

The conflict in Ukraine has displaced more than 10 million people since the latest military offensive by the Russian Federation began in February 2022; more than 3.5 million people have fled to countries in the region and an additional 6.5 million people are forcibly displaced within Ukraine itself. As hostilities continue, the impact on civilians remains alarming, including damage to civilian infrastructure such as hospitals and schools, and the breakdown of vital services such as electricity and water. Among those displaced or in need of humanitarian aid due to this conflict, the Women's Refugee Commission (WRC) is particularly concerned about the situation for women, adolescent girls, children, and other marginalized populations such as people with disabilities, older people, LGBTQI+ individuals, the Roma community, and third-country nationals. Their unique needs in emergencies demand urgent responses, particularly to prevent and respond to gender-based violence (GBV); meet critical health care needs, including sexual and reproductive health (SRH) care; and uphold their human rights.

## Key Concerns Impacting Ukrainian Women, Children, and Other Marginalized Groups:

- **Gender-based violence:** Under current circumstances, displaced Ukrainian women, girls, those with disabilities, and unaccompanied and separated children are further exposed to GBV. This includes [human trafficking and sexual exploitation](#) and abuse within Ukraine, en route as they flee, and once they cross borders. Crowded civilian structures such as underground bunkers that lack segregated hygiene facilities or sleeping areas, have inadequate lighting, and other recognized safety concerns contribute to the risk of GBV. Lack of legal status or documentation, economic hardship, and the loss of basic necessities for survival such as food and shelter also place them at greater risk of sexual exploitation and abuse, including by aid workers or others providing services. GBV prevention and response mechanisms, including SRH services, are also limited in these circumstances, leaving survivors of GBV and those at risk without adequate support.
- **Loss of sexual and reproductive health services and other critical care:** Ukrainian women and girls, including adolescent girls, older women, and those with disabilities, are particularly facing critical unmet health needs and barriers, especially as vital health infrastructure is being destroyed. Lifesaving SRH services, such as access to contraception, prevention and management of sexually transmitted infections, including [HIV](#), and treatment for survivors of sexual violence, are not available to all who need them. Moreover, the UN Population Fund (UNFPA) estimates that [265,000 women and girls in Ukraine were pregnant](#) at the beginning of the current crisis and 80,000 are expected to give birth within the next three months. This underscores the need to prioritize adequate maternal and newborn health care, both in Ukraine and in refugee-hosting countries, and to provide cross-border support on [SRH services and supplies](#) to support those unable to flee. The particular health needs of older people, and people with disabilities, such as accessible buildings and information, must also be addressed.
- **Deep trauma and psychological impacts:** Psychosocial assistance is particularly needed to cope with GBV, family separation, and the trauma of violence and displacement. This especially impacts children, including those who have been separated from their families. As UNICEF stated, almost half a million children are now facing grave risks to their well-being and every child affected by the conflict requires psychosocial support. From WRC's experience in various contexts, family separation can cause irreparable harm and trauma for all family members.

## Recommendations for Policy and Programming:

Aid agencies, supported by government and private sector donors, have begun implementing humanitarian aid programs to meet the urgent and growing needs of refugees, internally displaced people (IDPs), and others currently in need. Despite identifying the concerns above, humanitarian response so far has been slow to address these issues, both inside and outside of Ukraine, creating significant gaps in protection for women, children, and other groups at risk, which will only worsen as the crisis continues to escalate.

**WRC calls on parties to immediately cease hostilities and respect international human rights and humanitarian law and ensure the protection of civilians.** We also strongly urge policymakers, donors, and humanitarian aid implementers to keep the following recommendations central to the funding, design, implementation, and evaluation of humanitarian assistance programs for Ukrainians:

