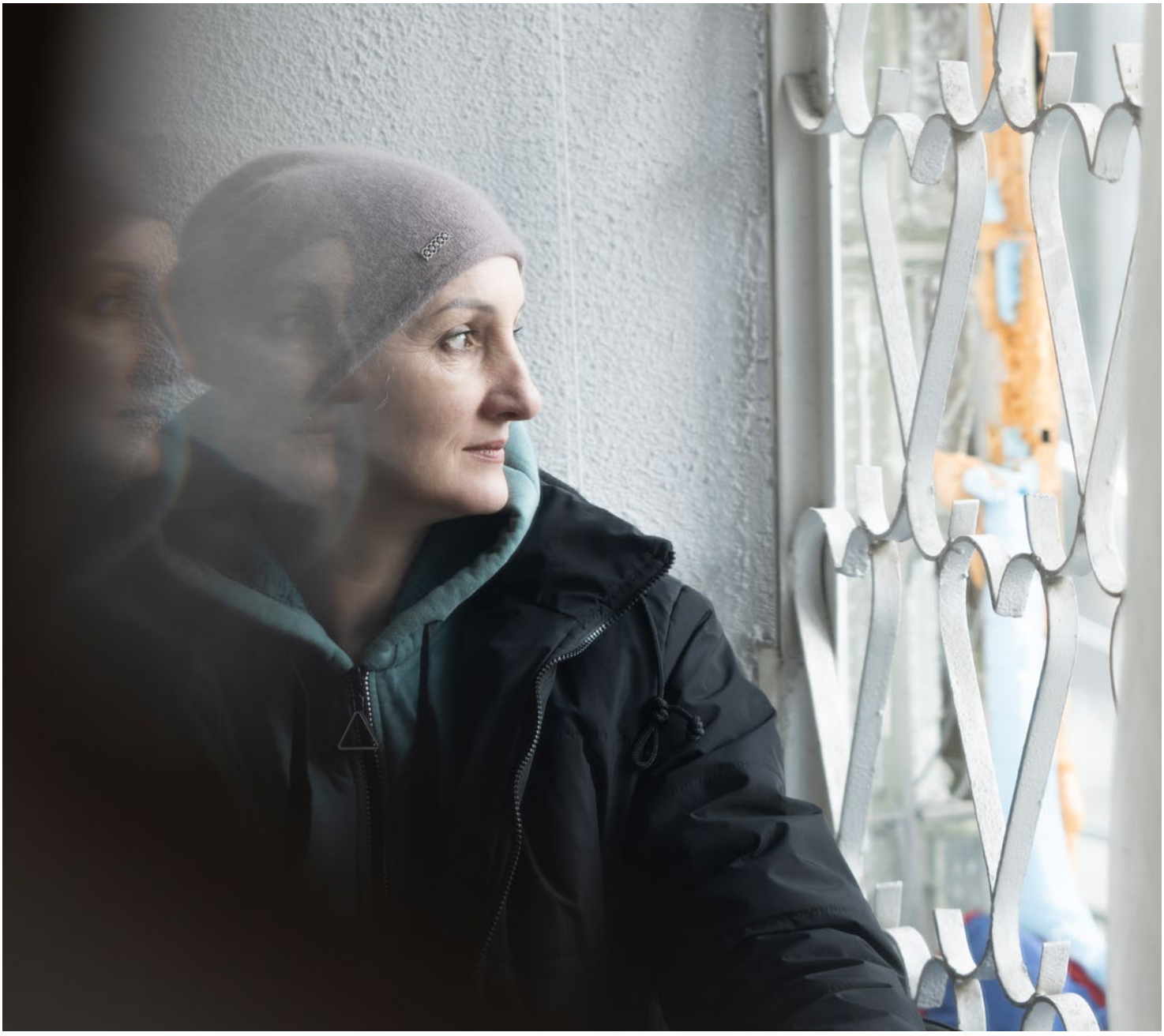
Assessment Of Opportunities, Structures And Limitations to Community Participation & Accountability in NRC Programmes in the Ukraine Response in Moldova And Ukraine

Final Report



NRC NORWEGIAN REFUGEE COUNCIL

scruples research

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Cover photo: When the fighting came closer and others evacuated, Olga chose to stay, mainly because her mother refused to leave and Olga did not want to leave her behind.

Photo: Ingebjørg Kårstad/NRC

Norway

Scruples Reserach

For the Norwegian Refugee Council

Assessment Of Opportunities, Structures And Limitations to Community Participation & Accountability in NRC Programmes in the Ukraine Response in Moldova And Ukraine

September 05, 2025

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Acronyms and Abbreviations

BOND	British Overseas NGOs for Development
CAWI	Computer-Assisted Web Interviewing
CEA	Community Engagement and Accountability
CEERO	Central and Eastern Europe Regional Office
CFM	Community Feedback Mechanism
CHS	Core Humanitarian Standard
CSO	Civil Society Organisations
DLC	Digital Learning Centre
FBI	Federal Bureau of Investigation
FGD	Focus Group Discussions
AGD	Age, Gender and Diversity
GDPR	General Data Protection Regulation
IDPs	Internally Displaced Persons
IFRC	International Federation of Red Cross and Red Crescent Societies
I/NGO	International/Non-Governmental Organisation
KII	Key Informant Interview
LBGTQAI+	Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, Asexual, Intersex, and Plus
NRC	Norwegian Refugee Council
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
PSEAH	Prevention of Sexual Exploitation, Abuse and Harassment
SMART	Specific, Measurable, Achievable, Relevant, and Time-Bound
SIP	Safe and Inclusive Programming
SoP	Standard Operating Procedures
ToR	Terms of Reference

Acknowledgements

This assessment was commissioned by the Norwegian Refugee Council (NRC) to Scruples Research to explore opportunities, structures, and limitations related to community participation and accountability in humanitarian programmes implemented by both NRC and other local and international non-governmental organisations within the Ukraine response in both Moldova and Ukraine. The aim is to amplify the voices and experiences of community members from diverse backgrounds through three pillars that align with the standards of NRC's Global and Community Engagement and Accountability (CEA) Policy: information sharing, community consultations, and community feedback mechanisms. Community members include internally displaced persons (IDPs), refugees, returnees, and members of host communities, across all genders and age groups, including women, men, girls, and boys. The assessment also focuses on the perspectives of marginalised and disadvantaged individuals, including older persons, persons with disabilities, members of the LGBTQAI+ community (Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, Asexual, Intersex, and Plus), and Roma communities. It seeks to ensure their meaningful engagement in humanitarian and development programmes by identifying their specific challenges, needs, and the gaps in existing mechanisms.

We would like to share our sincere appreciation with all community members who generously dedicated their time to share their experiences, challenges, and valuable insights genuinely, in order to enhance greater community engagement with humanitarian and development programmes. Under this assessment, we targeted community members who had received humanitarian assistance from NRC or other national and international humanitarian organisations within the past year, ensuring their experiences and insights are relevant.

We also would like to extend our heartfelt thanks to the internal and external stakeholders, including NRC team members, local partners, as well as national and local governmental and non-governmental organisations, for sharing valuable personal and professional experiences and observations gained while working with community members under highly challenging and changing circumstances.

Lastly, this assessment would not have been possible without the dedicated efforts of the NRC and Scruples Research team members. Special thanks go to Serap Merve Dogan, the lead consultant from Scruples Research, who guided the assessment with continuous guidance and expertise provided by Elsa Romera Moreno, Safe and Inclusive Programming (SIP) Regional Adviser for NRC's Offices in Asia, Latin America and Central and Eastern Europe. We also sincerely thank Dina Zaika, Senior Qualitative Research Lead at Scruples, and our dedicated field team in Moldova and Ukraine, whose diligent efforts and tireless work were instrumental.

Please note that the views expressed in this study do not necessarily reflect NRC's official position.

Executive Summary

This assessment was commissioned to Scruples Research by the NRC Central and Eastern Europe Regional Office (CEERO), to identify opportunities, structures, and limitations to community participation and accountability in NRC programmes within the Ukraine response context, specifically in Moldova and Ukraine. Research conducted between January and May 2025 in Chisinau, Ocnita, and Soroca in Moldova, as well as in Chernihivska, Dnipropetrovska, Kharkivska, Khersonska and Donetska in Ukraine is covered under this assessment.

Across the assessed locations, 12 focus group discussions (FGDs) with adult men and women community members and 24 key informant interviews (KIIs) with a range of internal and external stakeholders were conducted. These included the Global NRC CEA Lead, the Regional SIP Advisor, NRC management and programme staff, as well as representatives from international, national, and local organisations working with older persons, persons with disabilities, children, LGBTQIA+ individuals and Roma communities, along with local government officials and other external actors. Additionally, 12 KIIs were held with community members, including individuals with disabilities, members of the Roma community and children, across both Ukraine and Moldova. In Donetska oblast, due to significant challenges in convening FGD participants, especially in rural areas and through online platforms, the team opted for in-person interviews, conducting 4 KIIs (2 with women and 2 with men). To ensure the relevance of the group discussions and interviews, the community members who participated in them had received humanitarian assistance from NRC or other national and international humanitarian organisations in Moldova and/or Ukraine within the past year.

This assessment evaluated how well humanitarian programming implemented by NRC and other international and national humanitarian actors aligns with global standards on community engagement, accountability, and inclusive participation through its three pillars: information sharing, community consultations, and community feedback mechanisms. It reviewed the extent to which programmes integrate community engagement principles, particularly through the application of SIP and CEA approaches, and explored how affected communities—including disadvantaged, marginalised and vulnerable groups—were meaningfully engaged in programme design, implementation and accountability mechanisms. Finally, the accessibility and responsiveness of The Community Feedback Mechanisms (CFM), which the NRC and other humanitarian actors implemented, were also assessed, highlighting barriers such as limited community awareness, digital exclusion, and gaps in internal accountability systems.

The findings of the assessment have provided insight into structural and contextual challenges that influence community participation, including socio-cultural norms, gender roles, power dynamics within communities, and broader limitations due to digital literacy and infrastructural barriers. The necessity for humanitarian actors to foster inclusive practices, particularly through strengthened gender and intersectionality

approaches was underscored through this assessment, to ensure that diverse groups-including women, men, girls and boys, older persons, persons with disabilities, ethnic minorities, such as members of the Roma community, and LGBTQAI+ individuals-are fully engaged and empowered within humanitarian interventions.
By offering evidence-based recommendations and actionable insight, this report aims to guide NRC and other humanitarian stakeholders to enhance genuine community participation, improve accountability systems, and ensure that programming is safe, inclusive, participatory, transparent, and responsive to the nuanced needs of affected communities in Moldova and Ukraine.

Key Findings

- **Multi-channel approaches to information sharing**, as they tend to have dedicated financial, human, and technical resources for such activities in both Moldova and Ukraine. This approach combines traditional methods, such as printed materials, face-to-face communication through community events and in-person outreach efforts, and word-of-mouth among community members, with social media platforms, including Facebook, Viber, Telegram, and WhatsApp.
- **Local organisations tend to rely more on informal in-person information dissemination efforts** in both Moldova and Ukraine, in line with their available resources which are usually less than that of international organisations. Similarly informal/in-person approaches are used for community consultations and community feedback mechanisms with limited financial, human and technical resources for these activities, including for operational costs of printing materials and/or establishing call centres/hotlines, recruiting necessary staff members responsible for these mechanisms, investigating and responding to complaints while analysing and reflecting feedback meaningfully in their existing programmes in both countries. Budget constraints further often prevent the production of communication materials in accessible formats, such as sign language interpretation, audio formats, or translations into Romani, forcing marginalised groups to rely heavily on informal information networks.
- **In rural, underserved and frontline areas, word-of-mouth and face-to-face communication through trusted local intermediaries**—such as village heads, neighbours, and family members—remain the most reliable forms of information dissemination. Furthermore, older women in these areas were found to be the most active individuals in disseminating information about the available humanitarian aid. Community members reported significant trust in these channels, while having concerns about scams and misinformation in other forms of communication. However, this system is highly dependent on the presence and initiative of individual actors, which poses a risk when those individuals are no longer available or are replaced with a less active one.
- **In urban areas, digital tools are widely used by** digitally literate adult women and men (aged 18–65), adolescents, and LGBTQIA+ individuals who have stable access to electricity, the internet, and devices. As urban settings are **often densely populated and geographically**

scattered, digital engagement has become more efficient than in-person outreach for these community members. However, community members with limited digital access or digital literacy are largely excluded from this method. This includes persons with disabilities, older persons, Roma communities, and individuals living in frontline areas where infrastructure is significantly damaged.

- **QR code-based forms, commonly used by local organisations alongside in-person communication, were heavily criticised by community members.** Participants raised serious privacy concerns, particularly when these forms required the submission of ID numbers or scanned identity documents. Additionally, the forms were often described as not user-friendly—frequently crashing during submission or lacking accessible design features such as compatible screen layouts. This method disproportionately excludes older persons and individuals with disabilities, who reported facing significant difficulties navigating the platforms.
- **Many community members expressed frustration over the lack of follow-up after providing feedback or participating in consultations, particularly when their input did not lead to visible changes.** This lack of follow-up undermines trust and reduces future participation. The implementation of community consultation is often heavily influenced by programmatic and donor-imposed constraints, such as rigid eligibility criteria and inflexible budget lines, resulting in follow-up with communities often being de-prioritised. This often results in consultations being perceived by community members as superficial exercises—more about fulfilling organisational requirements than genuinely shaping programmes. Additionally, the high volume of consultations conducted by multiple actors in the same areas has led to participant fatigue. Over time, this has discouraged honest feedback, as community members have become increasingly disillusioned and doubtful that their voices will lead to meaningful change.
- **Gender dynamics significantly influence access to information, participation in community consultations, and engagement with community feedback mechanisms.** Across both Moldova and Ukraine, women were consistently observed to take on the primary responsibility for seeking information about humanitarian support. In contrast, men often reported refraining from engaging with these systems due to traditional gender roles that associate aid dependency with weakness, particularly for those perceived as heads of households. In Ukraine, the fear of military conscription further limited men's willingness to interact with humanitarian actors across all three pillars. Structural and practical barriers also constrained women's participation in consultations and feedback processes. Those with caregiving responsibilities or formal employment were often unable to attend sessions, which were commonly scheduled during standard working hours. The absence of child-friendly spaces or flexible modalities further limited their ability to engage meaningfully in these critical processes. Furthermore, there was only one organisation among those interviewed that was found to have child-friendly information sharing, consultations and feedback mechanisms, highlighting a significant need for the safe inclusion of children in these mechanisms by humanitarian actors in both countries.
- **Although LGBTQIA+ individuals are reported to be highly digitally literate and have the technical means to access online platforms**, they often face exclusion from community consultation practices due

to the absence of targeted communication. Humanitarian materials typically lack inclusive language or content explicitly addressing LGBTQIA+ needs. Additionally, fears of discrimination, outing, and social stigma further discourage individuals from seeking clarification or engaging with formal information, consultation and feedback mechanism channels.

- **Members of the Roma community face additional challenges due to limited proficiency in Ukrainian, Russian and Romanian languages, highlighting the need for translations into the Romani language**. However, even translations into Romani alone are insufficient, as many Roma individuals also experience low literacy levels, preventing them from reading traditional printed materials. Compounding these barriers, limited financial resources often restrict their access to mobile devices and internet connectivity, making social media platforms and other digital communication channels largely inaccessible. This does not prevent Roma individuals from only accessing the information but also participating in community consultations and engaging in feedback mechanisms, which often leads community members to communicate their insights, needs and feedback through trusted Roma intermediaries.

Key Recommendations

1. Short Term Recommendations

- Establish and/or maintain hybrid information sharing systems that combine digital tools (such as Telegram and SMS) with non-digital channels (including community boards, loudspeakers, and in-person briefings) to reach all population segments, particularly rural and older populations.
- Recruit and train community mobilisers or focal points from within marginalised groups (e.g., Roma individuals, persons with disabilities, LGBTQIA+) to serve as trusted intermediaries
- Implement feedback loops with visible follow-up actions (e.g., “You said, we did” notices, community feedback dashboards) to build credibility and demonstrate responsiveness.
- Distribute information in plain language and local dialects: Use simple, jargon-free language; translate into Romani and other relevant languages. Roma FGD participants reported receiving irrelevant or confusing messages in dominant languages.
- Ensure anonymity and safety in feedback: Offer private, anonymous ways to give input, especially for LGBTQIA+ individuals, children, and women at risk of violence. Feedback boxes or encrypted digital tools are essential.
- Develop child-friendly communication channels, including visuals, drawings, audio prompts, and storytelling approaches to ensures the access of children as per their gender and age group
- Appoint trusted community liaisons from each group: Train Roma leaders, disability advocates, and youth facilitators as focal points to gather and relay feedback within their own communities.

- Adapt consultation schedules and locations to accommodate women with care responsibilities, including flexible timings and child-friendly consultation settings.
- Offer transportation stipends or mobile alternatives: For older persons or persons with mobility challenges, provide small transport reimbursements or bring consultations directly to their homes or centres.

2. Medium Term Recommendations

- Integrate community engagement into all sectors and programme phases planning, implementation, monitoring by training sectoral staff, setting Key Performance Indicators, and ensuring consistent application of engagement tools.
- Create standing community advisory bodies or participatory monitoring groups to ensure regular community input and decision-making power over time.
- Conduct inclusive co-design workshops to enable community members, especially underrepresented groups, to shape the design of services, surveys, and information materials.

3. Long-Term Recommendations

- Invest in long-term partnerships with local CSOs and informal networks, especially women-led, Roma-led, or disability-led organisations, to localise and sustain engagement strategies.
- Incorporate engagement and feedback themes into donor frameworks and evaluation criteria, to ensure they remain a priority across funding cycles.
- Build inclusive digital infrastructure and literacy (e.g., training women and marginalised groups in digital engagement tools) to reduce long-term disparities in access.
- Advocate for developing national-level feedback and accountability frameworks, co-created with affected communities, local authorities, and civil society, to institutionalise participation.

