



Regional Situation Report

Ukraine Regional Humanitarian Crisis



Region:	Eastern Europe & Central Asia
Emergency type:	Conflict
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Covering Period:	July 1, 2024 to September 30, 2024
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Key Figures



16.8 M¹

Total people in need



4 M²

Women of reproductive age in need



2.6 M³

Young people (10-24) in need



2.2 M⁴

People with disability in need



1.8 M⁵

Total people targeted by UNFPA

¹The total people in need includes 14.6 mln people living in Ukraine and 2.2 Ukrainian refugees living in European countries that are part of the Regional Refugee Response Plan as per the [Ukrainian Humanitarian Need and Response Plan 2024](#) (HNRP) and the [Ukrainian Refugee Response Plan 2024](#) (RRP) respectively.

²The number was calculated based on the population structure presented in the Common Operational Datasets (CODs) 2023 for the Ukrainian population and 2023 Multi-Sector Needs Assessment for the Ukrainian refugees residing in the EU countries included in the 2024 Refugee Response Plan. Out of 4 million women of reproductive age, 3.2 million are in Ukraine and nearly 800,000 are residing in EU countries.

³ Out of 2.6 million young people in need, 2.1 million reside in Ukraine and 500,000 are hosted in the EU countries as per the above source.

⁴ It is estimated that the rate of people living with disability out of total people in need living in Ukraine and the Ukrainian refugees living in European countries amounts to 14% and 6% respectively.

⁵ According to UNFPA contributions to the inter-agency plans, including HNRP, RRP and others.

Highlights

- **The escalation of hostilities in Ukraine has led to a significant increase in displaced people**, with an estimated 6.7 million fleeing Ukraine, primarily to EU countries, and 3.7 million internally displaced.⁶
- Across the region, **UNFPA reached over 330,000 people (97% in Ukraine) with sexual and reproductive health (SRH) services and around 98,000 people (86% in Ukraine) benefited from gender-based violence (GBV) prevention, risk mitigation and response services.**

In Ukraine:

- To strengthen the health care system in Ukraine, **UNFPA opened a simulation training center in Poltava region** for training of first responders on emergency life-saving service provision for pregnant women and assistance during labor.
- UNFPA has **launched a series of interventions to support youth resilience, mental health, and socio-economic empowerment in Ukraine's most affected regions** (Dnipropetrovsk, Donetsk, and Luhansk), especially for internally displaced persons (IDPs).
- UNFPA is supporting the **Government of Ukraine to adapt the national case management system for GBV cases.**
- UNFPA strengthened GBV response services in several locations, including **completing renovations for a day center in Dnipro and finalizing preparations for a crisis room in Kramatorsk**, ensuring critical support for GBV survivors.

In neighboring countries:

- UNFPA continues to **ensure financial health coverage for Ukrainian women refugees (aged 18-55)** with temporary protection status in the Republic of Moldova.
- To strengthen the national health system's ability to provide life-saving care including comprehensive emergency obstetric and neonatal care (CEmONC) during the ongoing refugee crisis, UNFPA has **donated 48 stationary blood collection chairs and essential furniture to 16 healthcare facilities in Moldova**, including the National Blood Transfusion Center.
- **A new Safe Space for women and girls has been established in Belarus** responding to the needs of vulnerable refugee women, including older women and women with disabilities.
- The online learning **program on family planning**, developed with UNFPA support, was **approved as Continuing Medical Education (CME)** by the Romanian College of Physicians **and launched online.**
- UNFPA's partner in Poland **launched the "Living Library" initiative featuring real-life stories from individuals who experienced violence**, empowering women survivors to come forward and speak about their experiences.
- UNFPA continues to **expand awareness and access to GBV and SRH services in EU countries** bordering Ukraine via information campaigns, including expansion of the [Safe You](#) app in Romania.
- UNFPA **has secured \$61 million of the \$105 million needed to reach its target populations, leaving a funding gap of \$44 million.** This shortfall threatens the continuation of vital services, including sexual and reproductive health, GBV response, and youth support programmes, particularly for vulnerable groups in conflict-affected areas.

