

"Not a single safe place": The Ukrainian refugees at risk of violence, trafficking and exploitation

Findings from Poland and Ukraine



REPORT INFORMATION

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Table of Contents

Short summary	. 3
Executive summary	. 4
Introduction	. 8
Methodology	. 9
Continued experiences and risks of violence	10
GBV in conflict and transit (Ukraine)	12
GBV in places of refuge, resettlement, and return (Poland and Ukraine)	14
Gendered harms from war, in-flight to refuge	16
Risk factors increasing vulnerability to violence and exploitation	17
Barriers to reporting of violent incidents in Poland	18
Protective factors strengthening resilience to violence and exploitation	19
Grassroots responses: solidarity lacking systemic solutions	19
Interactions between violence, displacement, humanitarian and migration systems	20
Limited safeguarding measures in the refugee journey	20
Enforcing dependency and competition over resources in Poland	21
Trauma-insensitive uncoordinated refugee responses	22
Labour exploitation and discrimination of IDPs in Ukraine	22
Lack of privacy in accommodation and safeguarding risks with private hosts	23
Limited protection sensitivities and capacities of multiple stakeholders	24
Recommendations	25

Abbreviations

Central and Eastern Europe
Conflict-related sexual violence
Gender-based violence
Internally displaced persons
Intimate-partner violence
Office of the UN High Commissioner for Human Rights
Sexual and Gender-Based Violence against Refugees: from Displacement to Arrival

Short summary

Russia's war on Ukraine has rendered an unprecedented scale of forced displacement, primarily of women and children. Since 24th February 2022, it is estimated that seven million have fled Ukraine to neighbouring countries. As of 1st November 2022, 7,274,050 border crossings were recorded from Ukraine to Poland, and 1,469,032 Ukrainians applied for the national protection scheme.^{III} As of October 2022, there were 6.5 million internally displaced people in Ukraine.ⁱ An urgent and comprehensive protection response is needed from Poland and Ukraine to accommodate the specific needs of refugees and internally displaced persons (IDPs) as they settle into new contexts. The SEREDA CEE Project examined the risks, experiences and awareness of SGBV and trafficking in Poland and Ukraine to help develop adequate policy and safeguarding measures. Data was gathered from 14 interviews with national and local service providers in Poland and 32 interviews with refugee and IDPs in Poland and Ukraine.

Continued experiences and risks of violence:

All respondents were subjected to war violence and, for some, different forms of violence continued from pre-displacement, through conflict, transit and refuge. Most respondents suffered from war-related trauma, including physical and psychological harm.

Risk and protective factors: Lack of knowledge of one's rights, lack of support networks, and language barriers exacerbated vulnerability to abuse. Support for survivors of violence was provided by civil society in the face of a missing government response. Key facilitators of resilience were self-reliance in the country of refuge through accessing safe and secure accommodation and being able to work and access welfare.

Interactions between violence, displacement, humanitarian and migration systems:

1. Limited safeguarding measures in the refugee

journey: Services were offered without systemic coordination and lacked safeguarding measures. The registration system to verify drivers lacked in efficiency of safeguarding checks and monitoring of safe arrivals. Several women were raped and abused during informal transportation arrangements.

2. Enforced dependency and competition over resources in Poland: Domestic violence procedures

concerning Ukrainian nationals remained ambiguous. Due to delayed payments of social benefits, women depended financially on former abusive partners who stayed in Ukraine. Women who became the head of household, with several dependents, remained vulnerable to 'transactional and survival sex'.

3. Trauma-insensitive uncoordinated refugee

responses: Poorly coordinated refugee responses did not account for the impact of war trauma on refugees' vulnerability to violence and exploitation. Excessive information was shared with refugees in their distressed and disoriented state.

4. Labour exploitation and discrimination of IDPs in

Ukraine: Most research participants became unemployed, and exploitation was common. Some considered labour exploitation as discrimination against IDPs.

5. Lack of privacy in accommodation and safeguarding risks with private hosts:

Women with several children and elderly dependents often struggled to find adequate housing and continued living in reception centres or refugee camp. Some refugee women were verbally and physically attacked in overcrowded reception centres and private homes; others reported incidents of physical and emotional violence by hosts.

6. Limited protection sensitivities and capacities of multiple stakeholders: Services to address the specialist needs of refugee women were scarce and public sexual violence services lacked the expertise to work with refugees. Mental health support funded by the National Health Fund in Poland was difficult to access and low quality. Unaccompanied minors in Poland were subjected to obligatory guardianship procedures described as risky due to speedy guardian verification procedures.

Key recommendations: SEREDA CEE Project advocates for mainstreaming protection with refugee, gender and trauma-sensitivity in the humanitarian, immigration, and asylum systems through better coordination across different levels and sectors to help mitigate violence towards and exploitation of refugees. Key recommendations include: development of longer-term solutions for accommodation and employment; ensuring access to health services and long-term mental health support; establishing referral procedures; and strengthening cross-sectoral collaboration to prevent and respond to violence against refugees.

Executive summary

Introduction

Russia's war on Ukraine has rendered an unprecedented scale of forced displacement, primarily of women and children. Since 2014 over 1.5 million people from Eastern Ukraine and Crimea have fled to other regions of the country. With greater military presence in inhabited areas, the number of reported sexual and gender-based violence (SGBV) incidents at the 'entry-exit crossing points' have increased.^{vii} Since 24th February 2022, it is estimated that seven million have fled Ukraine to neighbouring countries. Also, 6.5 million people have been displaced internally and 13 million are unable to leave.^{1 ii}

Although neighbouring nations welcomed fleeing Ukrainians, the scale of the feminised displacement emergency has not been met with the appropriate resources, capacity, political will, or governance. As of 1st November 2022, 7,274,050 border crossings were recorded from Ukraine to Poland, and 1,469,032 Ukrainians applied for the national protection scheme.^{III} A large proportion of Ukrainians who entered Poland either continued journeying to another country, returned to Ukraine, or have not yet registered in Poland. An urgent and comprehensive protection response is needed from Poland and Ukraine to accommodate the specific needs of refugees and IDPs regardless of their background.

About the project

SEREDA CEE Project 'The Ukrainian refugees at risk: violence, trafficking and exploitation' examined the risks, experiences, and awareness of SGBV and trafficking in Poland and Ukraine to help develop adequate policy and safeguarding measures. The project was led by the University of Birmingham in collaboration with communitybased researchers from Convictus, an NGO in Ukraine and Poland. Collected data comprises 32 interviews with refugee and internally displaced women (17 in Poland and 15 in Ukraine) and 14 interviews with national and local service providers in Poland. The study has been funded by the Institute for Global Innovations and Institute for Advanced Studies and the College of Social Sciences Impact Fund of the University of

Birmingham. The study obtained ethical approval from the University of Birmingham Ethical Review Committee.

Continued experiences and risks of violence

All respondents were subjected to war violence. Some experienced GBV incidents pre-war; for others, different forms of violence continued from pre-displacement, through conflict, transit and refuge. Forms of violence shared by respondents include structural, physical, verbal, emotional and economic violence; sexual violence including conflict-related sexual violence; and stigmatization and discrimination of vulnerable groups. Risks of violence and exploitation across refugee journeys and settlement experiences in Poland were reported as very high. Many participants mentioned unfair pay and labour exploitation, and some of them faced verbal abuse and racism.

Gendered harms from war, during flight to refuge

Most respondents suffered from war-related trauma, including physical and psychological harm. Although many Ukrainian refugees could access protection and healthcare services in Poland, some still did not know they were entitled to support or faced healthcare exclusion due to language barriers and a lack of awareness of services.

Risk factors increasing vulnerability to violence and exploitation

War trauma and shock affected refugees' vulnerability to exploitation and their ability to evaluate protection risks. The levels of GBV and trafficking awareness varied among respondents in Poland and Ukraine. Overall, the lack of knowledge of one's rights, lack of support networks, and language barriers exacerbated vulnerability to abuse. Most IDPs in Ukraine faced destitution and depended on friends, relatives and the third sector, with some lacking knowledge of how to apply for state benefits. Most did not receive information about the risks of GBV, nor how and where to seek support.

Barriers to reporting in Poland

While service providers noted low levels of gendered violence reporting, they foresaw that reporting rates would increase in the future.

Shame and stigma deterred victims from seeking support and language barriers prevented contact with domestic violence hotlines and police. Despite extensive information resources targeting refugees in Poland, survivors often did not know about available support and services. Prevalence of gender stereotypes among statutory (public) services, victim-blaming culture and gender insensitivity posed barriers to GBV disclosure.

Protective factors strengthening resilience to violence and exploitation

Refugee women deployed a range of coping strategies to deal with trauma and the uncertainty of the future. Many relied on their personal strengths and qualities and those with social connections counted on support from family and friends. Some drew strength from their faith. For mothers, caring for children was an important coping strategy. Some respondents attended psychological support sessions in Poland and engaged in language classes. Acts of kindness toward fellow compatriots and self-reliance through accessing safe accommodation and work fostered coping capacities.

