

# The capacity of Polish and Romanian stakeholders to provide support to Ukrainian refugees with disabilities in the metropolitan areas of Warsaw and Bucharest



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Warsaw 2024



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# EXECUTIVE SUMMARY

The project aimed to diagnose and understand the current situation and the type of assistance provided to refugees with disabilities, using Ukrainian war refugees as an example. Our research is based on a scientific approach that draws inspiration from the concept of the „organizational field” as the unit of analysis. This means that we focus on individuals and organizations that provide assistance to refugees with disabilities.

Our research goal was to contribute to improving the organization of support for refugees with disabilities by gathering and sharing the knowledge resulting from our research and identifying opportunities for practical improvement. We aimed to achieve both scientific and social objectives to ensure that our findings have a tangible impact. We propose a timely and conceptually relevant combination of migration studies and disability studies approaches, which is still quite rare in both fields.

To accurately diagnose the situation, we conducted a comprehensive participatory study, which included document analysis, expert legal and policy-related opinions, group interviews and 41 individual interviews with social actors, considered key for the researched topic. The empirical data used in this analysis was gathered as part of the aforementioned project, in July-December 2023, at two research sites, Warsaw and Bucharest. This deepened our sociological knowledge and allowed us to formulate practical guidelines for real assistance to refugees with disabilities.

The project was carried out by Collegium Civitas in Warsaw in collaboration with the Research Institute for Quality of Life at the Romanian Academy of Sciences. This collaboration allowed us to strengthen our research capabilities and compare stakeholder actions in the metropolitan areas of Warsaw and Bucharest regarding support for war refugees.

## Key findings

- 1. Refugee Flow:** In spring 2022, Poland and Romania received Ukrainian war refugees. The high number of refugees with various forms of disabilities was unexpected by various state and civil society stakeholders.
- 2. Civil Society Response:** Despite being unprepared, civil society in both countries responded immediately. NGOs and private individuals took action without waiting for government intervention.
- 3. Initial Assistance:** Most help was provided at the borders when refugees entered the countries. The engagement was focused on reception and integration and to a lesser extent on evacuation efforts which were minimal.
- 4. Challenges and Burnout:** Organizations faced challenges during the intense initial weeks of assistance. Employees and volunteers experienced professional and emotional burnout. However, the enthusiasm and intense community mobilization also attracted resources from donors including international ones.
- 5. Communication and Cooperation:** Effective communication and cooperation among stakeholders were crucial. Networks, both personal and professional, helped refer clients/beneficiaries to relevant services.
- 6. Solutions for Refugees with Disabilities:** NGOs developed solutions, including bilingual helplines, video lines for deaf individuals, and information hubs in frequented city locations.
- 7. Transnational Cooperation:** Collaboration across borders was essential, especially for evacuations from conflict zones.
- 8. Role of Immigrants:** Immigrants in host societies played a vital role by creating bonds with refugees, serving as role models, and mediating cultural differences.
- 9. Unmet Needs:** Many of the needs of refugees with disabilities remain unmet. The primary reasons include a lack of procedures and long-term financing, especially in health support for people with disabilities.
- 10. Psychological Support:** There is a shortage of specialists who speak the refugees' own language, particularly in the area of psychological support. The lack of culturally appropriate diagnostic tools hinders accurate diagnosis for people from different cultural backgrounds. Psychiatric therapy requires multiple sessions, emphasizing the need for financial support, especially since refugees often rely on

private doctors. Psychological support is also needed for case workers, in order to help them manage the (emotional) difficulties of having to provide services to a new category of beneficiaries, with different experiences than service providers in Poland and Romania are accustomed to.

- 11. Accessibility:** Reception and long-term stay places must be adapted to accommodate the mobility limitations of people with disabilities. In many cases, the lack of accessibility was one of the crucial barriers experienced by refugees with disabilities.
- 12. Structured Solutions:** Supporting institutions and organizations require well-structured solutions rooted in migration and integration policies for effective long-term activities.
- 13. Quality of Service:** Improving service quality for citizens in a vulnerable situation benefits both refugees and the local population.
- 14. Contingency Planning:** Having a contingency plan and early response mechanisms are crucial during humanitarian crises.
- 15. Organizational Learning:** Going through such experiences contributes to developing future plans and increasing capacity for intervention by both public organizations and NGOs, which gained valuable expertise.
- 16. Challenges of NGOs:** Rapid growth leads to changes in internal structures, communication, and managing activities. Finding the right professionals proved to be difficult: language skills are critical for front-line workers and are often lacking. NGOs experience temporariness and uncertainty, due to their reliance on funding for refugees from the Ukraine. Rapid growth can sometimes be followed by rapid shrinking, which can be a problematic situation

# INTRODUCTORY PART

## INTRODUCTION

The outbreak of the full-scale Russian war on Ukraine caused the most rapid and most numerous influxes of refugees to countries neighbouring Ukraine. The situation required immediate action to provide support to people who had to flee their country because of the war. In March 2022, for the first time in history, The European Council activated The Temporary Protection Directive (Directive 2001/55/EC) on minimum standards for giving temporary protection in the event of a mass influx of displaced persons, which regulated the legal status of Ukrainian war refugees in the European Union (EU) and gave them access to legal employment and social services.

Data on 28 December 2023 show that 5,935,000 refugees from Ukraine were recorded in Europe (UNHCR). Up to June 2023, Poland was the biggest recipient of Ukrainians. There were 17,428,366 crossings of the border from Ukraine to Poland between 24 February 2022 and 12 November 2023. During the same period, there were 15,631,313 border crossings from Poland to Ukraine (Polish Border Guard). By the end of October 2023, there were 960,620 non-EU citizens from Ukraine registered under temporary protection in Poland, 142,340 in Romania, 111 615 in Slovakia, and 33,325 in Hungary (EUROSTAT 2023).

The choice of the two countries, Poland and Romania, was based on the number of Ukrainian war refugees registered there and the geographical position as the main interface between the EU and Ukraine, their common communist past, and a common post-communist experience as emigration countries. Both countries have very limited experience of receiving immigrants, especially in high numbers in a very short period, as in the case of Ukrainian war refugees (UWR). Therefore, the reaction to the influx of UWR was similar. The vast majority of actions aimed at supporting Ukrainian war refugees with disabilities (UWRwD) have been by NGOs and grass-roots initiatives without the formal support of central government or extensive support from local administrations (Dziekanowska et al., 2023; Kalinowska et al., 2023; Ociepka & Gorzałczyńska, 2022). Information reveals the difficulties public administration has

in being flexible and timely in providing proper support to UWRwD. Such historical similarities, geographical positioning, and lack of experience in receiving and integrating refugees make the two countries perfect for studying the current reaction to UWR and to develop cooperation among the different sectors in the two societies.

In the project, a participatory research frame was applied and insights from migration studies and disability studies frameworks were combined. Stakeholders and important community actors were involved in the research process, not only as informants and respondents but also as crucial partners. Therefore, the research and intervention methods and activities intersected. The results from the intervention activities fed the research, and the research results established resources for further intervention. The added value of the research was the fact that among the participants of the research were Ukrainians and people with disabilities, some being involved in providing assistance to UWRwD.

The research aimed to collect data about the beginning and subsequent stages of the helping process to map activities, compare the situation in Bucharest and Warsaw, and finally formulate recommendations for state and civil society stakeholders.

The report consists of six parts: the executive summary giving the most important information. The executive summary is available (as separate files) in Polish and Romanian and is also available in an easy-to-read version. The introductory part gives a general overview of the situation after the war started, including a review of the existing literature, and providing the methodological specifications. The section on findings details our main results and provides the data analysis. The final part is split into a discussion of the main implications and the conclusion, and recommendations for policy action.

## LITERATURE REVIEW

### Refugees as a specific social group

Refugees are highly vulnerable and a category of migrants with unique needs. The integration of migrants is a complex issue, dependent on various factors, including availability of the public services and resources that refugees can utilize for support (Bešić et al., 2022). For refugees, accessing essential resources for daily living and integration generally poses significant challenges. Health services, in particular, are notably difficult for refugees to access compared to the general population (Chiesa et al., 2019). Living conditions significantly affect other life domains, with higher rates of psychological issues observed among those in refugee facilities (Leiler et al., 2019). Daily interactions with the host community are crucial for fostering social

integration and empowering refugees (Ramachandran & Vathi, 2022). Additionally, studies suggest a possible link between social participation and mental health among refugees (Niemi et al., 2019).

The COVID-19 pandemic exacerbated the difficulties refugees face in accessing the necessary services and resources for their reception and integration (Pumares et al., 2021), while also negatively influencing public attitudes towards them (Bohnet & Ruegger, 2021). Suboptimal living conditions, particularly in refugee camps, increased exposure to the virus, and a lack of resources hindered the ability to obtain the recommended sanitary equipment (Bhimji 2021; Bohnet & Ruegger, 2021).

