

.....

LEVERAGING CASH ASSISTANCE IN GBV CASE MANAGEMENT AS A TOOL **IN MOLDOVA'S** **UKRAINIAN REFUGEE** **RESPONSE**

.....



EXECUTIVE SUMMARY



In 2023, as part of the Ukrainian refugee response in Moldova, the United Nations Population Fund (UNFPA) conducted a pilot to integrate cash assistance into gender-based violence (GBV) case management. Targeting GBV survivors and those at risk, including Ukrainian refugees and vulnerable Moldovans, the program aimed to mitigate GBV risks and enhance GBV response by addressing economic barriers that hinder survivors from escaping abusive situations and accessing life-saving GBV services. Two modalities were utilized: one-off emergency cash assistance and recurring cash assistance for up to three months. The pilot, conducted from January to December 2023, benefited 224 individuals. Results were shared in a round-table discussion involving the Ministry of Labour and Social Protection, civil society organizations, and UN agencies to advocate for continued use of cash assistance in GBV case management.



Key findings

Post-distribution monitoring (PDM) survey findings showed that the integration of cash within GBV case management had a positive impact on improving safety, mitigating further risk of GBV and enhancing access to life-saving GBV services.

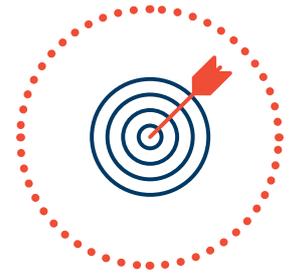
- 98% of respondents reported that the cash assistance helped them access necessary services for themselves or their children to recover from the disclosed incident of violence.
- 87% of respondents reported that the cash assistance significantly contributed to their improved physical and mental wellbeing.
- 100% of respondents reported that the received amount was adequate or somewhat adequate to improve their safety.



Key recommendations

- To ensure a smooth transition for survivors and individuals at risk of GBV and ensure their long-term needs are met after cash assistance ends, it is crucial to identify clear exit strategy options, including referrals to other stakeholders for support related to livelihoods, social protection, and economic inclusion.
- A well-functioning GBV case management system is essential for the safe and effective use of cash assistance within the case management process. As such, monitoring caseworker-to-survivor ratios and supervision systems is necessary to ensure that the GBV case management system has sufficient capacity to use cash assistance as a tool.

BACKGROUND AND OBJECTIVE



The invasion of Ukraine in February 2022 led to immense displacement in Europe, particularly affecting Ukraine's neighboring countries. About 1 million Ukrainian refugees have fled to the Republic of Moldova, with approximately 110,000 still remaining in the country at the time of this publication, the majority of which reside outside of refugee accommodation centers. The displacement has disproportionately affected women and girls, who face significant GBV risks in Ukraine, during transit, and in Moldova.¹

Prior to the invasion, evidence indicated high levels of GBV, with two out of three female respondents experiencing GBV since age 15 even prior to the onset of the conflict.² A 2022 GBV Safety Audit in Moldova revealed ongoing risks for women and girls during transit and in the host country, including sexual violence, intimate partner violence, and sexual exploitation and abuse. Factors contributing to these risks include unsafe conditions, separation from support networks, inability to meet basic needs, and limited access to protection.³

A significant portion of the refugees in Moldova are adolescent girls, elderly women, Roma women, and women with disabilities, all identified as at-risk groups vulnerable to GBV. With this, Moldovan women and girls also face GBV risks, with research from 2018 indicating that 26.8% of women aged 15–65 in the country had experienced physical, sexual, or psychological violence from intimate partners in the prior year.⁴ These risks are partly attributed to entrenched patriarchal norms and gender stereotypes, where traditional roles contribute to increased vulnerability to GBV.

In light of this context, UNFPA, in collaboration with implementing partner Artemida, provides GBV case management services to refugees and host community members in Moldova in order to ensure the availability of quality multisectoral response to GBV through which both immediate and long-term needs are addressed.