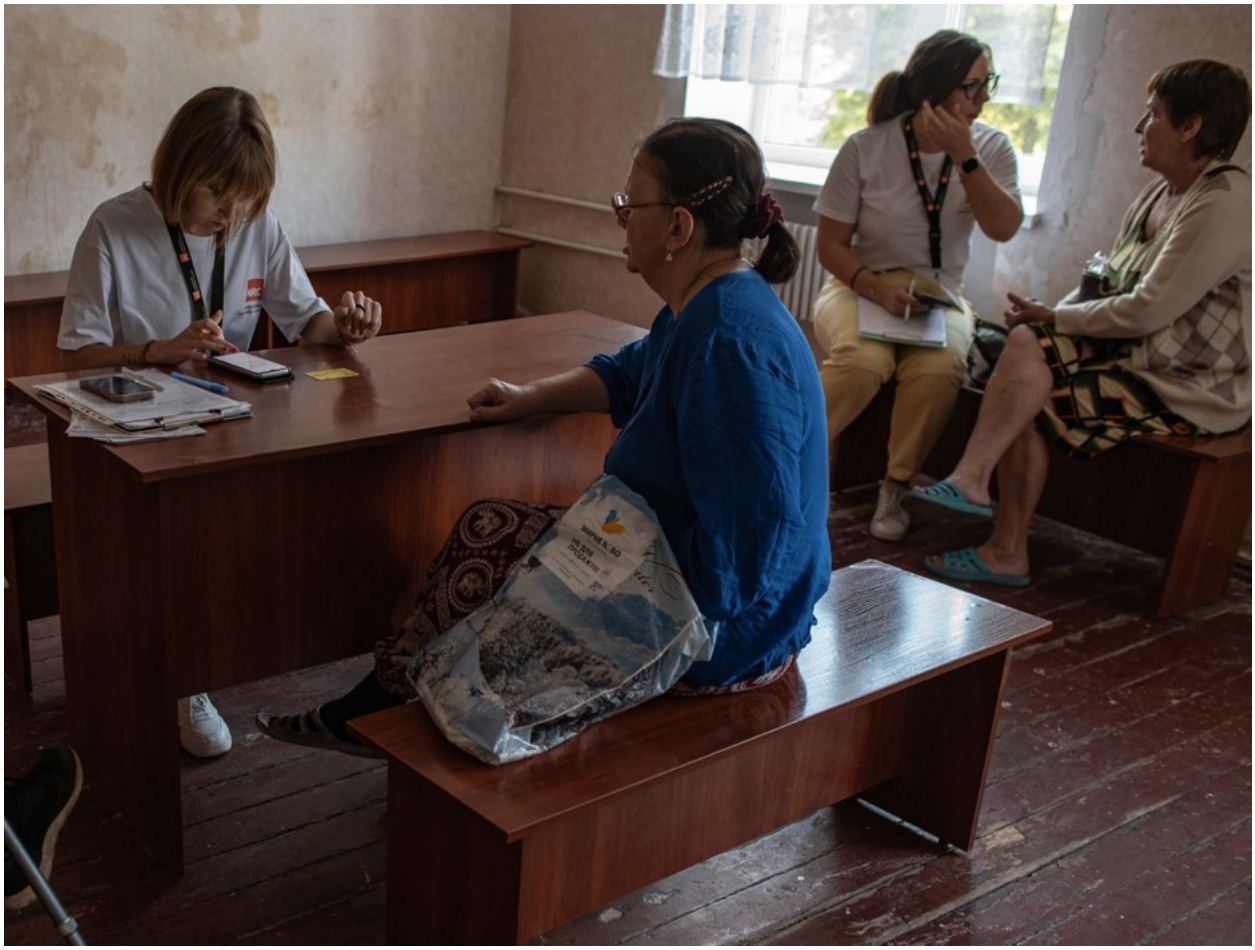
1 Background

NRC places CEA at the heart of its global strategy, recognising these principles as fundamental to achieving its mission to support displacement-affected populations. The NRC Global Strategy 2022-2025 underscores three guiding objectives, emphasising the necessity of transparency, evidence-based decision-making, and responsive programming.[1] Central to these objectives is *sub-objective 1—Quality, Accountability, and Learning*, which prioritises systematic data collection, technical standards, safe programming practices, meaningful community engagement, and adaptive programme development.[2] These elements collectively ensure that NRC's humanitarian responses are contextually appropriate, impactful, and continuously improved through reflective learning.
To operationalise these principles, NRC implements its SIP strategic initiative, which integrates protection, in addition to Age, Gender, and Diversity (AGD) mainstreaming throughout all programming phases of its Project Management Cycle (PCM) from programming to evaluation.[3] Grounded in international humanitarian standards, such as the Core Humanitarian Standard (CHS)[4] and the Inter-Agency Standing Committee (IASC) Protection Policy[5], SIP emphasises community safety, dignity, meaningful access to services, accountability, and participation.[6] Specifically, SIP's Minimum Standards 2C, 3A and 4A on information provision, community feedback mechanism and community participation through consultative processes, respectively, foster local solutions, and aim at inclusive decision-making practices that intentionally involve marginalised groups.[7] This approach not only addresses immediate humanitarian needs but also actively protects communities from potential harms, reinforcing equitable access and promoting sustainable community ownership.
Complementing SIP, NRC's CEA strategy, established as a distinct strategic area in December 2022, aims to enhance the active role of affected communities in shaping NRC interventions.[8] The CEA policy integrates and expands previous accountability frameworks, centring on three primary pillars: *meaningful participation, transparent information provision, and robust community feedback mechanisms (CFM)*.[9] NRC's engagement strategy follows international best practices, aligning with models such as the International Federation of Red Cross and Red Crescent Societies (IFRC) CEA Strategy[10], which emphasises structured community participation and two-way dialogue to enhance programme effectiveness.
Internal reviews such as the 2022 CFM report highlighted persistent challenges in practice, emphasising areas for improvement in community awareness, feedback channels, responsiveness from NRC teams, and the need for constant revisions in implementation based on feedback.[11] The NRC CEA strategic initiative was set up to address these recommendations. Recognising these issues, NRC is evolving its feedback systems as outlined in the CEA policy and CFM Handbook. demonstrating a commitment to improving engagement practices, which emphasises greater community involvement in the design and management of feedback

mechanisms, stronger linkages between community feedback and programmatic adjustments, and enhanced transparency in response processes.[12] Moreover, inclusion and gender sensitivity constitute critical aspects of NRC's accountability agenda. Through initiatives such as the Sida Gender Project (2024-2025) and its forthcoming Inclusion and Gender Policy, NRC is reinforcing its commitment to diverse and equitable participation.[13] These efforts prioritise gender-sensitive programming and intersectional approaches (at a minimum), ensuring that marginalised groups—including women, children and youth, ethnic minorities, such as members of the Roma community, LGBTQAI+ individuals, older persons and persons with disabilities—are actively and meaningfully engaged.[14] By integrating these policies within the SIP and CFM frameworks, NRC aims to build humanitarian programmes that genuinely reflect and respond to the complex realities of all affected communities at the global level by mainstreaming certain principles and standards across responses.

In line with this commitment, NRC values community engagement not only as a core part of its own operations but also as a collective responsibility within the humanitarian ecosystem. Through this study, NRC seeks to share insights and promising practices with other humanitarian actors, including UN agencies, international and national NGOs, and local civil society organisations, in support of more accountable, inclusive, and responsive programming across Ukraine and Moldova. Enhancing community engagement is critical for ensuring that humanitarian responses are grounded in the lived experiences of affected populations and that they promote dignity, equity, and long-term resilience.

Kharkiv Collective Center for Vovchansk IDP. ICLA team of NRC Kharkiv FO is providing legal information session for the elderlies evacuated from Vovchansk. Photo: Filippo Mancini



2 Purpose And Scope Of This Assessment

Given the Ukraine crisis and its unique impact on men, women, boys, and girls in Central and Eastern Europe, compared to other contexts, NRC identified a critical need to enhance information sharing, community participation, and community feedback mechanisms within its accountability agenda in Ukraine and Moldova programmes. This aligns with NRC's ambitions to meet its SIP Minimum Standards [15] and to comply with its most recent CEA Policy[16] in both country offices as well. Therefore, this assessment was commissioned to Scruples Research by the NRC CEERO team to assess opportunities, structures, and challenges related to community participation and accountability in NRC programmes by undertaking the following activities:

- **Comprehensive Desk Review:** Analyse existing opportunities, structures, practices, and limitations regarding community participation and accountability among populations affected by the Ukraine crisis in Ukraine and Moldova.
- **Consultations:** Facilitate discussions for KIIs, including with NRC programme staff, partners, external stakeholders, along with both KIIs and FGDs conducted with those displaced community members from different backgrounds, including those IDPs, returnees, refugees residing in Ukraine and Moldova, women, men, girls and boys, older persons, persons with disabilities, and Roma community members who received humanitarian assistance by international, national and local humanitarian actors to address gaps identified in the desk review.
- **Gap Analysis:** Identify gaps and areas for improvement in community participation practices, aligned with the CEA strategic initiative and NRC's CEA Policy. Put the analysis in a detailed report summarising findings and recommendations, and collaborate with relevant NRC staff from the country and regional offices to build consensus.
- **Recommendations:** Provide actionable recommendations to enhance community participation and accountability in decision-making processes.
- **Validation and Reporting:** The validation process included three validation workshops and one recommendations discussion session with the relevant NRC team members at both the Ukraine and Moldova country office levels, as well as with NRC CEERO team.

3 Methodology

The assessment adopted a qualitative methodology, combining KIIs and FGDs. KIIs aimed at gathering data from internal and external stakeholders, including key NRC staff members, staff of local organisations working with different community members, and other international and national external stakeholder both in Ukraine and Moldova. Furthermore, additional KIIs were conducted with the community members from different backgrounds, including individuals with disabilities, children, older persons and ethnic minorities such as Roma community in both countries, aiming at gaining a more in-depth understanding of the unique experiences, challenges, and needs of those marginelised and disadvataged community members in their engagement in humanitarian programmes. In parallel, the assessment explored how adult women and men—including IDPs, returnees, refugees, and host community members—perceive and experience engagement with humanitarian programmes for all three pillars of CEA in Ukraine and Moldova. These FGDs were also designed to generate more nuanced and context-specific insights by capturing differences between urban and rural settings, through the implementation of separate activities in each location. Responses collected via FGDs and KIIs had to not only consider displacement status, gender, age, and vulnerability, but also geographic location.

Regions including Northern Ukraine (Chernihivska), Eastern Ukraine (Dnipropetrovska, Kharkivska and Donetska) and Southern Ukraine (Khersonska), Central Moldova (Chisinau) and Northern Moldova (Ocnita and Soroca) were covered during the assessment and brought in-depth, context-specific, relevant knowledge and perspective to inform local, national and international organisations to improve their community engagement mechanisms. This assessment systematically integrated a gender-sensitive and inclusive approach into the research methodology and implementation to ensure meaningful representation of diverse community perspectives. Marginalised and disadvantaged groups, and ethnic minorities, including women, men, girls and boys, refugees, returnees, IDPs, host community members, LGBTQAI+, persons with disabilities, older persons, and Roma community members are purposefully engaged in the assessment. This inclusive approach has informed not only participant selection for the research but also guided the design, data collection processes, and analysis phases. To ensure balanced representation and foster inclusive dialogue, FGDs actively involved both women and men, across different geographical locations and settings, including both rural and urban areas within Moldova and Ukraine to capture their unique challenges, needs and opportunities for establishing better community engagement mechanisms and practices.

A six-phase structured process was followed to uphold methodological rigour and ensure quality control at each stage. It commenced with the Inception Phase, during which the assessment team collaborated with NRC team members to refine the study's objectives, scope, and key the-

matic areas. Furthermore, the methodology, sampling approach, and tools were designed and agreed upon, with guidance from the NRC's team, before commencing data collection. The assessment team rigorously adhered to ethical research practices throughout the entire process. The use of audio recording devices for in-person activities and digital recording tools for online sessions was also complemented by detailed notetaking. To ensure ethical standards and responsible data management, NRC's data protection guidelines and international best practices were carefully followed, fully aligning with GDPR principles where applicable. Informed consent was systematically obtained from each participant prior to data collection, clearly outlining the study's objectives, the voluntary nature of participation, confidentiality assurances, and participants' rights to withdraw at any stage. For the interviews with children, the assessment team sought both consent from parents/caregivers/legal guardians and informed assent from the child participants as well. No personally identifiable information was recorded, and all data was securely maintained using encrypted digital platforms with access limited strictly to authorised personnel. Upon completing data collection, transcripts underwent a detailed data cleaning and processing stage, which involved thorough verification for accuracy and completeness, careful anonymisation of sensitive information, and structured organisation of transcripts to facilitate systematic and confidential analysis. Rigorous anonymisation procedures were applied throughout data processing, and any identifying details were meticulously excluded from final reporting to maintain participant confidentiality and security.

During the data analysis phase, a thematic analysis method was employed to systematically identify key themes and patterns, with results disaggregated by gender, displacement status (refugee, IDP, returnee, host community), vulnerabilities, and geographical location. Thematic coding was utilised to classify recurrent issues and perceptions, providing a structured framework for interpreting participants' responses. For FGDs, a consensus-based approach was applied: responses that elicited no disagreement from group members were recorded as reflecting collective agreement, ensuring accurate representation of group perspectives and clarity on prevailing sentiments. Particular attention was given to exploring intersectional differences related to gender, vulnerabilities, and displacement status to capture nuanced experiences. Validation and triangulation methods were consistently used to corroborate primary findings with secondary data, cross-checking responses among various stakeholder groups to confirm patterns and highlight any divergences.

This phase also involved clarifying the methodology and sampling strategies to ensure a robust research design. These standards included, but were not limited to, the ***CHS 2024***[17] humanitarian criteria with a specific interest in accountability to affected populations. Moreover, the design of this assessment ensured that the overall tool design, sampling approach and data analysis met international standards, in line with ***BOND Evidence Principles***[18]. Throughout this assignment, the Scruples team was committed to the ***«Do No Harm»*** principle and followed these guidelines for data collection, including data protection, confidentiality, and the collection of data from study participants. The Scruples team employed participatory and ***AGD (Age, Gender, and Diversity)*** approaches throughout the design, implementation, analysis and report-

ing processes. SMART and actionable recommendations were generated to help NRC, and its partners improve programming in Ukraine and Moldova.
The assessment methodology consisted of the following methods:

- Secondary data: Desk review and secondary data review
- Primary data: Consultations with key stakeholders and community members through KIIs and FGDs.

3.1 Desk Review and Secondary Data Analysis

An extensive desk review of all relevant documents was conducted prior to commencing the fieldwork. These documents include NRC's relevant policies, frameworks, and reports (e.g., CEA Policy, SIP documentation, project proposals, M&E frameworks), baseline studies, and CFM reports from Ukraine and Moldova, but also external reports, including Ukraine Situation: Moldova - Accountability to Affected People - Feedback & Participation (ENG) (2023 - 2024)[19], The State of Communication, Community Engagement and Accountability across the Ukraine Response[20], Community Engagement And Accountability by the Red Cross Movement in the Emergency Response in Ukraine[21], and a global report by UNHCR titled the Age, Gender, and Diversity Accountability Report 2023[22].
The necessary data and information were recorded for further verification and triangulation. The desk review was also found to be essential in designing qualitative data collection tools, as it also helped the assessment team in identifying informational gaps that could be further explored during the data collection phase. For the detailed list of desk review documents, please refer to **Annex I**.

The document review enabled the assessment team to design an assessment matrix, through existing knowledge, which includes main and sub-assessment questions to be referred to for both the design of the tools and analysis of the data.This assessment matrix focused on three pillars of CEA, namely information sharing, community participation, and community feedback mechanisms. Each pillar is sub-categorised into current mechanisms and structures, barriers and challenges, and opportunities for improvement, as per the NRC's CEA and SIP strategies and standards. Please refer to **Annex II** for the detailed assessment matrix.

3.2 Key Informant Interviews

The KIIs were guided by semi-structured interview protocols, aimed at gaining more in-depth information about the perspectives of NRC staff members, representatives of local, national and international governmental and non-governmental organisations, including relevant Inter-Agency bodies, along with community members.
Throughout the assessment, **36 KIIs** were conducted in total in both Ukraine and Moldova. Out of them, **24 KIIs** were focused on the perspectives of internal and external key stakeholders, including Global CEA Lead, NRC management team and programme staff, international, national and local organisations working with older persons, persons

with disabilities, children, LGBTQAI+ and Roma individuals, local government representatives, and other external stakeholders both in Ukraine and Moldova. Please refer to the **Annex III** for the detailed list of KIIs. **A purposive sampling** approach was employed to ensure balanced representation as per expertise levels and geographic regions. Informants were prioritised based on their institutional roles, decision-making authority, direct engagement with communities, and relevance to the assessment's focus areas. The selection criteria ensured urban and rural perspectives were included as well.
The remaining **12 KIIs** were conducted with community members, including persons with disabilities and Roma community members, to gain a more in-depth understanding of the challenges, needs, and gaps they encounter in their engagement, as well as potential opportunities that NRC could factor into its programming in both Ukraine and Moldova.

1	Community Members-1: Persons with disabilities	2 Female	Ukraine	Their perspectives on current community engagement modalities and channels, as well as their needs and challenges, and what would be the ideal modality for them to engage in a more meaningful way.
2	Community Members-1: Persons with disabilities	1 Female	Moldova	
3	Community Members-2: Children	1 Girl	Ukraine	
4	Community Members-2: Children	1 Boy	Moldova	
5	Community Members-3: Roma community members	2 Female	Ukraine	
6	Community Members-3: Roma community members	1 Female	Moldova	
7	Community Members-6: Women	2 Female	Donetska, Ukraine	
8	Community Members-7: Men	2 Male	Donetska, Ukraine	

Table 1 List of Interviews with Community Members

3.3 Focus Group Discussions

Overall, 12 FGDs have been conducted with 85 participants, comprising refugees, IDPs, returnees, and host communities in Ukraine and Moldova. Since community engagement was not found to be sensitive to requiring gender-segregated groups, the assessment team, in agreement with the NRC, opted for mixed-gender FGDs. Throughout the FGDs, the perspectives and insights of community members on the barriers and gaps within existing mechanisms, as well as potential ways to improve, were sought. This aimed to understand how these mechanisms can be strengthened to foster more meaningful and equitable participation from individuals with diverse backgrounds, experiences, and needs.

