaw, Poland

+43 1 581 22 22

+48 22 538 91 03

<https://rovienna.iom.int/>

<https://dtm.iom.int/poland>

ROViennaDataResearch-Newsletter@iom.int

IOMDTMPoland@iom.int

This report was issued without formal editing by IOM.

Cover photo: IOM staff providing assistance to a refugee from Ukraine at a reception point in Przemyśl, Poland, © IOM 2023

Citation: International Organization for Migration (IOM), April 2024. "DTM Poland: Access to Healthcare Services for Refugees from Ukraine" IOM, Poland.

For more information on terms and conditions of DTM reports and information products, please refer to: <https://dtm.iom.int/terms-and-conditions>

Release date: April 2024

© IOM 2024

Some rights reserved. This work is made available under the [Creative Commons Attribution-NonCommercial-NoDerivs 3.0 IGO License](https://creativecommons.org/licenses/by-nc-nd/3.0/igo/) (CC BY-NC-ND 3.0 IGO).*

For further specifications please see the [Copyright and Terms of Use](#).

This publication should not be used, published or redistributed for purposes primarily intended for or directed towards commercial advantage or monetary compensation, with the exception of educational purposes, e.g. to be included in textbooks.

Permissions: Requests for commercial use or further rights and licensing should be submitted to publications@iom.int.

* <https://creativecommons.org/licenses/by-nc-nd/3.0/igo/legalcode>

TABLE OF CONTENTS

KEY FINDINGS	4
SOCIO-DEMOGRAPHIC PROFILE	5
ACCESS TO HEALTHCARE SERVICES	6
ASSISTANCE	8
INTENTIONS	9
EMPLOYMENT AND EDUCATION	10
ACCESS TO MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT	10
METHODOLOGY	11

KEY FINDINGS

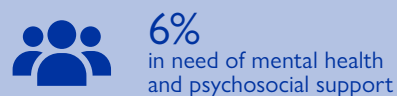
DEMOGRAPHICS



VULNERABILITIES

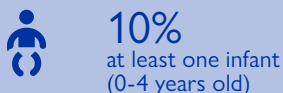


SUPPORT



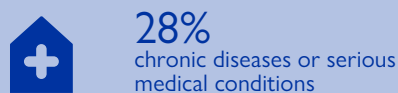
More than one answer possible

HOUSEHOLDS



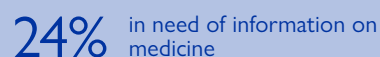
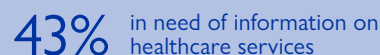
More than one answer possible

HEALTH CONDITIONS



More than one answer possible

INFORMATION



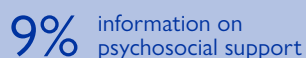
More than one answer possible

BARRIERS TO HEALTHCARE



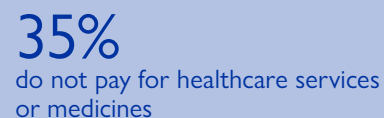
More than one answer possible

ELDERLY (60+) NEEDS



More than one answer possible

EXPENSES



SOCIO-DEMOGRAPHIC PROFILE

INTRODUCTION

IOM's Displacement Tracking Matrix (DTM) conducted a survey throughout 2023 in Poland interviewing a total of 2,710 respondents. This report focus on the trends related to their access to healthcare services and identifies obstacles

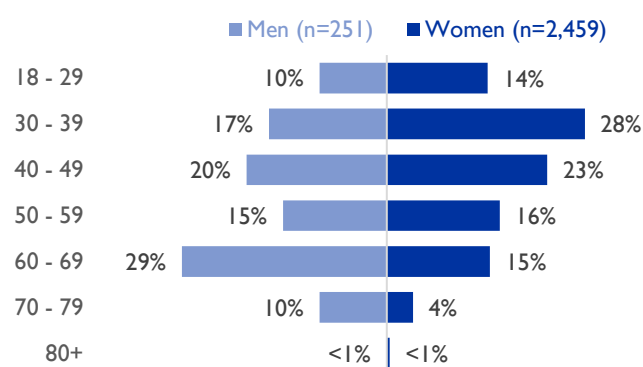
and challenges they encountered while displaced in Poland. The report also analyses respondents' needs identified in the field of mental health and psychosocial support.