⁶ [UNHCR Operational Data Portal \(Ukraine\), September 2024](#)

Situation Overview

- As of September 2024, an estimated **6.7 million people** have been forced to flee Ukraine, with nearly **6.2 million refugees** (93%) hosted in EU countries.⁷
- The number of internally displaced people in Ukraine increased from 3.3 million in June to 3.7 million in September 2024 due to ongoing conflict.⁸
- **In July, Ukraine reported its highest monthly civilian casualties toll since October 2022, with 219 killed and 1,018 injured**, as reported by the UN Human Rights Monitoring Mission. Coordinated attacks heavily damaged residential areas and civilian infrastructure in cities including Kyiv, Kryvyi Rih, and Dnipro. **In Kyiv, health facilities were destroyed, including Okhmatdyt Children’s Hospital, Ukraine’s largest pediatric center.** The targeting of [health infrastructure](#) not only exacerbates the immediate impact on those injured but also creates long-term health crises as access to care becomes severely limited.⁹
- **In September, hostilities in the Donetsk, Kharkiv, and Sumska oblasts led to significant civilian casualties as well as first responders on duty.** Multiple homes, education facilities, several hospitals and a facility for older people were damaged. Attacks on energy infrastructure disrupted electricity and water supplies for thousands of civilians in urban areas of Donetsk and Sumska oblasts.^{10,11}
- **Humanitarian response efforts are increasingly facing complex and dangerous environments. Between July and August alone, six aid workers were killed or injured**, highlighting the growing security risks in Kherson Oblast, in southern Ukraine.¹²
- On World Humanitarian Day (19 August 2024), **WHO reported 1,940 attacks on healthcare since the start of the full-scale invasion** - the highest number WHO has ever recorded in any humanitarian emergency globally to date.¹³
- Despite ongoing efforts to improve access to SRH services in EU neighboring countries, **health remains a critical issue for Ukrainian refugees across the region.** According to reports, 31% of Ukrainian refugees identified health as one of their top three urgent needs. This is particularly pronounced in Moldova, where 38% of refugees expressed this need, followed by Romania and Slovakia at 30%, and Poland at 26%.¹⁴
- Estimates show that Ukraine’s population has declined by over 10 million since the beginning of the war in 2014. In response to severe demographic challenges, [Ukraine adopted a Demographic Strategy](#), developed with UNFPA support. This innovative and comprehensive strategy is **aimed at countering the depletion of human capital and creating conditions for all Ukrainians to fulfill their potential.**

⁷ [UNHCR Operational Data Portal \(Ukraine\), September 2024](#)

⁸ Ukraine – [Internal Displacement Report](#) – General Population Survey, August 2024. IOM

⁹ Ukraine Health Cluster Bulletin #7, July 2024, <https://reliefweb.int/report/ukraine/ukraine-health-cluster-bulletin-7-july-2024-enuk>

¹⁰ <https://reliefweb.int/report/ukraine/ukraine-situation-report-19-september-2024-enuk>

¹¹ <https://reliefweb.int/report/ukraine/ukraine-humanitarian-impact-hostilities-donetska-kharkivska-and-sumska-oblasts-flash-update-9-20-sep-2024-enuk>

¹² <https://reports.unocha.org/en/country/ukraine/>

¹³ <https://ukraine.un.org/en/276820-grim-milestone-world-humanitarian-day-who-records-1940-attacks-healthcare-ukraine-start-full>

¹⁴ UNHCR, Regional Protection Profiling and Monitoring, July-September 2024, <https://data.unhcr.org/en/dataviz/377?sv=54&geo=0>