No.	Group Type	No. of Activities	Location	Exact location (or locations of residence of participants for online FGDs)	No. of Participants
1	Women and men in **urban** areas (IDPs, returnees and affected host community members)	1	Ukraine	Chernihivska	
2	Women and men in **rural** areas (IDPs, returnees and affected host community members)	1	Ukraine	Chernihivska	8
3	Women and men in **urban** areas (IDPs, returnees and affected host community members)	1	Ukraine	Dnipropetrovska	8
4	Women and men in **rural** areas (IDPs, returnees and affected host community members)	1	Ukraine	Dnipropetrovska	6
5	Women and men in **urban** areas (IDPs, returnees and affected host community members)	1	Ukraine	Kharkivska	6
6	Women and men in **rural** areas (IDPs, returnees and affected host community members)	1	Ukraine	Kharkivska	9
7	Women and men in **urban** areas (IDPs, returnees and affected host community members)	1	Ukraine	Khersonska	5
8	Women and men in **rural** areas (IDPs, returnees and affected host community members)	1	Ukraine	Khersonska	6
9	Women and men refugees in **urban** areas	1	Moldova	Chisinau	6
10	Women and men refugees in **rural** areas	1	Moldova	Ocnita and Soroca	10
11	Older women and men - refugees in **urban** setting	1	Moldova	Chisinau	8
12	Older women and men refugees in **rural** areas	1	Moldova	Ocnita and Soroca	5

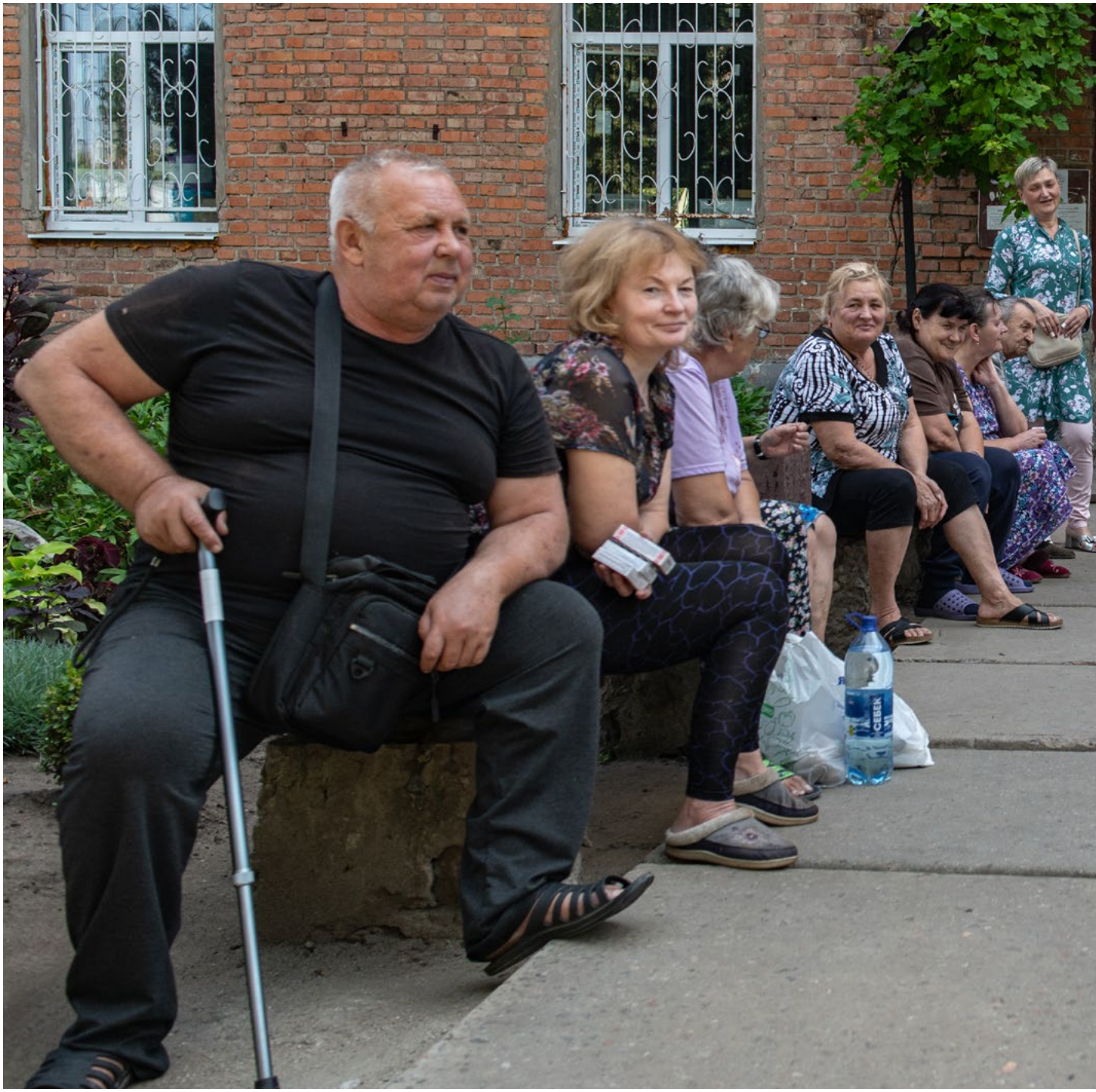
Table 2 List of FGDs.

FGDs participants were identified through purposive sampling to ensure that the participants represented different segments of the assisted population as per geographical location, displacement status (refugee, IDP, returnee and host community), gender (women, men and non-binary), and different types of vulnerabilities (single women, single parent/mother/father, etc.). This enabled the study to bring lived experiences of community members from different backgrounds, which is crucial to understanding the nuanced barriers and opportunities related to community engagement. Furthermore, diverse perspectives and deeper insights, which are typically not possible with random sampling, were captured, thus ensuring comprehensive representation and richer, contextually relevant data.

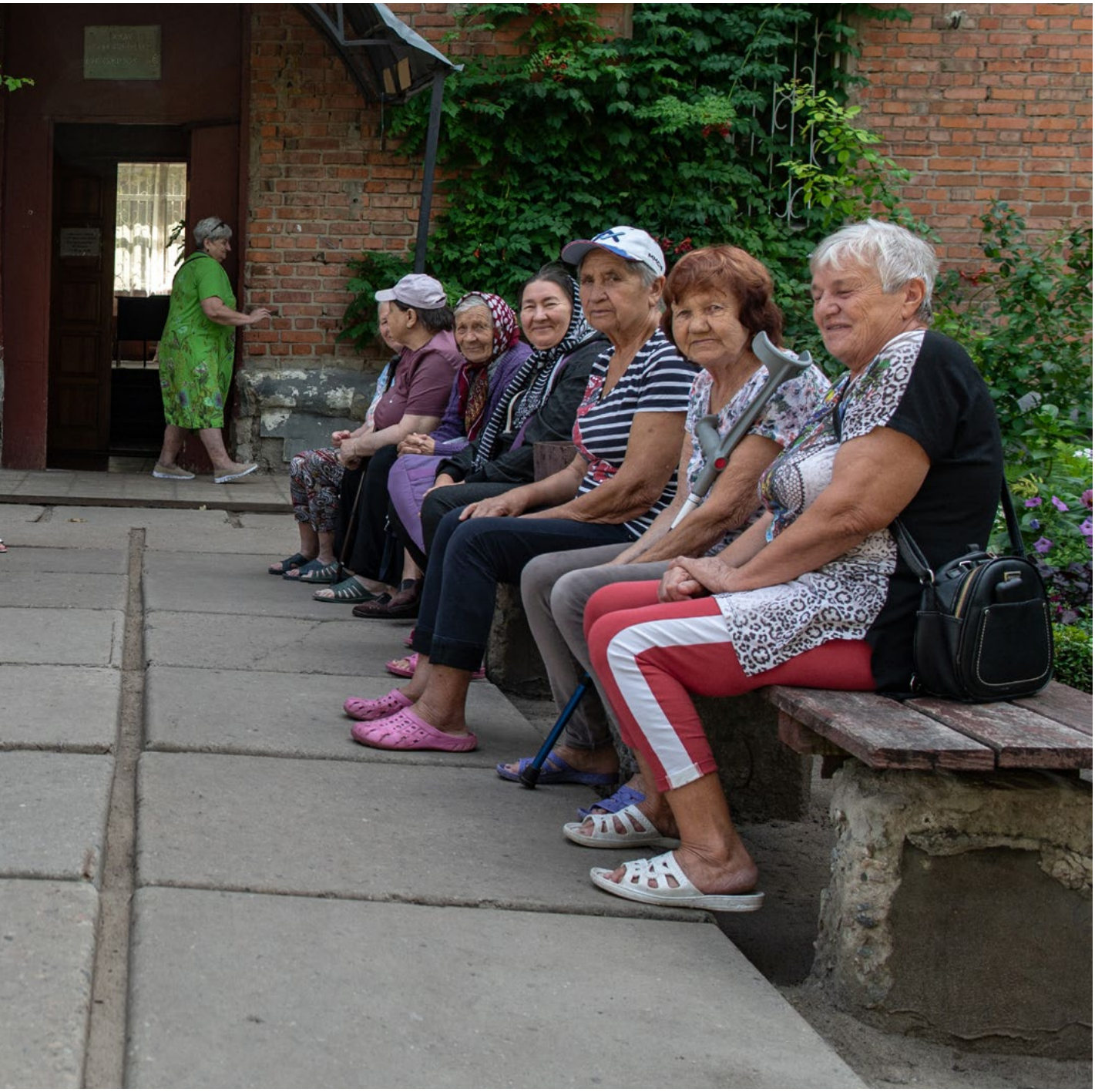
3.4 Limitations

Security Risks and Geographic Limitations in FGDs:

- Given safety and security concerns and risks, FGDs were conducted offline in Moldova, while in Ukraine, sessions were held online for Khersonska and Kharkivska oblasts and offline for Chernihivska and Dnipropetrovska oblasts.
- Considering previous challenges faced by the research team in organising FGDs in both formats, the assessment team decided to conduct online in-depth interviews instead, two with women and two with men, from Donetska oblast.



Lida, Tamara, Victor, Luda, Marfa, Anatolii, Nadia are just some of the people that NRC recently supported in one of the collective centre of Kharkiv. All of them has been recently displaced after the RF invasion in Vovchansk and Lyptsy (Northern of Kharkiv) of last May 24. The majority are elderlies with physical disabilities and few relatives to support them. NRC provided specific assistance to those in need of walking devices and an extended support in terms of household's items and clothes. The emergency response, set up by NRC straight after the relocation in the collective centres, was funded by ECHO. Since the chances of returning to their homes are remote at the moment, they are in need of multiple and prolonged assistance. NRC is there to support and strength the resilience of these people that despite all the circumstances are keeping stronger and unite; while their thoughts, stories, and expressions are filled with a mixture of joy and deep sadness.
Photo: Filippo Mancini



4 Findings

4.1 Information-Sharing With Communities

4.1.1 Existing Information Sharing Mechanisms

Humanitarian actors in Moldova and Ukraine adopt different communication channels and information-sharing methods, depending on geography (urban vs. rural), demographic characteristics (age, gender), displacement and displacement status (IDPs, refugees, returnees, and host communities), intersectional vulnerabilities (members of the Roma, LGBTQIA+ communities, persons with disabilities, and older persons) and the organisational capacity, including both financial, human and technical. These approaches are also shaped not only by access to technology and infrastructure but also by community trust dynamics, levels of digital literacy, and cultural preferences in how information is received and shared.

In urban settings, digital platforms such as Telegram, Viber, and Facebook are widely used, particularly among adult women and men, as well as youth who are considerably more tech-savvy and have settled in city centres. According to the adult women and men FGD participants, many rely on these social media platforms for receiving up-to-date information on humanitarian assistance provided across Ukraine and Moldova. The interviewed adolescents supported this; they found that social media channels are one of the most effective methods for accessing information about humanitarian programmes for themselves and their peers. Particularly, Telegram channels are becoming increasingly popular among young people, and it is recommended by adolescents that organisations adopt a blend of entertaining and informative content to make these channels more engaging. Moreover, to expand outreach, adolescents proposed non-school public spaces such as cinemas, parks, and transport hubs as potential sites for attractive, youth-oriented posters. Additionally, they highlighted the potential of billboards as a highly effective medium to enhance the visibility of available support and services. While adolescents report these communication methods as effective, representatives from the Inter-Agency Coordination mechanism interviewed highlight a critical need for more child-friendly information dissemination approaches. Most organisations in Ukraine lack such mechanisms, resulting in the exclusion of younger children from accessing important information.

In contrast, rural communities often rely more heavily on word-of-mouth and in-person channels, such as village councils, local leaders, neighbours, and family networks, where trust and familiarity determine

the extent to which information is shared among community members. This can be complicated by displacement status, impacting refugees, IDPs and returnees as they often lack established social networks in their new environments, making them more dependent on formal announcements or proactive outreach by humanitarian actors. Meanwhile, host communities—especially in underserved or economically marginalised areas—may remain outside typical communication flows, requiring tailored strategies to ensure inclusion.

In-person channels, particularly word of mouth, are widely relied upon by humanitarian actors in both Moldova and Ukraine for sharing information with community members. This has been seen as highly effective and accessible for those residing in rural and remote areas, as well as for groups with limited access to digital technologies and social media platforms. Across FGDs in Dnipropetrovska, Chernihivska, Khersonska and Donetska oblasts, information about humanitarian aid provided by different organisations is often shared by local administrators, village council heads, community leaders and/or respected local figures, who directly inform residents about the aid provided by these organisations and how to register for support.

These local administrators, village council heads, community leaders, and humanitarian aid workers use printed materials, such as posters, flyers, leaflets, and brochures, to disseminate information, according to NRC representatives. Therefore, NRC and other humanitarian actors often distribute materials to those relevant local authorities and representatives to improve their outreach in information dissemination. As per informants from NRC team, the design and content of these printed materials are also highly important to ensure readability and relevance for the local audience. Posters are also used to disseminate simplified versions of complex concepts, such as data protection rights, through visual formats designed to overcome the legal jargon that communities often ignore.

> *"We saw a flyer on the notice board after someone from the NGO visited. It wasn't just a paper—they told us directly, explained everything, and left it there so we could share with others."*
>
> *(Woman, FGD, Urban, Khersonska, Ukraine)*

Many organisations also include QR codes, hotline numbers and more detailed information about the services provided, as it is found to ease information dissemination to those with limited digital literacy and/or resources. Although these local administrators, village heads, and community leaders are found to be highly effective in information dissemination, the presence of mobile outreach teams handing out materials and sharing information is found to increase the legitimacy, perceived reliability of the information, and trust in the organisation.

Trust plays a central role: respondents consistently reported that they only act on information if it comes from a known and respected source, such as a neighbour, family member, relative, or a friend who had personally benefited from the programme.

> *"If it's some unknown source telling me that a humanitarian organisation distributes some aid, I won't go and register right away. I only approach those when I know it's shared by someone trusted and known, which means it is real"*
>
> *(Woman, FGD Participant, Rural, Dnipropetrovska, Ukraine)*

This need for trusted information sources results from widespread scamming, misinformation, and disinformation that have significantly undermined community trust in humanitarian communication across Ukraine. Since the beginning of the full-scale invasion, numerous fraudulent schemes have emerged, with scammers posing as humanitarian organisations to solicit money, personal data, or even sexual exploitation and abuse in exchange for promised aid. For example, the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) issued a public fraud alert in 2022, warning citizens about deceptive individuals falsely using the name of the Ukraine Humanitarian Fund to exploit vulnerable populations.[23] Similarly, the U.S. Federal Bureau of Investigation (FBI) reported cases where actors impersonated Ukrainian organisations online to extract monetary or cryptocurrency donations from international donors, further eroding public confidence in official channels.[24] This explains why word-of-mouth and face-to-face verification remain indispensable in humanitarian information sharing ecosystems, particularly in rural and underserved areas. However, since these methods are also vulnerable to manipulation and scams, it is important to consider using local authorities and media as additional channels for information dissemination.

Similarly, this form of communication is reported to be effective among persons with limited digital access and/or literacy, particularly older persons. According to FGDs across locations, older persons are highly active in in-person information sharing about those humanitarian services, often alerting neighbours and families about upcoming humanitarian support opportunities in rural areas.

Although word of mouth is still used in urban areas of Dnipropetrovska, Kharkivska, Khersonska, and Chernihivska oblasts, its reliance is found to be much less compared to rural areas. According to FGD participants across urban/central locations of these oblasts, social media could be considered as the most common communication method for information sharing, as the size of population and geographic area is greater than those hromadas/villages, making information sharing highly difficult through in-person methods, unless it is provided by the community centres of humanitarian actors, local administration and municipal offices. The primary social media channels utilised were Telegram, Facebook, Viber, and Instagram across all assessment locations. Generally, humanitarian actors circulate information through city-wide groups that they established on these platforms. Moreover, these digital platforms are also widely used by younger populations, as well as those in rural and central locations. According to FGD participants in Dnipropetrovska, Kharkivska, and Khersonska oblasts, Telegram and Viber channels, such as **"State Aid Community"** or **"Humanitarian Aid Ukraine"**, serve as real-time hubs for sharing aid updates, highlighting the importance of trust again, as these channels are those verified by authorities.

However, there are still in-person outreach efforts in which humanitarian actors and local authorities reach out to community members,

neighbourhood by neighbourhood, in these urban areas, and provide information that is followed up on via phone for later registrations. Respondents across rural Dnipropetrovska and Khersonska oblasts emphasised the reliability and clarity of these direct calls, especially when paired with follow-ups through social media channels like Viber messages or pre-assigned Telegram time slots.

Although word of mouth is equally vital in rural Moldova, as in rural Ukraine, including Soroca and Ocnita, local Viber groups consisting of refugees often initiate the information flow, which is then disseminated verbally through community volunteers and community leaders, according to FGD participants. While Telegram is found more popular across Ukraine, Viber is reported to be the main platform for following information about humanitarian aid in Moldova.

Moreover, in refugee communities, trusted women often act as intermediaries, monitoring digital channels and relaying news to neighbours. However, similar to Ukraine, older persons in these rural areas frequently do not access the information directly, as they lack digital literacy and/or resources such as smartphones and internet, instead relying on SMS messages or verbal updates from family members, other community members or acquaintances. In rural Moldova, older participants praised SMS alerts as the most accessible method, more effective than apps or voice calls, especially for those with hearing difficulties or low-tech devices.

For those with some level of digital literacy skills and necessary resources, volunteer youth play a key role, as per older FGD participants in Ocnita and Soroca. They often provide clear daily updates on the services, particularly applicable for older persons, via Viber with the registration channels and instructions. Moreover, many of those youth volunteers support older persons with registrations as well, including accompaniment, preparation of documents, etc.