## Dealing with disabilities

The mainstream discourse often portrays people with disabilities as a homogeneous group with similar needs. People with disabilities come from diverse economic backgrounds, cultures, and sexual and religious orientations, making them the most diverse minority group (Goodley et al., 2020). Consequently, how disability is experienced is shaped by a range of factors, including economic, cultural, environmental, and historical influences (Watson et al., 2012).

The definition of „disability” is evolving, as recognized by disability activists and scholars, and encapsulated in the United Nations’ Convention on the Rights of Persons with Disabilities (CRPD). Embracing the social model of disability, the CRPD emphasizes that disability arises from the interaction between individuals with impairments and „attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others” (UN CRPD, 2006). Therefore, disability is not defined as an individual’s inherent dysfunction. People with disabilities require an inclusive and accessible environment to fully exercise their human rights (Lid et al., 2023).

People with disabilities face significant challenges in meeting their needs (Hultman et al., 2023; Pisani and Grech, 2015). These challenges stem from communication and attitudinal barriers, restricted mobility, limited access to specialized equipment or medication, and increased exposure to additional risks such as violence. Substandard conditions in reception centres not only hinder mobility and access to basic services but also exacerbate the difficulties faced by people with disabilities (Mirza, 2014).

Similarly, people with disabilities may acquire new impairments and require mental health support, possibly due to conditions such as post-traumatic stress disorder (PTSD) (Hultman et al., 2023). The collection of information on migrants with disabilities, in cooperation with Disabled People’s Organizations (DPOs), is crucial

for developing appropriate humanitarian responses. Additionally, EU member states need to consider data on migrants with disabilities to ensure that the rights set out in the CRPD are upheld for those experiencing forced migration.

## The social landscape of migration in Warsaw and Bucharest

Historically, Poland was a country of emigration. However, two Russian aggressions in Ukraine have significantly transformed Poland into a receiving country. Since the 2014 Russian aggression in Eastern Ukraine, Poland has increasingly become a destination for economic migrants from Ukraine (UdsC). The full-scale Russian invasion in 2022 brought an influx of war refugees seeking protection.

Most migrants arriving in Poland are third-country nationals, with Ukrainians numbering 745,980. Other significant groups include Belarusians, Georgians, Hindus, and Moldavians. By the end of 2022, a total of 1,023,922 people were registered with the Zakład Ubezpieczeń Społecznych (ZUS, the Polish Social Insurance Institution). Additionally, there were 39,329 EU citizens registered (ZUS, 2023).

Warsaw is a primary destination for both third-country nationals and EU citizens (Andrejuk, 2017; Budyta-Budzyńska, 2020; Górny et al., 2018; Górny et al., 2020; Nowicka, 2021). According to City Hall data, the largest migrant groups residing in Warsaw are Ukrainians (51,705), Belarusians (15,999), Vietnamese (5,913), Indians (3,708), Chinese (1,541), and others totalling 34,028 (Warsaw City Hall, 2023). Since February 2022, Warsaw has also become a host city for UWR, primarily women and children. By the end of March 2022, the city's population had increased by 17% (Warsaw City Hall, 2022). Various entities established places for short and long-term stays, some of which are still operational.

Despite hosting migrants for years, Warsaw's city hall has not developed a comprehensive strategy for migrant integration. There is also no such strategy at the national level. All support directed to migrants is short-term and lacks alignment with any long-term goals or strategies.

Romania has traditionally been a country of emigration and is marked by significant disparities in individuals' access to resources such as services and various forms of capital. In recent years, immigration has also become a notable phenomenon (Roman et al., 2023). Bucharest and its metropolitan area, being the wealthiest region in Romania, attracts substantial internal migration. This region is also a key destination for work-related immigration, encompassing both low-skilled job seekers and highly skilled professionals (expats). The latter come mostly from within the EU for high-skilled jobs, while those from outside the EU typically fill low-skilled positions (Voicu & Croitoru, 2023).

Regarding refugees, Romania had limited experience as a host country, with fewer than an estimated 10,000 refugees prior to 2022 (Voicu et al., 2018). This changed dramatically with the onset of the war in Ukraine, with current UNHCR figures recording over 83,000 Ukrainian refugees in Romania as of 22 December 2023. Most of the time, Romania serves as a transit country, with frequent border crossings to and from Ukraine (UNHCR, 2023). Research highlights the language barrier as a significant challenge for Ukrainian refugees in accessing various services (IOM, 2022; Negru, 2022). Studies also underscore the importance of personal networks as crucial resources for integrating into the Romanian system, compensating for the sometimes-inaccessible formal services (Negru, 2022; Deliu & Trifan, 2023).

## METHODOLOGY: DATA AND RESPONDENTS

The empirical data used in this report was gathered as part of the aforementioned project, in July-December 2023, at two research sites, Warsaw and Bucharest. It contained three distinct stages: preliminary research – an initial workshop with stakeholders in the areas of disability and refugees; 20 individual interviews conducted with stakeholders in Bucharest and 21 in Warsaw, which constituted the central part of the research; an extended interview, with the purpose of discussing four hypothetical cases of Rwd who came from Ukraine to Warsaw or Bucharest. The activities conducted in the two research sites mirrored each other. Information was also gathered through a series of (unrecorded) research visits to service providers in Bucharest (3) and Warsaw (3).

The initial workshop was designed as a resource for easing the researchers' way into the field, by getting in touch with relevant actors and constructing a database of potential respondents, and, at the same time, finding out preliminary information regarding the situations encountered by professionals in their day-to-day practice. This latter aspect allowed us to calibrate the research instruments and also contributed to adjusting the list of potential respondents.

The data collection through in depth individual interviews with stakeholders constituted the most difficult part of this research, due to a series of factors: the timing (it was initially scheduled for the summer, but had to be postponed and extended because of the holidays); the busy schedules of most stakeholders, especially in the context of refugees coming from Ukraine; in Romania, a lack of cases and, consequently, of experience in dealing with cases. In Poland, another factor that caused the delay was the legislative elections, which clearly made some public officials unwilling to be interviewed.

In Bucharest, most of the interviews were one on one, with a few exceptions – one interview was with two respondents, and one with three, which were a result of interviewees' decision rather than the researchers' specifications. As it turned out, the high specificity of the research theme was often a deterrent, with respondents and potential respondents emphasizing their lack of experience with cases of RWD. In this context, the existence of multiple respondents at the same time/in the same encounter was interpreted as signifying a means to maximize the progress of the research or to increase the quantity of relevant information provided by the respondents. The response rate was fairly low: 20 interviews were completed after reaching out to 60 individuals (representatives of various public or private institutions). Especially in the case of service providers for people with disabilities, multiple networks, both professional and personal, were used, without having the expected success. As such, we extended this category to include various entities such as parents' or patients' associations. The interviews were conducted face to face (6), online (12) or by phone (2), according to respondents' preferences.

	No. of interviews conducted in Bucharest (September – November)	No. of interviewees in Bucharest	No. of interviews conducted in Warsaw	No. of interviewees in Warsaw
Representatives of local authorities (providers of public services)	6	8	2	2
Representatives of NGOs in the field of disabilities	4	4	9	9
Representatives of NGOs in the field of refugees/immigration	5	5	5	5
Representatives of NGOs/stakeholders extending their services to refugees from Ukraine	3	4	1	1
Volunteers involved in offering help to Ukrainian refugees	2	2	1	1
Representatives of public institutions (above local authorities)	0	0	3	3

In Warsaw, all the interviews were conducted one on one. The respondents were quite hard to reach even though there are plenty of actors in Warsaw who have experience in the required field. The research team reached out to almost 50 people and managed to complete 21 interviews. It was unexpectedly difficult to convince a person to take part in an interview. It is not clear why the actors were so reluctant to talk to the research team; one of the reasons could be parliamentary elections and the tense political situation in Poland, other general fatigue and overwork, and finally the field could be oversaturated with research. The interviews were conducted face to face (9), online (8), or by phone (4) according to respondents' preferences.

After completing (the minimum of) 20 interviews, we organized a workshop with relevant stakeholders, moderated by an external expert, in which potential cases of RWD were discussed, following issues such as the resources available, ways to access these or possible setbacks. The cases were defined by the researchers and provided to the participants and the moderator. This workshop was seen as a way to validate the research findings, and complete these with hands-on, practical insights from experts. Another added value of this event consisted of bringing together stakeholders with different backgrounds (NGOs [PL & RO], public administration [PL & RO], academia [RO]), and enabling them to work together and reach a consensus on the given cases.