GENDER, AGE AND MARITAL STATUS

Out of 2,710 respondents, 91 per cent were women. The largest age group among women consisted of individuals between 30 and 39 years old, comprising 26% per cent of all respondents. Among men, individuals over 60 years old constituted almost four per cent of all respondents.

The marital status most frequently reported both by women and men was 'married' (62% for both). Proportionately more women respondents were divorced, separated, or widowed compared to men (25% vs. 17%). The percentage of single men appeared to be higher than of single women (21% vs. 13%).

Figure 1. Age structure of the respondents (%) (Due to rounding, percentage totals may exceed 100%)



TRAVEL MODE AND GROUP COMPOSITION

Out of the total number of respondents (n=2,710), 70 per cent travelled in a group, while 30 per cent travelled alone. Among those who travelled in a group (n=1,889), the most common group composition was with their family (91%). Other responses included relatives (6%) and neighbours (5%).

Among respondents who travelled in a group (n=1,889), 67 per cent had at least one child (10% infants from 0 to 4 years old, 62% children from 5 to 17 years old), and 15 per cent had a member over 60 years old in their group. Five per cent of respondents traveling with a group had both a child and a member over 60 years old in their group.

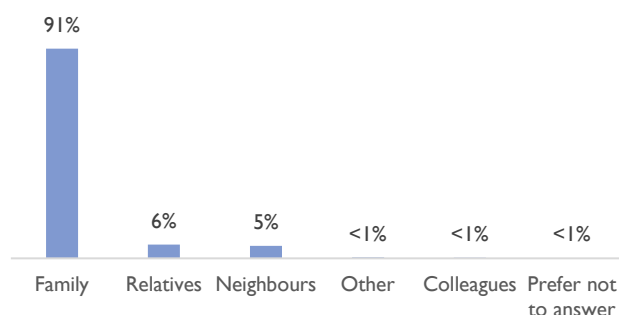
HEALTH CONDITIONS OR SPECIFIC NEEDS

In 2023, 35 per cent of all surveyed respondents reported individuals, including themselves, with serious health conditions or specific needs within their group.

Among those respondents, the largest portion (81%, n=762, 28% overall) reported having a group member with a chronic disease or under treatment. Additionally, 42 per cent (15% overall) reported having a group member with visual impairment, while 21 per cent reported having a group member with difficulties walking (n=388, different sample sizes are due to introducing new questions during the study, overall 7%).

Regarding the composition of households with individuals who had serious medical conditions or specific needs (n=776), 28 per cent of respondents resided with at least one person above 60 years old, 48 per cent with at least one child between the ages of 5 and 17, while only 6 per cent resided with an infant aged 0 to 4 years old.

Figure 2. Travel group composition (%), N=1,889 (more than one answer possible)



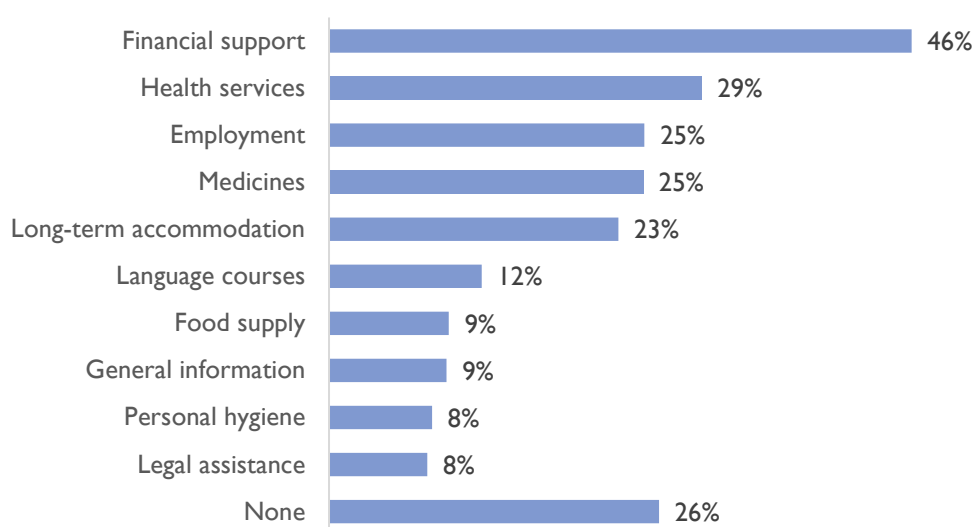
ACCESS TO HEALTHCARE SERVICES

NEEDS

When asked about their main needs, ‘health services’ was the second most frequent answer (29%), and ‘medicines’ ranked fourth (25%). Twenty-three per cent of the respondents reported both of these needs as their top need (n=2,710). These proportions remained consistent across different voivodeships.