UNFPA Response

Ukraine

- **Over 320,000 people benefitted from life-saving SRH services delivered through UNFPA-supported health facilities**, including 151 barrier-free gynecologic cabinets, 26 mobile reproductive health units, 3 mobile maternity units and 94 maternity hospitals, that were supplied with reproductive health commodities, including medicines and contraceptives. Services are tailored to meet the needs of vulnerable women and girls, including those with disabilities.
- **26,538 pregnant and breastfeeding women also benefitted from non-food (maternity) kits**. These kits which include essential sanitary and hygiene items were distributed to support the SRH needs of women during pregnancy and in the months after childbirth.
- **To enhance the health system at national level, including along the “contact line” and in remote rural areas** and to ensure quality service provision, UNFPA:
 - **strengthened the capacity of 304 health professionals on various SRH-related topics**, including clinical management of rape; client centered medical care in cases of GBV; coordination and referral systems at the regional level; effective communication with clients, with a focus on the needs of vulnerable groups; youth-friendly SRH services; providing SRH care to women with disabilities; and family planning and modern methods of contraception.
 - **built the capacity of 80 nurses and midwives working in 25 primary health care (PHC) facilities in 10 regions** (serving a population of 250,000 people) through a series of training sessions, some being facilitated by the professional association “Academy of Family practice”, on SRH services at the primary level.
 - **opened a simulation training center in the Poltava region** for training of first responders on emergency life-saving service provision for pregnant women and assistance during labor.
 - **provided PHC facilities with basic RH supplies** - to complement existing SRH services - provided as part of [inter-agency reproductive health kits](#) #4 and #5 and in bulk.
- **To enhance the utilization of a family planning application, 85 tablets were distributed and mid-level health workers trained on entering patient records and service data**. This initiative helps streamline the management of reproductive health services, improving access to family planning resources and ensuring efficient data tracking.
- **Over 84,000 people received integrated GBV prevention, risk mitigation and response service through UNFPA-supported service delivery points, such as 29 Women and Girls Safe Spaces, 40 Crisis Rooms, 57 Daycare Centres, and 20 Shelters, as well as [106 mobile psychosocial teams and 116 case managers](#)**. These services include psychosocial support, legal and information counseling, with high demand among vulnerable populations, particularly in regions with high concentrations of IDPs, such as Western and Central Ukraine.
- **5,214 dignity kits were distributed to women and girls, and older people along the contact line and in areas most affected by the war**. To ensure that the most vulnerable people in hard-to-reach areas were reached, UNFPA has utilized centralized UN convoys to deliver essential supplies to affected populations, while UNFPA-run mobile services provided essential support to IDPs and vulnerable host community members. These mobile services are crucial for reducing the risks of GBV by offering targeted assistance and protection to those most in need.

- In July, **UNFPA hosted its first GBV Case Management in Humanitarian Settings conference.** This event **brought together 100 dedicated professionals** from across the country and equipped participants with valuable insights, tools, and strategies to enhance their work in supporting survivors of GBV.
- UNFPA **enhanced municipal GBV response services in several locations.** In Dnipro, renovations were completed for the day center and consultation service, including the repair of a ceiling damaged by a missile strike and the setup of a specialist room. Similarly, in Kramatorsk, preparations for a day center with a crisis room were finalized in July, ensuring vital services are operational for GBV survivors.
- To ensure a timely and survivor-centered response, **100 GBV case managers and partner representatives were trained on specific protection from sexual exploitation and abuse (PSEA) considerations** in the context of case management, including mandatory reporting requirements, obtaining informed consent, applying survivor-centered approaches, and sharing basic investigation components. This will enable better referrals to services and survivor-focused care. In addition, 264 GBV service providers benefitted from in-service training on GBV-related topics.
- **UNFPA is supporting the Government of Ukraine to enhance the national case management system** by adapting it to GBV cases, specifically strengthening the monitoring and evaluation of referrals, quality and types of services received by survivors.
- **UNFPA along with the National Social Service of Ukraine, the Ministry of Social Policy, and civil organizations are working on a new holistic methodology for monitoring GBV specialized services.** This initiative will focus on assessing the accessibility of 967 GBV specialized services across the country, the incorporation of social inclusion aspects and the quality of service provision. The results will be used for further decision-making by the Government of Ukraine when developing mechanisms for state subsidies and the elaboration of an algorithm for the procurement of social services for communities to fill identified gaps.
- **UNFPA has launched a series of interventions to support youth resilience, mental health, and socio-economic empowerment in Ukraine's most affected regions (Dnipropetrovsk, Donetsk, and Luhansk), especially for IDPs.** This initiative equipped youth with essential skills to manage stress and crisis situations (230), provide peer support on mental health (117), enhanced employability through career support (157) and empowered 40 young people to develop community-based resilience and mental health projects, 11 of which secured funding and are expected to reach 826 young people in war-affected communities.
- **UNFPA prioritized youth mental health and resilience through its support to the "Molodvzh" annual event in Lviv, which brought together 2,900 participants from all over Ukraine.** This event emphasized digital engagement, resilience-building, and mental health support, and served as a vital platform for public discussions on the challenges faced by youth in war-affected regions, particularly for those directly impacted by the conflict.
- UNFPA's "**Mentalochka**" mental health podcast has enhanced mental health awareness among **Ukrainian youth** by producing 6 new episodes and hosting three open recordings in various cities, engaging over 100 participants. With a media reach of 774,613 views, the podcast has become a vital resource for mental health support, particularly for youth coping with war-related stress. This initiative highlights UNFPA's commitment to addressing the mental health needs of young people in conflict-affected areas and promoting their resilience.