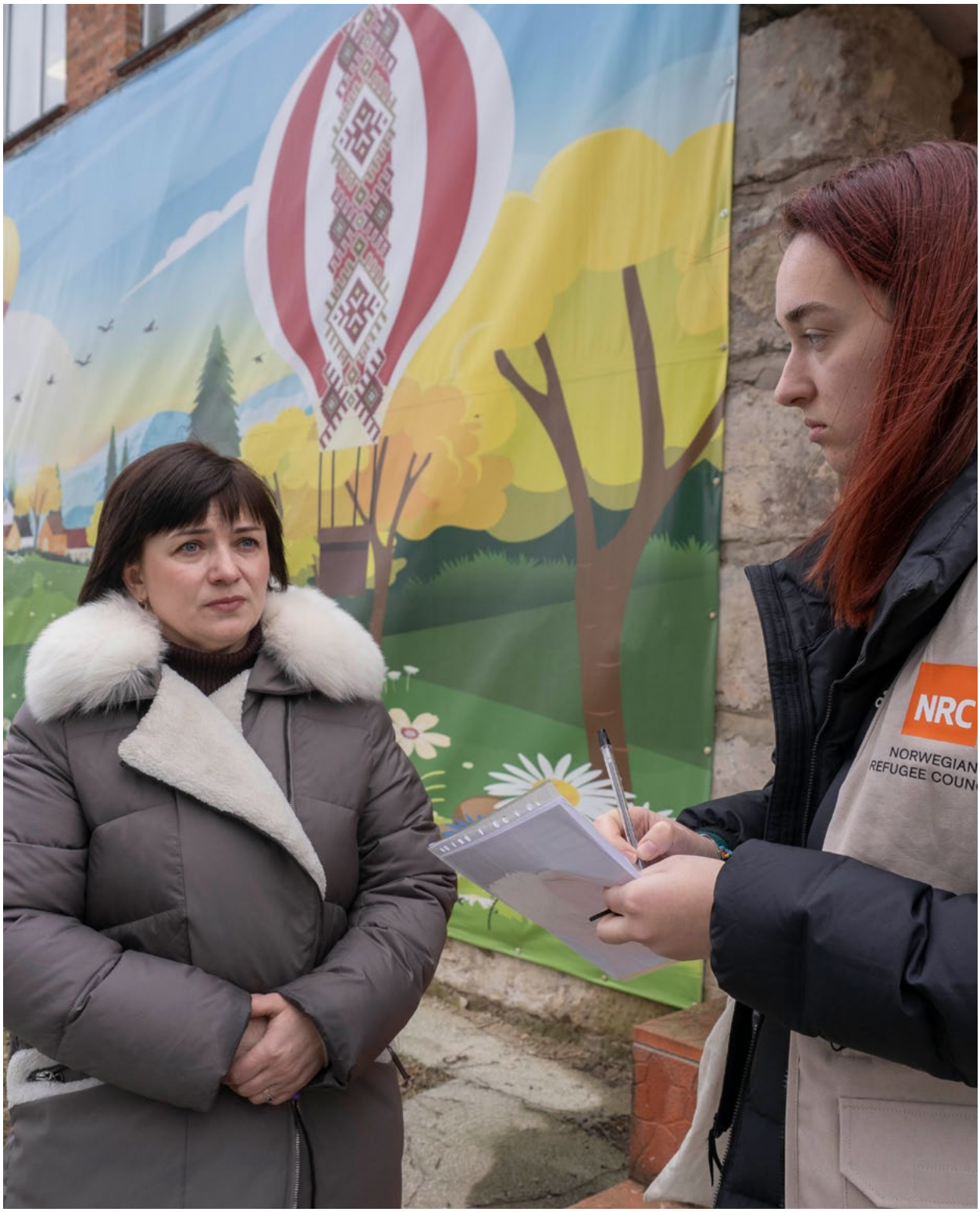
In those rural areas, remote villages, or collective shelters, children reported receiving information from their parents and/or school administrators instead of through a direct outreach approach for children by humanitarian actors. For instance, a 13-year-old refugee boy interviewed in Moldova reported that his mother received programme updates about the activities, particularly those informal education and recreational ones for children through a Viber group and informed him afterwards, showing the need for more child-friendly direct outreach mechanisms targeting children for information sharing, which could also be done through events held in schools, as school administrators are already actively involved.

In urban Moldova, such as Chisinau, word-of-mouth plays a supplementary role to digital communication but remains crucial in smaller refugee groups and among persons with disabilities and older persons who may not have the necessary knowledge and resources to use digital tools. FGD participants in Chisinau mentioned learning about humanitarian aid through acquaintances at churches or during in-person events, such as community outreach events held by I/NGOS and UN Agencies. This was concurred with UN Agency and I/NGO representatives, who stated that informal, day-to-day conversations between humanitarian workers and community members are often more effective than formal messaging.

Furthermore, web-based platforms such as NRC's "Kobli[25]" in Ukraine and Moldova, which provide legal and administrative information in multiple languages, are increasingly used for targeted service delivery.

However, these websites are primarily accessed by digitally literate users and/or those with access to smart devices, the internet, and electricity, and are rarely the first point of contact in rural or older communities. Therefore, the NRC team used in-person outreach and phone calls to reach individuals who were unable to access information through Kobli. Similarly, websites from agencies like the Red Cross or Salvation Army were mentioned by participants in urban Kharkivska oblast, but typically as a means of cross-checking information rather than for direct outreach.

Svitlana Humeniuk, the principal of Kolonschyna lyceum in Makariv local council, is standing in front of the colorful banner that covers a cement wall. This cement wall shields the windows of the school shelter and protects them from any explosions or debris.
Photo: Volodymyr Tsvyk



4.1.2 Barriers to Accessing Information

A range of barriers affect how community members in Ukraine and Moldova access information about humanitarian support, including geographic disparities, physical and mobility limitations, gender-based inequalities, low levels of digital literacy and access to technology, limited language proficiency, and poor visibility of available information. Together, these factors contribute to the systematic exclusion of certain individuals and groups from accessing crucial information.

Geographical Location

While urban areas and central locations benefit from a greater humanitarian presence and easier access to humanitarian information, rural and remote areas, particularly those on the frontline, often experience delayed, irregular, or entirely absent information flows due to constant shelling and attacks. As humanitarian information is typically disseminated through trusted figures such as local administrators, village council heads, community leaders, and trusted community members in rural areas, the information flow is found to depend more on individual effort.

> *"It was the head of our village council who reached out to everyone and told us someone was coming... It was organised and initiated by her through her personal will."*
>
> *(Woman, FGD, Rural, Dnipropetrovska, Ukraine)*

According to FGD participants in rural Dnipropetrovska oblast and a woman informant from Donetska oblast, this system is only effective when such individuals are proactive and trusted by their communities. In areas where local leadership is weak, inactive, or no longer functional due to conflict-related displacement or destruction, entire villages may remain unaware of available support.

> *"Power outages can wipe out both internet and mobile service, making it impossible to complete online registrations. In places like Stepanivka or Prytichyne, there's no mobile signal at all."*
>
> *(Woman, KII, Urban, Donetska, Ukraine)*

Moreover, in frontline areas and/or areas under constant shelling, there are almost no formal mechanisms left for humanitarian information sharing as the local infrastructure, such as council buildings and social services, has been destroyed, as per informants from Donetska. As a result, information about humanitarian services is shared sporadically through Telegram channels in Donetska, which is also limited due to unstable mobile and internet service, along with constant power outages.

Furthermore, urban areas, although better connected, have high population density, making it unfeasible for authorities to directly notify residents, unlike in smaller rural communities, as noted by urban Kharkivska FGD participants. As a result, humanitarian information is usually posted in citywide Telegram or Facebook groups. However, this digital communication model assumes that residents are actively online and digitally literate, which excludes many, especially the older persons or newly displaced IDPs, who are unfamiliar with these channels.

Although the urban-rural divide similarly affects how humanitarian information reaches different segments of the population in Moldova as well, the accessibility is still found to be better compared to those residing in frontline areas of Ukraine, as no such safety and security concerns are jeopardising these barriers in Moldova. Cities such as Chisinau and Balti are well-served by a mix of humanitarian actors, centralised aid distribution systems, and robust online networks. By contrast, rural areas, including Ocnita and Soroca, along with remote villages, where many Ukrainian refugees and low-income Moldovan families reside, who need more humanitarian support, face structural disadvantages in information access.

> *"In the villages, we have both information and services provided rarely and minimally. And in cities, it's always available."*
>
> *(Woman, FGD, Soroca, Moldova)*

According to FGD participants in Ocnita and Soroca, most formal aid opportunities, including scheduled distributions, psychosocial support (PSS) and recreational activities, are hosted in urban centres. Residents in rural communities frequently report being told that assistance is "for city residents only," and many learn about such programmes only after they have ended. This delay is often the result of limited outreach capacity and underuse of offline, localised information channels. Closing this information gap often falls on community volunteers, residents of refugee shelters, or family members who maintain Viber groups or pass on updates face-to-face. However, according to participants in the FGD with older rural residents, this system breaks down when those key individuals leave or become inactive. For instance, if a Viber group admin stops posting, as several participants noted has happened, those without alternate access channels are effectively cut off in both Ocnita and Soroca. The issue is further compounded by transportation barriers. Many rural residents rely on shared cars or informal networks to travel into cities, decreasing their access to information and registration of those services. As per a Roma informant in Soroca, announcements are often released late or in locations that are logistically unfeasible for villagers to access. Even in urban Moldova, there are gaps. While FGDs in Chisinau confirm that many residents receive timely updates through Facebook groups like **"Help for Ukrainians in Moldova**[26]**,"** this communication is often fragmented. Participants describe having to track multiple platforms to stay up to date, with information scattered across Telegram, Facebook, and organisational websites — none of which are consistently updated or verified.

Moreover, refugee-specific platforms like **''Dopomoga.md**[27]**''**, which were initially helpful, are now outdated or inactive, forcing residents to rely on informal networks or "**guesswork**" to determine when and where aid is available. This leads to missed opportunities and emotional exhaustion, particularly among those with caregiving responsibilities or limited time to monitor multiple channels.

Gendered Barriers

Gender is found to be one of the main factors that deeply shape the accessibility of information about humanitarian aid, in both urban and rural areas of Ukraine and Moldova. Across both rural and urban settings, women take on the primary responsibility for monitoring aid announcements, managing registration processes, and supporting others in navigating eligibility criteria. This pattern is repeatedly observed in FGDs and KIIs from Dnipropetrovska, Khersonska, Chernihivska, and Donetska oblasts, in Ukraine, and Chisinau, Soroca and Ocnita in Moldova. In both countries, women are reported to be often more active on Viber and Telegram groups, more likely to attend in-person registration events, and more persistent in tracking down unclear or delayed information. Men, by contrast, are frequently detached from these communication channels, generally stated to rely on woman household members to gain knowledge. This finding could be attributed to the caretaking role of women, which places them in constant contact with community groups and humanitarian organisations. They are also more likely to share information informally, creating organic "word-of-mouth networks" more quickly and effectively than formal systems in many communities. Men, especially those of working age, often disengage from the aid-seeking process, either because they are not home during daytime hours as they engage in the labour market or because of social pressure to appear self-reliant. Moreover, the fear of conscription is found to be one of the barriers preventing men from seeking further information on humanitarian services. This dynamic becomes even more pronounced in frontline regions, where some men fear interaction with humanitarian actors and local administration representatives due to military conscription risks.

> *"The man's task is to provide for the family... For instance, you will not see a woman pushing the baby stroller while walking with her husband. These things are the duty of men."*
>
> *(Man, FGD, Urban, Chisinau, Moldova)*

Gendered barriers are found to be present, impacting accessibility to information, but take on different nuances. Women are often the ones who stay home with children or older family members, and as a result, they become the primary recipients and distributors of humanitarian information. In urban FGDs in Chisinau, respondents describe how women take the lead in monitoring Telegram groups, participating in registration activities, and responding to social media announcements, while men are found to be more focused on employment. As per the man FGD participants, men should be providing for their families, highlighting how traditional gender roles and responsibilities influence their willingness to engage in information about humanitarian services. This often results in men receiving little or no information directly, especially in cases where they live alone or are separated from their families. In such cases, they may entirely miss out on aid registration opportunities. Some men also express discomfort or shame in accepting assistance, particularly those with military backgrounds, who have strong traditional gender roles and responsibilities in their perspectives or a strong internalised sense of independence.

Physical Mobility Issues

These access disparities between urban and rural areas are further compounded by physical ability and mobility, particularly for persons with disabilities and older persons. While humanitarian actors increasingly recognise the need for inclusive programming, many community members with physical limitations continue to face exclusion, not necessarily because information is unavailable, but because they cannot access it. In Ukraine, the war's impact on infrastructure, transportation, and social systems magnifies the barriers faced by older persons and people with disabilities. Particularly those residing in frontline areas and/or areas under constant attack have further challenges in physical access to information as roads are highly damaged, transport is expensive or unavailable, and mobile networks are unstable. Even when individuals are aware of the presence of humanitarian support, their ability to physically access it is severely constrained. According to older FGD participants and interviewed community members with disabilities, particularly those who live alone and are housebound, face significant challenges in accessing information, while others rely on caregivers who themselves face stress or limited availability. The layered consequences include highly limited access to information around existing humanitarian support, missed registration deadlines and social isolation. Humanitarian services and activities that require in-person appointments or travel to central hubs inherently exclude these individuals unless tailored outreach, like mobile teams or home visits, is provided. Even in cities with better infrastructure, inaccessible buildings, long queues, and unclear accommodation procedures continue to create structural exclusion. Several UN representatives and I/NGO informants also noted the absence of disability friendly facilities, increasing barriers for those needing wheelchairs, walkers, or support persons.

Similar challenges on a smaller scale are reported in rural areas of Moldova, particularly for those with disabilities and older persons as well. In many rural communities, roads are unpaved, or transport is infrequent, making it difficult for people with reduced mobility to access in-person information through community centres, and/or events. Even when they are informed about the announcements for those information dissemination events organised, physical access still becomes the deciding barrier. Persons with disabilities frequently depend on relatives or neighbours to retrieve aid or relay information. This dependency makes them vulnerable to delays, miscommunication, or complete exclusion if their support networks are weak. While some humanitarian actors post printed schedules or make phone calls, this still requires recipients to independently act on the information, something not always possible for those with chronic health issues or impaired mobility. A need for increased investment in mobile outreach teams, in-home service provision, and transport vouchers, especially in rural, remote and underserved regions in both Moldova and Ukraine is recognised and highlighted by many UN and I/NGO representatives. However, resource limitations mean that most services still assume individuals are able-bodied, mobile, and capable of travelling independently.

Invisibility of LGBTQAI+

LGBTQIA+ individuals in Ukraine experience a distinct set of barriers to accessing humanitarian information, shaped not only by structural exclusion but also by fear of discrimination, lack of tailored outreach, and weak institutional recognition. While many LGBTQIA+ people are digitally literate and actively connected through community-run social media platforms, their access to mainstream humanitarian services is often indirect or inconsistent. The primary barrier is invisibility in general aid communications. Mainstream organisations rarely include LGBTQIA+ persons explicitly in their materials or outreach strategies, resulting in a perception—and often a reality—that such services are not meant for them. As a result, LGBTQIA+ individuals rely heavily on trusted, community-based organisations for information and referrals. These organisations often maintain their own digital channels and provide peer-to-peer support systems that are more affirming and responsive, according to the interviewed representative of the LGBTQIA+ organisation serving at the national level.

> *"The main barrier is that we usually have to find funding and provide necessary services and goods by purchasing them ourselves."*
>
> *(KII, LGBTQIA+ Organisation, Ukraine)*

However, this reliance on niche community networks creates a parallel system that runs adjacent to, but rarely intersects with, the broader humanitarian architecture. In many cases, UN agencies and INGOs do not systematically coordinate with LGBTQIA+ organisations, nor do they allocate dedicated funding for community-specific outreach, as per the interviewed representative. This not only limits the scale and reach of community groups but also places a disproportionate burden on them to fill systemic gaps. Moreover, further risks are present for those residing in the frontline areas and/or areas under attack, particularly at risk of conflict-related sexual violence, as per the informant, as homophobia is also highly prevalent among Russian soldiers, considering the increasing homophobia in Russian Federation in general and the weaponisation of the homophobia since the beginning of the full-scale invasion.[32] Many of them chose to disengage entirely from public information spaces out of fear of outing, social stigma, or harassment, especially in mixed-gender shelters, community centres, or Telegram groups. These risks are rarely addressed in the design of humanitarian communication campaigns, which continue to use one-size-fits-all messaging and often fail to reflect the lived realities of LGBTQIA+ people.

Similar barriers are experienced by LGBTQAI+ individuals in Moldova as well. While those individuals mainly receive information about humanitarian support through local organisations, the targeted outreach for information sharing by INGOs is reported to be highly limited. Several interviewed I/NGO representatives noted that LGBTQIA+ individuals, especially youth and trans people, are less likely to trust anonymous hotline operators or aid workers at distribution points unless they are clearly identified as safe or trained in inclusion. Fear of misgendering, harassment, or being outed contributes to avoidance of public services, particularly in rural areas or conservative communities. Furthermore, transgender individuals may face difficulties with ID mismatches, especially when documents do not reflect their gender identity, a barrier

that complicates both registration and access to services. As information dissemination activities are not targeted, they often do not include necessary information on how these barriers could be addressed, as transgender individuals are also unknown, further increasing the fear and prejudice against these humanitarian services. According to the representatives of the relevant Inter-Agency Coordination Mechanisms in Moldova, the implementation of inclusive practices is also inconsistent, despite the numerous global and local guidelines published and shared on inclusion. Most humanitarian organisations in Moldova do not have staff trained in gender and sexual diversity, nor do they design communication formats that explicitly name LGBTQIA+ groups as target beneficiaries. This invisibility fosters a continued sense of marginalisation, even among those with full digital access and high engagement. An interviewed LGBTQIA+ NGO representative in Moldova reported adapting its communication systems to build trust and ensure safety yet emphasised that such work remains underfunded and largely unsupported by the international humanitarian system as well, further limiting local outreach.

> *"Even if we have the platforms, we don't always have the backing to distribute aid or scale our work. We're still treated like a niche community."*
>
> *(KII, LGBTQIA+ Organisation, Moldova)*

While community networks play an essential role, exclusion from formal channels perpetuates invisibility, and those who are not already linked to local LGBTQIA+ groups face significant accessibility issues and remain completely unserved. To address these barriers, greater coordination, flexible funding, and explicit inclusion in messaging and feedback systems are essential.

Photo: NRC

4.2 Community Consultations

4.2.1 Existing Community Consultation Mechanisms

Different formal community consultation mechanisms are reported to be operational within humanitarian actors at different levels, depending on their institutional capacity, structure, consistency, and inclusivity, which vary significantly. Although awareness of the importance of community consultations is increasing, as representatives of UN Inter-Agency Coordination Mechanisms, INGOs, and local organisations, most FGD participants reported not being consulted by these organisations prior to the support provided. According to many key informants, this is largely due to the fact that many local, regional, and national organisations lack the capacity and resources to conduct meaningful or sustained consultation processes, starting with the proper needs assessments. They often rely on external guidance but receive limited practical support to institutionalise these mechanisms. Conducting such assessments requires adequate human resources and dedicated funding, both of which are frequently unavailable to smaller actors. While many local organisations have worked within the same communities for decades, granting them valuable insights into the evolving needs, challenges, and lived experiences of those they serve, the absence of a systematic and institutionalised approach continues to constrain the effectiveness of their engagement. This is further compounded by a limited technical capacity to analyse and interpret needs data, as well as to meaningfully integrate this analysis into programme design and delivery, in accordance with international humanitarian principles and standards, by sector.

According to FGD participants in Chernihivska and Kharkivska, as well as community informants from Donetska, many of these organisations employed a first-come, first-served humanitarian support model without prior consultation. Similar sentiments are made by the interviewed Roma community members and persons with disabilities, highlighting that their opinion was not asked prior to the provision of the humanitarian aid.