Grassroots response: solidarity lacking systemic solutions

Poland's civil society and private sector showed great solidarity with refugees at the outbreak of the invasion. A range of NGOs responded immediately to support refugees' basic needs and adapted their work in the face of a missing government response. Longer-term needs, such as sustainable housing solutions, work and integration, required further support and involvement from the state. Practitioners appealed for stronger coordination and networking.

Interactions between violence, displacement, humanitarian, and migration systems

Six interactions between violence, displacement, humanitarian, and migration systems were identified in the study:

1. Limited safeguarding measures in the refugee journey

At the early stages of the emergency, volunteers and ad hoc grassroots organizations coordinated informal transportation arrangements to process the massive influx of refugees in Poland. Services were offered in a chaotic manner without systemic coordination and lacked safeguarding measures. Several women were raped and abused during informal transportation arrangements. A registration system, introduced later, to verify documents and criminal records of drivers transporting refugees lacked in the efficiency of safeguarding checks and monitoring of safe arrivals. Some drivers registered with false data and were found to be untraceable after abusing refugee women. Similarly, the registration of volunteers assisting at reception points did not involve screening.

2. Enforcing dependency and competition over resources in Poland

Some refugee women survivors of domestic violence rejoined their abusive partners, who had earlier migrated to Poland for work, and were revictimised. In domestic violence situations, the application of 'blue card' procedures in Poland remained ambiguous concerning Ukrainian nationals. Due to delayed receipt of social benefits in Poland, some women became financially dependent on their former abusive partners who remained in Ukraine. Some women registered with the Social Insurance Institution (ZUS) with the help of men who had their phone number and could access their email account. Women, who left their spouses in Ukraine and became the head of household with numerous dependents, remained vulnerable to 'transactional and survival sex'.

3. Trauma-insensitive uncoordinated refugee responses and procedures

The lack of a coordinated and state-led response to mass-scale refugee displacement forced refugees to trust volunteers and strangers immediately after experiencing armed violence. Excessive information was shared with refugees in their distressed and disoriented state. Also, information campaigns about human trafficking and exploitation were often presented in ways that did not effectively communicate their message to refugees.

4. Labour exploitation and discrimination in Ukraine

Most research participants became unemployed, as indicated in our interviews which were conducted between one to three months after their flight. Exploitation was common. Some considered labour exploitation as discrimination against IDPs. Sex work was reported, too. Job offers misled participants, turning out to be requests for sex services.

5. Lack of privacy in accommodation and safeguarding risks with private hosts

The lack of centralised coordination and insufficient background checks of private hosts and housing increased refugees' anxiety about potential harm. Some respondents could not cover housing fees without jobs or by working part-time. Women with several children and elderly dependents often struggled to find adequate housing and continued living in reception centres. Some refugee women were verbally and physically attacked in overcrowded reception centres and private homes by other refugee women residents due to conflict over resources. Others reported incidents of physical and emotional violence by hosts. IDPs in Ukraine faced extreme increases in rental costs and lack of shelters. Some locations were difficult to live in without basic amenities and safety checks.

6. Limited protection sensitivities and capacities of multiple stakeholders

Services to address the specialist needs of refugee women were scarce, and mainstream and sexual violence services lacked the expertise to work with refugees. The lack of reproductive health solutions for victims of violence led, in some cases, to the loss of life. Mental health support funded by the National Health Fund in Poland was difficult to access and low quality. Migrant organisations lacked funding to increase outreach to potential survivors. Unaccompanied minors in Poland were subjected to obligatory guardianship procedures described as risky due to speedy guardian verification procedures. Some minors were approached by older and unknown persons.

Key recommendations

Despite the kindness and solidarity offered by Polish citizens to Ukrainians, the scale of the feminised displacement emergency requires further systemic solutions to strengthen the protection of displaced people. Therefore, SEREDA CEE Project advocates mainstreaming protection with refugee, gender and traumasensitivity in the humanitarian, immigration, and asylum systems through better coordination across different levels and sectors to mitigate violence against refugees.

The central government, regional and city

authorities should develop systemic solutions to mainstream the protection of refugees from violence and exploitation regardless of nationality or residency:

- Establish an adequate, safe, and user-friendly registration of drivers and volunteers, verification, and monitoring system to strengthen the protection of refugees nationally and internationally
- Develop longer-term solutions for accommodation, regulate rental fees and subsidise rental costs
- Centralise coordination of private hosts offering accommodations to refugees and IDPs, and introduce safeguarding measures to mitigate violence and exploitation
- Build capacities of workers at crisis intervention centres and sensitise reception points to support refugee survivors of violence and exploitation.

Justice system should:

- Ensure the criminal code enables all victims, irrespective of nationality, to access justice and effective prosecution
- Provide anti-GBV and anti-trafficking training for the legal and justice system (including police)
- Provide legal advice free of charge to refugee and IDP victims in languages they use.

Employers and private sector should:

 Help refugees and IDPs, regardless of nationality, access employment, including skills development programmes and internships to support their self-reliance and integration.

National Health Fund (NFZ), hospitals and health services should:

- Support all refugees of different ages to access health services and long-term mental health support in urban and rural areas
- Ensure reproductive health information and services are available to refugees

• Sensitise staff on mental health and GBV experiences of refugees and IDPs.

Multi-sectoral capacities should be strengthened to prevent and respond to violence and exploitation:

- Develop a comprehensive counter-trafficking response in partnership with the authorities, international organisations, and specialist NGOs
- Ensure central, regional, and city authorities, NGOs, specialist organisations and the private sector strengthen collaboration for effective aid distribution to reach the most vulnerable
- 'Violence against women' sector to provide training for staff of social assistance centres, social insurance institutions, police, and border services on risks of violence and relevant procedures
- Provide funding for flexible services for mobile and newly arrived populations and support the development of protection programmes and infrastructure to cater to the specific needs of refugees.

NGOs should:

• Develop links with specialist organisations and establish referral procedures

- Support refugees to register and legalise their stay in Poland and access support services
- Support volunteers, workers at reception points, and social workers by providing training on how to support refugee and IDP populations who experienced violence
- Offer psychological support to all support staff and volunteers to prevent and recover from burnout.

Faith-based organizations should:

 Develop institutional solutions for refugees and support their psychosocial and spiritual needs, regardless of their faith. Avoid risks of proselytisation.

Campaign and advocacy needs:

- Develop a national campaign for refugee protection in Poland, to raise awareness of the risks of violence, crime, and exploitation, and to signpost where to seek support in languages used
- Counter disinformation initiatives which misrepresent refugees and incite conflict between host and refugee communities
- Build international advocacy and utilise diplomatic pathways for the Polish government to develop systemic refugee solutions.

Introduction

Russia's war on Ukraine has rendered a large scale of forced displacement, primarily of women and children, as men remain to defend the country. It is estimated that over seven million have fled Ukraine to neighbouring countries since the onset of war on 24th February 2022. Refugees make difficult journeys to escape war violence. 6.5 million people have been displaced internallyⁱ and 13 million are unable to leave due to security risks, destruction of road infrastructure, and lack of information on where to seek safety.ⁱⁱ As of 1st November 2022, 7,274,050 border crossings were recorded from Ukraine to Poland, and 1,469,032 Ukrainians applied for the national protection scheme.^{III iv} The disparity in numbers indicates a large proportion of Ukrainians who entered Poland either continued journeying to another country, returned to Ukraine, or have not yet registered in Poland. An urgent and comprehensive protection response is needed from Poland and Ukraine to accommodate the specific needs of refugees and internally displaced persons (IDPs) regardless of their background as they settle into new contexts. Within the Polish national system, the 12th March 2022 Act on 'the assistance to citizens of Ukraine in connection with the armed conflict on the territory of that country' defines the rights of citizens of Ukraine fleeing to Poland.^v The Act states that national and local authorities may offer accommodation and mental health support to people seeking refuge, but there is no obligation to do so. The law also excludes persons with specific needs and thirdcountry nationals fleeing war in Ukraine, thus increasing their vulnerabilities.