Republic of Moldova

- **UNFPA, under a joint UN agreement with National Health Insurance Company, continues to ensure financial health coverage for Ukrainian women refugees (aged 18-55) with temporary protection status.** Of the health services provided to the women refugees, most of these cases involve complications that required surgical intervention, which are typically associated with high costs. These critical and often life-saving procedures were made accessible to refugees at no cost, ensuring their well-being and reducing the financial burden on the Republic of Moldova healthcare system.
- UNFPA strengthened the national health system's capacity to provide essential healthcare services to refugees by upgrading facilities at national level.
 - **UNFPA donated 48 stationary blood collection chairs and essential furniture to 16 healthcare facilities, including the National Blood Transfusion Center.** This initiative increases blood collection efficiency, ensures blood-donor comfort, and strengthens the national health system's ability to provide life-saving care (including for refugee women who experience complications during delivery and are in need of CEmONC services) under the ongoing refugee crisis.
 - **UNFPA equipped a one-stop center for survivors of violence** at the Family Justice Center of the General Police Inspectorate with **forensic supplies to serve women who experienced rape and gynecological equipment tailored to the needs of women with disabilities** who are at greater risk of rape and coerced sex including sexual violence, according to global UNFPA data. Additionally, UNFPA provides psychological and social support services for survivors at this center.
 - **UNFPA delivered medical equipment and furniture for gynecological examination units, the operating theater, and the intensive care unit** for the Medical Service of the Ministry of Internal Affairs of the Republic of Moldova, ensuring its employees have access to improved medical services that meet international standards.
- UNFPA successfully conducted nine training sessions in Chisinau, **reaching 139 healthcare providers** from the National Center of Pre-Hospital Emergency Care and its territorial stations. These sessions focused on enhancing their **capacity in the Clinical Management of Rape**, equipping them with the necessary knowledge and skills to provide comprehensive and sensitive care to survivors of sexual violence.
- **More than 13,000 women and girls from refugee and local vulnerable communities were reached with GBV services by 20 static Safe Spaces located in Refugee Accommodation Centers, border crossing points, train station and UNHCR community centers and by 11 mobile Safe Spaces.** Out of those, 3,403 people were reached with individual psychosocial support (PSS) services, including psychological first aid and counseling services. 9,615 people were reached with recreational and social activities and 1,494 were reached with in-person GBV awareness-raising activities.
- UNFPA together with the Ministry of Labour and Social Protection conducted 34 foundational training sessions on **GBV Case Management for 829 community social workers** with the aim of providing quality care to survivors from refugee and host communities. This exercise is part of the national social assistance - RESTART reform.
- UNFPA in partnership with the Women's Law Center and the Ministry of Labor and Social Protection presented a report assessing the alignment of the Republic of Moldova legal framework with the Istanbul Convention, focusing on technology-facilitated violence. **UNFPA advocacy efforts led to**

- revisions of Law No. 45/2007, introducing definitions for "violence against women," "femicide," and "psychological violence," including forms of violence through information technology.** The amendments also established a new data collection system managed by the National Agency for Preventing and Combating Violence against Women and Domestic Violence.
- UNFPA, in partnership with La Strada, **developed comprehensive guidelines for facilitators on preventing and addressing technology-facilitated GBV.** These guidelines target professionals working with women and girls from refugee and host communities in educational institutions, youth centers, and safe spaces. 419 women, girls, and boys from both refugee and host communities participated in digital violence awareness sessions, and 72 individuals accessed GBV response services, including psychological counseling and legal assistance.
 - **UNFPA in partnership with the Ministry of Labour and Social Protection developed an analysis on GBV integrated services involving evaluating all existing public and private GBV services** at the district level against the essential GBV service package. The analysis covered critical components such as availability, accessibility, adaptability, appropriateness, quality, survivor-centered approach, data management, inter-sectoral linkages, and accountability mechanisms. A PowerBi tool was developed analyzing the requested data in order to evaluate GBV services on the rayon level.
 - **UNFPA, in collaboration with the Council of Europe and UNDP, has supported the National Agency on Elimination of Violence against Women in establishing itself as the national coordination body for GBV data collection.** [During the workshop](#) aiming to discuss national standards, regulatory frameworks, and the methodology for developing the Compendium, UNFPA provided an overview of the current situation, a contextual analysis, and stressed the need for a national compendium of indicators for preventing and combating violence against women and domestic violence. Additionally, the concept of the "State Registry of GBV Cases" information system, including provisions for refugees, was discussed, ensuring compliance with GBVIMS data protection standards.
 - [Nine community-based, women-led organizations have been selected to receive \\$5,000 grants](#) each, aimed at providing GBV prevention and response services, with a focus on supporting remote communities impacted by the refugee crisis.