This was not only prevalent at the design stage, but also during the implementation, as per FGD participants. Although many of these organisations use common methods to maintain communication channels for consultations with their project participants through digital/online forms, informal verbal communications, and, less frequently, phone consultations or in-person follow-ups, these mechanisms were rarely implemented systematically or inclusively. In many cases, respondents felt that their participation had little or no influence on programming decisions, as per FGD participants across Ukraine. These consultation formats are reported to range from basic online forms to more detailed surveys from UN agencies, which were praised for capturing household composition, health conditions, and child-specific needs.

> *"They called me and asked me almost everything about what we need, our preferences, etc. I shared all the details with them, and I felt really happy that they consulted us. But then.... nothing. It is not only that nothing was given. None of those I shared were*

> *reflected either."*
>
> *(Woman, FGD, Urban, Kharkivska, Ukraine)*

Participants in both urban and rural FGDs in Dnipropetrovska, Chernihivska and Kharkivska reported that some organisations allowed them to indicate preferences for items such as children's clothing, which they found helpful. However, the lack of follow-up after form submission led to frustration. Furthermore, these online forms were criticized by these FGD participants, as they are not inclusive for those with limited digital literacy or technical gadgets/internet etc. such as older persons, Roma individuals and persons with disabilities, but also the lack of data protection in these processes, expressing concern over requests for sensitive documents like passport copies. To increase access and inclusivity in these consultations, many FGD participants recommended that at least some communication be conducted via phone calls with disadvantaged groups to ensure their involvement in the process. Additionally, even those who were consulted reported that the consultations did not yield any tangible results. For instance, some participants from Donetska, Kharkivska and Khersonska reported organisations contacting them to ask their opinion on the support for children, and some basic and medical needs, without any results or tailoring in the support provided, showing further need to systemise the use of the information coming through consultations for shaping programmes and activities.

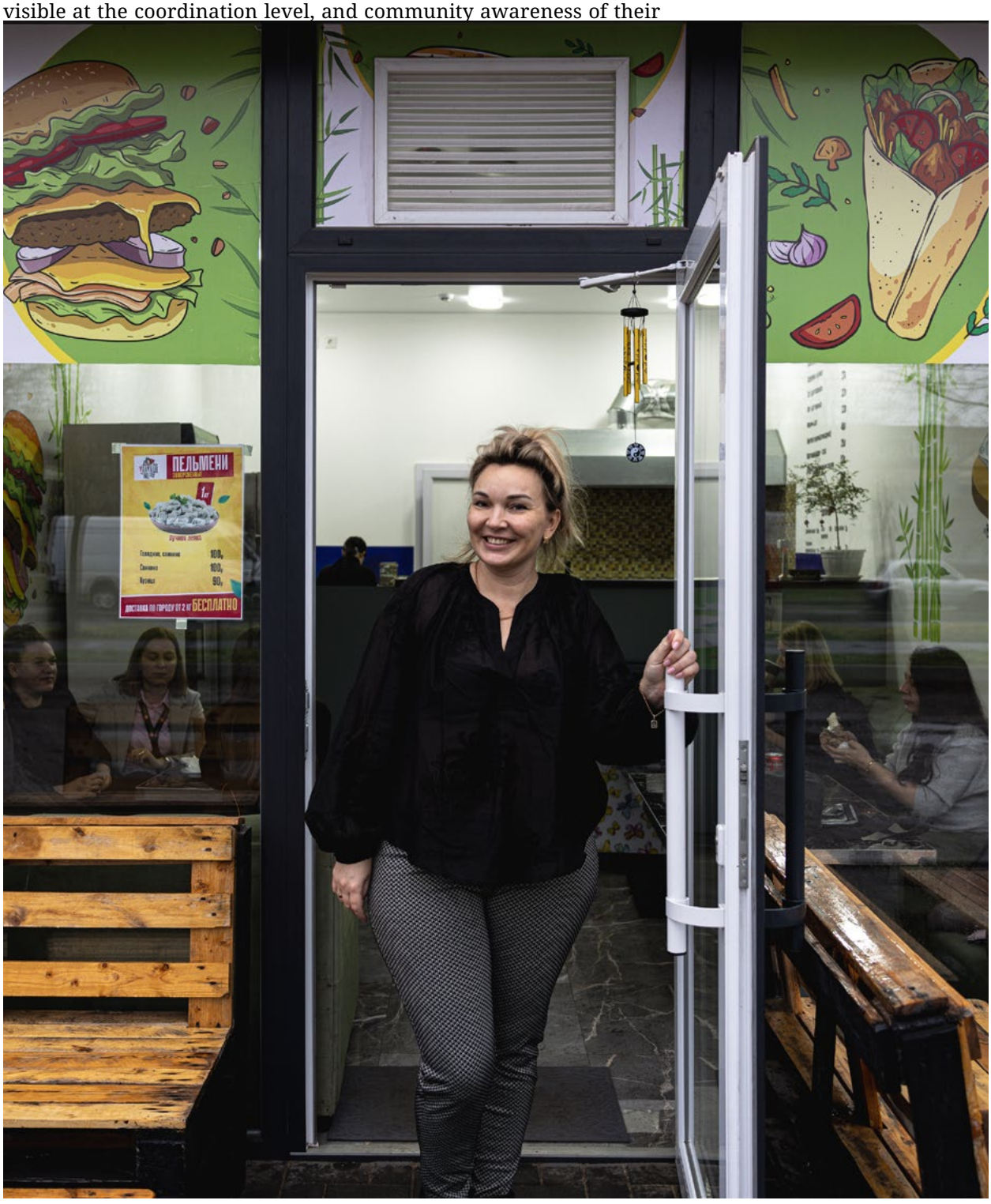
Similar results are reported to be prevalent in Moldova as well. FGD participants, particularly those in rural areas, are not being consulted on the support they received. Most of the distributions they also received in the last year, mostly basic needs, are distributed without consultation. Similar sentiments are shared by Roma community members in Soroca, indicating that most organisations did not have consultations, often due to poor communication and follow-up. However, the community consultations are found to be much better in central locations, particularly in those centres and shelters. In urban Chisinau, consultation was described as being concentrated in refugee centres. As one participant noted, "a large part of the population remains off-screen." Another described the selection for consultation as informal and opaque, often happening through word of mouth or social networks, rather than systematic outreach. While some participants had been invited to surveys or group discussions, many felt these did not result in tangible changes or follow-up, similar to Ukraine.

Youth and adults who are actively involved in the labour market across Moldova also reported low engagement in consultation processes. According to a KII with a local organisation, most consultations were held around project events or final meetings, rather than during design or planning stages. While there were focus groups and networking events, these were often limited to active community organisation members, excluding those occupied during working hours, as well as harder-to-reach or marginalised groups.

Consultations with persons with disabilities showed similar patterns. As one interviewed respondent with disabilities in Moldova explained, no one had asked about their needs before receiving cash assistance, and the amount was later reduced without explanation or a mechanism to appeal. The lack of two-way communication, particularly regarding

eligibility and reductions, eroded trust and discouraged future participation, as per interviewed community members.

However, despite these gaps, there were examples of participatory best practices. The UNHCR-coordinated Participatory Assessment process, for instance, involves structured focus group discussions with refugees using an age, gender and diversity (AGD) lens, and includes groups like the Roma Task Force, the Disability and Age Task Force, and LGBTQIA+ organisations. These structures have influenced policies and operational decisions, such as the deployment of mobile TP registration teams and the expansion of health coverage. However, these practices were more visible at the coordination level, and community awareness of their



NRC works alongside local partners in Transnistria, Moldova, providing assistance to those affected by the crisis. This includes housing support, hygiene kits, and livelihood assistance. Photo: Richard Ashton

4.2.2 Barriers in Community Consultations

While community consultations are increasingly recognised as a critical component of accountable and inclusive humanitarian programming, a range of barriers continues to limit their consistency, accessibility, and effectiveness across Ukraine and Moldova. These challenges are experienced both at the structural and community levels and were frequently highlighted by FGD participants and key informants.

Privacy Concerns and Fear of Fraud

Across FGDs conducted in Ukraine, community members voiced strong concerns about protecting their personal information and the increasing risk of fraud, particularly when sharing sensitive data through unprotected online forms. For instance, several participants expressed discomfort with the requirement to upload or submit scanned images of identity documents, such as passports, when filling out online forms in urban FGDs in Chernihivska. While these forms can be helpful for sharing basic information about needs, etc., they are reportedly not suitable for cash assistance or other sensitive support where more secure verification is required. Moreover, FGD participants warned that older persons and young people could fall victim to fraudulent schemes if sensitive data were mishandled.

> *"Scams are becoming more common. Older persons people could be tricked... It's dangerous to send passport photos through these forms, as we don't know who sees or accesses them."*
>
> *(Woman, FGD, Urban, Chernihivska, Ukraine)*

Echoed by FGD participants in Kharkivska and Khersonska, particularly video documentation or permanent storage of photos, was found to pose greater risks than collecting names or ID numbers. They recommended in-person verification at distribution points or during home visits as a more secure and trustworthy alternative to online data collection. Participants agreed that organisations should avoid retaining scanned copies of documents unless absolutely necessary and should instead verify originals in person. Notably, one of the local organisations working with persons with disabilities was referred for its respectful and privacy-conscious approach: the organisation only reviewed original documents without retaining copies, which increased respondents' trust in the process. This was offered in sharp contrast to other actors who requested permanent digital documentation. Beyond data submission, the broader context of increasing digital fraud has further fuelled community scepticism. Some participants reported being hesitant to answer phone calls from unknown numbers, even when these were legitimate survey or follow-up attempts, due to concerns about impersonation or misuse of their data. Even after receiving aid, many people remained suspicious of follow-up phone surveys, as they were unclear about who was calling and the purpose of the call. This barrier has been prevalent in the Ukraine context only.

Inflexibility of Humanitarian Programmes

One of the other barriers identified during the FGDs across Ukraine is the limited flexibility of humanitarian programmes, even when community members actively provide input or share specific needs.

Respondents frequently described consultation mechanisms that are either purely formal or pre-programmed, with little room for tailoring support or adjusting eligibility criteria. This issue is prevalent for those whose needs particularly did not align neatly with the fixed categories or pre-approved assistance types embedded in donor frameworks. For instance, several FGD participants in rural Khersonska recounted situations where they were surveyed or interviewed about their needs yet ultimately denied aid because they were technically deemed ineligible under existing criteria. One woman participant described being rejected from a firewood programme because her home had a gas line installed, even though she could not afford to use it.

> *"I applied for firewood... They said, 'You have a gas line.' Yes, I do, but I don't have the money to pay for it. My husband hasn't worked for four years. We live in total poverty."*
>
> *(Woman, FGD, Rural, Khersonska, Ukraine)*

Highlighting the limitations of donor regulations and programme criteria, participants expressed that not only are they denied support, but such interactions even lowered trust, as community members were asked to share personal details but then received no feedback or explanation for their ineligibility for the support, showing the need for improved and more transparent communications with the community members, even for negative results.
This was supported by the many representatives of local organisations interviewed in both Moldova and Ukraine, who confirmed that one of the major frustrations among communities was the lack of flexibility in how humanitarian support is delivered, not only for IDP, refugee, and returnee community members but also for host communities, who often felt overlooked. This not only restricted adaptive programming but also exacerbated tensions between groups, especially where needs overlapped or evolved, also by passing the 'Do No Harm' principle.

Geographical Barriers

Geographic isolation emerged as a major barrier to inclusive and effective community consultations across Ukraine, particularly in rural areas, collective centres, and frontline areas or those under constant attack. Community members residing in these areas often faced multiple overlapping challenges, including insecurity, a lack of public transportation, and physical immobility, which severely restricted their ability to engage in consultation processes or attend community meetings related to the humanitarian support they received. For instance, according to the FGD participants in both rural Dnipropetrovska and Khersonska, these humanitarian consultations are also mainly conducted in central locations, as most humanitarian aid registrations and activities are also in place, significantly impacting their participation in the entire process. Infrastructure damage, curfews, or shelling compounded transport-related challenges. In Donetska, for instance, one woman participant explained that she was only able to leave her home for short periods during "quiet windows" between drone attacks, making it virtually impossible to attend group meetings to share her opinion and insights. Even local public transport, where it existed, was often too infrequent, expensive, or unsafe for use. These conditions highlight a fundamental access barrier that cannot be addressed through improved forms or digi-

tal tools alone. Without intentional, flexible strategies — such as mobile consultation teams, telephone-based surveys with known contacts, or home visits — entire communities risk being excluded from the processes meant to make aid more accountable and responsive.
Although there are no such safety and security challenges prevalent in Moldova, geographic isolation still remains a significant barrier due to poor transport infrastructure, centralised service models, and limited institutional presence in rural regions. According to FGD participants in Ocnița and Soroca, humanitarian organisations are often physically absent from their communities, and their ability to travel to consultation meetings was hindered by age, cost, and a lack of mobility assistance. It is not only a result of the limited infrastructure but also considered burdensome and expensive. This contributed to a growing reluctance to participate, even when staff are perceived as kind and respectful. Furthermore, geographic barriers are further exacerbated by inaccessible infrastructure for those with physical disabilities, as a result of a lack of ramps or other disability-friendly accommodations, making attendance nearly impossible without assistance, as per NGO representatives. Along with their limited digital literacy skills and access to digital devices, this prevents these community members with disabilities and their insights from being visible in these consultation practices.

Consultation Fatigue and Lack of Visible Outcomes

In many locations across Ukraine, FGD and KII respondents conveyed a growing fatigue and scepticism regarding consultation efforts, particularly when repeated requests for information yielded no tangible improvements in services or support. While affected communities generally expressed a willingness to be consulted, this willingness was often undermined by their experience of non-responsiveness or procedural repetition. People reported filling out forms, answering phone calls, or participating in assessments — only to see no visible follow-up, no adjustment in aid, and no communication about outcomes. This was echoed by FGD participants across Ukraine in both urban and rural areas. For instance, FGD participants in rural Dnipropetrovska recounted numerous examples of consultation attempts, in which they often felt like statistical exercises rather than meaningful engagement. Participants reported being surveyed only after receiving aid, not before, and suggested that the process felt like ticking a box rather than building a genuine feedback loop. Further deepening this fatigue is the issue of duplicate assessments by different humanitarian actors, as noted in interviews with I/NGO staff members. he absence of a coordinated consultation strategy across sectors or regions means communities are sometimes asked the same questions multiple times by different actors — without understanding why or how the information will be used. Over time, this has led to growing reluctance to participate, especially when no benefit is perceived from engagement.
This sentiment is not only about individual disillusionment. At a broader level, it reflects a breakdown of trust in the purpose and integrity of consultation processes, a dynamic that is particularly dangerous in conflict-affected contexts, where trust is already fragile and expectations around aid delivery are high. Similar experiences are reported by FGD and KII participants in Moldova, reporting that community members started to give more generic or superficial responses, not because people lacked opinions, but because they did not believe the input would make a difference. In their words, only anonymous forms sometimes

prompted honest feedback, a reflection of both trust issues and the perceived futility of speaking up. This disengaged or red responses risks leading humanitarian actors to draw inaccurate conclusions, ultimately resulting in programmes that are misaligned with the actual needs and priorities of affected communities.

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Institutional and Structural Gaps

One of the most consistent barriers to meaningful community consultations reported across both Ukraine and Moldova is the absence of structured, organisation-wide consultation mechanisms that are mainstreamed across different departments. Key informants highlighted that even within the same organisation, including NRC, programme teams often conduct community consultations without a unified strategy or shared framework. For example, site management teams, protection units, and ICLA staff may all engage with affected populations separately, using different tools, formats, and messaging. This inconsistency

not only reduces the clarity and effectiveness of consultations but also erodes community trust, particularly when repeated consultations yield no visible outcomes or follow-up.
Another major barrier linked to institutional structure is the high turnover of expatriate staff, particularly in technical and leadership roles. In both countries, several key informants described how international specialists rotate out of posts every three to six months, often just as they begin to understand the local context and build rapport with staff and community members. Despite efforts to document processes and hand over responsibilities, incoming staff often restart initiatives from scratch, leading to a loss of institutional memory, disrupted consultation practices, and community fatigue from having to re-explain their needs and circumstances to new faces. This constant flux contributes to inefficiencies and undermines any long-term strategy for sustained engagement.

> *"By the time they understand the local context, their contract ends. Everything starts over."*
>
> *(KII, NRC, Ukraine)*

At the same time, while local and national staff often possess the contextual knowledge and continuity necessary to sustain effective consultations, they are not always provided with the resources, decision-making authority, or support required to lead these processes at scale. This imbalance is further complicated by the reliance on local implementing partners, many of whom, despite being trusted actors within their communities, lack the capacity, tools, or training to conduct meaningful and sustained consultation processes. In both Ukraine and Moldova, INGO representatives reported that consultations with local partners are often ad hoc, superficial, or driven by donor reporting requirements rather than embedded as a core component of programme design. Furthermore, feedback collected by partners may not always be aggregated, analysed, or acted upon, especially when partners operate under tight timeframes and with limited funding flexibility.
While localisation remains a key ambition for humanitarian actors, the findings suggest that simply transferring responsibility to local organisations without investing in their consultation capacity, technical support, or coordination mechanisms risks reproducing the same weaknesses present in international systems, only with fewer resources. The combination of disjointed internal practices, frequent staff turnover, and uneven local capacity continues to limit the potential for community consultations to serve as a genuine driver of programme quality and accountability. Unless consultation processes are institutionalised across departments and actors, with stable leadership and shared frameworks, affected communities will remain caught in fragmented systems that ask for their input but struggle to act on it.