Crucially, UNFPA has identified financial barriers to accessing life-saving GBV services as a major concern for GBV survivors and those at risk enrolled in case management in Moldova. While various national social protection schemes exist in the country to assist specific groups of refugees and vulnerable host community members facing economic hardship or social vulnerabilities, their responsiveness and inclusivity in providing cash assistance tailored to GBV survivors vary. Although the schemes address general needs, they lack specialized protocols and eligibility criteria for women affected by GBV who are in need of urgent financial support, potentially hindering their ability to escape abusive situations, access life-saving medical care, or rebuild their lives.



The only person I considered close to me in Moldova was my neighbor. I went to him with a request to lend me some money or food so I could feed my children. Then I got the biggest shock I'd had since the war when he proposed to have sex – that's the only way he would give me money.

Sofia,* a Ukrainian refugee who received cash assistance as part of the GBV case management process.

* Name changed

1 [UNHCR Operational Data Portal - Ukraine Refugee Situation](#)

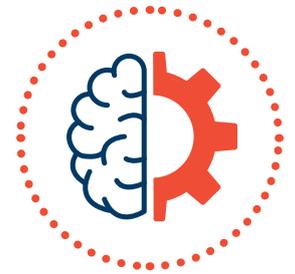
2 [Well-being and safety of women. Moldova results report. OSCE-led survey on VAW \(2019\)](#)

3 [2022 GBV Safety Audit](#)

4 [Well-being and safety of women. Moldova results report. OSCE-led survey on VAW \(2019\)](#)

To address this gap, UNFPA introduced unconditional and unrestricted cash assistance in GBV case management in Moldova as a complementary component to national social protection schemes. This intervention aimed to mitigate GBV risks faced by women and other vulnerable groups in case management, enhance GBV response by addressing economic barriers, and facilitate the recovery and empowerment of survivors.

METHODS



Eligibility, targeting and prioritization

Ukrainian refugees, vulnerable Moldovan GBV survivors, and individuals at risk of GBV enrolled in case management were eligible for cash assistance if they required financial support to achieve goals outlined in their case action plans. This included those facing specific GBV risks compounded by financial constraints hindering access to urgent GBV-related services such as medical, legal, shelter, as well as immediate essential needs.

Before integrating cash assistance into GBV case management, an analysis was conducted to ensure alignment of the implementing partner's procedures with the [Interagency GBV Case Management Guidelines](#). A response analysis was also carried out to determine situations in which cash would be a suitable intervention based on context-specific analysis of GBV cases in Moldova. A subsequent Response Framework was established to aid caseworkers in deciding whether cash will be an appropriate form of assistance for the survivor, outlining criteria for determining when cash assistance is appropriate for addressing the needs of women and girls affected by GBV.

The Response Framework delineated the following scenarios of GBV where cash assistance would be deemed an appropriate course of action:

- Cash assistance would enable the survivor to leave a living situation made unsafe by intimate partner violence, domestic violence, harassment, or other violence related to the living arrangement. The cash assistance could help to support the safety of her and her children by enabling relocation to a safe place, covering basic needs, and preventing sexual exploitation by facilitating withdrawal from the perpetrator or threats, including cases where landlords demand sex for accommodation.
- Cash assistance would enable survivors who have already fled unsafe living situations risking their safety and that of their children and who lack financial resources to secure accommodation, meet basic needs, and prevent potential returns to unsafe environments due to financial constraints.
- Cash assistance would ensure access to essential fee-based GBV services such as health, legal, shelter, and others, to address and mitigate serious harm resulting from GBV incidents or risks.



- Cash assistance would help survivors with limited economic resources due to workplace violence or harassment meet basic needs by preventing them from returning to unsafe work environments and providing time to find new employment.