Belarus

- **UNFPA scaled-up its humanitarian response and in partnership with the Belarusian Association of UNESCO Clubs, established a new Safe Space for vulnerable women in Minks.** During the reporting period, through the Safe Spaces, 335 Ukrainian refugees were reached with GBV programming, including psychosocial support and social activities across Brest, Gomel, and Vitebsk oblasts. Of those reached, 219 women and girls, including 93 older women, were referred to specialized services and support, such as medical care, employment, shelter and basic needs.
- **72 older Ukrainian refugee women participated in recreational and social activities** such as digital literacy, healthy aging, yoga, and art therapy. These activities, while promoting mental and physical health, fostered social engagement, helping older women to cope with the stress of displacement.
- In addition, through the Crisis Centers supported by UNFPA in partnership with the Red Cross in Brest and Vitebsk City, **SRH counseling was provided to 49 older refugee women and 23 women with multiple chronic illnesses were referred to specialized health services.**

Neighboring EU Countries

Romania

- **The online learning programme on family planning, facilitated by UNFPA and its partner, EEIRH, was approved as Continuing Medical Education (CME) by the Romanian College of Physicians** and awarded the maximum 18 credits. The programme offered through the [ViC Romania platform](#), is available for personnel of the Ministry of Health and the Association of Family Planning Physicians. Since its launch in August, 11 participants registered, and 2 already certified.
- **To strengthen and ensure the quality of post-GBV healthcare for Ukrainian refugees and host community members, UNFPA conducted an [assessment in four health facilities](#)** (Timișoara, Constanta, Targu-Mures and Bucharest) using the [WHO Gender-Based Violence Quality Assurance Tool \(GBV QA Tool\)](#). The gaps identified in post-GBV care across all facilities include: lack of comprehensive, patient-centered clinical care, with only emergency contraception (EC) prescribed and no referral or follow-up systems in place. In terms of training and quality improvement, there is no system for continuous improvement or supervision plans to support provider-patient interactions. Health care policy and provision are inadequate, with no on-site guidelines available. Furthermore, none of the facilities collaborate with other services to integrate GBV care, nor do they engage in community outreach or have a liaison to raise awareness of available GBV services. UNFPA is now working with its partners to address these critical issues and improve post-GBV care.
- **UNFPA focused on mainstreaming disability in service provision by enhancing the capacity of 16 service providers** to deliver rights-based, gender-responsive GBV services for persons with disabilities. Additionally, UNFPA strengthened the capacity of a total of 18 specialized and non-specialized service providers on GBV in Emergencies to ensure comprehensive and inclusive responses to GBV, particularly addressing the needs of vulnerable populations during emergencies.
- **UNFPA partner Safe YOU launched a marketing campaign** to increase awareness on GBV-related topics, using organic content on [social media](#), alongside a gymnastics-themed ad campaign on buses and video platforms. The campaign aimed to build trust and encourage app registration, with content translated by the Sensiblu Foundation in Romanian, Ukrainian and English.