Throughout 2023, the percentage of respondents who reported health services as their top main need remained roughly the same throughout 2023 (31% in Q1, n=1,795, 27% in Q4, n=260). The proportion of respondents reporting medicines as top need decreased from 28 per cent in the first quarter (n=1,795), to 11 per cent in the fourth quarter (n=260).

Figure 3. Top 10 most frequently reported needs (%), n=2,710 (more than one answer possible)



Compared to younger age groups, the respondents in the 50–59 and 60–69 age groups more frequently reported health services and medicines as one of their main needs. No gender differences were observed. Respondents who reported having serious health conditions or special needs, or who traveled with such persons, more frequently reported health services (42% vs. 21%) and medicines (34% vs. 17%) as one of their top needs compared to those who did not report health conditions.

Those who had a person in their group with difficulties walking frequently reported health services (48%, n=83) as a need. Having children in the household was not significantly related to reporting health services as a top need, even among the age group of 18–39 (22% vs. 19%).

Figure 4. Respondents who reported health services and medicines as their main needs by age groups (%) (more than one answer possible)

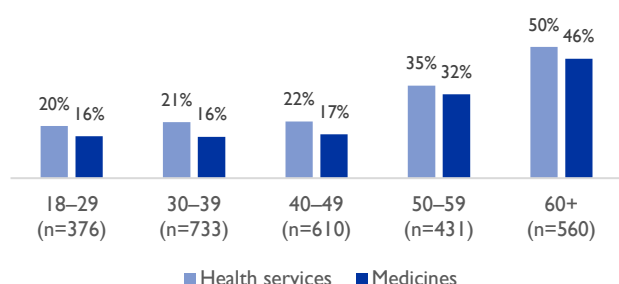
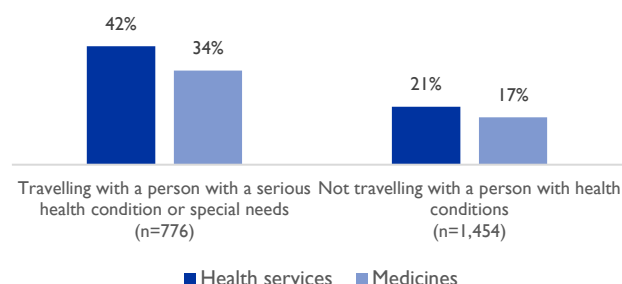


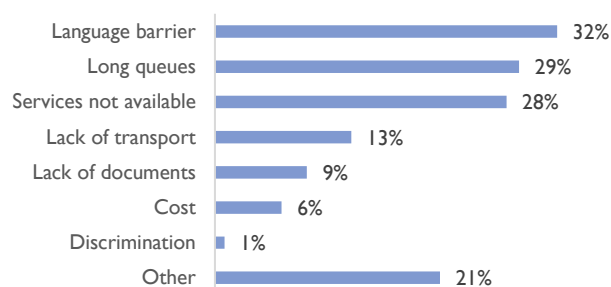
Figure 5. Share of respondents who reported health services as a top need when travelling with a person with a serious health condition (%)



OBSTACLES

Out of those who responded to this question (n=1,594), 21 per cent of respondents encountered obstacles preventing them from accessing healthcare services in Poland, 10 per cent were unsure, and 2 per cent preferred not to answer. Among those who encountered obstacles (n=333), the most frequently reported challenges were language barriers (32%), long queues (29%), and unavailability of services (28%). Additionally, fourteen individuals described in detail instances of discrimination they experienced while seeking medical assistance.

Figure 6. % of respondents who reported obstacles to accessing healthcare services in Poland, n=333 (more than one answer possible)



“ At the doctor's appointment after giving birth, the doctor said, 'Why did you come here, no matter how much war there was, I wouldn't have left, you're stuck in a foreign country.' ”

Forty-year-old woman, originally from Donetsk oblast, living in Katowice

The proportion of respondents who stated encountering obstacles was greater in the fourth quarter of 2023 (49%), compared to the first quarter (19%). The frequencies of particular obstacles reported in most cases did not differ between quarters of data collection. However, respondents over 60 years old reported encountering obstacles more frequently than those under 60 (24%, n=331, vs. 20%, n=1,407).