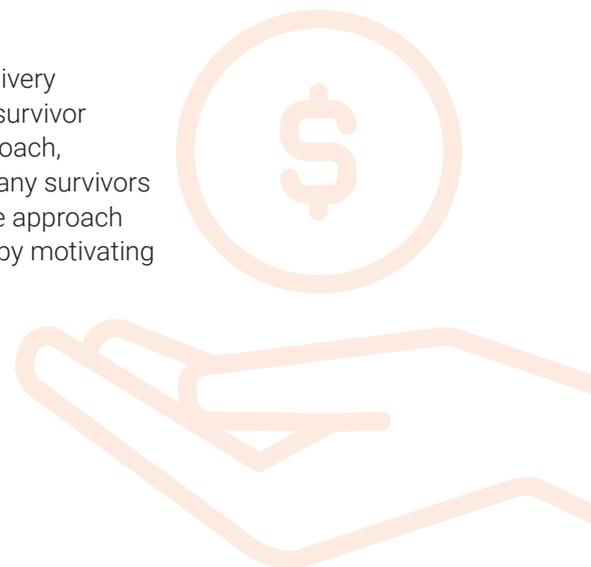
It is important to note that this Response Framework allied for flexibility in response as needed, recognizing the individuality of each GBV case. The key analytical question guiding decisions was whether cash assistance would help reduce GBV risk or aid in the recovery of survivors, considering the specific situation and case characteristics identified.



Survivors of violence can find help through UNFPA Mobile Safe Spaces, which bring reproductive health and GBV prevention and response services, as well as referral to other specialized services, to Moldova's hardest to reach regions.

Delivery mechanism

Cash transfers to bank accounts were deemed the most appropriate delivery mechanism. This approach allows for significant discretion, prioritizing survivor confidentiality and privacy. With this, it is an efficient disbursement approach, especially for survivors with existing personal bank accounts. For the many survivors who did not have bank accounts when beginning case management, the approach contributed to financial inclusion and promoted financial independence by motivating them to open bank accounts.



Transfer amount, frequency, and conditionality

Unrestricted and unconditional cash assistance was chosen for its flexibility and responsiveness, aligning with UNFPA standards outlined in its [Guidance: How to Design and Set Up Cash Assistance in GBV Case Management](#). Unrestricted and unconditional cash assistance helps to ensure the agency and empowerment of GBV survivors by enabling quick disbursement times and by providing the survivor with significant flexibility.

Cash assistance was provided either as recurrent payments for up to three months or as a one-off emergency payment. The amount transferred was determined based on the individual's needs as outlined in their case plan. Transfers range from a minimum of 200 MDL (approximately 11.36 USD) to cover transportation costs to services, to a maximum of 18,500 MDL (approximately 1,051 USD) disbursed in up to three installments to cover service access and survivor relocation. The transfer amount was calculated based on the specific needs and aligned with the consumption basket determined by the Moldovan National Bureau of Statistics. Transfer amounts were adjusted based on ongoing monitoring of the general inflation rates as well as based on beneficiary feedback.

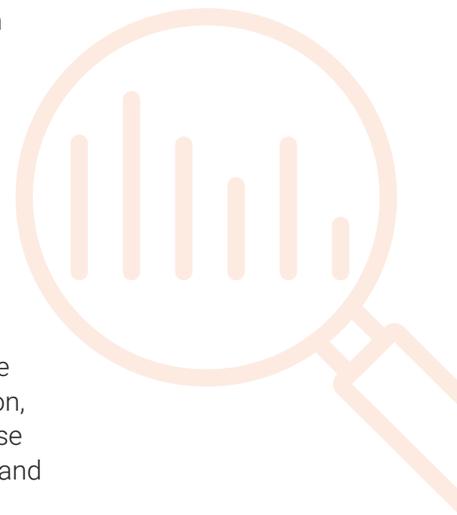
Monitoring

A monitoring framework was established to ensure regular and systematic data collection and analysis of the integration of cash within GBV case management. The purpose was to collect feedback in order to improve cash assistance implementation, track its risks and benefits, and enhance protection outcomes for survivors and those at risk of GBV. The framework utilized various tools and involved only case workers and managers to ensure survivor confidentiality, safety, and wellbeing.

Output monitoring tracked program outreach, including the number of individuals reached and the total value of cash assistance transferred to individuals. Disaggregated data on gender, age, disability, displacement status, dependents, installments, and delivery mechanism enabled trend analysis.