Slovakia

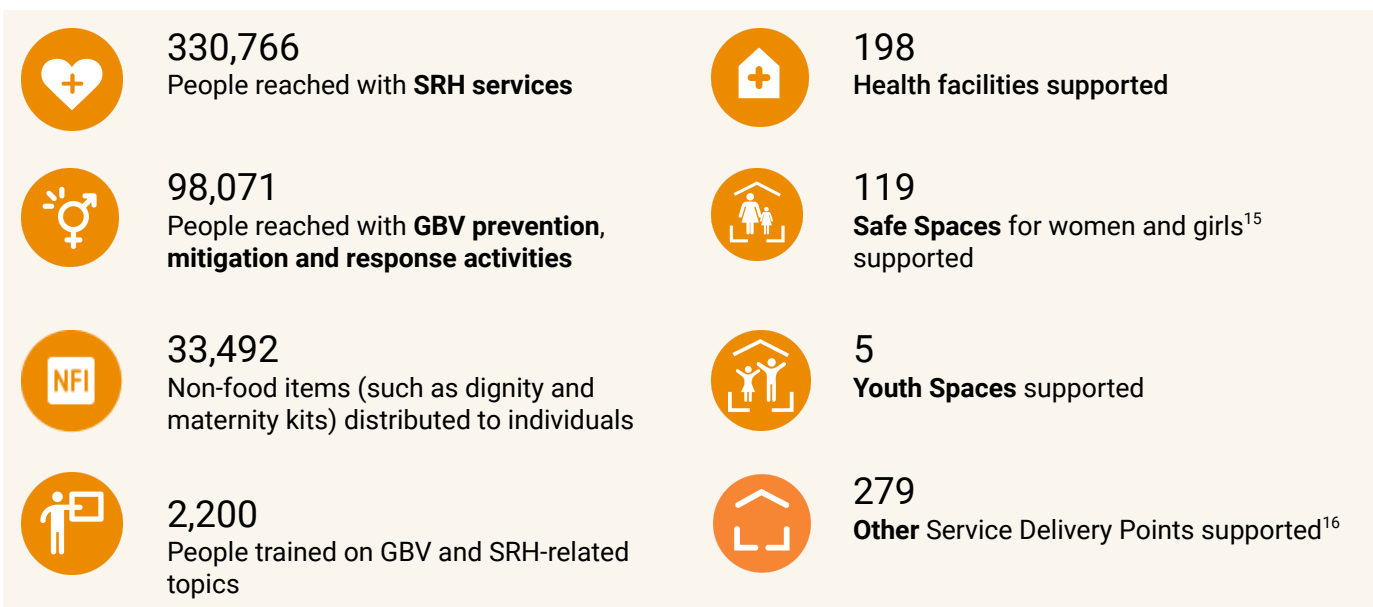
- **UNFPA partner League for Mental Health (LFMH) launched the "Living Library" initiative** that was expanded across multiple regions in Slovakia, attracting over 100 participants in August only. These events featured real-life stories from individuals who experienced violence, sparking significant emotional discussions and reactions from attendees.
- **LFMH updated its [website](#) content to promote the UA Helpline Nezabudka by raising awareness among Ukrainian refugees (including survivors of violence) about available services.** The updated content exceeded initial engagement expectations with 33,262 views of the educational videos, over 455,000 unique Slovak visitors and more than 319,000 Ukrainian viewers. This campaign led to a slight

increase in calls related to GBV, including from the host community, who were referred to specialized services in the Slovak social system.

Poland

- To raise awareness on GBV-related topics and service availability, UNFPA partner International Rescue Committee (IRC) developed 4 webinars.** Three webinars were published on online platforms, Youtube and social media reaching 164 people with information on GBV-related topics. The webinars focused on the following topics: [what to do in case of sexual violence](#) (published in April 2024), [economic violence](#) (published in August 2024), [psychological consequences of incidents of violence](#) (published in August 2024). The fourth webinar will provide information about the Feminoteka’s rape crisis centre and will be published before the end of 2024.










Results Snapshots region wide



¹⁵The safe space for women and girls include women community centers, shelters and women wellbeing centers that provide quality services, information and activities that promote healing, well-being and empowerment.

¹⁶ In addition to safe spaces for women and girls, UNFPA in Ukraine supports other types of service delivery points targeting GBV survivors and those at risk of violence, including 57 Daycare Centers, 106 mobile PSS teams and 116 Case Managers.

Results Snapshots by country

	Ukraine	Republic of Moldova	Belarus	EU Countries
 People reached with SRH services	321,878	8,776	112	-
 People reached with GBV prevention, mitigation and response activities	84,472	13,018	335	246
 Number of people reached with awareness-raising activities and GBV-lifesaving information in-person	37,634	1,659	326	822
 People reached with Humanitarian Cash & Voucher Assistance for GBV and SRH	16	28	-	-
 People trained on GBV and SRH-related topics	748	1,358	-	94
 Health facilities supported	180	16	2	-
 Safe Spaces for women and girls supported	89	26	4	1
 Youth Spaces supported by UNFPA	-	5	-	-
 Non-food items (such as dignity and maternity kits) distributed to individuals	31,752	1,740	-	-