Forcibly displaced people face a range of vulnerabilities, some specific to pre-war conditions and some specific to the war and displacement experience. Over 1.5 million people from Eastern Ukraine and Crimea have fled to other parts of the country since Russia's 2014 invasion. IDPs experience multiple disadvantages, such as structural violence (violence and inequalities embedded in society), often compounded by mental health conditions due to stressors of internal displacement. For example, in 2018, 20.2% of IDPs in Ukraine (compared with 12.2% of the general population) had 'moderately severe' or 'severe' anxiety.^{vi}

Overall, since the war in Eastern Ukraine and greater military presence in inhabited areas since 2014, the number of reported gender-based violence (GBV) incidents at 'entry-exit crossing points' have increased.^{vii} There is no one universal definition for GBV.^{viii} The Inter-Agency Standing Committee (IASC) defines GBV as an "umbrella term for any harmful act perpetrated against a person based on socially ascribed gender differences between males and females. It includes acts that inflict physical, sexual or mental harm or suffering, threats of such acts, coercion and other deprivations of liberty".^{ix} Refugees face increased risk of intersecting forms of violence and exploitation, including structural and interpersonal violence, such as domestic violence, where a 50% increase in reported cases between 2018 and 2020 was recorded.* Conflict-related sexual violence (CRSV) also increased across Ukraine. The Human Rights Monitoring Team of the UN High Commissioner for Human Rights (OHCHR) received reports of 124 alleged acts of CRSV as of 3rd June 2022.^{xi} The data indicates underreporting, as in many other settings, due to shame, stigma, social, cultural, and institutional barriers faced by victims.

Moreover, forcibly displaced persons face increased risk of trafficking.^{xii} OHCHR defines trafficking as: "...the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation (Article 3, 2000).^{xiii} Trafficking includes forced prostitution and other forms of sexual exploitation, forced labour, slavery and servitude.

Findings from earlier SEREDA projects indicate that violence occurs on a continuum: from predisplacement, through conflict and transit, to refuge.xiv Multiple risks of violence increase with the length of displacement: the longer the journey, the riskier it becomes. The risk of GBV increases along transit routes and even upon arrival to refuge for multiple reasons, from loss of resources and economic destitution to restricted legal protection in transit countries for noncitizens. With most humanitarian focus on violence in conflict, violence that occurs across forced migrant routes and upon arrival to a place of refuge is less frequently considered. Although neighbouring nations welcomed fleeing Ukrainians, the scale of the feminised displacement emergency has not been met with the appropriate resources, capacity, political will, or governance to enable protection mainstreaming across services and gendersensitive facilities.

'The Ukrainian refugees at risk: gender-based violence, trafficking and exploitation' project examined the risks, experiences, and awareness of GBV and trafficking in Poland and Ukraine to help develop adequate policy and safeguarding measures. The study is part of the SEREDA research initiative, undertaken as a SEREDA CEE extension.^{xv} The University of Birmingham led the project in collaboration with community-based researchers in Poland and Ukraine from Convictus, a Ukrainian national NGO.

Methodology

Multi-lingual community-based researchers undertook in-depth interviews with 17 Ukrainian refugee women in Poland (Warsaw, Gorzów Wielkopolski, and nearby villages) and 15 internally displaced persons in Ukraine (Lviv and Chernivtsi) between May and June 2022. Interviews were held in respondents' preferred language – Ukrainian (14), Russian (17) and mixed (1). Table 1 introduces the sample of participants: most were women in their 20s and 30s (8 each), seven in their 40s, four each in their 50s and 60s, and one below 20. Almost all participants (31) were Ukrainian citizens - one was Russian. 13 participants were married, seven were not married, six were divorced, four had a partner, and one each were single and a widow respectively. Most participants (22) had children and more than a third (12) cared also for other

dependants, for example parents and grandparents. They had different accommodation arrangements: five respondents lived in either a hotel or hostel, 13 in a flat or private apartment, four in a private house, nine stayed in shelters, and one in a school. Participants came from different regions in Ukraine, with a third (11) from Kharkiv Oblast.

Gender		Nationality	
Women	26	Ukraine	31
Men	2	Russia	1
Transgender	4		
Age		Marital status	
Under 20s	1	Single	1
20s	8	Married	13
30s	8	Divorced	6
40s	7	With Partner	4
50s	4	Not Married	7
60s	4	Widow	1
No of children		No of other dependents	
None	10	None	20
1	10	1	8
2	10	2	2
3	2	3	1
		4	1
Origin from Ukraine		Living arrangement	
Bucha district	2	Hotel	3
Dnipro region	1	Hostel	2
Zhytomyr	1	Flat/private apartment	13
Kyiv	3	Private house	4
Kramatorsk District	3	Shelter	9
Kryvyi Rih	1	School	1
Mariupol	1		
Odesa	2		
Poltava	1		
Primorsk (Russia)	1		
Severodonetsk	1		
Kharkiv Oblast	11		
Kherson	1		
Chernihiv	1		
No answer	2		

Table 1: Displaced participants sample summary

14 key informants were also interviewed in Poland in Polish (11) and English (3). Table 2 presents an overview of the service providers and activists involved. Most key informants (9) came from NGOs and grassroots organisations, three were individual activists, and two from UN agencies. A third were coordinators of aid initiatives, and three in a senior leadership capacity. We also spoke with a lawyer, psychologist, and social worker.

Table 2: Stakeholders sample summary

Organisation		Role	
Local and grassroots			
organisations	2	Coordinator	5
Individual activist	3	Social worker	1
Unregistered foundation	1	Lawyer	1
INGO	1	Activist	3
NGO	5	Psychologist	1
UN Agency	2	Vice-president	2
		Co-founder	1

The study used a systematic thematic analysis approach to process the data. Ethical approval from the University of Birmingham Ethical Review

Continued experiences and risks of violence

All respondents were subjected to war violence. Some experienced GBV incidents pre-war in the domestic sphere or at the workplace. While some respondents revealed single incidents of violence or talked about the experiences of violence of their acquaintances, for others, different types of violence continued from pre-displacement, through conflict, transit, and refuge, wherein different forms of violence intertwined. Risks of violence and exploitation across refugee journeys and settlement experiences in Poland were very highly reported. List 1 outlines the different experiences and risks of violence at different stages of forced migration.

List 1: Experiences of violence at different stages of displacement reported by respondents

Violence pre-24th February 2022

- Structural factors: normalisation of GBV, patriarchal norms, objectification of women, impunity for abusers, shame and stigma around experiences of sexual violence, lack of professional and trusted mental health support
- CRSV since the annexation of Crimea and armed conflict in Donetsk and Lughansk oblasts since 2014

Committee was obtained as an extension of the main SEREDA Project. Participants were informed in their native language about the study, ethical procedures, including confidentiality and safe data storage, and joined with informed consent. Refugees and IDPs were asked about risks and experiences of GBV and trafficking, coping mechanisms, help-seeking and risk mitigation. Key informants were also asked about protection concerns, vulnerability and resilience of refugees, and their practical and policy recommendations. This report proceeds with findings from the interviews, outlining interactions between violence, displacement, mobility, and humanitarian and migration systems. It also includes two infographics - a survivor's story (front page) and a safety guide for refugees in Poland (back page).

- Stigmatization and discrimination of vulnerable groups: verbal and physical harassment of people with disabilities, persons of diverse sexual orientation and gender identity, stigma around HIV and drug addiction
- Labour discrimination of IDPs
- Domestic violence and intimate partner violence (IPV)
- Workplace: gender injustice, restraining women's leadership, sexual harassment
- Sex tourism.

Violence since 24th of February 2022

- Forced conscription of men
- Intense military aggression: destruction and raiding of homes and personal belongings, looting, torture and interrogation
- Witnessing war atrocities and human remains, hearing voices of dying persons trapped in rubble after airstrikes, attacks on schools, hospitals, and humanitarian corridors
- Resource deprivation and loss: loss of jobs and income, food insecurity, lack of access to clean water, sanitation, and hygiene in occupied territories and in areas of active hostilities
- Lack of shelter: enforced homelessness and destitution, being forced to hide in basements and underground shelters for days and weeks,

civilians denied space in shelters during raids due to overcrowding

- Children deprived of play activities, education, and forced to sleep on basement floors
- Interpersonal and family conflicts based on different ideologies and war divisions
- Emotional blackmailing of women in abusive relationships to remain in Ukraine with the abuser threatening to harm himself
- Sexual violence: Sexualisation of women and verbal harassment of local residents by military aggressors, offers of protection by militia in exchange for sex, rape of women and children by soldiers as a weapon of war and tactic to humiliate the Ukrainian nation, murder of victims of sexual violence.

Violence and risks in flight

- Dangerous and exhausting journey: fleeing to unknown destinations without belongings and with children and elderly family members, mine explosions and airstrikes enroute, journey by buses, trains, cars, and on foot with dependents, lack of accessibility for people with disabilities
- In-journey verbal and physical violence:
 violence against women and transgender
 people in overcrowded trains, ethnic-based
 and ideological conflict (due to different views
 on the war) on trains including death threats
- Sexual assault and harassment during train/bus journeys within Ukraine by military personnel and drivers, incidents of rape by private volunteer drivers and private hosts in Poland
- Fear of strangers: women feeling observed by unknown men at borders and reception points
- Very high risks of trafficking among traumatised refugees: service providers noting indicators of organised crime with transportation arrangements for refugees
- Loss of money due to pre-paid transportation booking in Ukraine and 'no-show' drivers
- Mistreatment at customs and borders, including long periods of queuing in cold conditions, being denied rest in waiting areas at train stations when transferring (Austria)

 Separation from and loss of contact with family members, women and children disappearing during the journey.