Gendered Barriers

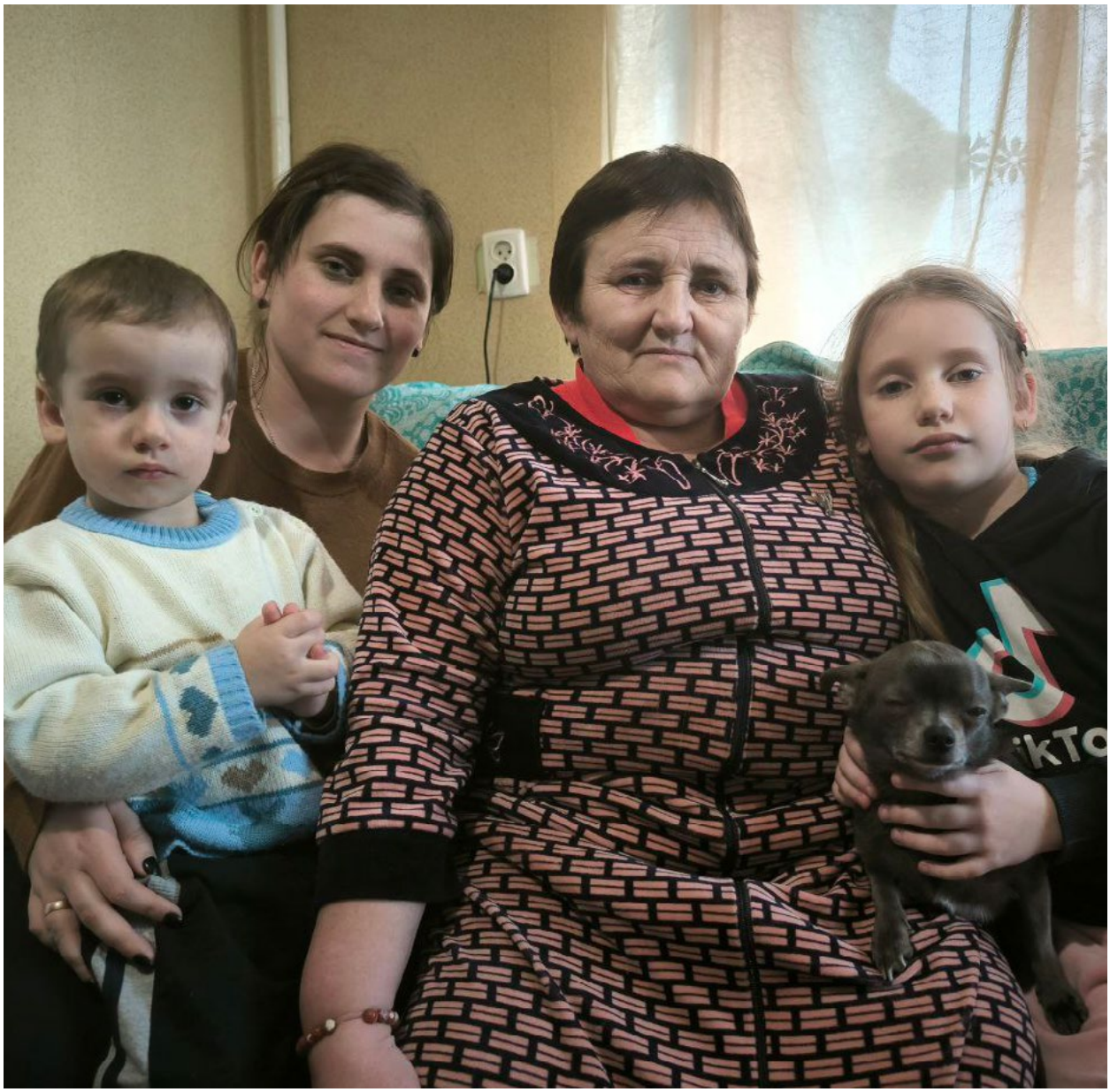
Gender roles and care responsibilities also emerged as a barrier, especially for women, particularly older women, mothers of young children, or caregivers to disabled or older relatives. In both countries, women are more likely to undertake unpaid domestic and care work, which limits their time and ability to participate in consultations, especially

when these are held during working hours, in inaccessible locations, or without access to childcare.

This dynamic was reflected in FGDs in both Moldova and Ukraine, where woman participants expressed a desire to engage but also frustration that consultation activities rarely accounted for their time constraints or caregiving duties. An NGO representative in Moldova shared that providing on-site babysitting during trainings significantly improved women's participation, illustrating that relatively minor accommodations can make consultations far more inclusive.

Furthermore, in the context of displacement and war, gendered barriers have intensified. In Ukraine, for instance, some women have had to give up public leadership roles to care for children or older parents, particularly when men family members are serving in the military. This transition has pushed women's perspectives further into the background at a time when they are managing significant household and psychosocial burdens. Despite these challenges, consultation formats have not yet been widely adapted to proactively address this gendered exclusion, as per key informants in both Moldova and Ukraine.

Oksana Rusnak, her mother Lydia and her children Roman and Ilona displaced to Zaporizhzhia from the city of Orihiv and the village of Novopokrovka.
Photo: Artem Lysenko



4.3 Community Feedback Mechanism

4.3.1 Existing Community Feedback Mechanisms

Community feedback mechanisms vary significantly, depending on the capacity, operational scope, and targeted group(s) for other local, regional, national, and international humanitarian actors. Multiple organisations have implemented multi-channel systems that combine in-person interactions, hotlines, digital platforms (including social media channels and emails), QR codes, paper forms, and physical feedback boxes placed in accessible community locations, such as community centres. Many of these organisations try to prioritise different communication channels to ensure community members can provide feedback comfortably through those that are most accessible to them. For sensitive or urgent cases, dedicated channels, such as direct conversations with psychologists or case managers, ensure safe and personalised responses.

While INGOs and UN Agencies offer many of these communication channels at the same time through one comprehensive feedback and complaint response mechanism, local NGO representatives recognised significant operational constraints, noting limited financial and human resources that impede the consistent implementation of such feedback and complaint response mechanisms. They described formal feedback collection tools as sometimes overly bureaucratic, deterring genuine community participation. Psychological barriers were also acknowledged, as community members frequently expressed fear that negative feedback might negatively impact their eligibility for future aid.

Community-based organisations and local NGOs provided valuable insights into effective informal feedback mechanisms, emphasising the importance of direct interpersonal communication and trusted local intermediaries. Additionally, many local organisations relied heavily on gatherings and activities, direct conversations, and trusted social workers to gather authentic feedback, given the limited digital literacy among these groups. Moreover, some NGO representatives also highlighted innovative approaches such as social media monitoring to identify and address misinformation and community concerns in real-time, proactively. For instance, organisations actively track informal feedback and complaints on platforms commonly used by affected communities, using this data to adjust programming and address emerging issues promptly. Similar practices by utilising the same communication channels, including hotlines, physical boxes, digital and social media platforms, and in-person channels that are operated in Ukraine are also prevalent in Moldova by humanitarian actors as well. Additionally, the centralised information-sharing platform also known as the «Refugee Green Line, which is primarily staffed by refugees themselves, operates as a hotline for handling feedback and complaints as well. The system carefully logs and tracks incoming calls, many of which, particularly early in the crisis, were related to cash assistance issues as per UN representatives. At its busiest period, the hotline handled more than 14,000 calls within a single month. The Green Line addresses general questions and pro-

cesses formal complaints, including sensitive matters related to Protection from Sexual Exploitation and Abuse (PSEA). Although multiple hotlines are initially established, they proved financially unsustainable and logistically complicated. Consequently, the Refugee Green Line now serves as the primary centralised channel, complemented by a limited number of additional support hotlines. Furthermore, the UN maintains an inter-agency misconduct complaint form and a dedicated email channel specifically for addressing serious issues, such as ethical violations.

4.3.2 Barriers to Accessing Community Feedback Mechanisms

Psychological and Cultural Barriers

One of the barriers impacting the use of community feedback mechanisms in both Moldova and Ukraine is the presence of psychological and cultural barriers, deeply rooted in shared social norms and perceptions towards humanitarian aid. In both countries, respondents from various community backgrounds frequently cited feelings of gratitude, shame, fear of appearing ungrateful or overly demanding, and scepticism towards formal mechanisms as common reasons why they were hesitant to provide critical feedback. For instance, according to FGD participants from both urban and rural areas across Ukraine, there is a discomfort with complaining or raising critical feedback about humanitarian aid, as they feel it is morally inappropriate due to gratitude towards humanitarian organisations and volunteers.

Statements such as, *"Why would we complain if people are already helping us?"* encapsulate a widespread sentiment that complaining or providing negative feedback is socially unacceptable, equated with ingratitude or disrespect towards those providing assistance. Similarly, in Moldova, community members from Chisinau, Soroca, and Ocnita shared similar views, describing feelings of embarrassment or moral discomfort at the idea of voicing complaints after receiving aid. The informants of the UN, as well as NGO representatives, support this, reporting a strong reluctance to appear disgraceful.

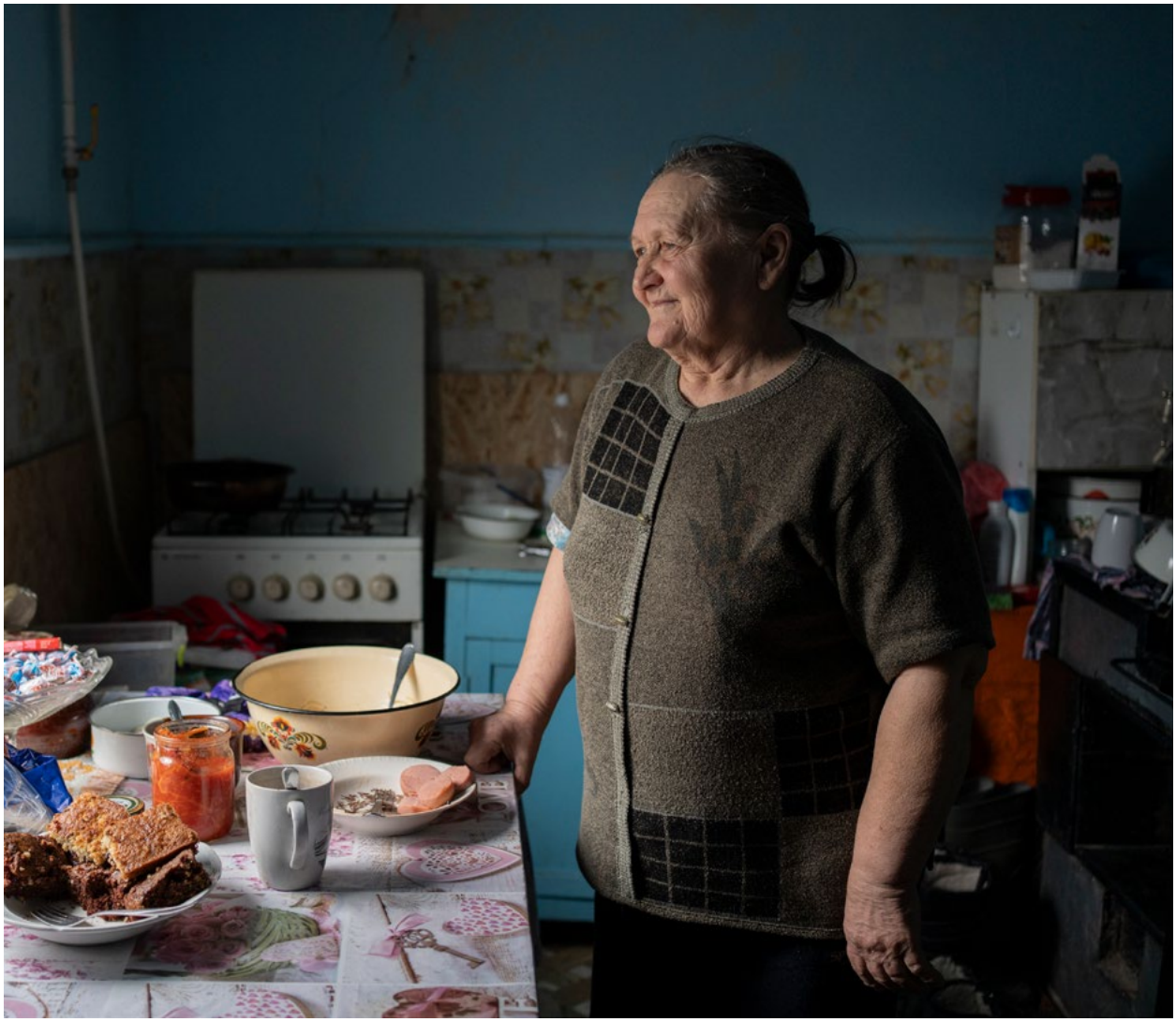
Interestingly, the fear of being perceived as disrespectful is found to be higher among older respondents in both countries, particularly highlighting their reluctance to appear ungrateful for the assistance they depend on, which shows that the traditional mindset against aid also impacts their use of the community feedback mechanism. This highlights the further need for efforts to improve older persons' perspectives on providing feedback.

Furthermore, among men, there is a significant concern about potential military conscription, leading to reluctance in formally registering for aid or providing personal information. These fears significantly limited engagement, causing severe underreporting of needs and further exclusion from humanitarian support. Moreover, many men felt hesitant to express their needs openly, experiencing profound embarrassment associated with relying entirely on humanitarian assistance, which conflicted deeply with their traditional roles and responsibilities as providers within their communities, as per the UN and I/NGO representatives.

Parallel to this, any FGD participants in both countries also reported having a fear of negative repercussions, which emerged as another critical barrier. Across Ukraine and Moldova, the fear of repercussions

manifested through a widespread belief that complaints could result in being cut off from future aid. According to FGD participants, even when services fell short, many participants chose silence over potential risks, strongly influenced by informal warnings from community leaders or personal experiences where complaining had led to negative consequences.

This psychosocial barrier manifests in a distinct way when it comes to Roma communities in both Moldova and Ukraine. Mistrust of formal institutions, shaped by generations of discrimination, neglect, and social exclusion, profoundly influences how Roma individuals perceive and interact with community feedback mechanisms. Many individuals believe that their concerns will not be taken seriously or addressed, leading to a widespread reluctance to engage with systems they perceive as distant or biased. This is reinforced by cultural norms that discourage drawing external attention to community issues, particularly through formal or bureaucratic channels. As a result, many Roma individuals prefer to engage through trusted intermediaries, such as community mediators, younger relatives, or local Roma organisations. These actors play a critical role in bridging the gap between formal systems and the community. However, in areas lacking these support structures, particularly remote or underserved regions, Roma communities are effectively cut off from feedback and complaint mechanisms.



Lyudmyla inside her house in the village of Kotlyareve, Mykolaiv region, South Ukraine. Lyudmyla lives with her husband. Both never left since the beginning of the full-scale invasion. Photo: Myriam Renaud

4.4 Cross-Cutting Barriers

Digital Literacy and Access to Digital Tools/Equipment

In both Ukraine and Moldova, access to humanitarian information, community consultations, and community feedback mechanisms is increasingly dependent on digital tools and social media channels such as online forms, Telegram, Viber, Facebook, and other online registration portals. While these platforms offer rapid and scalable communication, they assume a baseline of digital literacy and access to smart devices, internet and electricity that many community members do not have. Some of the community members, including older persons, persons with disabilities, Roma individuals, those in rural or frontline areas, and those with low income, face significant exclusion not just due to the absence of technology, but due to the inability to use it effectively or consistently. Even when people have smartphones or internet access, technical tasks such as downloading apps, uploading documents, or navigating complex online forms present serious challenges.

> *"I spent 3–4 hours trying to register. And we didn't receive the aid in the end."*
>
> *(Man, FGD, Rural, Chernihivska, Ukraine)*

This barrier is prevalent not only for accessing information but also during registration, which often takes place through Google Forms or organisational websites due to wartime disruptions to in-person outreach and the increased use of social media by humanitarian actors. Although these forms and other digital tools are found highly useful in improving access, mainly by youth and adult FGD participants across Ukraine, many acknowledged some community members, such as older persons, persons with disabilities and Roma individuals struggling with forms that time out, crash, or require information to be submitted in specific formats.

The reliance on online platforms also fails to accommodate those using basic phones or relying on others, often family members, to complete digital tasks, which undermines the agency and privacy of participants. This barrier is particularly acute in locations where humanitarian services are primarily advertised or accessed via digital means, excluding those unable to connect.

These technical barriers are further compounded by infrastructure instability, particularly in frontline areas and/or areas under constant attack. When power outages or mobile signal failures interrupt form submissions, users often have no recourse to complete the process, especially when there is no paper-based or phone alternative. Even when internet access is available, digital tools are frequently not user-friendly. For instance, forms that require users to scroll through decades to select a birthdate or upload scanned identification documents present substantial challenges for older or digitally inexperienced individuals.

Digital exclusion is not only a matter of infrastructure, but also deeply tied to factors such as age, income, and education. Many older individuals and persons with disabilities either do not own smartphones or use basic "button phones" that cannot run social media apps. Even those with devices often avoid digital communication out of fear of scams,

technical confusion, or sheer unfamiliarity. This affects not only access to information but also the ability to verify its credibility. Individuals who are not digitally connected are often unaware of updates, registration windows, or changes to eligibility criteria until it is too late. Among older persons, many own mobile phones but are unable to use messaging apps or navigate websites. In several rural and urban FGDs, participants describe relying on younger family members or neighbours to assist with aid registration or to relay digital announcements. However, when such support is unavailable due to displacement, death, or isolation, these individuals are excluded entirely from humanitarian updates.

Persons with disabilities, particularly those with visual impairments or cognitive challenges, also face serious limitations. Several key informants acknowledge that online forms are rarely designed with accessibility in mind. Screen-reader compatibility, large-font layouts, or alternative submission methods are often missing as per I/NGO representatives and interviewed community members with disabilities. As a result, users with disabilities depend on caregivers for access, creating layers of delay, miscommunication, and dependency.

Roma community members are also among those who are equally impacted by limited digital literacy and access to devices and tools, primarily due to limited education and financial resources. Many lack digital devices altogether, and even when smartphones are available in a household, literacy and digital fluency levels are often low. Community members may not know how to install or use Telegram, let alone fill out online registration forms. According to representatives of those organisations working with Roma people, fear of scams, lack of trust, and limited education make it more likely that Roma individuals avoid digital engagement entirely in both Moldova and Ukraine contexts.

> *"Digital tools can't replace relationships — if they don't trust the system, they won't click the link, no matter how good the platform is."*
>
> *(KII, Roma Organisation, Ukraine)*

This leads to a reliance on verbal communication and interpersonal relay networks, such as the informal "Roma mail" system, in which trusted community members pass on messages. While efficient within a close-knit setting, this method depends on the active presence of local mediators and fails when external actors do not build partnerships with those networks.

In both countries, digital communication strategies that rely solely on internet-enabled devices, complex platforms, or form-based systems are inaccessible by design for a large portion of affected populations. Without inclusive, low-tech alternatives—such as in-person briefings, simplified SMS, printed materials, digital literacy classes and tools/equipment for those with limited access, or trusted intermediaries, information will continue to reach only those who already possess the digital skills and trust to act on it.

Limited Financial and Human Resources

Across both Ukraine and Moldova, local organisations face persistent constraints in financial and human resources, directly impacting their ability to implement inclusive and responsive information sharing, community consultation, and feedback mechanisms. These constraints limit the number and diversity of communication channels that can be maintained, reducing the capacity for timely and sensitive engagement with communities, particularly those in marginalised or remote areas.
In many instances, local organisations struggle to diversify communication modalities due to budgetary and staffing limitations. For instance, these local organisations lack the necessary budget to create information-sharing practices in accessible formats, such as sign language or translation into Romani, for Roma community members. As a result, these community members heavily rely on word-of-mouth in both countries.