Coordination Mechanisms

Gender-Based Violence

Ukraine

- **During July-September, 92 operational partners of the GBV Area of Responsibility (AoR) chaired by UNFPA reported reaching 160,738 survivors and those at heightened GBV risk (91% female, 9% male, 13% children, 68% adults, 19% older people)** including IDPs (31%) and non-displaced conflict-affected people (69%) including returnees. Predominantly vulnerable women and girls but also men and boys have been reached in 93 districts of 24 regions with concentration in the East, North and South of Ukraine through a variety of GBV services.
- **In East and South Ukraine, the GBV AoR coordinates partners' responses in transit centers for evacuees were affected by active hostilities.** During the reporting period, the GBV AoR along with

CCCM, Protection, and WASH clusters completed two joint Intercluster Safety Audits in Odesa and Mykolaiv regions.

- **The GBV AoR Capacity Enhancement WG ran two needs assessments** to capture existing capacities and training needs in Ukraine for 2024-2025 among GBV actors (104 respondents from 76 different GBV organizations), and non-GBV actors (80 respondents from 56 organizations). During the reporting period 21 GBV AoR partner organizations trained 1136 GBV service providers (individuals) to meet GBVIE minimum standards and 941 non-GBV humanitarian actors (individuals) on GBV risk prevention and mitigation.
- Following the GBV AoR thematic meeting on dignity kits (5 July), the newly established ad hoc **Task Team conducted nine focus group discussions capturing the views of 89 women and girls in 4 regions regarding the dignity kit content list**, which will be endorsed soon. New guidelines, titled "[Role of Dignity Kits in Supporting Women and Girls: What Non-GBV Actors Involved in Distribution of Dignity Kits Need to Know](#)," were developed and introduced to enhance the understanding of dignity kit distribution among last-mile delivery personnel and humanitarian convoys.

Republic of Moldova

- **UNFPA co-leads the GBV sub-Working Group (sWG)**, bringing together over 63 national and international organizations, women-led organizations, and government entities to coordinate the GBV prevention, mitigation, and response interventions targeting the Ukrainian refugees and the host communities.
- During the reporting period, **UNFPA together with UNHCR presented the findings of the GBV Safety Audit across all Refugee Response working groups, sub-working groups and task forces** to ensure that GBV risk mitigation is being mainstreamed across all sectors. As a follow-up of the GBV Safety Audit, the GBV sWG has also conducted one GBV risk mitigation and GBV safety walk training.

Neighboring EU countries

- In Romania, UNFPA is **co-leading the GBV Case Management Task Force** with ANES, having agreed with the partners on the roadmap for dissemination and validation of the SOPs for GBV CM to be adopted by organizations and stakeholders conducting case management in the country.
- UNFPA continues to co-lead the **Regional GBV Working Group** dedicated to the Ukraine Response, along with UNHCR, with national and international organizations representing the refugee hosting countries engaged in the RRP for 2024.
- During the reporting period, UNFPA, together with UNHCR, engaged in consultations with partners at regional and national level to understand GBV needs and priorities for the upcoming 2025-2026 RRP.

Sexual and Reproductive Health

Ukraine

- **Significant progress was made by the SRH Technical Working Group (TWG) to enhance evidence for decision-making.** The SRH TWG dashboard was thoroughly updated with data on humanitarian

response collected via ActivityInfo, ensuring efficient use of resources. Additionally, a new dashboard on capacity building efforts was created to inform partners about available certified trainers and upcoming training sessions, further enhancing coordination efforts.

- **Regional SRH TWG meetings in Mykolaiv and Odesa** brought together various stakeholders, including international humanitarian organizations, representatives of vulnerable communities, and local health and social services. The meetings **aimed to expand the integrated SRH and GBV service provision, with a survivor-centered and one-stop-shop model introduced in Odesa and Mykolaiv, to Kherson**. Emphasis was placed on peer-to-peer service provision to reduce stigma and improve access to services for marginalized groups.
- Partners agreed to **enhance outreach efforts by raising awareness about free health services, patient rights, and the importance of referrals**. The critical role of midwives in extending SRH services to hard-to-reach areas was highlighted. A consensus was reached on the need to provide stigma-free services and accessible SRH education, ensuring that women's health needs are prioritized in a supportive environment.
- Strategic preparations were advanced for the upcoming SRH conference in October, with a draft agenda under review. The **joint meetings between the SRH TWG and GBV Area of Responsibility resulted in fostering collaboration on case management and the Clinical Management of Rape protocols**.
- Overall, coordinated efforts are being strengthened to improve SRH and GBV services, with innovative service models and partnerships enabling better access to care for vulnerable populations.