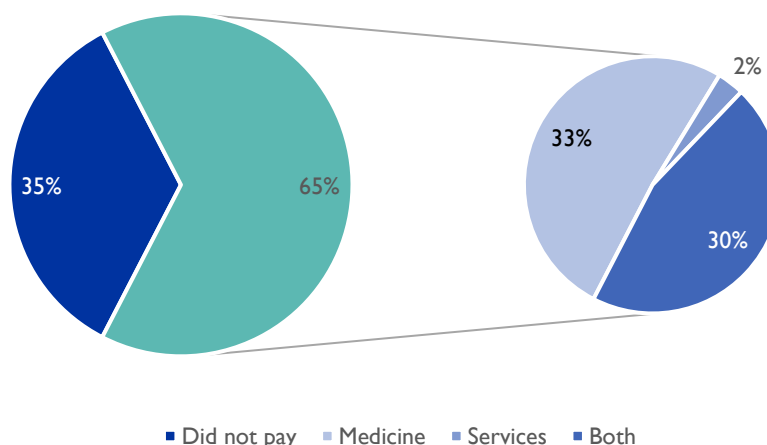
A slightly higher frequency of reported obstacles was observed in Mazowieckie voivodeship (21% overall) compared to Pomorskie (16%) and Małopolskie (15%). Other voivodeships were omitted from the comparison due to a small number of available data.

EXPENSES RELATED TO HEALTHCARE

Among the 135 respondents who were asked regarding their expenses on healthcare services or medicine, 65 per cent confirmed that they had paid for at least one of these.

Furthermore, 30 per cent reported that they had incurred expenses for both healthcare services and medicine.

Figure 7. % of respondents who purchased healthcare services and/or medicine, n=135



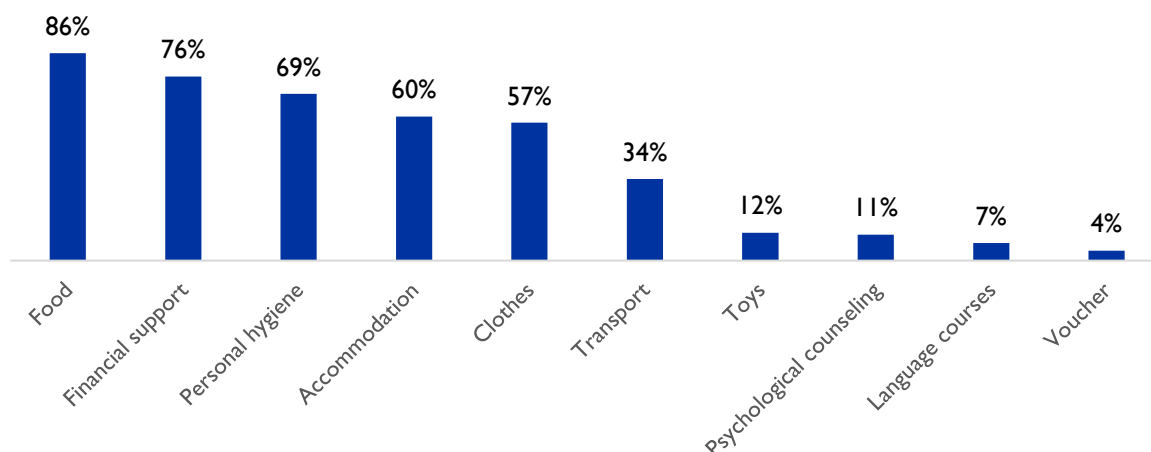
ASSISTANCE

ASSISTANCE RECEIVED

Eighty-five per cent of respondents (n=2,534) reported receiving some form of humanitarian assistance. Out of those (n=2,166), 86 per cent received food (74% overall), 76 per

cent received financial support (65% overall), 69 per cent received personal hygiene items (59% overall), and 60 per cent received accommodation (51% overall).