Violence and risks in refuge

- Discrimination and violence in employment: labour exploitation (e.g. long working hours, underpayment and underemployment), harassment at work by peers, sexual harassment at work, misleading job advertisements (e.g. advertising for cleaning but seeking prostitution/sexual services, Poland and Ukraine), discrimination against transgender men in Ukraine
- Violence in accommodation: physical, sexual, and emotional violence in accommodation by private hosts, intensification of domestic violence (Poland and Ukraine)
- Racism and xenophobia: emerging harmful and anti-refugee narratives, xenophobic verbal attacks in public spaces in Poland
- Online harassment of Ukrainian women in Poland
- Conflicts between co-nationals: alienation of Russian-speaking Ukrainians among the Ukrainian community, emotional abuse and conflict between co-nationals living in the same accommodation (Poland and Ukraine)
- Denial of reproductive rights (e.g. to contraception and abortion) in Poland
- Economic risks: dependence on grassroots aid and private hosts, refugee women entering romantic relationships with Polish men
- Some refugee children, who faced adaptation challenges in new schools in Poland and showed difficult behaviours due to war trauma, were mistreated by teachers and left without psychological and emotional support.

Violence and risks during return

- Increased risk of violence, exploitation, and trafficking in transit during return migration, with heightened insecurity and inability to access support services needed
- Severe risks of war violence.

GBV in conflict and transit (Ukraine)

All interviewed refugees and IDPs witnessed violence and life-threatening events in their hometowns and enroute to refuge. Many fled from territories under shelling and were forced to make rapid decisions to leave their homes:

> "There was not a single safe place in Ukraine due to the war. And I decided to leave...ran with almost nothing and in what we were wearing. There was a crowd, and traffic jams...Everyone was afraid, and panicked, explosions were heard...We ran in a panic..." (Katerina, May 2022, Poland)

Some people who hesitated were persuaded to leave by fear of their children's future, despite work duties and anxiety. In several accounts, women did not want to leave their husbands behind as they valued them as their protectors. Living in and fleeing occupied territories was described as a terrifying experience. One informant who fled from occupied territory compared the occupation to the trafficking of people:

> "In my view, even occupation is the trafficking of people of a kind. It's profiteering of human stock, surrender, or you are killed. As soon as hostages are involved, it is trafficking and blackmailing." (Victor, June 2022, Ukraine)

Many respondents described traumatising events witnessed and experienced during the war. One informant shared the experiences of those stranded in Mariupol:

> "My mother was talking about a woman who lives with her in a hostel. Her husband serves in Mariupol. He said that he hears people screaming under the rubble that they can't make out. First, it's adults and children, then just children who are still alive, and then no one screams." (Ludmila, June 2022, Poland)

Others recalled personal experiences of confinement in basements and shelters during

airstrikes. Sitting in the basement or waking up from sirens became an everyday reality for many Ukrainians:

> "For two weeks we were sitting in the cellar, there was such a state that you no longer understand where you were, what was happening to you, you slept and did not sleep." (Tamara, May 2022, Poland)

Several respondents shared indirect information about rape of Ukrainian women and children by the Russian army which they heard from family, colleagues and social media. Many women were afraid of becoming victims of conflict related sexual violence and of perpetrators' brutality:

> "...I've heard stories about raping of women, girls, and children by Russian servicemen...This is horrible because the Russians use rape as a method of war." (Natasha, June 2022, Ukraine)

"We had girls from a neighbouring village who had been taken to the hospital as the result of violence...It was really awful. I have a friend who works at the hospital, she was on duty for 42 days non-stop...she saw them all after the operation. One doctor said - I couldn't see where to sew up the wound. It was terrible." (Oksana, May 2022, Ukraine)

Fleeing war, women and men undertook dangerous journeys, often separated from their families and during airstrikes, fearing for their lives. Those fleeing by car faced fuel shortages and heavy traffic, others who fled by public transport travelled in overcrowded trains and buses, standing or seated for very long hours. During flight, many felt powerless and disorientated:

> "...you are in a condition when the trip itself is violence...It was a forced decision, and you are under pressure. It was scary at every step - scary to get on the train. There weren't enough seats on the first train. Everybody pushes their way onto

the train; men push up their women, mothers, and children so they get on first...You don't even feel human at that moment as your physical powers are exhausted." (Polina, May 2022, Poland)

"The way we drove was physically difficult - there were inconveniences, sixteen people in the compartment. People are completely confused, especially women who have left their husbands behind." (Olena, May 2022, Poland)

Some respondents lost hope and, while experiencing continued terror, waited for death. Two respondents, among many others, described these terrifying circumstances:

> "You've been constantly waiting to die since the morning of the twenty-fourth. This is the worst thing - that it is not death itself that is terrible, but the expectation that it will happen at any moment." (Zlata, May 2022, Poland)

> "During the bombing, they stopped the train and told everyone to turn off their phones, and in this darkness the child shouts: "Mom, I do not see you! Mother, I do not see you!". The children were screaming and were very afraid, bombs were falling, the siren was buzzing. It's not a horror movie – it's what's happening to you now." (Victoria, June 2022, Poland)

Exhaustion and extended severe stress levels made people less alert to some signals of risks. One respondent mentioned: *"People let their* guard down. We've been driving for seventeen hours, you're tired, you haven't slept, and people can take advantage of that".

In addition, war and forced displacement prevented people from COVID-19 risk mitigation, affecting IDPs' physical and mental health. One older woman shared:

"I was worried that I was infecting people because I was still sick at the time. Let

people forgive me, but I didn't admit to anyone that I had a coronavirus infection at the time. I was worried about my grandson." (Anita, June 2022, Ukraine)

Displaced women experienced different types of gendered violence during the journey, including sexual harassment, physical and emotional violence in the internal displacement experience. Some tried to cover their femininity, due to fear of sexual harassment, by wearing loose clothes, cutting and dying their hair, to not attract attention of men in general and soldiers at roadblocks and checkpoints. Some said that men at roadblocks harassed young women and did not let them pass, for example saying: "We are not going to let you leave. Pretty women mustn't leave Kherson." Other women experienced gender-based discrimination in the trains, for example, one man demanded women clean the train's toilet:

> "In our train, there was a man who did not like how other people used the WC. He said that people should not go there, he required that women shall clean the WC, such a gender-based discrimination...This complaining was rather stressful." (Yana, May 2022, Ukraine)

People with chronic illness and disabilities were at increased risk during the journey because of overcrowding in trains. Panic and stress limited public sensitivity towards people with specific medical needs. Transmen were also subjected to verbal abuse in buses and trains. In addition, several women described the lack of access to menstrual hygiene products during long journeys without access to sanitation facilities as unbearable.

> "The road took us 21 hours. Road shoulders are mined, you can't even go to the toilet. So, you have to change your hygiene products out in the field next to other cars. Then we slept in a school. It had no shower or dedicated rooms." (Wlada, May 2022, Ukraine)





the states

GBV in places of refuge, resettlement, and return (Poland and Ukraine)

Many participants mentioned unfair pay and labour exploitation in informal cash-in-hand catering, hospitality and agricultural work. Some refugees in Poland faced verbal abuse and racism at work and in public spaces:

"One day on the bus, my son and I were talking, at which time I was kind of attacked by a woman who started screaming something like I was coming here and doing something wrong, and she didn't like it..." (Yulia, May 2022, Poland)

"...these women don't like that I work there. It's passive aggression in my direction, bullying. The phrase: 'Go to your Ukraine' - it acts on me like the colour red on a bull...Coming here was not my choice and working here is not my choice." (Sofia, June 2022, Poland)

Also, there were instances of hate crime and jealousy. Distribution of social welfare (such as child benefits, '500 Plus', distributed to families in Poland) to vulnerable Ukrainians raised conflict in some neighbourhoods over disagreements about the allocation of public resources.

The Polish government's decision to stop funding private hosts in summer 2022 affected many refugees' housing security. For some who could not find a decent job, working in exploitative conditions was the last resort to afford accommodation. With limited childcare provision, many could not work sufficient hours to provide for their families. Some women were forced to return to Ukraine for medical care because of healthcare exclusion and lack of reproductive rights, including abortion, in Poland. Others returned due to destitution, loss of jobs, and in some cases financial dependency on men who stayed in Ukraine. Women were also targeted by non-partners for exploitation through disguised job offers on social media and communication channels, such as Telegram and Facebook, aimed to lure young women into giving sexual services. Some participants shared their own or their friends' experiences with offers of sex work disguised under vacancies within the hospitality sector in Poland and Ukraine. One woman disclosed:

> "When we came to Poland, I had a lot of Telegram channels. One of them had a message about the provision of work with high pay for cleaning the house. I responded, wrote a personal message, and then came a response, where they asked me to tell them about myself, about my story. I was surprised, but I told them that I came from Ukraine, about my children and they began to describe the essence of the work. They asked me the question about whether I can work overtime. Of course, I agreed, after which it turned out that this was a job to provide intimate services, and not cleaning the house. Then I was told, to my surprise, such an ambiguous phrase that 'intimate places also require cleaning'." (Sasha, May 2022, Poland)

Experiences of trafficking or sex work in Poland were not directly recounted by respondents, given the limited size of the sample, but some had heard about such cases: *"Many financial problems push women to engage even in prostitution"*.