Process monitoring, through PDM surveys and a complaint and feedback mechanism, aimed to capture any factors affecting the quality, safety, and access to cash assistance. PDM surveys were administered to capture whether the survivors were able to safely access the cash assistance and if they deemed the duration, timing, and amount of the cash assistance to be adequate to improve their safety. PDM surveys were administered by different case workers than the survivor's primary case workers in order to provide a neutral space for feedback and possible complaints. Data collected from PDMs was then anonymized and triangulated with data from the complaint and feedback mechanism. Field visits and regular meetings with the implementing partner complemented these tools.

Outcome monitoring, mainly through PDMs, assessed the impact of cash assistance on physical and mental wellbeing, household relations, and GBV service access. Regular analysis of disaggregated data identified factors hindering positive outcomes.



RESULTS



In 2023, 224 individuals received cash assistance as part of their GBV case management plan. Of these, 116 (52%) received recurrent cash assistance, with 67% of these individuals receiving three installments. Additionally, 108 individuals received one-off cash assistance, with 32% of these using it to access specialized health services related to GBV. PDM surveys were conducted with 208 cash recipients three to five weeks after the last distribution. Monitoring showed that:

- 98% of respondents stated that the cash assistance helped them access necessary services for themselves or their children to recover from a violent incident.
- 87% of respondents reported that the cash assistance significantly contributed to improved physical and mental wellbeing.
- 100% of respondents asserted that the received amount was adequate (75% of respondents) or somewhat adequate (25% of respondents) to improve their safety.
- 65% of cash recipients were enrolled in GBV case management after being referred to the service by another actor. This was due to the fact that the implementing partner's GBV services, including case management, were widely recognized and referred to by other actors because of their flexible service delivery and mobile outreach. This approach helps overcome barriers that limit women and girls' access to essential GBV services.
- The provision of cash assistance was complemented by direct provision of and referrals to: medical services (received by 64% of cash recipients), psychosocial services (61%), police or security services (8%), legal services (8%), and/or safe house services (4%).
- Only 12% of respondents reported that they will be able to prevent further exposure to harm when the cash assistance ends. This could be attributed to the absence of sufficient exit strategy options for beneficiaries, emphasizing the need for robust referral pathways to other assistance for a smooth transition after the cash assistance ends.

The pilot results were presented in a round-table with the Moldovan Ministry of Labour and Social Protection, civil society organizations, and UN agencies. The aim was to explore further opportunities for integrating cash assistance into GBV case management. The Ministry expressed interest in the intervention and announced their intention to study other countries' use of cash assistance in GBV case management to assess its feasibility in government-run and government-sponsored services.

The Ministry also stressed the importance of having a strong GBV case management system for the integration of cash assistance. Ultimately, the success of the pilot was instrumental in helping UNFPA to advocate for the integration of cash assistance into national protection schemes and for structuring GBV case management processes in a way that is conducive to the safe integration of cash, thus enhancing government-led responses to GBV.

After losing her home in a fire caused by her physically abusive husband, Kateryna* received cash assistance as part of her GBV case action plan. She remarked:



I was left on the streets, with a child, without clothes or basic necessities, and no source of income. This help was life-saving for me – I bought clothes for myself and my child, shoes, food, and building materials to repair an outdoor kitchen so that we can live there in the winter. Now I can focus on providing my children with a better life.

* Name changed

LEARNING AND RECOMMENDATIONS

- Cash assistance had a positive impact on protection outcomes, including preventing and mitigating further GBV risk and ensuring access to life-saving GBV services.
- An exit strategy, including referrals to additional assistance, is crucial to meet survivors' long-term needs beyond the short-term provision of cash assistance. Exit strategies should be developed by collaborating with key stakeholders involved in livelihood opportunities, economic inclusion, and long-term social protection.
- To integrate cash assistance into GBV case management, a well-functioning case management system is essential. This requires monitoring caseworker-to-survivor ratios and supervision systems to ensure sufficient capacity. High caseloads can hinder case workers, so continuous monitoring is needed to ensure enough capacity for cash assistance as a tool within the case management process.



.....

**Delivering a world where every pregnancy is
wanted, every childbirth is safe and every young
person's potential is fulfilled**

.....

**UNFPA Humanitarian
Response Division and
UNFPA Moldova**

hrd-cva@unfpa.org
www.moldova.unfpa.org

March 2024