Figure 8. Top 10 most frequently reported types of assistance received (%), n=2,166 (more than one answer possible)

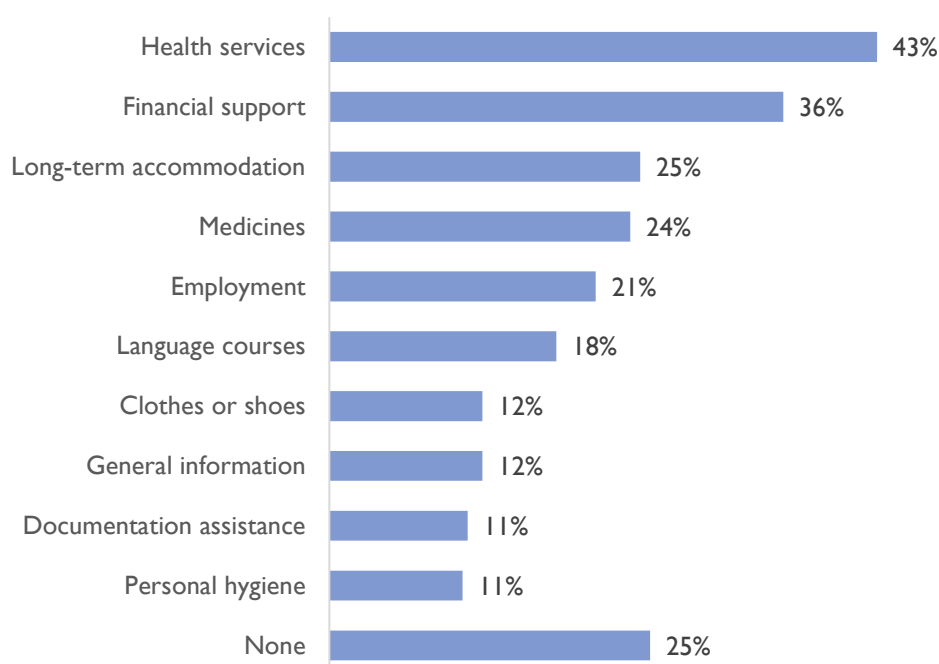


INFORMATION ON ASSISTANCE

Of the 1,251 respondents who were asked if they knew where to seek assistance, 78 per cent confirmed that they did. However, among the 257 respondents who were unsure,

43 per cent expressed a need for more information about available health services, and 24 per cent sought more information about medicines.

Figure 9. Areas of information on assistance needed (%), n=257 (more than one answer possible)



INTENTIONS

TRAVEL INTENTIONS

Overall, 45 per cent of respondents were not planning to move away from their current location in Poland. Forty-two per cent were planning to return to Ukraine, six per cent wanted to move to another country, and three per cent elsewhere in Poland. Five per cent of respondents did not know where they wanted to move in the future.

PLANNING TO RETURN

Most of the respondents planning to return to Ukraine reported that one of the reasons was wanting to reunite with their family members (59%). Other reasons included the improvement of the situation in their place of origin (20%), and lack of resources or money for living costs (11%). Health care as a reason for returning was reported by less than 0.5 per cent of respondents. However, according to the 2023 Annual Report of IOM Poland Ukrainian Nationals Crossing Back to Ukraine¹, 32 per cent of the respondents crossing back for a short-term visit (n=1,980) reported receiving medical care as a reason.

Some of those who planned to return to Ukraine or move to a different country were asked about their predictions regarding immediate needs upon moving (n=314). Forty-two per cent of those reported cash support as their primary need. The second most frequently mentioned need was medical support (22%), followed by employment (22%).