Gendered harms from war, in-flight to refuge

The combined experience of being forcibly displaced, war violence and other forms of abuse generated trauma with potentially lasting consequences. Most respondents suffered from war-related trauma, including physical and psychological harm. Many feared for the whereabouts of their relatives who stayed in Ukraine. Some felt guilty about leaving Ukraine, as described in List 2. Although many Ukrainian refugees could access protection and healthcare services in Poland, some still did not know they were entitled to support or faced healthcare exclusion due to language barriers and a lack of awareness of services.

List 2: Health impacts of war trauma and GBV reported by respondents

Psychological	Physical
 Shock and disbelief of reality Intense anxiety, panic attacks Fear of loud noises and of Russian-speaking men Severe psychological distress and emotional pain Symptoms of post-traumatic stress disorder (PTSD) Self-isolation and agoraphobia Feelings of loneliness and abandonment Suicidal thoughts, self-harm Flashbacks Sleep disorders Symptoms of depression Feeling of hopelessness and powerlessness Developing alcohol addiction 	 Injuries, scarring, burns and broken bones Chronic pain Physical disability Reproductive and gynaecological problems Forced pregnancy (from rape) with no access to termination

The psychological burden of accumulative events continued to impact respondents daily. Some lost sense of reality, others went through a range of upsetting emotions.

> "To be honest, I'm not paying attention to anyone now because I'm still all in myself, all in my thoughts. And somehow, I don't notice anything around me." (Mila, May 2022, Poland)

> "Everything accumulates in me, and then, somewhere aggression manifests itself, somewhere stress. I have not yet turned anywhere for psychological help..." (Daryna, June 2022, Poland)

Refugees and IDPs lived in continued fear and felt a loss of purpose due to recurring memories and trauma - some did not want to live, others sought help through psychologists and medication. "It was unbearable. I didn't want to live or think about anything. You can't go back home, living with your children is not an option, no job, and you don't speak the language." (Sara, June 2022, Poland)

"Memories of the past do not allow me to live peacefully... As soon as the plane flies, you immediately feel horror and fear...It's a constant fear, a memory of how they pushed me there... You're always waiting for them to come." (Alina, May 2022, Poland)

"I have been taking antidepressants all this time because I cannot cope with the anxiety. I have panic attacks after the bombing in Kharkiv." (Nastya, June 2022, Ukraine)

Risk factors increasing vulnerability to violence and exploitation

War trauma, shock and psychological distress affected refugees' vulnerability to exploitation and their ability to evaluate protection risks. Also, physical exhaustion from fleeing war and long journeys often made displaced persons inattentive to potential risks, as they believed that after barely escaping military violence, nothing worse could happen to them during their flight:

"When a war breaks out and you run away from home with your handbag, you might think that nothing worse could happen to you." (Ivanna, June 2022, Ukraine)

While some felt disoriented by trauma during their journeys, many remained vigilant about potential risks, feeling they should not trust anybody and rely only on themselves. Some feared abuse from strangers and pseudovolunteers and kept their personal documents safe:

> "Well, there are pseudo-volunteers who can tell you something like that. Help you cross the border...for some money, additional payment or they say, give your passport. In a state of shock, you are not responsible for your actions...I was afraid that they would take away my passport..." (Daniela, May 2022, Poland)

Travelling alone or having no relatives or friends in Poland and other cities in Ukraine after reallocation also increased vulnerability to abuse, as did a lack of economic capital, dependency on others, language barriers and limited knowledge of one's rights. The levels of GBV and trafficking awareness varied among respondents in Poland and Ukraine. Some received information about potential risks from government websites, word of mouth, social media, or leaflets; others did not receive any information.

> "A lot of people warned me that women began to disappear, that they began to be robbed, raped, in Poland or on the way to Poland." (Olena, May 2022, Poland)

The most vulnerable were said to be unaccompanied children, young women, women described as beautiful or travelling alone, and women with dependents who thus needed more resources. Women with young children, children with disabilities, and elderly parents often became the head of their household due to changing gender dynamics, and confronted additional pressures to secure their families' basic needs amid increased risks of exploitation. Ethnic minorities, people addicted to drugs, and those living with HIV or disabilities and persons with diverse sexual orientations and gender identities, were also at increased risk of abuse and exploitation.

In addition, the orientalisation and sexualisation of Ukrainian women was prevalent in public discourse, particularly on social media where they were objectified and described as more beautiful, attractive, and obedient than Polish women. Some comments in Facebook groups manifested beliefs that Ukrainian women were submissive and would not refuse sex, indirectly inciting abuse.

Most IDPs in Ukraine faced destitution and depended on friends, relatives and the third sector with some lacking knowledge of how to apply for state benefits. Most did not receive information about the risks of GBV or how and where to seek support. The Ukrainian police was described as insensitive to emotional and economic violence among IDPs, with tendency to blame victims. One IDP from Kyiv described:

> "There is no point going to the police, they are powerless until you put pressure on them. (...) They just turn a blind eye, and don't want to work on it." (Nataliya, June 2022, Ukraine)

Barriers to reporting of violent incidents in Poland

While service providers noted low levels of gendered violence reporting by survivors, perhaps due to a lack of trust and confidence in its effectiveness, they foresaw increasing reporting rates in the future, as the emotional reactions to traumatic experiences often emerge later when survivors feel safer. Yet, the limited reporting does not mean violence, trafficking, and exploitation do not exist but indicates multiple and cumulative barriers preventing refugee survivors from seeking support:

> "In Poland, we have a problem with underreporting, and Ukraine has a problem of underreporting. And imagine people from Ukraine being refugees in Poland, being further marginalised, further under tons of stress. I would just imagine that the underreporting in that area is going to be massive and we're going to hear just singular stories..." (Katarzyna, National NGO, Coordinator, June 2022, Poland)

Despite extensive information resources targeting refugees in Poland, newcomers often did not know where to turn for support and what services are available for refugees, indicating information may not have reached the most vulnerable groups. For example, those who arrived by private car and did not pass by the refugee reception points at train stations lacked guidance. Also, the absence of privacy in shelters, feelings of shame, and lack of interpreters deterred victims from seeking support from domestic violence hotlines and police:

> "As far as I know, I was told where I could seek help. But I don't speak Polish, so I didn't understand enough. Now I realise I could call the domestic violence hotline to

go to the police and report a beating. But I was so emotionally exhausted that it was physically painful to go and talk about it again...I was paralysed with fear because I'd just been in Ukraine recently, there was nothing I could do, I'm crushed, unarmed." (Mila, May 2022, Poland)

Service providers reported Poland's 'violence against women' (VAW) sector as malfunctioning, overlooked by the state and unfit to meet refugees' needs. It lacked the justice system's capacity, security measures and efficient referral pathways. Prevalence of gender stereotypes among statutory (public) services, victim-blaming culture and gender insensitivity combined with the lack of relevant training was reported to reinforce guilt and stigma against GBV survivors. Despite existing procedures for working with survivors, they were reported as insufficiently implemented. There was little interest in training professionals and volunteers who might be survivors' first point of contact. High rotation of social workers, psychologists, and other service providers undermined the capacity to create a sustainable support framework for survivors:

> "Unfortunately, it is not possible within a few weeks to patch up the great structural difficulties and the great unmet needs of the victims of violence that have piled up over the years and that they have been screaming about. It is not possible in a few weeks to change the definition of rape, to make abortion more accessible, to make prosecutors and police officers, and indeed the whole law enforcement and judicial system, receive training, or to make harassment a part of criminal law...if we continue to fight for the perpetrators of violence to be better prosecuted and the victims of violence to be better protected, we are also simply fighting for Ukrainian women." (Anna, Grassroots activist, May 2022, Poland)

Protective factors strengthening resilience to violence and exploitation

Refugee women deployed a range of coping strategies to deal with trauma and the uncertainty of the future. Many relied on their personal strengths, qualities, and instincts to survive in conditions of war and refuge:

"We do not believe that anyone can protect us, Ukrainian women, and we have to rely only on ourselves." (Aleksandra, June 2022, Poland)

Those with social connections counted on support from family and friends. Some respondents said they had a chance to attend sessions with psychologists in Poland and considered them helpful in tackling trauma and beginning the recovery process to some extent - albeit, support was short-term and sometimes without adequate translation. Some engaged in language classes, work, and generally tried to keep busy by taking action to distract themselves from negative thoughts and recurring memories. Living and caring for children was an important coping strategy for many mothers, who continued to help their children heal from war trauma and secure a better future. Being sensitive about children's safety was also mentioned as a protective factor.