> *"No one comes to explain anymore. We hear from neighbours if something is happening."*
>
> *(Woman, FGD, Rural, Soroca, Moldova)*

Community engagement efforts are also hindered by insufficient staffing, particularly in areas such as facilitation, inclusive communication, or working with specific vulnerable groups. As noted by a representative of a national NGO in Ukraine, *"We want to hold more regular community dialogues, especially with displaced populations and persons with disabilities, but we simply don't have the staff or transport to reach all areas."* This decreases the two-way communication between these local organisations and community members, impacting the engagement of community members during implementation and resulting in less tailored and effective programming, as well as an inefficient use of humanitarian resources.
Similarly, community feedback mechanisms require operational resources to establish and maintain mechanisms through multiple channels (e.g., complaint boxes, digital tools, social media channels, hotlines, and in-person feedback desks), as well as to respond adequately to submissions through trained personnel. As per an interview with a local NGO representative in Ukraine, *"We get complaints through social media sometimes, but we don't have a person to monitor and respond full-time."* One of the interviewed community members with disabilities in Ukraine expressed frustration over submitting feedback with no follow-up, attributing it to "the small teams and too many things happening at once."
This is also recognised by UN Agency and NGO representatives in both Ukraine and Moldova, suggesting a further need for localisation in information sharing, community consultations, and feedback mechanisms by supporting local organisations in both financial and technical ways.

Social and Cultural Barriers

In both Ukraine and Moldova, social and cultural barriers remain persistent, though often under-recognised, challenges to inclusive information sharing, community consultations and feedback mechanisms. These barriers do not stem from physical or technological limitations

alone, but from deeper systemic and relational issues, including stigma, societal norms, marginalisation, and entrenched power imbalances. The result is an engagement landscape where certain groups are consistently underrepresented, under-consulted, or entirely invisible in the design and adaptation of humanitarian programmes.

Across both contexts, key informants and FGD participants highlighted that *Roma communities, LGBTQIA+ individuals, persons with disabilities, and older persons* are frequently excluded from consultation processes, either directly or indirectly. This exclusion is rarely intentional but often the byproduct of systems that fail to account for cultural sensitivities, communication barriers, or structural disadvantages.

In Ukraine, several key informants noted that while Roma communities may not be overtly excluded from programming, they are rarely reached through formal consultation processes, due to deep-seated mistrust, language barriers, and fears related to institutional engagement. Respondents stressed that Roma mediators play a crucial role in bridging these divides. These individuals, trusted within their communities and unaffiliated with government institutions, are often the primary means of gathering authentic feedback and facilitating participation in a culturally sensitive manner.

> *"Roma mediators are those trusted by people. If you wanna get accurate information, you need to approach the Roma community through these mediators."*
>
> *(KII, Roma Organisation, Ukraine)*

Similarly, LGBTQIA+ individuals were noted by some NRC staff and LGBTQAI+ organisation representatives as being almost entirely absent from consultations, not because they don't exist within the affected population, but because they may self-exclude out of fear, invisibility, or previous negative experiences with institutions. In both countries, informants acknowledged that safe and welcoming consultation spaces for LGBTQIA+ people are lacking, particularly in smaller towns and rural areas where stigma remains high.

A similar issue is found for persons with disabilities, who are frequently left out of consultation activities, not only due to mobility limitations but also because of a broader social perception that their opinions are less relevant. As one of the interviewed inclusion experts explained, the legacy of Soviet-era institutional attitudes continues to shape the way disability is treated in both policy and practice, often reducing persons with disabilities to passive recipients of aid without any structured and systemic approaches for their inclusion in consultations.

Limited Language Skills

Some of the community members, particularly Roma, have further barriers in accessing information, participating community consultations and sharing their feedback due to the limited language skills. As per representatives of the Roma organisation in Ukraine, many cannot read or write. According to the Migration Policy Institute, many Roma individuals do not speak Ukrainian or Russian and instead speak various dialects of the Romani language. This is a result of persistent underfunding of Ukrainian schools with large Roma student populations and the limited integration of Roma children into broader school communities. Even in

integrated settings, Roma students often remain socially isolated, frequently seated at the back of classrooms and facing ongoing challenges related to language barriers and educational support.[38]

> *"Many of them can't read. Some don't want to sign anything — they're afraid. Even marking an 'X' feels risky."*
>
> *(KII, Roma Organisation, Ukraine)*

As a result, many Roma community members even can't read and understand the support provided through traditionally printed materials because of limited literacy skills. Considering that many also do not have necessary digital literacy skills, along with the gadgets and internet, they become highly excluded in receiving comprehensive information about the humanitarian aid, participating in consultations and sharing their feedback.

Furthermore, even those who are functionally literate often struggle with formal forms that require signatures, digital uploads, or exact wording as per the informant. In some cases, individuals avoid registering for humanitarian support altogether because they fear making mistakes, signing something they don't understand, or being asked for documents they cannot provide. This lack of accessible formats disproportionately excludes those who need the humanitarian aid most among Roma individuals. Additionally, many humanitarian assistance registration processes involve multi-step digital forms, often in Ukrainian only, without accompanying explanations or audio guidance, leaving Roma community members behind in terms of access. Representatives of many I/NGOs and UN Agencies acknowledge these challenges but often lack the tools, time, or funding to design and distribute materials in plain language, with visual instructions, or in spoken formats. As a result, well-intentioned outreach materials reinforce exclusion rather than closing the gap.

While Roma community members have the same challenges in terms of literacy and access to information through these printed materials in Moldova, limited language skills are reported to be an additional barrier for refugees from Ukraine as well. Although Moldova has made significant efforts to provide multilingual outreach, including in Ukrainian and Russian, some materials still appear only in Romanian, which many Ukrainian refugees do not speak or read fluently. This results in limited access to information, misunderstandings, or delayed applications, even among those with a high motivation to access information and register for humanitarian support. According to FGD participants from Ocnita and Soroca, some refugee-targeted announcements on public transport or in job centres were entirely in Romanian, with only one line in Ukrainian at the end, leading many to question whether the services applied to them. Moreover, according to refugees, information in Romanian is more prevalent in rural areas than in urban areas, such as Chisinau and Balti, where more information is found translated into Ukrainian and/or Russian.

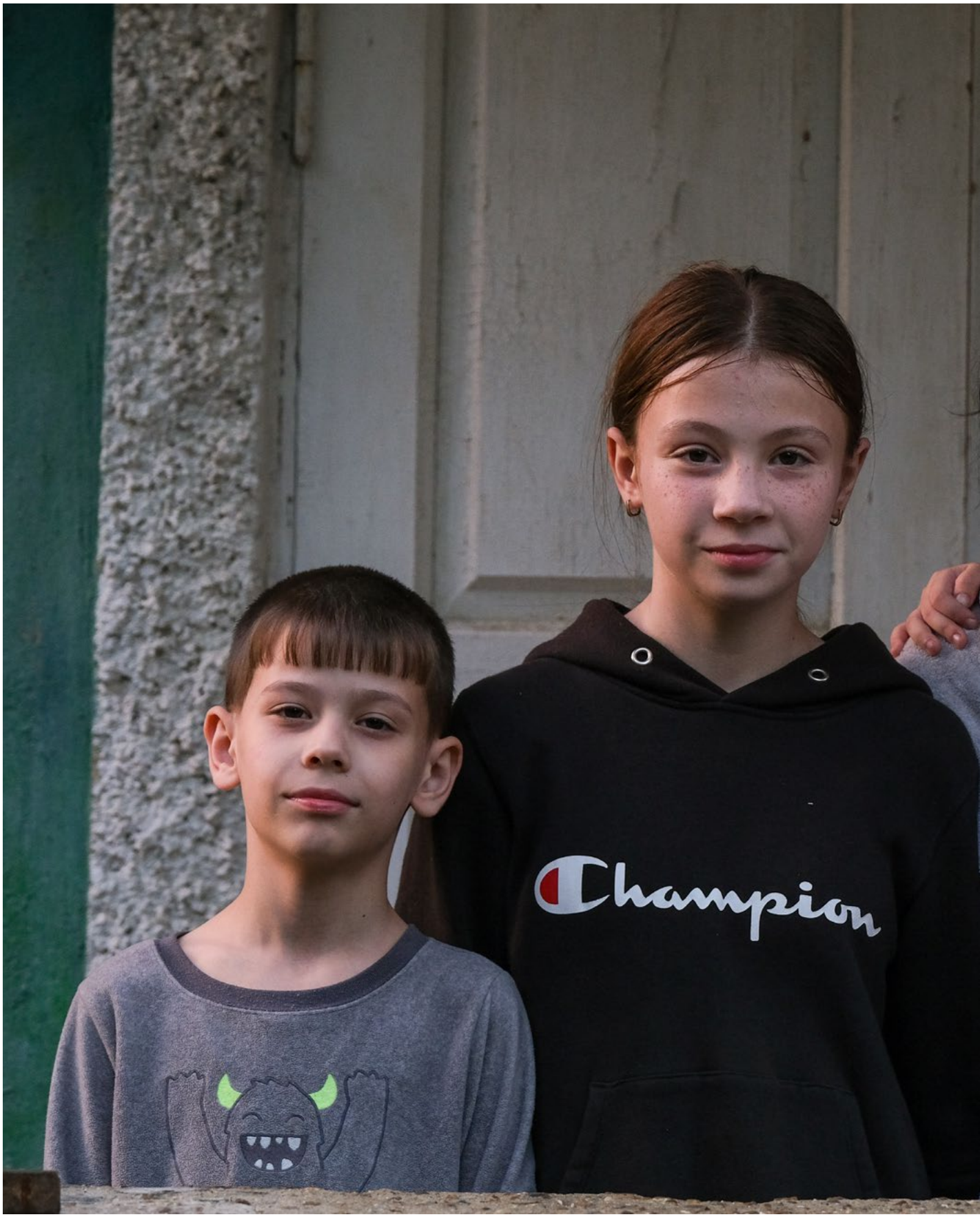
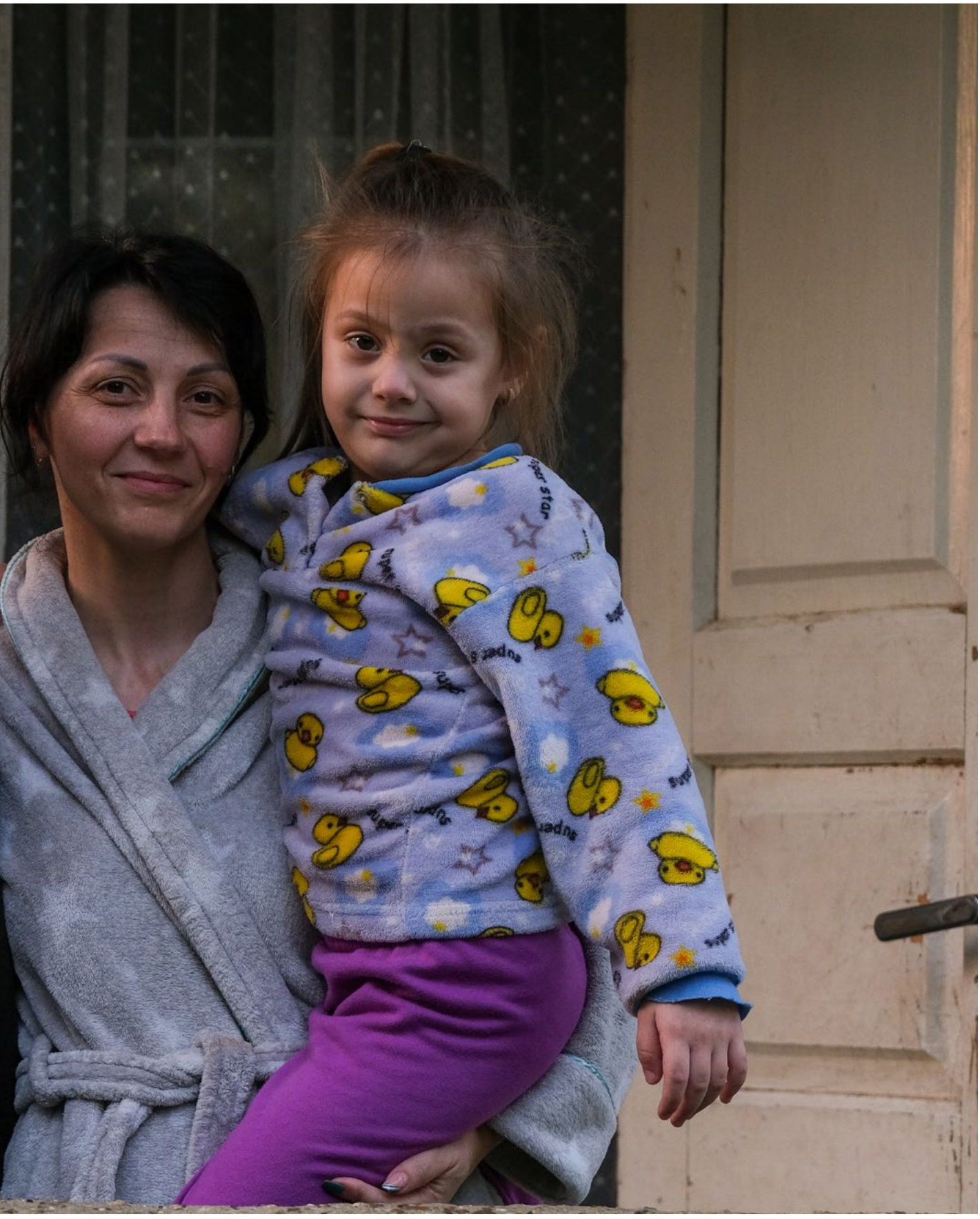

Champion

Photo: NRC



5 Conclusions & Opportunities

Opportunities to strengthen and sustain effective community engagement and accountability, across information sharing, consultations, and feedback mechanisms, were clearly articulated by community members, representatives of marginalised groups, and humanitarian actors in Ukraine and Moldova. These opportunities reflect a recognition of systemic barriers and a shared willingness to co-create inclusive, transparent, accessible and sustainable solutions.

1. Expanding Localised, Inclusive, and Multi-Modal Information Dissemination

Community members across Ukraine and Moldova consistently emphasised the need for tailored, accessible, and timely information provision. Participants in rural, and remote areas and those residing in frontline or under constant attack described an overreliance on digital platforms that are either inaccessible or unfamiliar to certain population groups, particularly older persons, persons with disabilities, and Roma communities.

Opportunities exist to *integrate non-digital dissemination methods*, such as community bulletin boards, word-of-mouth communication through trained community volunteers, and in-person information sessions facilitated in local languages. In both countries, community radios, SMS alerts, and printed materials in easy-to-read formats were suggested as preferred options. These approaches should be co-designed with communities, particularly those with limited literacy or access to technology.

2. Establishing and Supporting Community-Based Focal Points and Mobilizers

Trust emerged as a foundational issue in all aspects of engagement. Many participants noted that humanitarian actors were seen as external, transient, or difficult to engage with, particularly those coming from marginalised and disadvantaged backgrounds. To address this, both community members and local NGO staff suggested the appointment or reinforcement of trained community focal points who can serve as the bridge between humanitarian actors and affected populations.

These focal points should represent diverse social groups, including women, youth, older persons, Roma people, LGBTQIA+ individuals, and persons with disabilities, and receive training on inclusive communication, humanitarian principles, and safeguarding. Establishing *community mobiliser* networks could enhance trust and continuity in both consultations and feedback mechanisms.

3. Adopting Proactive Accessibility and Intersectionality Standards

Opportunities to improve accessibility are manifold, especially through the *institutionalisation of inclusive design practices*. As per disability rights organisations in Ukraine and Moldova, most current feedback systems are not usable by persons with visual, hearing, or intellectual disabilities.

FGD participants with disabilities noted that consultation meetings often lacked ramps, sign language interpretation, or materials in braille or pictograms. One participant shared, *"It's like we are invisible. If you want our voice, you need to make space for it."*

Moreover, many local organisations were unable to offer different communication methods, modalities, and languages to the various groups due to limitations in financial, human, and technical resources. To mitigate this, a joint system could be considered, such as Moldova's Green Line platform, and these groups could be served through a single accessible platform, jointly funded by international, national, and local humanitarian actors, thereby mitigating risks associated with limited budgetary and staff capacity. Humanitarian actors, including relevant AAP Task Forces, could advocate and coordinate with humanitarian actors for the design and establishment of such a platform.

In addition, LGBTQIA+ individuals and Roma respondents called for *safe spaces for feedback* and anonymity options, noting fear of backlash or stigmatisation. Feedback boxes in community centres, encrypted messaging channels, or the use of trusted intermediaries for sensitive consultations were proposed as practical solutions.

4. Creating Feedback Loops that Build Trust and Demonstrate Accountability

Across FGDs and KIIs, community members expressed scepticism about the effectiveness of feedback mechanisms due to a perceived lack of follow-through. As one Ukrainian participant described, *"We told them what was wrong six months ago. Nothing changed. It feels useless."*

To address this gap, humanitarian actors can implement *feedback loop protocols* that ensure responses are visibly acted upon and reported back to communities. Examples include displaying community feedback dashboards in local centres, issuing monthly *"You said, we did"* updates, and convening follow-up dialogues specifically on feedback themes. Furthermore, communication regarding feedback, whether positive or negative, should be integrated into structured systems, clearly outlined in Standard Operating Procedures (SOPs), and assigned to designated staff roles to ensure accountability and consistency.

NGO staff in Moldova proposed using *participatory reflection sessions* where community members are presented with action taken based on their input and asked to validate or revise proposed solutions. Such approaches not only improve transparency but also create a culture of mutual respect and iterative learning.

5. Formalising Community Participation in Programme Design and Review

A deeper level of engagement, beyond one-off consultations, was advocated by youth groups, displaced persons, and Roma communities. In several FGDs, participants articulated a desire to be part of *decision-*

making processes, not just recipients of information or occasional respondents.

In Kharkivska, youth respondents recommended co-leading the design of digital engagement tools or surveys targeting their age group, while Roma women in Moldova asked for structured forums where they could routinely meet with NGO staff and shape intervention priorities. *"Don't ask us once. Work with us throughout,"* said one participant.

Embedding communities in *participatory monitoring, evaluation, and learning processes*, for instance, through community advisory groups or peer-led feedback collection, was viewed as a key step toward meaningful engagement. These groups can also help humanitarian actors adapt their interventions in real-time to reflect the evolving needs of different groups.

6. Developing Mobile, Pop-Up, and Itinerant Engagement Models

In both countries, populations living in remote, informal, or underserved areas face persistent exclusion from humanitarian engagement processes. Communities affected by displacement or marginalisation, particularly Roma individuals, persons with disabilities and older persons, expressed that engagement events or information sessions often occur far from their locations, making participation physically and logistically unfeasible. FGD participants in Moldova noted that humanitarian organisations rarely visit their settlements unless there is a crisis, and even then, visits are brief and unannounced.