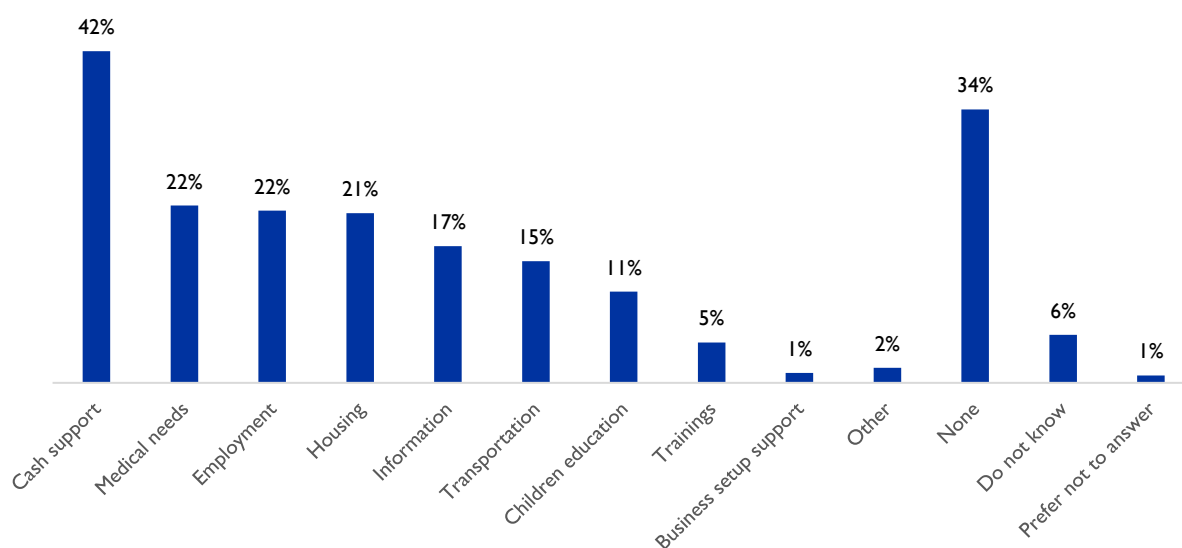
Figure 10. Respondents' intention to move from current location (%), n=2,710 (Due to rounding, percentage totals may exceed 100%)



Figure 11. Top 5 reasons for wanting to return to Ukraine (%), n=1,132 (more than one answer possible)



Figure 12. Most frequently reported immediate needs upon returning to Ukraine or moving to a different country (%), n=314 (more than one answer possible)



¹ International Organization for Migration (IOM), February 2024. DTM Poland “Poland — Ukrainian Nationals Crossing Back to Ukraine — Annual Report (2023)” IOM, Poland.

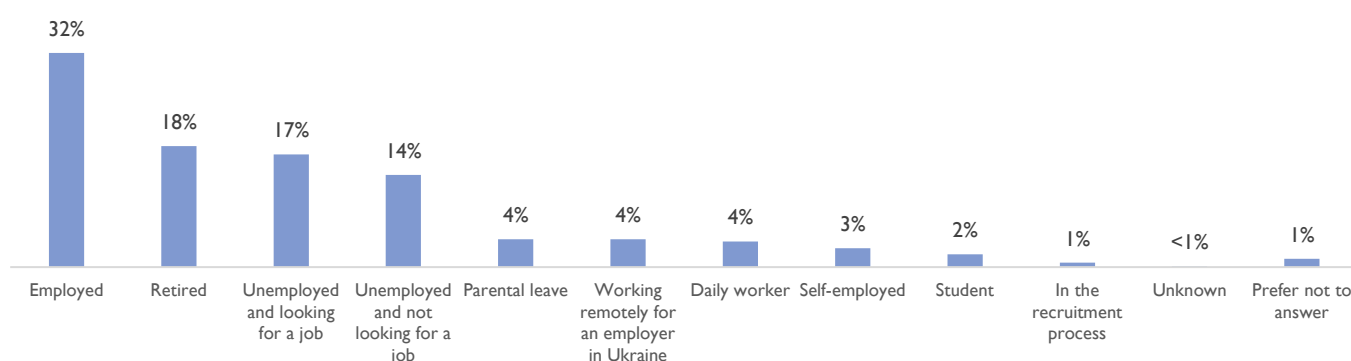
EMPLOYMENT AND EDUCATION

EMPLOYMENT

Thirty-two per cent of respondents were employed in Poland at the time of the survey. An additional four per cent were working remotely for an employer in Ukraine, while another four per cent worked as daily workers, and three per cent were self-employed. Eighteen per cent were retired. Seventeen per cent of respondents were unemployed and looking for a job,

with an additional one per cent in the recruitment process, and 14 per cent not actively seeking employment while unemployed. Four per cent of respondents were on maternity or paternity leave, and two per cent were full-time students.

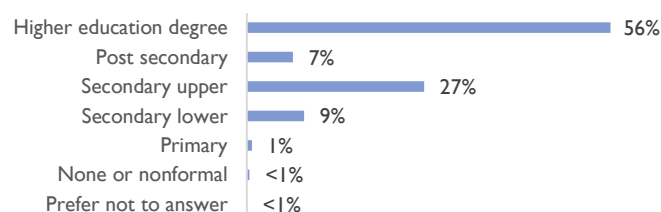
Figure 13. Employment status in Poland (%), n=2,644 (Due to rounding, percentage totals may exceed 100%)



EDUCATION

When considering the highest level of education received, more than half of the respondents reported having a higher education degree (56%). Twenty-seven per cent of respondents completed upper secondary education.