While some enjoyed meeting co-nationals for mutual emotional and practical support, others deployed avoidance of social contact and selfisolation as a coping technique. Acts of kindness toward fellow compatriots helped to build supportive communities among refugees in Poland and IDPs in Ukraine. Ukrainians supported each other, for example with childcare during their refugee journeys and informal self-help groups in places of refuge. Residents of a shelter for IDPs in Western Ukraine mentioned that sharing the cleaning and cooking duties strengthened their coping mechanisms. Others volunteered in humanitarian aid distributions. Many travelled in groups, conscious that this could decrease risks and used different tactics to protect themselves from abuse, such as informing family members about their plans, sending photos of the transportation used, and keeping hold of their passports/IDs.

Some respondents also drew strength from their faith, prayers, and attending church. Some found

peace by contact with nature and visiting local parks. Moreover, help and guidance from private hosts supported refugees' resilience and ability to navigate new environments.

Finally, a key facilitator of resilience was selfreliance in the place of refuge through accessing safe and secure accommodation, being able to work and access welfare. Upon registration in Poland (obtaining a personal identification number), refugees were entitled to basic social benefits. In Ukraine, those who had gained IDP status in 2014-2021 faced a range of administrative and policy issues in claiming some social benefits.

Grassroots responses: solidarity lacking systemic solutions

Poland's civil society and private sector showed great solidarity with refugees at the outbreak of the invasion. A range of NGOs, previously neither involved in the humanitarian field nor working with migrants and refugees, responded immediately to support their basic needs and adjusted their work in the face of missing governmental response. Grassroots and bottomup initiatives frequently filled important gaps in aid provision with volunteers, enabling refugees to move to other cities, find accommodation, and gain emotional and practical support.

> "We told our story, and they let us into their hearts, into their homes, and when we were reunited, my morale began to improve." (Ulyana, May 2022, Poland)

Polish NGO networks rapidly mobilised to respond to the immediate crisis response, raising funds to build team capacities and employ interpreters. Helplines providing support to GBV survivors were quickly extended with the provision of support in Ukrainian and/or Russian. Channels of communication were adjusted as printed materials were deemed ineffective and organisations invested time and resources to reach out to refugees on social media. New grassroots initiatives emerged, engaging refugees themselves to provide them with support during their journeys and to refer them to organisations offering GBV services in countries of refuge. The arrival of international organisations was received with mixed feelings, with some well-established national NGOs feeling patronised by international organisations that were unaware of the operational capacities of Polish organisations and, most often, lacking an understanding of the Polish context. Interventions from large humanitarian organisations were at the borders, short-term, and sometimes ceased without notice.

Women's, migrant and refugee organisations initiated leisure and networking activities for Ukrainian women refugees (e.g. mother groups and informational meetings) with the view to support longer-term integration. However, practitioners expected the government to lead refugee response by ensuring large scale support to Ukrainians and filling gaps beyond what civil society could offer. A lack of state-coordinated refugee response meant shifting responsibility from powerholders to the refugees themselves to self-protect, which was considered unethical by key informants. Such a shift in responsibility resulted in overburdening NGOs as the key actors providing immediate and short-term assistance. Underfunding contributed to the burnout of many volunteers. One activist stressed:

"We have a lot of specialists, after trainings, who have been helping for years, but they do it for free and are not able to sacrifice...So maybe the state should look at what we already have, because we don't need to create new structures...What we need now is to ensure that one volunteer after another does not simply disappear." (Karolina, Grassroots activist, May 2022, Poland)

In Ukraine, multiple international and local organisations worked on GBV-related issues. For example, GBV Sub-Cluster of Protection Cluster Ukraine activated seven Sub-National Hubs (in Vinnytsia, Dnipro, Kyiv, Poltava, Uzhhorod, Lviv and Odesa) that covered 21 oblasts of Ukraine, excluding occupied territories or areas of active combat. At the same time, many research participants mentioned a lack of information regarding benefits and other kinds of state support for IDPs. Similarly, the GBV Sub-Cluster has been active across different regions in Poland, facilitating the coordination of different stakeholders, capacity building, and operational updates.^{xvi}

Interactions between violence, displacement, humanitarian and migration systems

Six interactions between violence, displacement, mobility, and humanitarian and migration systems were identified and are outlined next.

Limited safeguarding measures in the refugee journey

In the early stages of the emergency, volunteers and ad hoc grassroots organisations coordinated informal transportation arrangements to process the massive influx of refugees in Poland. Safeguarding measures were lacking (in both Ukraine and Poland), intensifying the anxiety and feelings of disorientation of already traumatised individuals over their safety. Services were offered without systemic coordination:

> "In Medyka [a border crossing town], there is simply a festival of volunteerism. It is a wild town where the messages of organizations and volunteers are mixed...the official messages are lost or there are none at all. So there, you walk

down the corridor among volunteer tents, where everyone offers food, it is just.... well, it looks like Woodstock [music] festival, not a place where a refugee has the right to feel safe, to see...what is going to happen to them next." (Zuzanna, National NGO coordinator, June 2022, Poland)

Men offering private transportation and/or live-in opportunities for refugees explicitly told volunteers at reception points at the Polish borders that they sought to help young childless Ukrainian women. Several women were raped and abused during informal transportation arrangements in Poland, while some people went missing in the areas not controlled by authorities in Ukraine. A registration system, introduced later in Poland, to verify documents and criminal records of national and international drivers transporting refugees (coordinated by scouts, firefighters, and the Territorial Defense Army) lacked in efficiency of safeguarding checks and monitoring of safe arrivals to declared destinations. Some drivers registered with false data and were untraceable after abusing refugee women. Similarly, the registration of volunteers assisting at reception points did not involve screening in both countries. There were also risks of abuse and exploitation by persons claiming to be humanitarians and wearing high visibility vests, but not affiliated with any organisation:

> "...anyone can register for volunteering simply by coming, showing their ID. And nothing stands in the way of a person who is in charge of recruiting a person for some transport. They can do it in a discreet way and not look suspicious at all...people who organise volunteering, for example at a railway station, don't realise this, but by dressing volunteers in reflective waistcoats they give them a mandate for refugees to trust them." (Anna, National NGO coordinator, June 2022, Poland)

Enforcing dependency and competition over resources in Poland

To survive, some refugee women survivors of domestic violence rejoined their abusive partners, who had earlier migrated to Poland for work, and were re-victimised by repeated abuse.

> "All these events [war-related] made me leave home and quit my job. That was an act of violence itself, but when I faced my husband's aggression, I just couldn't tolerate it anymore." (Mila, May 2022, Poland)

Some women who faced abusive partners felt guilty about reporting someone who otherwise helped them. In the case of domestic violence, the application of 'blue card' procedures in Poland remained ambiguous concerning Ukrainian nationals. Also, some women became financially dependent on former abusive partners who remained in Ukraine due to delayed receipt of social benefits in Poland. Some men demanded their spouse to return home.

A few women registered with the Social Insurance Institution (ZUS) with the help of men who had their phone number and could access their email account. This could transform into a form of control over women's benefits and mobility. Women in smaller towns could not access employment and remained dependent on aid. Language barriers and lack of childcare also limited work opportunities and self-reliance. Lack of purpose and feelings of dependency on others often exacerbated existing traumas and psychological conditions which in turn increased vulnerability to exploitation.

Trauma-insensitive uncoordinated refugee responses

The poorly coordinated response failed to account for psychological conditions arising from forced displacement and family separation. In particular, physical exhaustion and lengthy journeys exacerbated war trauma, pushing many to take risks in search of safety and compounding anxiety and trauma. Excessive information was shared with refugees in their distressed and disoriented state. Unable to absorb new information, many respondents were left unaware of the risks, their rights, and where to seek help in transit:

> "Even myself, coming into the reception centre, knowing a lot of the things that are happening, I was a bit overwhelmed with the amount of information. Thousands of posters, thousands of leaflets, and thousands of things to do. Because I have to register here. I have to go there. I have to do this...And this is the information that, you know, is not going

to be needed necessarily on the first day of arrival..." (Katarzyna, National NGO coordinator, Poland, May 2022, Poland)

Information campaigns about human trafficking and exploitation were often presented in ways that did not effectively communicate messages to refugees:

> "Information campaigns warning of these dangers are constructed in such a way that refugee women do not identify with these problems. A typical poster warning of human trafficking features a child or a woman with someone covering her face, against a black background. It looks horrifying. It looks like a horror movie. It doesn't look like something that could happen to you tomorrow." (Marzena, Grassroots initiative founder, June 2022, Poland)

Labour exploitation and discrimination of IDPs in Ukraine

Some research participants in Ukraine continued their jobs online. However, most became unemployed, as indicated in our interviews conducted between one to three months after flight. Exploitation was common. For example, a 20-year-old woman IDP in Western Ukraine mentioned working in two chain restaurants for two weeks each, on probation without payment. Some considered labour exploitation as discrimination against IDPs.