# FINDINGS

## ATTITUDES TOWARDS REFUGEES

Among our respondents, the general stance towards refugees is positive. Nevertheless, this may reflect a simple selection bias: it might be that those who did not want to be interviewed share negative attitudes towards refugees, people with disabilities, or the intersection of these. In the following section, we provide excerpts from the interviews, showing that the predominant attitude was favourable towards refugees, that they refer to the general population as also being favourable, but with decreasing interest as the war progresses and becomes a more permanent presence. We also stress the legislative gaps that may reflect a disinterest of society, the presence of isolated negative attitudes, the harm due to lacking experience in dealing with refugee flows, and particular anti-Roma attitudes.

### General stances, deservingness

In Warsaw and Bucharest, the entire refugee setup was somewhat contradictory, with the two societies having anti-Russian sentiment, but also being somewhat reticent towards the Ukrainian state, due to past and still unsettled territorial disputes. The war and the incoming flow of refugees could heal such wounds, as one Polish interviewee points out:

---

**//** I think, a bit grandiosely speaking, but I think it can calm down some of our historical quarrels. Whether it's about Volhynia, UPA, various issues we have with Ukrainians, and it will definitely have a significant impact on relations with them.

(PL16, F, public administration agency)

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A generally positive attitude towards refugees is visible among the respondents. This finding is not surprising since we interviewed people who work with refugees through choice, the few exceptions being employees of public agencies that provide various types of welfare support and happen to be assigned to work with refugees. Even for this category, the general attitude is rather positive. Deservingness is, in this case, underlined, and also considers the case for further help. However, for many, the help should not be unconditional:

---

// The idea is the following: they consider themselves refugees and that they should be protected. But in reality, if you are truly a refugee, you need protection, but you also need to work. Just like I go to work, you need to go and...

(RO10, F, public administration agency)

---

Deservingness is depicted irrespective of personal wealth or other characteristics of the refugees but simply by their status as refugees.

## Comparison to other refugees

Deservingness is often extended to non-Ukrainian refugees, enabling us to assess that it is really based on being in need:

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// I don't know, they are from... actually, they lived in Ukraine and came, but they are of another nationality, an example, and all kinds of cases and instances. I mean, we can't, in the hub, people have also come from Somalia, from Egypt, from Africa, from...

But still through Ukraine?

Some of them. But a few, yes.

(RO12, F, NGO focused on issues other than refugees or people with disabilities)

---

Most of our interviewees designed their programmes in such a way that Ukrainian refugees are beneficiaries along with other refugees, irrespective of their type. It is unclear whether this is due to the need to provide better help to other refugees as well, or actually a positive stance towards refugees in general, but, in the end, it

humanizes the situation of UWR who become part of a larger group of people that have experienced atrocities, and may find comfort through this belongingness.

On the Romanian side, in the legislative realm, Ukrainians seem at a slight advantage compared to other refugees, but this occurs in a general atmosphere that rather discourages refugees from remaining in the country. The comparison to other refugees is also limited due to differences in the profiles of those fleeing their countries:

---

**//** Well, let's say the profile, first of all, is different. The profile of refugees coming to Romania from other countries or Romania from other countries compared to those coming from Ukraine. Just thinking about the gender difference, for example, I don't know, 90% before were men in searches, well, they were the first to come and try to find something and then bring their families. In the case of Ukrainians, the ratio is reversed, well, not quite at 90% women, but the majority are women, there are many children, many elderly people, other types of problems. On the other hand, there are rights that, or, well, benefits that have been granted, benefits from temporary products that are not accessible to other refugees, primarily related to access to the labour market. And... it's very important here because one of the most important barriers in Romania for foreigners is related to documents, proving formal education and qualifications.

(RO14, M, NGO focused on immigrants)

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## Particular indications of positive stances

The positive attitudes towards refugees are also reflected in the stances towards funding, merely in the preoccupation to find resources to help them. For instance, sometimes efficiency in resource allocation within the overall effort to help comes to the fore. One of the Romanian interviewees from an NGO devoted to social issues explained how the entire money circuit leads to half of the effort being devoted to administrative costs. This interviewee also spoke about the generally positive attitude towards the beneficiaries, and the concern with finding resources to help. On the other hand, we also learned that with the crisis continuing, the structure of costs started to differ, since the infrastructure was in place and the number of helpers increased. Then, again, the number of direct service providers decreased, and the share of administrative costs increased. The entire discussion about the dynamics of costs reveals the preoccupations and positive stances towards refugees.

Some interviewees also underlined the need for tailored intervention, and, implicitly, the unpreparedness of the public agencies to deal with the refugee flow (RO07, F, public administration agency). Despite the apparent negative positioning, the feeling that the intervention needs to be personalized, also noticed in several other interviews, actually speaks of empathy and shows favourable feelings towards refugees. Such feelings may, however, face a lack of skills in providing support, as stressed in the next section.

Understanding the cultural differences between refugees and host societies is part of paving the way towards positive attitudes. In the interviews, we discover many instances in which such differences between Ukraine and Romania or Poland are depicted. Interviewees discussed cases of very young Ukrainian parents with both condescendence and understanding and explained the NGOs' efforts to overcome the differences, showing that they always face differences in what a minor means in different societies, whether a teenager is still a minor or not, the different liberties that teenagers have in different societies, how girl-boy relations are seen, what is legitimate and what is not typical behaviour, the responsibilities added to a young adult who becomes a parent, etc.

## Dynamics

Nevertheless, for service providers not already dealing with refugees, the initial flow of refugees was tiny, then out of blue it became very large, then slowly decreasing over time, with boosts in periods when the war became more intense. Organizations whose general purpose included helping refugees, clearly resented the dynamics of the flow and had to adapt resources to the demand. This occurred in a context of changing attitudes, willingness to provide help, and availability of resources.

The natural dynamic is to observe the initial public emotion converted into helping behaviours. In time, these emotions fade and people start helping less and less. There is some periodization both in the attitudes of the general population and in those of the service providers. Initially there was huge enthusiasm to help. With the war becoming a constant presence, people got used to it and the number of volunteers decreased. A compensation mechanism was fortunately in place: large international donors directed their efforts towards service providers in both capital cities, and help could be provided by employees of the service providers. With the passing of time, even this resource started to decrease:

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// Let's say the times of volunteering have ended. We are involuntary volunteers because no one pays us. However, at the very beginning, during the storm and stress, everyone worked voluntarily.

(PL04, M, NGO focused on immigrants)

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// [...] this change of behaviour that I identify even in political statements, the behaviour of Romanian citizens. From very high interest [...] And these changes in behaviour cannot but affect them, emotionally or... And even more so for refugees with disabilities, I suspect it is more unsettling for them than for others.

(RO20, F, NGO focused on immigrants)

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Even when resources become insufficient, showing the decreasing benevolence of society towards those fleeing the war, the positive attitude of service providers towards refugees does not disappear, and there were various reports in the interviews about working extra unpaid hours, days and weeks, or helping refugees who did not fulfil all the legal requirements anymore, due to changes in legislative provision. This latter behaviour was observed mainly in public service providers, since the NGOs were not typically constrained by the respective regulations.

In discussions with service providers, we also learned about the commuting behaviour of some refugees in recent stages of the war: they leave and visit their families and businesses that were left in Ukraine, they do agricultural work, take care of men still in the country, bring supplies to those left behind, and come back to Poland or Romania after a while, in particularly during cold periods, when they need proper shelter. This dynamic mobility was seen as natural by the interlocutors and was rather treated as a normal coping strategy, proving the rather positive attitudes over the entire span of time since the war broke out.

Beyond the positive stances, there is a certain periodization in observing negative attitudes. Some of the volunteers in the initial stages showed prejudices towards Roma, as reported by one interviewee. We discuss this issue in the Roma and minorities section of this chapter, also showing that such stances were naturally eliminated through renouncing them to such volunteers.

## Ambiguous and negative attitudes

Within the context of general positive stances, the appearance of ambiguous or negative attitudes are also reported.

With war refugees being asked to get employment to receive benefits for a longer period, the attitudes of employers become relevant. In both Warsaw and Bucharest there were few indications of bad treatment from employers, but only signs of selection barriers due to the need to master the local language. While language proximity makes such barriers more important in Bucharest, some negative attitudes are reported in the case of Warsaw:

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// Here, the employer wasn't very cooperative. There were some dishonest practices. It was a challenging situation, but thanks to the translator, things worked out. She called me during work hours and informed me about the required documents. When I asked my boss, who tried to avoid some responsibilities, she called him directly, and he had no choice but to provide the necessary documents.

(PL11, F, NGO focused on people with disabilities)

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One Polish interviewee noted that the contribution of Ukrainian refugees to the Polish economy is not recognized and promoted enough, and this may impact on not so positive attitudes towards refugees.