Figure 14. Highest level of educational attainment (%), n=2,710 (Due to rounding, percentage totals may exceed 100%)




ACCESS TO MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT


Mental health and psychosocial support did not emerge as the most frequently reported main priority needs. Only six per cent of respondents (n=2,710) identified psychological counseling as a primary need. Among those who reported




overall
9%
respondents received
psychological counseling



6%
in need of
psychological
counseling



6%
of women in need
of support



3%
of men in need
of support

receiving assistance (n=2,166), 11 per cent stated they had received psychological counseling (9% overall). Additionally, 9 per cent of respondents seeking additional information on available assistance (n=257) specifically required information regarding psychological counselling services.

METHODOLOGY

IOM's Displacement Tracking Matrix (DTM) is a system to track and monitor displacement and population mobility. It is designed to regularly and systematically capture, process and disseminate information to provide a better understanding of the movements and evolving needs of displaced populations, whether on site or en route.

This survey is part of IOM's DTM activities to monitor the profiles, displacement patterns and most immediate needs of the Ukrainian refugees and TCNs residing or transiting through Poland.

In Poland, surveys were conducted in Ukrainian, Russian, and English by IOM's DTM trained teams of enumerators on a mobile application.

The interviews are anonymous and carried out one-on-one

with respondents, provided they consent to be interviewed after a brief introduction.

Enumerators trained on ethics of data collection, information provision and protection principles, approached people crossing back to Ukraine, to verify their willingness to conduct the survey, which was only addressed to adults (18+).

The survey form was designed by IOM to capture the main displacement patterns, intentions and immediate needs of refugees from Ukraine following the outbreak of the full-scale war. It analyses the demographic profiles of respondents and of the group they are travelling with, if any; it gathers information regarding a set of main needs at the moment of the interview; and it asks about intentions relatively to the permanence in Ukraine.

About the Survey

Aim

To improve the understanding of the profiles of refugees from Ukraine residing or transitioning through Poland, including their displacement patterns, intentions and needs.

Location & Execution

Face-to-face surveys are conducted by 12 trained enumerators stationed at selected locations. Surveys were conducted in English, Ukrainian, and Russian with the help of a mobile application.

Target population

The analysis focuses on the access to healthcare services among refugees from Ukraine residing or transitioning through Poland.

Regional data collection and analysis

The survey was deployed in 11 countries: 6 neighboring Ukraine (Belarus, Hungary, Poland, the Republic of Moldova, Romania, Slovakia), and 5 other countries (Bulgaria, Czechia, Estonia, Latvia and Lithuania) impacted by the arrival of refugees from Ukraine.

LIMITATIONS

Various settings were identified to conduct surveys, to maximise the number of interviews, and reach out to different profiles of individuals.

While in border crossing/transit points, such as train stations, the flow of people was higher and interviewees were randomly surveyed (having the same likelihood compared to others to be selected), in other settings, such as collective accommodations and humanitarian aid centres, respondents were intentionally identified.

Among the limitations encountered during data collection

were the reduced time to carry out surveys at transit points and limited amount of enumerators to cover the desired locations/regions.

To address the aforesaid shortcomings, and cover different viewpoints, a mixed sampling strategy guided the data collection exercise.

Consequently, this analysis does not proportionally represent the whole population and results cannot be deemed representative of all refugees from Ukraine in Poland, and the results should be considered indicative.

DTM

Displacement Tracking Matrix (DTM) is a system to track and monitor displacement and population mobility. The survey form was designed to capture the main displacement patterns for refugees of any nationality fleeing from Ukraine because of the war. It captures the demographic profiles of respondents and of the group they are travelling with, if any; it asks about intentions relative to the intended destinations and prospects of permanence abroad or return; it gathers information regarding a set of main needs that the respondents expressed as more pressing at the moment of the interview.

Since the onset of the war in Ukraine, several IOM's DTM tools were deployed in countries neighbouring Ukraine and in other countries particularly impacted by the new arrivals of migrants and refugees from Ukraine.

For more information, please consult:

<https://dtm.iom.int/responses/ukraine-response>



GLOBAL DATA INSTITUTE
DISPLACEMENT
TRACKING MATRIX