> "...as far as I understand, just displaced people are being used like that. And recently, my boyfriend was interviewed, and they told him: for three weeks, you have a probation period, we pay you a small fortune, but you work from 6 in the morning until 6 in the evening every day. And they promised him a salary of 3,000 a month. Just because you have nowhere else to go. That amount is not even

enough to rent a room in a town where informants settled." (Yaryna, May 2022, Ukraine)

Some IDPs explained that employers did not want to employ them due to their temporary status in the city, especially when their residence was declared in other cities. Sex work was reported, too. For example, after advertising her cleaning services, a young female participant started receiving messages from men requesting the inclusion of sex services. One participant said:

> "You clean, and after you have cleaned, you perform the duties of a woman. (...) You're welcome, but you must be dressed as a real woman." (Zoya, May 2022, Ukraine)

Another young participant disclosed how, during an ordinary job interview, she and her partner were offered work in the pornography industry. Similar offers were made to another participant in a public setting.

Lack of privacy in accommodation and safeguarding risks with private hosts

IDPs in Ukraine faced a lack of shelters and landlords easily manipulated rent costs, providing minimal living conditions with extreme increases in rental fees. Some locations were difficult to live in without basic amenities and safety checks:

> "We came to Vynnyky [a town in Lviv area] and rented a house for two. When we came, there were also people from Kramatorsk who occupied one room. But when the landlady came, she said, 'I didn't expect there to be so many of you'. We agreed on the price – 6000 Hrivna [approx. 166 Euro] for the house and when she came, she says, 'no, now it's 7000 – there are too many of you here'. No washing machine, the fridge doesn't work, sewage is not functioning, water is rotten. Isn't it violence?" (Vera, May 2022, Kramatorsk, displaced from the occupied part of Donetsk oblast in 2014, Ukraine).

Many lived in overcrowded accommodation with other people in distress, which reinforced their trauma. For example, one woman who lived in a hostel with eight people in one room described:

> "This situation affects your mental condition when you come together with people like you...through similar circumstances, not the locals. And we are enclosed in the same room, people who share the same grievance, who locked up their houses and left. Everyone always has a family member who calls from there and everyone feels obliged to share with other residents. This makes your worries three times worse." (Nyura, May 2022, IDP, Chernihiv oblast, Ukraine)

Finding a private space was essential for survival and healing. Though often impossible to create separate rooms, some measures were undertaken in shelters to mitigate loud noises and possible conflict. For instance, a shelter in Chernivtsi established some rules, such as prohibiting the use of alcohol indoors to minimise risks of violence. Yet, safeguarding risks were prevalent among IDPs across Ukraine. For example, one woman mentioned accommodation offers from men targeting women of specific age groups, while another reported being offered accommodation in Lviv in exchange for sex:

> "...He said that he had a room to rent. I got to know later that he actually had no room, I was supposed to live with him. He wanted me to have sex with him to let me live with him in his flat." (Tanya, June 2022, Ukraine)

In Poland, the lack of centralised coordination and insufficient background checks of private hosts and housing increased refugees' anxiety about potential harm. Some were concerned about their safety living in the homes of unknown people.

> "...But I had some kind of inner fear, little did I know what kind of family I would fall into...If it was centralised and landlords had some kind of registration, I'd feel safer." (Mila, May 2022, Poland)

Inadequate/unstable temporary accommodation with a lack of personal space compounded trauma and increased victimisation risks. For example, accommodation in one room shared with children and relatives or other families led to intergenerational and inter-family conflicts. Some refugee women were verbally and physically attacked in overcrowded reception centres and private homes by other refugee women residents due to conflict over resources. Others reported incidents of physical and emotional violence by hosts:

> "But over time, it turned out that the girl who sheltered us has mental problems. I no longer knew whether it made sense for me to come here or whether it would be better to stay in Ukraine...She had breakdowns in our presence...I didn't know the language, I didn't know where to turn... She threw objects, screamed, and so on. My child begged me to go home, he was very scared." (Yana, June 2022, Poland)

When accommodated by private hosts, refugee women often lived with constant fear, stress, and pressure. Feeling uncomfortable, like an inconvenience, and monitored for what they do and eat, they worried about doing something wrong, e.g. occupying a bathroom when others needed it. Some felt a sense of obligation towards their hosts:

> "There is absolutely no personal space. Even, you know, to cry...here you live with strangers, with strangers...I just can't even go to the shower, not cry, because there is always a queue there. Constantly. Then the children run, then someone else. Everybody is very interested in what you're doing there. What you eat there, what you have on your table..." (Yulia, June 2022, Poland)

Some respondents could not cover housing fees without jobs or by working part-time. The ending of payments from the government for private hosts meant some refugees were left to cover accommodation costs alone. Due to unstable and unaffordable housing, some refugee women returned to Ukraine or became dependent on their abusive partners. Women with several children and elderly dependents often struggled to find adequate housing and continued living in reception centres or refugee camps, e.g. in schools. In addition, some housing was unsuitable for hosting refugees with disabilities and special needs. Refugee centres provided by municipalities, e.g. stadiums and conference centres, lacked hygiene facilities. Some service providers reported potential GBV incidents in 'refugee camps' based on clients requesting abortion pills.

Limited protection sensitivities and capacities of multiple stakeholders

Given the high volume of newly arrived displaced persons in a very short period, public institutions had limited capacity to mainstream the protection and safeguarding of refugee women and children in Poland. Border control personnel were described as unprepared to respond to refugees' needs with gender sensitivity. Heteropatriarchal social norms (i.e. victim-blaming culture) shaped the way refugees were approached by people in authority. Public services (including social workers and personnel at reception points), health personnel, and volunteers providing help to refugees required training to improve the quality of support offered to Ukrainian women and adopt a survivor-centered approach. Services to address the specialist needs of refugee women were short in supply and mainstream and sexual violence services lacked the expertise to work with refugees. The lack of reproductive health solutions for victims of violence led, in some cases, to the loss of life:

"...the Russians raped a girl. She then crossed the border, and it turned out that she [was] pregnant. And she doesn't want a child. And in Poland, abortion is banned...she goes straight to suicide, because it's a big trauma for her." (Olena, May 2022, Poland)

Mental health support funded by the National Health Fund in Poland was difficult to access due to long waiting time and low quality. Migrant organisations lacked funding to increase outreach to potential survivors with gender-appropriate interpretation. Those in Ukraine mentioned mental health services were inadequate and stressed the importance of free and high-quality psychological support for all war-affected people.

> "I have tried to go to these cost-free doctors we are offered, but unfortunately, they are like... 'drink some chamomile tea...'." (Ruslana, June 2022, IDP from Kramatorsk in Western Ukraine)

Moreover, unaccompanied minors (persons below 18) in Poland were subjected to obligatory guardianship procedures described as risky due to speedy guardian verification procedures. Some minors were approached by older and unknown persons with offers to formalise the guardianship requirement, raising safeguarding concerns. Sometimes older children looked after younger ones. In some instances, children were separated from friends and extended family.

Concluding, war, violence, displacement, humanitarian and migration interactions underpinned the vulnerabilities of displaced people in multiple ways, generating gendered risks of violence, trafficking and exploitation at different stages of displacement within Ukraine and in Poland. Such risks were contextual and specific to displaced people's socio-economic circumstances and operated at different interpersonal, community and structural levels.

Recommendations

Despite the kindness and solidarity the Polish and Ukrainian people offered to refugees and IDPs, the scale of the feminised displacement emergency requires further systemic solutions to strengthen the protection of forcibly displaced populations. The SEREDA CEE Project advocates for mainstreaming protection with refugee, gender and trauma-sensitivity in the humanitarian, immigration, and asylum systems through better coordination across different levels and sectors to help mitigate violence and the exploitation of forced migrants.

Recommendations were discussed at the consultative workshop with multiple stakeholders co-hosted by the University of Warsaw's Centre for Gender and Women's Studies and Centre of Migration Research on 26th July 2022 in Warsaw. The project team consulted representatives of local and national NGOs and international organisations who contributed to developing recommendations proposed in this report. While the project could not organise similar consultation in Ukraine, the recommendations have been consulted with Convictus, a Ukrainian NGO.

Participants in Poland recommended changing legislation to help refugees access housing, work, medical and psychological assistance, as well as ease of access to information on their rights. Likewise, IDPs in Ukraine suggested prioritising housing, employment, and childcare to tackle GBV and the exploitation of IDPs. Housing for IDPs requires urgent attention as an outstanding issue in Ukraine for the last eight years.