Legislative indecision and political ambiguity are reported in both capitals by interviewees from NGOs that are typically involved in advocacy. The arguments are on social rights and comparisons to locals, on bureaucratization, and a lack of empathy towards those refugees who do not fully understand the regulations.

In the case of Romania, this is combined with the relative discouragement of refugees to stay in the country noticed in already-quoted verbatim, and in existing reports (Voicu et al., 2018). This is also reflected in a lack of interest from relevant authorities (allegedly, the Ministry of Labour and Social Protection, the Ministry of Education) typically missing active involvement in legislative development and debate, and letting the Ministry of Internal Affairs deal with a problem which lacks proper competence (RO14, M, NGO focused on immigrants). Sometimes, criticism against public policy comes with a clear request to increase support for Ukrainian refugees (PL04, M, NGO focused on immigrants).

Lack of experience and less organization compared to western societies also comes up in the discussions:

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// Whether in Sweden or the Netherlands, there is a reception centre where the refugee arrives, an interview is conducted with them, and based on the needs of the refugee, the worker immediately knows in which municipality, in which town they can place them, where all their needs will be satisfied to some extent, not only concerning a bed and food but also medical care, the possibility of finding work, education for children, and so on. In Poland, there is nothing like that, never was, and never will be because, first of all, we don't learn anything, all these staff raised among these brilliant, wonderful people, volunteers who worked hard in the first months, and they are completely unused. They learned a lot of things, and neither local government nor state administration has any offers for them. Of course, big aid organizations, so to speak, focus mainly on monitoring the situation.

(PL04, M, NGO focused on immigrants)

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This is, in fact, a factor to boost negative attitudes: confronted with situations that exceed their possibilities, sometimes people tend to blame the victims.

We have also noticed a few instances in which both Romanian and Polish interlocutors invoked the need that Ukrainians contribute more to caring for the spaces where they are received. In addition, some of the interviewees spoke about prejudice against refugees and people with disabilities, in particular from people who lack proper qualifications for social work, or under very tight budgetary constraints that lead to some triaging of beneficiaries due to a lack of capacity (RO12, F, NGO focused on issues other than refugees or people with disabilities).

Some of the interviewees in Warsaw, directly or implicitly, also noted negative attitudes of the population towards both Ukrainians and their helpers (PL05, F, NGO focused on issues other than refugees or people with disabilities). Such negative attitudes were also reported in Bucharest, but in a more subtle way, manifesting as resistance towards receiving refugees in general, and pushing limits to impose barriers for integration despite formal legislation that is supposed to help refugees (RO14, M, NGO focused on immigrants).

Several interlocutors noticed that it is difficult to offer refugees solutions other than the help provided to locals who are experiencing the same situations of risk. Sometimes, however, it is said this may become a pretext for duplicity.

In some ways, the interviewees suggested that the aid to refugees does not actually depend on attitudes, but on abilities. A Romanian NGO worker indicates that all the help provided to Ukrainian refugees depends on the (lack of) abilities of those involved in the helping. She also indicates that the use of Romania as transit country is actually a good thing for the refugees, since the capacity of local service providers is limited when considering the quality of human resources (RO12, F, NGO focused on issues other than refugees or people with disabilities). The lack of abilities was actually mentioned several times by the Romanian interviewees, but not by the Polish ones. Some interviewees, both from public administration agencies and NGOs, directly connect lack of proper training and ambiguous attitudes towards refugees. As one interviewee tells us, beneficiaries are often seen only as numbers, not as people, considered as a burden, in particular when lack of training combines with overworked staff and budgetary constraints.

As in any large-scale traumatic event, we found narratives about how other people profit from the intended aid. The indented helping programmes allegedly create sources of profit for individuals and service providers, including landlords and NGOs suspected of creating dependency on aid:

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**//** I receive at least 3,500, if not 4,000 lei per month, financial aid [per refugee.] International NGOs did not want to synchronize databases because, guess what, they would have had a smaller number of beneficiaries, they would not have had access to resources. And then this led in some cases, especially in the Suceava area, because also in Bucharest, to creating dependency on aid and only that. [...] Because the 50-20 programme could have been an extraordinarily good one if it hadn't turned into a big business for Romanians, but also for Ukrainians.

(RO16, M, NGO focused on issues other than refugees or people with disabilities).

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Nevertheless, such suspicions, irrespectively if based on actual behaviour or imagined ones, have the potential to deter good intentions, and hinder positive attitudes towards refugees.

## Minority groups

Racial attitudes are less observed in the case of Ukrainians, given their similarities with local people. However, in both countries, in several instances, we found reports of anti-gypsism manifested by other refugees. Such stigma sometimes led to the separate hosting of Roma and Ukrainian groups reported in both Bucharest and Warsaw by several interviewees. Sometimes, such attitudes are also expressed by volunteers who joined the helping efforts in the first stages of the war and the consequent provision of refuge.

We did not ask specific questions about LGBTQ+ refugees, and few interviewees spontaneously mentioned this group. This lack of mentions could be interpreted as acceptance, given that the ones that indicate facts about LGBTQ+ refugees are neutral or positive towards them.

## Overwhelming intervention

Sometimes there is too much supply for various types of refugees, and the refugees themselves become overwhelmed:

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**//** At first, people were super stressed, and it was like, okay, there's someone there, pretending to be happy, happy, joy, take the child, I see him, as it was in a sports hall, the other centre. I see the child, it's okay. At first, there was no resistance, I didn't see it. Now I think there are enough services for refugees from various organizations, and I have encountered this reaction from parents, where they say: What more do you want from me? You're giving me again, you're calling me again? Yes... There are services in the centre. There are all kinds of workshops and therapy options for parents, and I understand that they don't often show up, or they show up and don't talk, they show up and don't want to participate. Because at some point, I understand them, there's also this annoyance... Okay, sometimes we don't understand that there are funds to provide services, but the person also needs to be asked if they need those specific services. I mean, you don't force them on them...

(RO17, F, NGO focused on issues other than refugees or people with disabilities)

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In other instances, service providers are overwhelmed:

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**//** That is, no one complained about... about a lack of... of funds. On the contrary, there were organizations that said, oh, too many donors come to us; there were organizations that had to give up some donors by directing them to others.

(RO14, M, NGO focused on immigrants)

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## ATTITUDES TOWARDS PEOPLE WITH DISABILITIES

The general attitudes towards people with disabilities are positive among our interviewees, again not a surprise given the type of sample. They seldom report stigma from society, but they stress that stigma is more often present in Ukraine, and refugees sometimes avoid declaring their disability. It seems that the presence of people with disabilities within the refugee flow was initially neglected, and there was no provision, in either Warsaw and Bucharest, related to how to deal with them or to how to somehow register their disability. Such neglect is also related to a certain invisibility of refugees within the refugee flow. Many interviewees declare from the beginning that they do not work with people with disabilities but end up narrating stories of how they provided services to various RWD. It seems that neglect is not intentional, but through a lack of knowledge, and a learning process is in place in both countries. In the following sections, we provide more detailed arguments on the above statements.

### Distinguishing people with disabilities within the refugee flow

Nevertheless, there are a lot of people with disabilities within the refugee flow, and there is no technical difficulty counting them if a proper system is in place:

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**//** To summarize, it's easy for us to have records, to know if we have people with disabilities.

(RO03, F, NGO focused on issues other than refugees or people with disabilities)

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However, organizations that do not focus on disabilities most of the time have difficulties reporting about their disabled beneficiaries:

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**//** Due to the fact that our activities are quite scattered, it's quite difficult for us to gather everything into a concrete number. We also have difficulty, even compared to other organizations, even in the mundane nomenclature, that is, who we treat as a person, as it were, with a disability, regarding this, concerning trivial confirmations.

(PL02, F, NGO focused on immigrants)

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In specific cases, the financier of certain projects specifically requires indications of disability status, and this sheds light on the matter. Sometimes, the service provider develops its own ways of keeping track of the specific needs of the refugees they assist. However, there is no unitary practice in the field, in neither country, or at least it was not in the first year of the conflict. Some of the Romanian interviewees observed that the forms that they filled in (in autumn 2023) included a question about whether the refugee is disabled.

On the one hand, the lack of interest towards systematic recording of disability status tells us that there is no discrimination involved, since they did not even think to create a distinct category. On the other hand, this raises a warning that the special needs of people with disabilities might be ill-addressed:

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**//** Because if from such a base, as I mentioned, we have this solidarity base of people willing to host refugees, if there were often reported needs, that there is a need for a separate room for a family with a disabled person, or a special bed, or in general, architectural amenities, it was difficult to find. And it was difficult to find people who are willing to accept such families, so that's why the numbers of accommodated people with disabilities with us were very much smaller, and then very often we turned to organizations that directly deal with people with disabilities. Sometimes it worked, but in comparison, if you will, with other families, this process was much, much more difficult.