Republic of Moldova

- **UNFPA continues to prioritize SRH and GBV issues in the discussions and actions of the Health Working Group**, agreed during the bi-monthly meetings attended by representatives of the Ministry of Health, the National Health Insurance Company, UN agencies, and other relevant humanitarian actors.

Neighboring EU countries

- In collaboration with WHO, UNFPA participates in the alternating **SRH and Health Coordination meetings in Romania, making UNFPA a trusted voice for leading the response to SRH concerns**. UNFPA also contributed to strengthening access to SRH services and information through participation at the **CMR-IPV coordination meetings in Poland**.
- UNFPA, in consultation with UN partner agencies, including WHO, civil society organizations (CSOs) and its implementing partners, and in alignment with various Ministry of Health (MoH) strategies developed the 2025-2026 RRP to address crucial SRH needs.

✦ Other working groups led by UNFPA

Ukraine

- **UNFPA leads the inter-agency PSEA Network in Ukraine** through the technical and financial support of the PSEA Network led by a Senior Inter-Agency PSEA Coordinator. The Network currently has over 130 organizations, including over 50 local NGOs/CSOs.
- In September, **UNFPA supported with procurement and logistic arrangements three rounds of the Training of Trainers on the UN Victims Assistance Protocol and Technical Note**. In addition, a targeted

training package to implement a decentralized approach and support PSEA focal points in the field, as well as a community dialogue guide to increase understanding SEA amongst communities, have been developed.

Belarus

- **UNFPA took the lead** at the Inter-Agency Refugee Taskforce **to address specific complex cases related to provision of humanitarian response to older Ukrainian refugees** in collaboration with other international and national counterparts.
- In addition, **UNFPA facilitated a series of trainings on gender, age, and disability responsive services** for frontline workers to build their capacity and ensure effective support and protection services for women, older people and people with disabilities and equip first responders with skills to enhance their emotional resources and overall well-being.

Outreach Highlights

[Meet the women saving lives on Ukraine's front line](#)

[Giving birth on Ukraine's front line: How women and medical care workers are coping under fire](#)

["It's like being thrown a lifesaver": The lasting impact of UNFPA-sponsored Women and Girls Safe Spaces for Ukrainians in Romania](#)

[Alexander, a survivor of violence, found comfort at the UNFPA-supported center in Poltava.](#)

Funding Status

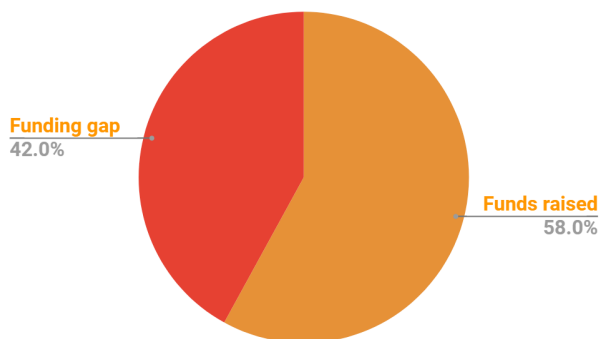
EECA region	Ukraine	Republic of Moldova	Belarus	Poland	Romania	Slovakia	Regional Coordination	Total
Funding required	\$75,000,000	\$23,649,264	\$660,000	\$2,000,000	\$1,000,000	\$1,000,000	\$1,752,000	\$105,061,264
Funding received	\$39,935,092	\$17,409,261	\$376,892	\$759,405	\$978,585	\$544,439	\$ 583,441	\$60,587,115
Funded	53%	74%	57%	38%	98%	54%	33%	58%

UNFPA needs \$105 million in 2024 to address the GBV and SRH needs of its target populations. With almost \$61 million currently available, this leaves a gap of approximately \$ 44 million.

Current Donors

Bilateral donors: Austria, Belgium, Czech Republic, Denmark, Estonia, European Union, France, Iceland, Ireland, Japan, Republic of Korea, Norway, Portugal, Spain, Sweden, the United Kingdom, USAID's Bureau for

Funding Requirement



Humanitarian Assistance (BHA), and the US Department of State Bureau of Population, Refugees, and Migration (BPRM).

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