A range of sector-based recommendations for specific stakeholders are presented in Table 3.

Table 3 Recommendations by sector and stakeholder

	Ukraine	Poland
To the central government, regional and city authorities		
Develop systemic solutions to mainstream the protection of refugees from violence and regardless of nationality or residency:	d exploitati	on,
Verification of helpers: Establish an adequate and user-friendly registration, verification, and monitoring system to strengthen the protection of refugees nationally and internationally. Run background checks of volunteer drivers, private hosts, and helpers at reception points, and monitor and coordinate an exchange of information between relevant stakeholders.	V	V
Tracking of transportation: Develop solutions for safeguarding and tracking refugee journeys with volunteer drivers internationally and nationally, from pick up to drop off.	V	V
Reception centres and shelters: Reception points receiving refugees to be sensitised on how to support persons who experienced violence and trauma.	V	V
Coordination of private hosting and supporting private hosts : Centralise coordination of private hosts offering accommodations to refugees and IDPs and introduce safeguarding measures to mitigate violence and exploitation. Continue financial help offered to host families in Poland and Ukraine to mitigate risks of exploitation of refugees hosted and introduce safeguarding measures to mitigate protection risks.	V	V
Systemic housing solutions: Develop longer-term solutions for accommodation and ensure women are not housed with male private hosts they do not know. Regulate rental fees and encourage private landlords to rent to women with children who are on minimal pay, to enable women to rent privately and avoid dependency on private hosts. Subsidise rental costs for most vulnerable groups. Avoid mass-accommodation arrangements due to inclusion and protection concerns.	V	V

Monitor legal guardians: Ensure safeguarding of refugee minors entrusted in care of legal guardians.	V	V
Language: Ensure language classes are accessible for refugees in both urban and rural areas.		V
Share information during PESEL registration: Distribute information about support		V
available (public services, welfare/humanitarian organisations, hotlines) during the		
registration process for personal identification number (PESEL).		
Capacity building: Support workers at crisis intervention centres to support refugee	V	V
survivors of gender-based violence and exploitation.		
Strengthen sectoral capacities to prevent and respond to violence and exploitation of r	efugees:	
Mental health support and trauma-informed support services: Provide free voluntary mental health screening for anxiety and depression and refer those with severe issues to mental health professionals trained to work with refugee populations (see	V	V
recommendations on health). Ensure service providers are trained on war trauma and provide trauma-sensitive		
services for refugees and IDPs to reduce risks of re-traumatising victims.		
Fund NGOs, grassroots and bottom-up initiatives: Provide funding for flexible services	V	V
for mobile and newly arrived populations and support the development of protection		
programmes and infrastructure to cater for the specific needs of refugees.	ļ	
Anti-trafficking measures: Develop a comprehensive counter-trafficking response in	V	V
partnership with the authorities, international organisations and specialist NGOs, and		
adapt existing anti-trafficking programmes to war conditions and mass displacement.		
Improve humanitarian coordination: Ensure central, regional and city authorities,	V	V
NGOs, specialist organisations and the private sector strengthen collaboration for		
effective distribution of resources, avoidance of duplication, and to ensure aid reaches		
the most vulnerable according to their needs.	V	V
Screen volunteers: Develop safeguarding mechanisms for informal aid provision to protect displaced populations from exploitation risks.	v	v
Awareness of rights and support: Undertake initiatives to raise awareness of survivors	V	V
about where support services are available and on their rights to protection and	•	•
assistance.		
'Violence against women' sector: Provide training for staff of social assistance centres,	V	V
social insurance institutions, and police and border services on violence and		
exploitation risks and procedures, and the specific mental health and socio-economic		
needs of refugees. Develop referral pathways for refugee survivors of violence and		
exploitation. Develop safe spaces for women and people with disabilities, and relevant		
services specific to refugees' needs. Raise awareness among refugees about rape in war		
as a war crime to help survivors access their rights. Ensure policy developments are		
survivor-centred, gender- and trauma-sensitive.		
Extend childcare and kindergarten: Support refugees and internally displaced families	V	V
to register children in pre-school childcare and kindergartens to enable parents to work		
outside of home.	<u> </u>	
Support self-help groups: Enable registration of grassroots-based self-help groups	V	V
To the justice system		14
Access to justice: Ensure the criminal code enables all victims, irrespective of		V
nationality, to access justice and effective prosecution. Ensure fair treatment of victims		
when reporting a crime and during court proceedings. Sensitize law enforcement and justice system about refugee and IDP victims' unfamiliarity with procedures and legal		
language. Include community-based methods in law enforcement and justice system.		
Training: Provide anti-GBV and anti-trafficking training for legal and justice system.	V	V
(including police).	v	v
	<u> </u>	

.egal advice: Provide legal advice free of charge to refugee and IDPs victims. Ensure egal advice and information is provided in different languages.	V	V
Fo employers and private sector		
Employ refugees: Help refugees and IDPs, regardless of nationality, access employment, including skills development programmes and internships, to support wheir self-reliance and integration in places of resettlement.	V	V
To the National Health Fund (NFZ), hospitals and health services		
 Access to health: Support all refugees of different ages to access health services and ong-term mental health support in urban and rural areas: Ensure specialist support with professional interpretation is available to refugees Support victims to access sexual and reproductive health services, e.g. emergency contraception and post-exposure prophylaxis to prevent sexually transmitted infections Inform refugees about their right to request an interpreter of a preferred gender Ensure female doctors and psychologists are available to assist survivors Extend the supply of group sessions for refugee survivors of war and violence Reproductive health: Ensure reproductive health information, such as contraception and sex education, is available to refugees. 		V
Access to pregnancy termination for GBV victims: Ensure access to abortion and all eproductive health services to refugee survivors of GBV.		
GBV awareness of staff: Sensitise staff on refugee and IDPs mental health and GBV experiences and the importance of having female staff available.	V	V
To NGOs		
Sensitise refugees on GBV and their rights: Extend sensitisation about violence, rights to assistance and protection among vulnerable groups on both victimisation and perpetration.	V	V
Extend access to specialist organisations: Develop links with specialist organisations and establish referral procedures.	V	V
.egal support: Support refugees to register and legalise their stay in Poland and access support services.		V
Training for staff: Support volunteers, workers at reception points and social workers prough training on how to support refugee and IDP populations who experienced violence.	V	V
/olunteer and staff care: Offer psychological support to all support staff and volunteers o prevent and recover from burnout.	V	V
Advocacy: Strengthen advocacy for better protection mechanisms for refugees, and provide holistic support to survivors.	V	V
To faith-based organisations		
Refugee response: Develop institutional solutions for refugees and support their psychosocial and spiritual needs regardless of faith. Avoid risks of proselytisation.	V	V
To campaigners and advocacy		
Sensitisation campaign: Develop a national campaign for protecting refugees in Poland and to raise awareness of the risks of gender-based violence, crime, and exploitation and where to seek support. Counter the disinformation: Counter initiatives which present refugees as a burden to the public budget, inciting conflict between host and refugee communities.		V
nternational advocacy and utilise diplomatic pathways: Build international advocacy efforts to extend pressure on the Polish government to help develop systemic solutions for refugees in Poland.		

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^{II}UNHCR (n.d.) *Internally Displaced Persons* (IDP) – UNHCR Ukraine. https://www.unhcr.org/ua/en/internally-displaced-persons. IIIUNHCR (2022) *Ukraine Refugee Situation*: https://data.unhcr.org/en/situations/ukraine.

^{iv}Multiple crossings per person may be included. Also, over 5 million border crossings from Poland to Ukraine have been recorded. ^vUrząd do Spraw Cudzoziemców (2022) Law of 12 March 2022 on Assistance to Citizens of Ukraine in Connection with Armed Conflict

on the Territory of that Country. https://www.gov.pl/attachment/fd791ffb-c02b-4e99-b710-e8ed3a9a821b.

^{vi}Kuznetsova, I., Mikheieva, O., Catling, J., Round, J., Babenko, S. (2019) *The Mental Health of IDPs and the general population in Ukraine*. https://zenodo.org/record/2585564#.YtahfnbMJD9.

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^{xi}UN (2022) *Reports of sexual violence in Ukraine rising fast, Security Council hears*. https://news.un.org/en/story/2022/06/1119832. ^{xii}Freedman, J. (2016) Sexual and gender-based violence against refugee women: a hidden aspect of the refugee "crisis." *Reproductive Health Matters*. doi:10.1016/j.rhm.2016.05.003.

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^{xv}SExual and gender-based violence in the REfugee crisis: from Departure to Arrival (SEREDA) Central and Eastern Europe (CEE). https://www.birmingham.ac.uk/research/superdiversity-institute/sereda/index.aspx.

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