(PL02, F, NGO focused on immigrants)

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In particular, lack of previous experience with people with disabilities leads to low provision of support in the first phases of the incoming refugee flow. However, in time, service providers became more proficient with respect to the needs of their beneficiaries.

## Positive stances

Overall, positive stances are predominant. In fact, no negative view was expressed. Empathy becomes clear when observing how interviewees search for solutions to help people with disabilities in a difficult environment, which in many instances were creative, and tried to overcome the lack of proper spaces, lack of resources, or legislative barriers. The need for tailored intervention is quite often stated and implemented by various service providers, showing interest and willingness to help. Supporting attitudes are noticeable even in the absence of specific experience in the field of helping people with disabilities. Sometimes benevolence is manifest through reactive measures to improve the reception of people with disabilities and the services that RWD could afford.

## Ambivalence

In the case of the Romanian interviews, a few opinions stress the ambivalence of treating people with disabilities. On the one hand, the service providers allegedly see them as a threat that hinders providing proper support to other refugees or makes their work too difficult. On the other, societies claim to seek integration but lack proper understanding of the issue. The ambivalence claimed in the subtitle resides therefore in the willingness to help but lacking knowledge and proper understanding of today's canonical representations on the integration of people with disabilities. A similar position is stressed with respect to legislation and society as a whole:

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**//** In general, people with disabilities in Romania are strongly vulnerable, and it's hard for them to get their legal benefits, let alone talk about other additional empathic support from society... I don't think it's a lack of empathy or a lack of desire to help, but simply the fact that we haven't solved the problem for Romanians, for Romanians with disabilities. It's very difficult for these organizations to expand their coverage area because they themselves still face specific problems.

(RO14, M, NGO focused on immigrants)

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Social workers in public agencies reported trying to assist RWD through other organizations, in order to avoid bureaucratic procedures and an extra burden both for them and for the RWD. Ambivalence can also be present at the level of volunteers, but it manifests differently, bringing willingness to help and fear at the same time:

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**//** Well, I worked with children with autism for a while, so I have a lot of images in my mind when I hear „disabilities”. Various physical and mental images come to mind; there isn’t one that stays fixed. So, well, in physical and mental aspects, it goes through my mind. I can’t have a very emotional reaction when it comes to this word. At least when I worked with them, it didn’t affect me emotionally that much. I managed to build a shield, but I think it’s actually a scary thing. I remember when I was little, people with disabilities used to scare me because I thought about how hard it would be if I were in their place.

(RO04, F, volunteer)

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Finally, but not last, the same ambivalence in applying the laws is observed in some units, but not in others, and is also associated with the prejudice reported by relatives of people with disabilities, which is reported for the local population, not just for refugees.

## Neglected people

The situation of being both a refugee and disabled is acknowledged by most interviewees as a double trauma. Sometimes it leads to feeling neglected or being neglected. People with disabilities mention that they feel left outside society, which may be the ultimate cause of the relative neglect of disabled needs in designing the intervention at the beginning of supporting the UWRwD in both capital cities:

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**//** Deaf people constantly feel as if they don’t exist; they are pushed aside. I am among those people, and I always have to fight everywhere. I constantly have to show that I exist.

(PL11, F, NGO focused on people with disabilities)

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NGOs focused on people with disabilities observe that they need to speak up in many instances to include the needs of people with disabilities in the design of projects, interventions, events, etc.

Not including any specific provision for people with disabilities does not make them absent, but hides their needs for specific support:

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// Because it sometimes happens, I don't hide it, because there are no other options. The silence and underfunding of this segment concerning several hundred people, and probably thousands of people on the scale of Poland, several hundred people only at this point, demand some legal or charitable actions to resolve these situations. But so far, the city, the voivode, and large aid organizations absolutely do not even want to hear about it.

(PL04, M, NGO focused on immigrants)

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The lack of pre-emptive planning ends up affecting the quality of the services for people with disabilities, as the interviewees acknowledge, sometimes in anecdotal narratives:

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// But we had ordered, I think, three potties, two feeding chairs, a lot of plates and utensils for feeding children. And it turned out that there weren't so many children for it... Some things were left even open. [...] Because at that time, when we were doing the shopping, we didn't have a basis, and we probably had this image in our minds. It was also the beginning of the war, yes. And I don't know, it's hard for me to say where it came from. But it's certainly also a matter of the fact that we learned a lot.

(PL07, F, NGO focused on people with disabilities)

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Increasing experience with people with disabilities leads to solutions, showing the willingness to act in the respective direction. The retrospective view of the initial situation at the beginning of the refugee flow usually stresses the lack of access to good practices, to understanding the specific needs of people with disabilities, to lacking tools for providing specific help.

Lack of previous experience is often given as the main reason for neglect in the design phase as well. Sometimes, surprise accompanies the hearing of the presence of people with disabilities within the refugee flow:

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“ Unfortunately, there was such a situation that, for example, even in significant, well-known humanitarian organizations, we heard, „But we don’t support people with disabilities”, and our surprise then was, „How is that possible?” Statistically, it’s not even possible that there are no refugees with disabilities among them.

(PL15, F, NGO focused on people with disabilities)

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In many cases, when specifically asking about RWD among the beneficiaries, in organizations not devoted to helping people with disabilities, the initial answer was negative. However, during the interviews, the interviewees started to tell stories of some isolated cases, that by end of the interview proved to be quite a lot:

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“ I think so, that is, under the influence, also that previously we saw that, I don’t know, there were minors, that there were women, but really, that a bit under the influence of the outbreak of war, we started to notice persons with disabilities and older persons a bit more.

(PL17, F, NGO focused on immigrants)

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At later stages of the interviews, the interviewees spontaneously remembered and started to narrate several stories of RWD, showing that they are actually not as few as initially stated. Such examples are numerous in Bucharest, and are also present in Warsaw.

## Specific policy

Being disabled, a child, and a refugee seems to be one of the challenging combinations, at least with respect to being accepted for schooling. Various narratives testify in this respect, revealing a world in which a lack of abilities, prejudice, and legislative ambiguities are mixed in many instances. Even working as a helper for people with disabilities in schools that accept RWD may be represented as being complicated due to administrative barriers and fear (PL11, F, NGO focused on people with disabilities).

## Comparison to local people with disabilities

There is no evidence that Ukrainians with disabilities were treated differently to their Polish or Romanian counterparts:

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**//** In practice, they struggle with the same Romanian system that adults or children in Romania struggle with.

(RO07, F, public administration agency)

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However, through the nature of the required paperwork that needs to be filled in to get recognition of their disability status, both in Warsaw and Bucharest, it may be considered that UWRwD are discriminated compared to local people with disabilities:

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**//** Here is a kind of discrimination, and you will see why. These people don't have supporting documents for various reasons that are not their fault. Not that they lost them, but the hospital archives don't exist at some point. We send requests, but they can't provide them either. And for a long time, they didn't come, they had no income. After years, they manage to obtain a miserable disability pension.

(RO13, F, public administration agency)

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In other cases, the surprise was that help for Rwd was easier than for their Romanian counterparts:

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**//** I was amazed at how quickly it was resolved, considering that for my haemophiliac colleagues, young people, children, there were situations where they waited for years or many things, as an experience, we have negative experiences with many requests from my colleagues with haemophilia, and the problems were not resolved. But here being a conjunctural issue, the Romanian state moved quite quickly...

(RO18, M, NGO focused on people with disabilities)

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For many RwD, re-migration to a Western European country is the best option for receiving adequate support, considering the availability of care, treatment, facilities, and societal understanding of disability:

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**//** That's why we are going to the German embassy soon to discuss this, how these organizations that deal with relocation, how they operate. In Poland, it's impossible, and in the West, it's becoming less possible. And people with psychological problems, I'm not just talking about diagnosed patients, but here, every second person has PTSD.

(PL04, M, NGO focused on immigrants)

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## Successful strategies proving positive thinking towards people with disabilities

Planned intervention. Instances of carefully planned intervention, considering the needs of people with disabilities, provide flesh for understanding that people with disabilities are not always left behind and that subsequent help is easier when planned in advance:

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**//** And we renovated it there, but it was such a renovation... Painting the walls, making those... Oh, the [anonymized] Foundation helped us with that, by the way, there was cooperation with the Castorama Foundation. Because we laid floors, there were old carpets, and we had to tear it all down, lay floors, paint walls, put up a few walls to divide that point into others, into more rooms. So, here, we had to learn all that. And I remember even counting steps, how many beds would fit in this room. And we... It was such... I feel warm thinking about it now. How I remember, standing, walking, and yes, one bed here, another one there, okay. Here, will it fit? Will there be space for a wheelchair to pass between the beds?