- **Urgently ensure appropriate protection measures, including child protection, at borders, reception areas, and inside Ukraine** – UN agencies report an urgent need for protection mechanisms to address the significant safety concerns of unaccompanied and separated children, people with disabilities, and younger women and adolescent girls at particular risk of trafficking and exploitation. Measures should include prioritizing access to safe humanitarian corridors; early deployment of protection advisors; inclusion of child and gender protection specialists in needs assessments and shelter design and management; coordination between humanitarian responders to mitigate GBV risks; and registration and family tracing in line with international humanitarian standards to prevent abuse, reunite families, and identify caretakers as swiftly as possible.
- **Prioritize GBV prevention and response** – Donors should support humanitarian responders to immediately institute measures to mitigate GBV risks across sectors, including in reception centers and at border crossings, and strengthen coordination between providers. Implementers should also use technical assistance and local expertise where possible to provide appropriate support to survivors, including health care, psychosocial services, and women and girl safe spaces. This assistance should further support GBV referral and reporting mechanisms, clinical management of rape services, legal support, and cash and voucher assistance for survivors and those at risk of GBV.
- **Ensure women and girls can safely access the full spectrum of health services** – Health services available through humanitarian aid programs must address the specific needs of Ukrainian women and girls, including the full range of sexual and reproductive health and rights. Services including maternal and newborn health care; prevention and treatment of sexually transmitted infections (STIs), including HIV; dignity kits and menstrual hygiene products; safe abortion care; and post-rape care should be made accessible in line with the [Minimum Initial Service Package \(MISP\) for Sexual and Reproductive Health](#). Furthermore, evidence consistently shows that women and girls affected by crises need and demand access to contraception, yet a [global assessment of contraceptive availability and access](#) in crises found that one-fourth of humanitarian health programs did not include contraceptive services. Humanitarian program implementers and donors should ensure voluntary contraception, including emergency contraception and long-acting reversible contraceptive methods, is fully accessible. Donors and implementers should support the work of local women's and youth-led organizations, as well as agencies like UNFPA that are providing mobile health services, training frontline health workers, and operating hotlines and crisis rooms for GBV survivors. Implementers should also consider providing cash and voucher assistance integrated within comprehensive SRH programming to help overcome financial and other barriers to access, including user fees and transportation costs to get to health facilities.

- **Prevent sexual exploitation and abuse (PSEA)** – Humanitarian programs must institute measures to adequately prevent and respond to exploitation by humanitarian aid workers and others. This should include funding specifically for PSEA mechanisms and flexibility for aid organizations to use program funds for PSEA activities such as reporting mechanisms, focal points, training, and information sharing.
- **Support cash and voucher assistance programs as part of multi-sector, cross-sectoral, and sectoral outcomes** – [Research shows](#) that minimizing economic vulnerability can reduce the risk of GBV and exploitation. Humanitarian responders are already instituting or scaling up cash and voucher assistance to displaced people so that they can directly meet their immediate needs, such as food and basic household supplies. Implementers should ensure that cash and voucher assistance programs are gender, age, and disability inclusive, accessible to marginalized groups, and include measures to mitigate unintended consequences such as GBV.
- **Address intersecting factors and discrimination that hinder access to services** – Various age, gender, disability, and diversity factors, such as country of origin, wealth, or social status, impede displaced people’s ability to access necessary services, including linguistic diversity and discrimination against minority groups such as the Roma community or third-country nationals, particularly those of non-European ethnicity. Donors, policymakers, and implementers must make nondiscrimination and addressing age, gender, disability, and diversity factors an explicit component of humanitarian aid programs and should call on all implementers to ensure full accessibility of services, without discrimination. Donors should also practice caution not to support organizations that work against gender equality or reinforce anti-migrant, racist, or xenophobic attitudes.
- **Optimize opportunities for women and girls to fully, equally, and meaningfully participate in humanitarian responses** – Humanitarian activities should prioritize engaging affected women in all their diversity in the design, implementation, monitoring, and evaluation of humanitarian aid programs. This includes working with Ukrainian women’s, youth, and LGBTQI+ rights groups and other local actors such as women-led organizations of people with disabilities (OPDs) to participate in needs assessments, conduct aid activities, and be meaningfully engaged in humanitarian coordination mechanisms.
- **Provide flexible funding to aid implementers** – As this humanitarian context shifts quickly, we urge donors to provide flexible funding to partners so that they can adapt, re-locate, and modify their programs as needed to be as responsive as possible to the priority and changing needs. Wherever possible, funding should be directed to locally led organizations and agencies as project leads or as subgrantees.
- **Coordinate and pursue partnerships with local organizations** – Local organizations, both inside Ukraine and in host countries, are already providing frontline assistance to refugees, IDPs, and others impacted by the conflict. Donors should support programs that leverage local expertise, coordinate with local actors, and promote nondiscrimination and gender equality. Assistance should also provide flexible financial and logistical support to local organizations, including women’s, LGBTQI+, youth, and disability rights organizations, to identify and meet needs. One opportunity that should not be overlooked is group cash transfers, to resource the existing capacity of local civil society to design, implement, and measure community-level responses that are delivered by the affected community itself.
- **Use gender and social inclusion assessments across sectors to respond to the ongoing needs of women, girls, and other marginalized groups effectively** – The Inter-Agency Standing Committee (IASC) regularly issues guidelines to enable humanitarian actors to plan, establish,

and coordinate on a set of minimum multi-sectoral responses. Humanitarian actors should ensure their responses are in line with the IASC Gender Handbook, the IASC GBV Guidelines, the IASC guidelines on participation of persons with disabilities in humanitarian action, IASC guidelines on Mental Health and Psychosocial Support (MHPSS) in Emergency Settings, and other relevant and human rights-based guidance and assessments such as the Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings. Some of WRC's own resources can be found here:

- » WRC/UNICEF, [Supporting Young Male Refugees and Migrants Who Are Survivors or At Risk of Sexual Violence: A Field Guide for Frontline Workers in Europe](#)
- » WRC and others: [Leaving No One Behind: Ensuring an Age, Gender, and Diversity \(AGD\), including disability Inclusive Approach to Internal Displacement](#)
- » WRC/USAID, [I'm Here Playbook, an operational approach that helps implementing partners reach the most vulnerable adolescents](#)
- » [I See That It's Possible, Building Capacity for Disability Inclusion in Gender-Based Violence Programming in Humanitarian Settings](#)
- » [Cash and Voucher Assistance and GBV Compendium: Practical Guidance for Humanitarian Practitioners](#)

### What the Women's Refugee Commission is doing to support these efforts:

- WRC's advocacy is influencing donors and program implementers to prioritize the key recommendations listed above and provide funding to grassroots organizations, including those that provide services or advocate for the rights of women, youth, people with disabilities, internally displaced or stateless people, refugees, LGBTQI+ individuals, and other marginalized groups.
- WRC is also using its expertise, research, and tools, such as on cash and voucher assistance, to provide guidance to UN stakeholders, international organizations, member states, donors, and other policymakers and program implementers.

### Organizations in Ukraine and host countries responding to the crisis:

**Ukrainian Women's Fund:** UWF is supporting women's/feminist organizations with rapid response grants to procure and distribute food, water, medicines, and hygiene products, and provide emergency psychosocial and transportation services to particularly vulnerable groups, such as women and girls with disabilities and their caretakers, LGBTQI+ populations, and activists remaining in place.

<https://uwf.org.ua/en/>

**Women Association Sphere (Kharkiv, Ukraine):** Working closely with queer community and young people, Sphere is actively engaged in queer organizing in the region and across Ukraine.

<https://sphere.org.ua/en/>

**Insight Ukraine:** Ukrainian human rights public organization, which brings together lesbians, gays, bisexuals, transgender people, and queers. They provide psychological and legal support to the LGBTQI+ community in Ukraine. <https://www.insight-ukraine.org/en/>

**Women's Perspectives:** An NGO with 21 years' experience, working on addressing GBV and domestic violence. <http://www.women.lviv.ua/en/about-us/>

**Roma Women Fund:** Raising awareness and advocating for Roma women's rights in Ukraine. They collaborate with Roma communities on a regional level. <http://www.chirikli.com.ua/index.php/en/?fbclid=IwAR3rYFz2OlkoFAXXrxsbwOBr8mm7u8aZy7Qr1lOYJho4n19rge66yvl3kdc>

**Lambda Warszawa:** An organization that has been active in Poland since 1997, their mission is to offer independent, professional, and expert support in times of crisis.

<http://lambdawarszawa.org/en/en-strona-glowna/>

**Feminist Fund:** An institution providing support only to activities engaged in by women, girls, and LGBTQIA people from throughout Poland. <https://femfund.pl/en/about-us/>

**National Assembly of People with Disabilities of Ukraine (NAPD):** NAPD is an umbrella organization, representing interests of people with disabilities from all regions of Ukraine. NAPD includes organizations of persons with disabilities (DPOs) that represent people with different disabilities and health conditions, DPOs of women with disabilities, DPOs run by parents of children with disabilities, and others. <https://naiu.org.ua/about-naiu-eng/>

**Ocalenie Foundation, or Rescue Foundation:** Helps refugees, immigrants, and repatriates build a new life in Poland. <https://en.ocalenie.org.pl/>

**Woman Health and Family Planning – Ukraine:** WHFP is a nongovernmental organization that was been working for 20 years in the field of reproductive health strengthening and protection of reproductive rights of Ukrainian people, implementing public information campaigns, advocacy events, and research, as well as trainings for medical professionals. WHFP is also a member of IPPF. <http://www.womanhealth.org.ua/en/>

**SECS – Contraception and Sexual Education Society, Romania:** Works to meet the needs of information, education, and service provision in the fields of sexuality and family planning. <https://secs.ro/>

*[NOTE: WRC does not work directly with or endorse any of these organizations and offers this list to highlight just a few of the many organizations working on the ground to support people during this current situation.]*

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