As a result, many feel disconnected from humanitarian programming and unaware of their rights or available services. To address this, a recurring recommendation was to adopt mobile and itinerant engagement models, such as rotating community tents, pop-up information kiosks in markets or transport hubs, and roving feedback collection teams. These models would not only expand reach but also demonstrate presence and consistency. When deployed regularly and with clear communication in advance, such mechanisms could bridge geographic barriers, strengthen trust, and ensure that information, consultations, and feedback systems are not limited to static or centralised venues. Furthermore, UN agencies and INGOs should consider supporting local implementing partners with the necessary financial and technical capacity under their localisation response to ensure that local organisations are able to implement such mobile, pop-up practices.

7. Addressing Gendered Constraints to Participation Through Flexible and Inclusive Modalities

An important yet often under-acknowledged barrier to equitable community engagement lies in the *gendered impacts of caregiving and household responsibilities for women,* particularly those whose husbands/partners are conscripted and have become the sole caregivers and income generators in their households. In Ukraine and Moldova, many women reported being unable to attend community consultations, information sessions, or feedback events due to increased unpaid care burdens following the conscription or displacement of men family members. This includes caring for children, older relatives, persons with disabilities, or managing multiple jobs to sustain household income. These overlapping responsibilities significantly limit women's availability to engage in in-person meetings or time-bound feedback mechanisms. To

address this, humanitarian actors should consider introducing *more flexible engagement modalities* such as extended consultation periods, asynchronous digital tools (e.g., voice notes, messaging apps), childcare support during community events, and scheduling consultations during hours that accommodate women's routines. Additionally, offering *women-only consultation groups* facilitated by woman staff may improve both comfort and accessibility. Recognising and planning for these gendered constraints is essential not only to improving women's participation but also to ensuring that engagement processes reflect the full diversity of community experiences and needs.

8. Leveraging Technology for Two-Way, Real-Time Engagement

While face-to-face engagement remains essential, particularly for marginalised and digitally excluded groups, there is a growing demand for more dynamic and interactive digital tools, especially among young people and adult women and men populations, which is a significant proportion of the population with necessary digital tools and literacy skills. FGD participants across Ukraine and Moldova expressed frustration with the current digital feedback tools, which are often static or unidirectional, such as online forms that do not offer confirmation or follow-up.

Youth respondents in Ukraine and Moldova called for mobile apps or Telegram bots that allow users to not only submit feedback but also track whether their input was read, responded to, or acted upon. Similarly, representatives of organisations working with LGBTQIA+ individuals in both countries emphasised the need for confidential and anonymous engagement tools, suggesting the development of AI-powered chatbots or voice-response lines that offer multilingual options and privacy. These platforms should be designed collaboratively with users, tested for usability and accessibility, and integrated into existing service delivery pathways. Real-time engagement tools, when implemented safely and inclusively, can significantly enhance accountability, user confidence, and communication efficiency.

9. Mainstreaming Community Engagement and Accountability Across All Sectors and Programmatic Phases

A critical structural opportunity lies in institutionalising CEA throughout the entire programme cycle and across all sectors, not only within specialised protection or accountability teams. According to humanitarian staff interviewed in both Ukraine and Moldova, community engagement is often treated as the responsibility of a single focal point or unit, which limits its integration and effectiveness. When engagement is siloed, communities may receive inconsistent messages, miss out on opportunities to shape programme decisions, or be repeatedly consulted without coordination. Mainstreaming engagement requires that all humanitarian staff, regardless of sector, whether working in ICLA, Shelter, Protection, WASH, health, livelihoods, or education, receive training on inclusive communication, understand the importance of feedback mechanisms, and are accountable for implementing engagement activities within their scope. Furthermore, including engagement-related indicators in monitoring frameworks, budgeting for community participation activities in sectoral proposals, and reflecting engagement in performance reviews can all contribute to institutionalising this practice. Such inte-

gration ensures that community perspectives are systematically embedded in needs assessments, programme design, delivery, and monitoring processes.

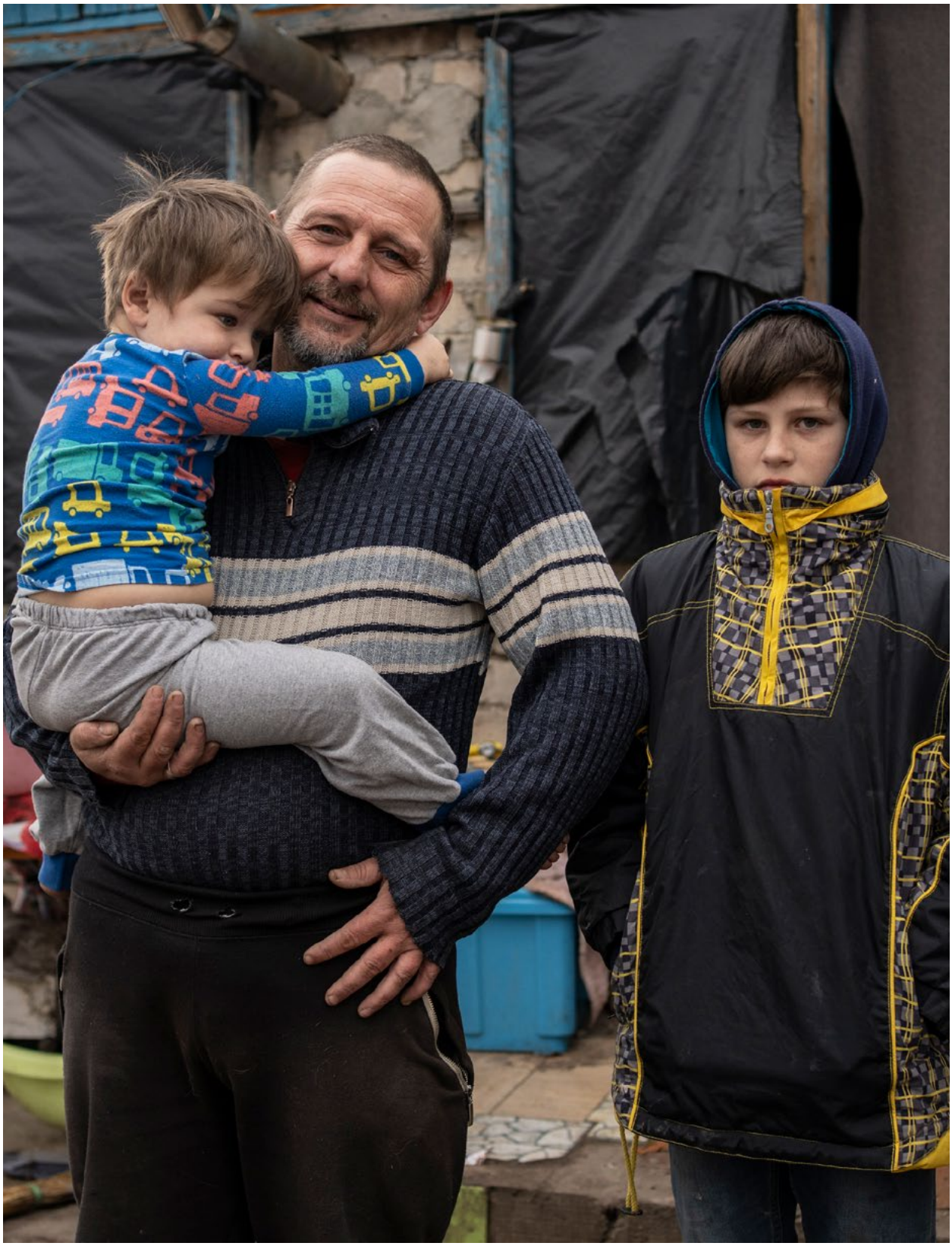
10. Building Long-Term Relationships Through Local Partnerships and Capacity Sharing

Sustainable and effective engagement requires long-term presence and trusted relationships, elements that are often better embodied by local civil society actors than international organisations with short-term mandates. FGD and KII respondents across both contexts highlighted the critical role of local NGOs, community-based organisations (CBOs), and informal networks in bridging trust and communication gaps. Representatives of local organisations and community members expressed stronger alignment and comfort with local mediators/facilitators who share cultural understanding, language, and lived experience. However, these actors frequently lack sufficient financial and technical support to lead systematic engagement efforts. Humanitarian agencies should prioritise *funding and capacity development partnerships* with these actors, including training on information sharing, consultations, community feedback mechanisms and standards, digital tools, data protection, and participatory facilitation. Co-implementation and co-design models, where local partners are not merely intermediaries but co-owners of engagement strategies, can dramatically improve quality, inclusivity, and relevance. This also contributes to broader localisation commitments, shifting power to local actors and building resilience in community systems.

11. Centring Psychosocial Safety and Trauma Sensitivity in Engagement Approaches

It is imperative that all community engagement mechanisms are designed and implemented through *a trauma-sensitive lens*, particularly in conflict-affected areas with high psychosocial distress. Across FGDs with adults, interviews with persons with disabilities, children and Roma community members revealed emotional fatigue, stress, and occasional re-traumatisation caused by poorly facilitated consultations or impersonal data collection. A woman from Kharkivska expressed this succinctly: *"We are asked again and again to tell our stories, but nothing changes. It reopens old wounds."* Opportunities to improve this include training facilitators in *psychological first aid*, using non-invasive, non-judgmental language, providing opt-out and consent-based participation, and ensuring referral pathways to psychosocial support services are available at consultation sites. In addition, creating safe and welcoming spaces for dialogue, such as women-led or LGBTQAI+ led safe rooms or inclusive community hubs, can provide an emotionally secure setting for participation. This would not only increase their meaningful engagement but also build trust between organisations and targeted communities.

Vitaliy, 51, and 2 of his sons, in the the yard of their house in Posad-Pokrovske, North of Kherson region. In December 2023, Vitaliy, his wife and their 6 children left the outskirsts of Kherson city to the village of Posad-Pokrovske.
Photo: Myriam Renaud



6 Recommendations

6.1 Short-Term Recommendations

- Establish/maintain hybrid information sharing systems that combine digital tools (such as Telegram and SMS) with non-digital, more traditional channels (including community boards, loudspeakers, and in-person briefings) to reach all population segments, particularly rural and older populations.
- Clearly define roles and SOPs for communicating feedback (positive or negative), with assigned accountability to designated staff.
- Recruit and train community mobilisers or focal points from within marginalised groups (e.g., Roma individuals, persons with disabilities, LGBTQIA+) to serve as trusted intermediaries.
- Ensure trauma-sensitive facilitation by training all staff involved in consultations and feedback to apply principles of psychological first aid and safeguard against re-traumatisation.
- Implement feedback loops with visible follow-up actions (e.g., "You said, we did" notices, community feedback dashboards) to build credibility and demonstrate responsiveness.
- Provide physical and digital accessibility: Ensure all consultation venues are physically accessible (ramps, seating), and that digital tools (feedback forms, chatbots) are compatible with screen readers or offer audio options for persons with visual impairments
- Ensure anonymity and safety in feedback: Offer private, anonymous ways to give input, especially for LGBTQIA+ individuals, children, and women at risk of violence. Feedback boxes or encrypted digital tools are essential.
- Develop child-friendly communication channels, including visuals, drawings, audio prompts, and storytelling approaches to ensures the access of children as per their gender and age group.
- Appoint trusted community liaisons from each group: Train Roma leaders, disability advocates, and youth facilitators as focal points to gather and relay feedback within their own communities.
- Adapt consultation schedules and locations to accommodate women with care responsibilities, including flexible timings and child-friendly consultation settings.
- Offer transportation stipends or mobile alternatives: For older persons or persons with mobility challenges, provide small transport reimbursements or bring consultations directly to their homes or centres.
- Distribute information in plain language and local dialects: Use simple, jargon-free language; translate into Romani and other relevant languages. Roma FGD participants reported receiving irrelevant or confusing messages in dominant languages.

6.2 Medium-Term Recommendations

- Integrate community engagement and accountability into all sectors and programme phases of programming, implementation, monitoring by training sectoral staff, setting Key Performance Indicators, and ensuring consistent application of engagement tools.
- Expand mobile and itinerant outreach models such as rotating information tents, pop-up kiosks, or roving community teams to reach those in informal settlements or remote areas.
- Conduct inclusive co-design workshops to enable community members, especially underrepresented groups, to shape the design of services, surveys, and information materials.
- Advocate for a joint inter-agency community engagement platform that facilitates community consultations and feedback mechanisms, harmonises tools, and reduces consultation fatigue.
- Design and deploy two-way digital engagement tools (e.g., chatbots, messaging platforms, Interactive Voice Recognition systems) that allow real-time feedback, language preferences, and user anonymity.

6.2 Long-Term Recommendations

- Invest in long-term partnerships with local CSOs and informal networks as part of the localisation agenda, especially women-led, Roma-led, or disability-led organisations, to localise and sustain engagement strategies.
- Incorporate engagement and feedback themes into donor frameworks and evaluation criteria, to ensure they remain a priority across funding cycles.
- Monitor and evaluate accessibility over time: Integrate disaggregated indicators into M&E systems (e.g., % of Roma women participating in consultations, % of feedback mechanisms accessible to persons with hearing impairments).
- Create standing community advisory bodies or participatory monitoring groups to ensure regular community input and decision-making power over time.
- Build inclusive digital infrastructure and literacy (e.g., training women and marginalised groups in digital engagement tools) to reduce long-term disparities in access.
- Advocate for developing national-level feedback and accountability frameworks, co-created with affected communities, local authorities, and civil society, to institutionalise participation.

7 Annexes

7.1 Annex-I: List Of Desk Review Resources

- Norwegian Refugee Council, NRC Safe and Inclusive Programming Toolkit, 2023, Oslo, Norway
- Norwegian Refugee Council, CFM in NRC - Final Report, October 2022, Oslo, Norway
- Norwegian Refugee Council, Sida Gender Project 2024 - 2025 Explainer, 2024, Oslo, Norway
- Norwegian Refugee Council, Community Engagement and Accountability Policy, June 2024, Oslo, Norway
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- Norwegian Refugee Council, NRC Ukraine Country Strategy 2023-2025
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- Norwegian Refugee Council, NRC Moldova Complaints & Feedback Mechanism 2024 Annual Report, Chisinau, Moldova
- Norwegian Refugee Council, Safe and Inclusive Programming Minimum Standards, 2023, Oslo, Norway
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- Norwegian Refugee Council, CFM Training – Information Session 2024, PPT
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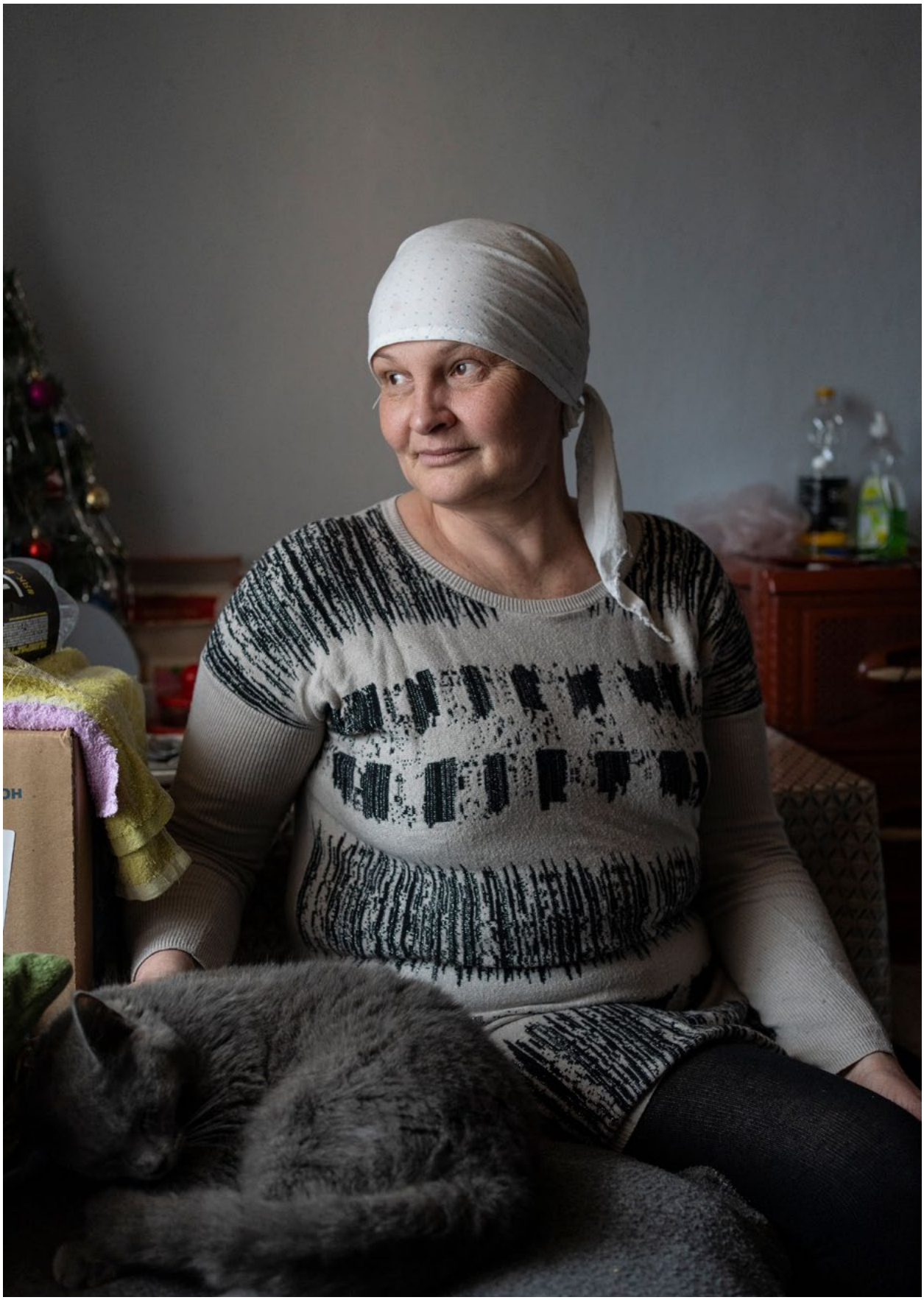
- UNHCR, Meaningful engagement: Enhancing inclusive participation in UNHCR work Age, Gender and Diversity Accountability Report 2023,
- Internews and UNHCR, ”Feedback ≠ Participation: Trust, transparency and communication with refugees from Ukraine” Information Ecosystem Assessment 2023-2024. Moldova

Table 3 List of Desk Review Resources

Portrait of Liubov, in Liubomyrivka, Mykolaiv region, Southern Ukraine. Liubov and her husband Vitaliy came back to their village in May 2023, after one year away. Photo: Myriam Renaud



End notes

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10 IFRC, Community Engagement and Accountability Strategy 2023-2025, 2023. Geneva, Switzerland. Link https://www.ifrc.org/sites/default/files/2023-06/20230523_CEA_Strategy_ONLINE.pdf
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NORWEGIAN
REFUGEE COUNCIL