(PL07, F, NGO focused on people with disabilities)

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Planned integration. There are instances of planned integration, meaning that facilities were designed in such a way that RwD receive support along with regular refugees and with the local population. Though rare, such examples do exist and show a pro-active positive attitude towards people with disabilities in general, and RwD in particular.

Personal efforts. In both countries, we have found evidence that personnel for service provider units do help people with disabilities aside from their duties:

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// ... even though we don't specifically deal with refugees from Ukraine, we helped last year, during that dramatic moment, so to speak, which we already know about. I have a disease called [anonymized], and at that time, we helped several families with members who had the same disease as mine, especially families with children and young people. One family with a boy who had [anonymized], like me, stayed with us from March to August when they left for Germany.

(RO18, M, NGO focused on people with disabilities)

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Learning from past errors. A learning process is in place, and it can occur only if facilitated by positive attitudes towards people with disabilities. This leads to better interventions with the crisis advancing in its manifestations, and to preparedness for eventual unfortunate future refugee flows.

## THE PRESENCE OF PEOPLE WITH DISABILITIES IN THE REFUGEE FLOW IN POLAND AND ROMANIA

In the Romanian and Polish cases, the presence of people with disabilities among the refugee flow seemed surprisingly large and diverse to the stakeholders who were assisting them. This diversity was not only in terms of the types of disabilities but also other socio-economic, age, and health parameters.

### Diversity and scope within the refugee flow

This made Rwd one of the most varied groups, and neither institutions nor aid organizations were well-prepared for their arrival. Consequently, the presence of Rwd necessitated rapid learning and adaptation of aid strategies by these organizations (PL07, F, NGO focused on people with disabilities). Regarding the precise statistics or calculations of the number of individuals who arrived in Poland, there was no uniform approach. Some organizations in Romania reported no difficulties in calculating these statistics (RO03, F, NGO focused on issues other than refugees or people with disabilities), whereas organizations in Poland often suggested that it was impossible due to the high number of individuals with disabilities and the dynamic nature of aid activities, which hindered systematic record-keeping.

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**//** Due to the fact that our activities are quite scattered, it's quite difficult for us to gather everything into a concrete number. We also have difficulty, even compared to other organizations, even in the mundane nomenclature, that is, who we treat as a person, as it were, with a disability, regarding this, concerning trivial confirmations. Many people came with a Ukrainian certificate, which in Poland is rarely treated normally.

(PL02, F, NGO focused on immigrants)

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The difficulty in maintaining such statistics, and thus determining the exact scale of the issue, was further compounded by the reluctance of many individuals to disclose their disabilities or those of their dependents, particularly in cases of intellectual disabilities or those related to mental health issues (RO03, F, NGO focused on issues other than refugees or people with disabilities).

Despite these challenges, the available data indicates that both Romania and Poland received a full spectrum of individuals with physical, mental, sensory, and multiple disabilities. There were some examples of people with disabilities experiencing the intersection of disability and HIV.

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**//** [N]ot only are these people without care and in wheelchairs, but they are also carriers of the HIV virus.

(PL04, M, NGO focused on immigrants)

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As respondents from Romania pointed out, although there were not many transports from institutions, there were often situations where people with disabilities or serious illnesses arrived at the same time in one transport, requiring urgent medical assistance. Providing such assistance was difficult precisely because there were suddenly so many cases at once (RO01, M, volunteer). Considering the even larger influx of RwD in Poland, it can be stated that a similar phenomenon occurred in Poland, and on an even larger scale than in Romania.

Descriptions of those most in need frequently highlighted individuals whose disabilities were due to chronic or oncological diseases (RO03, F, NGO focused on issues other than refugees or people with disabilities), or who had disabilities in conjunction with such conditions, as well as disabilities resulting from ageing. Unfortunately, among those who reached countries outside Ukraine, there were

instances of death (RO03, F, NGO focused on issues other than refugees or people with disabilities).

A recurring theme in both countries was the emphasis on so-called visible disabilities, especially among individuals using wheelchairs (PL04, M, NGO focused on immigrants; RO01, M, volunteer). It can be argued that the consequence of the readiness to identify such individuals as people with disabilities often led to them receiving the most tailored assistance, partly because this aligns with certain stereotypes of what constitutes a person with a disability and their needs.

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**//** If you saw people with disabilities at the border or at the train station or...

Well, the volunteers helped them get off the train, you know, they would take their luggage. Then those in wheelchairs, they, the ones in wheelchairs would be taken to the waiting room, given blankets, food, hot tea, and all that. And they would find out their intentions, what they wanted to do, if they wanted to stay at the station, if they had accommodation, if they wanted us to find accommodation...

(RO01, M, volunteer)

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Not being able to assess or identify the type of disability and the required assistance could lead to not providing required assistance or to delays in providing it. This phenomenon, where physical impairments, especially mobile ones, have a „stronger” impact on humanitarian help compared to the stigma around intellectual or mental health disabilities, sometimes meant that there was a risk of people pretending to have a certain type of physical impairment in order to receive attention and assistance.

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**//** You must have a physical disability, we are not interested in mental disability, you don't have Ukrainian citizenship, although you are a victim of war, you came from there and so on, and so on. Um, therefore, frames, so that they are not rigid, um, you can do it so that people don't abuse it, that if someone pretends to limp, well, they will notice, but generally, people don't pretend in such situations, it just doesn't happen that someone bends the system in this way.

(PL10, M, volunteer)

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The refugee flow revealed that, despite the assumptions of people with disabilities being predominantly isolated or institutionalized, many who arrived from Ukraine travelled with their immediate or extended families (RO01, M, volunteer; PL20, F, NGO focused on immigrants). This led to some organizations shifting their focus from solely the individual with a disability to treating the entire family as a unit experiencing disability that needed to be addressed.

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**//** In addition, we have included people with disabilities in the vulnerable groups, which means that, for example, if there is a person with a disability in a given family, that family qualifies for us as a group, into the vulnerable group. We also included single individuals aged 75 and older because there are many people who are somewhat independent and just have significant difficulties, even in accessing things. Some don't have smartphones.

(PL20, F, NGO focused on immigrants)

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## Gender, age and mobility dynamics within the refugee flow

Another important phenomenon that challenged existing social stereotypes, and thus affected the support these individuals received, was the gender dimension of disability (PL07, F, NGO focused on people with disabilities). For instance, women with disabilities were often mothers arriving with their children, countering the stereotype that women with disabilities are solely care recipients when they are also caregivers (PL07, F, NGO focused on people with disabilities). Additionally, there were many older men with disabilities who had specific needs for which the aid system was unprepared.

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**//** I think many people still do – that when thinking about a refugee, they think of a woman with a child (...) they think, a woman over 30, a child, two children, maybe three. So, this is our image of a refugee in our minds. However, in our centre, it was somewhat verified because there were actually more older men with physical disabilities.

(PL07, F, NGO focused on people with disabilities)

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Another assumption challenged by the realities observed among RwD within the context of migration is the perception of their immobility or differing travel objectives compared to those without disabilities.

For many, Poland and Romania served merely as transit countries, as they continued westward due to unsatisfactory conditions from their perspective, for instance, in Poland (PL04, M, NGO focused on immigrants; RO12, F, NGO focused on issues other than refugees or people with disabilities). Some people with disabilities returned to Ukraine because the housing they could get in Poland was not adapted to their needs. Many individuals returned and concluded that it was better to live in a less adapted apartment in western Ukraine than in a completely unsuitable one in Poland. There were instances where individuals who went westwards returned to Poland. This was because, despite better conditions in those countries (Canada, Netherlands), such as the adaptation of public spaces, it was harder to secure a place in a special school or access rehabilitation services (Group interview, Poland).

On the other hand, the intersection of older age and disability often led to cases of enforced immobility. Elderly individuals and people with disabilities – these were the kinds of people whose futures were uncertain and for whom there seemed to be no clear plan for assistance. As a result, they often remained in a single location (PL17, F, NGO focused on immigrants).

## Extreme cases and PTSD

Although, as explained above, there are certain main cases and characteristics among people within the refugee flow, there were also so-called „extreme cases” that required the cooperation of several organizations or stakeholders.

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**//** A foundation that can take people with disabilities, has the means, has a place to take them, let's say to Finland or Germany. But it can take one or two people a week. So, we turned to them when a person no longer has help, a caregiver, no money, and is in a difficult psychological condition after various processing camps, and I don't know, robberies on the border, she can go there, and they will take care of her because she also has no caregiver. And only in such a case, because that's already an extreme case.

(PL10, M, volunteer)

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// And then requests are made to the prefecture because there are still four cases that we submitted to the address we made for people who cannot work effectively, only for accommodation, to be approved there. These are people over 50 years old. One is 56, deaf with a hearing aid, one is on crutches, has arthritis and wets herself, where do you hire her? One is diabetic, 60 years old. Another one is visually impaired, can't see, and is 50-something.

*(RO10, F, public administration agency)*

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An important aspect to consider when thinking about the flows of refugees with disabilities is that a lot of them, as well as their caregivers or families, arrived from Ukraine with acquired PTSD. This further complicated what these individuals needed in terms of assistance.

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// And people with psychological problems, I'm not just talking about diagnosed patients, but here, every second person has PTSD.

*(PL04, M, NGO focused on immigrants)*

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## POLICIES TO PROTECT UWRWD

Despite the introduction of legislation aimed at safeguarding the rights of individuals with disabilities, the reality has diverged significantly from the ideal. The policies designed to protect RwD in both Romania and Poland have fallen short due to inefficiencies and inconsistencies, leading to discriminatory practices. Therefore, the situation for RwD navigating legalization processes remains complex and uncertain. Provisions within these policies have inadvertently worsened discrimination, such as establishing contradictory retirement ages and imposing arduous recognition processes for disability certification. Moreover, there is no consistency in how procedures are conducted across different regions and institutions. Consequently, arbitrary requirements and delays in obtaining the necessary paperwork have arisen. This situation has left many people with disabilities without the support and assistance they need, as bureaucracy has rendered disability certificates almost useless for accessing jobs and state benefits.

Romania has some legislation in place to protect the rights of UWRwD, providing them with access to social protection services similar to those enjoyed by Romanian citizens. These services range from accommodation to rehabilitation centres, all available after registration of residence in the country. However, obtaining a disability certificate is challenging, and differences in methodology between Ukraine and Romania require careful documentation and assessment.

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**//** You know what happened. The law didn't make any, or rather, it created a certain amount of discrimination against people who couldn't work, with somewhat absurd provisions, like the one stating that a woman has to work until she's 65, even though the retirement age here is 63. At the moment, a woman retires at 63. The ordinance established the retirement age as 65, so this regulation contains a lot of mistakes. It forced people with disabilities to go through the entire recognition process to obtain a disability certificate, which was somewhat natural.

*(RO02, F, NGO focused on issues other than refugees or people with disabilities)*

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Language barriers make communication with local authorities difficult, compounding the financial burden of translating the necessary documents and the difficulty of proving residence. Nevertheless, efforts are being made to facilitate access to information and services through platforms such as Infoabil, helping UWRwD navigate the bureaucracy and secure the necessary documentation.

Beyond the procedural hurdles, there are tangible benefits and facilities available to UWRwD and their personal assistants in Romania. These include deductions, discounts and exemptions from certain taxes, which serve to reduce the financial burden. Transport services can be provided at reduced rates or free of charge, increasing mobility and accessibility. In addition, access to social benefits and facilities from both public and private entities further promotes their integration and wellbeing. Despite the challenges, the policy seeks to respect the rights and ensure the integration of UWRwD into Romanian society, recognizing their unique needs and circumstances. By implementing ongoing measures to streamline procedures and increase accessibility, Romania aims to provide comprehensive support to UWRwD, thus supporting their empowerment and integration into their new environment (Guga 2023).

In the case of Poland, the policies aimed at protecting Rwd from Ukraine in theory encompass a comprehensive range of support measures, both material and non-material. These measures include provisions for accommodation, full-day collective catering, transportation to accommodation facilities, financial support for public

transportation, access to personal hygiene products, emergency medical assistance, and provision of medical personnel for necessary check-ups, including for those infected with SARS-CoV-2. These policies ensure that Rwd receive the necessary aid and assistance upon their arrival in Poland, with specific attention paid to their unique needs and circumstances. Additionally, individuals with disabilities, including those lying down, are entitled to free specialized transportation between accommodation, food, or medical care facilities. Furthermore, after 180 days from when they first entered Polish territory, Rwd are exempted from partial payment obligations for the aforementioned forms of support. This exemption applies to individuals in possession of a disability certificate or a relevant assessment, thereby ensuring that financial barriers do not impede their access to essential services and assistance (Orylski 2023).

Despite these provisions, challenges persist in the recognition of disability status for Ukrainian refugee populations. Ukrainian-issued disability certificates often lack legal validity, thereby complicating the process for refugees seeking recognition of their disabilities. In order to ensure equitable access to support services for Rwd, it is necessary to make adjustments to existing regulations and procedures.

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**//** We often go to government offices, but sometimes nothing works, and we have to try again and again because the system is sometimes unreliable. Sometimes what we see in practice can differ significantly from how it's supposed to be in the law. Recently, there was a significant issue here that many people reported losing their temporary protection status...

(PL02, F, NGO focused on immigrants)

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It seems that at the core of a lot of problems lies the issue of certifying disability and the subsequent ramifications. Medical proof is essential for recognition, yet the process is complex and inconsistent, varying by region and institution. Delays and bureaucratic hurdles often result in individuals being ineligible for essential support. Moreover, outdated regulations create further obstacles, such as conflicting retirement age requirements. Many institutions even demand unnecessary documentation, which adds to the confusion and burden. The difficulty in obtaining disability certificates serves to exacerbate the vulnerability of Rwd, leaving them without access to crucial aid and support services.

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// But I'm sure that if you have a disability, I mean, medically proven, because we go by medical documents, because we have no other way, and we have the resources to do them, but to take them to a doctor, to put a diagnosis on them, and I suspect that when a diagnosis is made, they can also say a few words about their work capacity. Including this issue of those who cannot work, do not meet the conditions to work, and do not have a disability certificate. Including people who are vulnerable, such as mothers who cannot work and those children remain unfed. Including this. The fact that they are in buildings that the department should not rightly assume repair costs, replacement costs, and so on, even if you tell them. Well, change a showerhead, that's okay, but who can afford to change a toilet? Some have no jobs, others have 20 million per month and have a child to support. Can you tell that person: change your toilet?

(RO07, F, public administration agency)

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Based on our findings, it can be argued that in both cases, Poland and Romania, policies aimed at protecting Rwd have strengths that are often not effectively implemented in practice on the one hand, and on the other hand, exist many gaps still exist in areas of policy. An intersectional approach is needed, considering not only the type of disability but also age, race, class, and gender, as well as taking into account situations not only from an individual perspective but also from that of the family. For example, individuals without disabilities but supporting those with disabilities must also be considered in policies with a complementary approach.

A very clear thread in our research findings has been that people working directly with people with disabilities from Ukraine themselves emphasized that only through practical experience and testing policies were they able to assess and determine what is needed and what is lacking. Therefore, activists and representatives of NGOs from both Romania and Poland emphasized the urgent need to utilize their experience, as well as the experience of individuals with disabilities, in creating new solutions and repairing existing ones.

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// Well, a lot of legislation would need to be changed.

In what sense?

Well, from all my contacts and meetings, every time I attended a conference or a debate, everyone said the same thing, well, this law doesn't provide for this, I don't know what. That law is insufficient or interpretable. Or, for example, we can't provide a refugee with the reception package because it needs to be signed by the legal representative, and he doesn't have a legal representative at that moment. What do we do with that? I mean, I think work should be done...

... to make everything more adaptable to the situation?

Yes, probably laws should be made together with those who work, although this is done, and there are, NGOs come, meet with authorities, sit at the round table to discuss the law, the order they will... but those who are in practice can advise decision-makers. (...) I'm convinced of that, but I don't know how applicable it is in law if I were president, that's what I would do.

(RO12, F, NGO focused on issues other than refugees or people with disabilities)

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// I would just add, because I complained about the Polish government in general, that assistance for families with someone with a disability is terribly insufficient in Poland overall. I think it was supposed to increase, these allowances were supposed to increase, I don't know if they have already increased at this moment. But just, apart from my foundation life, my friend conducted research with mothers who have children with disabilities, and it just seems to me that the situation is dramatically bad. So, especially if we imagine individuals who come here and have problems with housing, work, and everything else, and possibly lost everything in Ukraine or another country they came from, and still have someone, a child perhaps, with a disability under their care. I imagine it is super difficult, super burdensome to live in Poland.

(PL17, F, NGO focused on immigrants)

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## THE IMPLEMENTATION OF POLICIES

When thinking about the implementation of policies, one can think of the standard stages of the process: exploration, installation, implementation, and scaling up. Implementation of policies supporting UWRwD due to abruptly unfolding events started from implementation. There was no time to explore the needs of refugees and install policies, all the actors took almost immediate actions to support people fleeing the war. The implementation of policies supporting UWRwD is a multi-actor, based on a „learning by doing” paradigm, process. This applies to elaborating and launching programmes at the state level, introducing modes of operation of local institutions and NGOs, and engaging individuals who decided to help UWR.

Polish and Romanian stakeholders supporting UWRwD had to organize help for incoming people in a very short time. The form of support given to refugees depended on the stage of refuge: evacuation, reception, and integration.

An evacuation was mainly focused on the organization of transportation from an endangered place to a place where people were safe. Evacuation of people with disabilities was a very challenging process, much more challenging than evacuation of people with no disabilities.

Support provided in the reception phase includes transportation to the final destination, food and drink, temporary accommodation, basic medical support (medical consultations, distribution of medicaments, mobility aids), and information.

In the integration phase, support given to UWRwD included: information, help to find permanent accommodation, help in dealing with administrative issues including obtaining disability certificates in a receiving country, medical support (organization of visits and translations, rehabilitation, psychological/psychiatric appointments), and material support.

Integration is not only about face-to-face forms of help and support. It also includes taking actions on the side of the receiving society, which are to create solutions and structures providing social and institutional space for changes and adjustments on both sides of the process: immigrants/refugees and the receiving society.

As it is difficult to draw an exact line of demarcation between the stages of refuge, it will not be possible to make clear cuts between the stages of refuge and the forms of support, as in many cases it is more about change and development.

## Evacuation

The evacuation was not a main activity directed to UWRwD taken up by Polish and Romanian non-governmental organizations (PL07, F, NGO focused on people with disabilities; RO17, F, NGO focused on issues other than refugees or people with disabilities), but some stakeholders were engaged in this stage of helping. The majority of these organizations had no experience of evacuations:

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**//** So, we at [NGO] also decided to take some action because we felt that someone needed to help people with disabilities who are refugees. We organized, how should I say, an evacuation. The evacuation of 12 people from Odessa to Poland. [...] People with disabilities. And I also participated in organizing this, many people from [NGO] participated. It was the first such action we did.

(PL07, F, NGO focused on people with disabilities)

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One of the strategies to be more effective in the evacuation process was to use some help from the local people in Ukraine (PL10, M, volunteer). If stakeholders were not able to organize the whole evacuation by themselves, they at least assisted in the process of transportation from Ukraine. This was not a one-time activity, they did it on several occasions.

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**//** I'd say, assistance in evacuation, not on a massive scale, but from time to time, right? Assistance in transporting these people locally, assistance in, well, transporting from abroad.

(PL10, M, volunteer)

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Assistance was mainly about investigating the situation, recognizing the needs and impairments of the refugees, preparing a place to stay in a receiving country, and connecting a refugee with a stakeholder who would transport the refugee to a safe place.

Some evacuations were organized and carried out by private persons including. In such cases, the urge to help was stronger than reason. People who decided to do this were not fully aware of the difficulties they might encounter, but still they managed. What is important is the fact that the whole process was based on mutual trust between refugees and helpers who met for the first time and simply had to believe in the good intentions of the other side.

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// Those people didn't know us; they just left themselves in our hands. We could have been anyone, traffickers or something; we didn't even have the vocabulary to convince them that everything was okay, and so on.

(RO01, M, volunteer)

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Evacuation of people with disabilities is an extremely difficult process. There are no procedures that the NGOs could follow (Group interview, Poland). People with disabilities are usually evacuated with no mobility aids, therefore they are dependent on other people during the journey (PL09, F, NGO focused on people with disabilities). During the evacuation from war zones, safety and life-saving go first, and dignity falls into the background. Another challenge is the evacuation of deaf people who have very limited access to information as they are not able to hear either danger (bombs exploding, planes) or information provided verbally. Not every deaf person dares to try to communicate with people to get some information, provided that they can read lips (PL11, F, NGO focused on people with disabilities).

Another aspect is organizing evacuation for institutions. The Ukrainian system of care for people with disabilities is still very much based on institutional solutions. The outbreak of a full-scale war made it necessary to evacuate whole institutions. In the process of evacuation were engaged ministries and non-governmental organizations that had experience in humanitarian aid (Caritas Poland, Polish Centre for International Aid); none of the NGOs we interviewed declared being directly involved in this kind of evacuation.

The Ministry of Family and Social Policy took charge of children from Ukraine arriving from orphanages. A hub was established for these children in Stalowa Wola in the Podkarpackie Voivodeship. It served as a large reception centre, and the children were found places in various facilities or family foster homes across Poland. Some of these children also went abroad to Germany or other western countries. This posed a considerable challenge, especially since these children had often arrived at large institutions in Ukraine, different from the more intimate family-like structures in Poland. These Ukrainian facilities housed a varying number of children, from practically newborns to almost legal adults, with diverse degrees of disabilities, sometimes complex and including bedridden individuals. Evacuating these people during wartime presented a challenge.

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**//** I remember an operation when several dozen people arrived in Przemyśl and had to be transported to Stalowa Wola, to that reception centre or hub run by the ministry. Several dozen of these children were bedridden.

(PL19, M, public administration agency)

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For individual persons who somehow managed to evacuate themselves, there were no major problems in that regard for supporters in receiving countries. Polish and Romanian institutions dealt with refugees only when they crossed the border. People who fled Ukraine sometimes had nothing with them, stayed in Warsaw or Bucharest for a few hours and then continued their journeys.

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**//** So, they ended up at the Eastern or Central station, got on a bus, and were taken to where there was space. There was a phone call in the middle of the night: „Do you have space? How much do you have? A bus will come to you, and they’ll be there in 20 minutes.” It was really 3:00 in the morning, and 20 minutes later, 100 people would arrive in a dramatic state, extremely hungry, and with just a proverbial bag. It really was like that; I mean, these are not stories because these people really arrived with nothing. Holding children in their arms, with people who couldn’t walk, carried in their arms because there wasn’t even equipment. They arrived just as they stood. So, it was just distribution in the city system. They came to Warsaw, through the city, and then either went somewhere else immediately. They only came, for example, for 2 hours to wash and eat, and they weren’t even located, I mean, they didn’t get their place to spread their things or sleep, as if there were conditions, of course, there was an option to sleep, but not always were such conditions. For example, after 3 hours, a bus would come for them and take them on the train to Berlin.

(PL16, F, public administration agency)

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## Reception and integration

Reception and integration are two different phases of refuge. But the type of support given can be the same up to some point, so it is difficult to make a clear cut between

the two – an example of such is described in the „Providing information” section below. Other forms of support can be assigned to a particular refugee phase, for example, language courses or vocational training belong to the integration phase.

## RECEPTION CENTRES

Receiving RwD requires a good and accessible reception infrastructure and procedures. Neither Warsaw nor Bucharest was prepared to receive a large number of refugees in a short time, therefore the reception/short-stay centres were established in exhibition halls, sports and entertainment halls. The reception points were mainly established by local governments. In some cases, NGOs were engaged in consulting on how the space should be designed so that it was accessible for people with disabilities:

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**//** We supported, among other things, the city of Warsaw in setting up reception points. We provided a set of recommendations and also consulted one of the points regarding accessibility for people with various disabilities.

(PL09, F, NGO focused on people with disabilities)

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Setting up a reception point or a short-time stay centre was a challenge, as most of the people who did it had no previous experience. They did their best, but the solutions they came up with were sometimes not appropriate for people staying there, especially for people with disabilities. There were no procedures to follow. One of the people who managed the distribution of meals at a reception place pointed out that the whole process was based on learning by doing. She needed to observe and analyse which solutions worked and which did not. She had some previous managerial experience, so it was easier for her to make the place work. She developed a schedule for delivering meals from restaurants and managed volunteers both „official” ones registered by the city hall, and an informal network she created herself. While the situation was developing, some solutions needed to be stopped. At one point, she had to end donations of sandwiches by residents of Warsaw. There was enough food and when private citizens brought food they made themselves, there was no guarantee that the food was prepared with all the sanitary precautions. Avoiding food poisoning among residents of the centre was her top priority (PL16, F, public administration agency).

One of the Polish NGOs decided to establish a reception point. The aim was to create a space for people with disabilities, especially those with learning ones. The reception point was designed so that neuro-sensitive people could feel safe there. This

was especially important after the hardships of the journey to a receiving country. The place was adjusted to the needs of mothers with children and equipped with children's dining chairs and bunk beds to accommodate more refugees. The point was also accessible to people with mobility impairments.

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**//** Especially for people with intellectual disabilities or autism, and so on. And architecturally adapted. Also, basic products for them, adult nappies, wet wipes, and rehabilitation beds. [...] we had to start looking for funding for this idea. We managed to find it; Polish Humanitarian Action supported us, was our partner.

(PL07, F, NGO focused on people with disabilities)

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But short-stay centres adapted to the needs of people with disabilities were the exception, not the rule.

Some UWRwD did not stay in reception centres at all. In such situations, NGOs helped them to find places to stay with families.

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**//** We offered assistance to people who were here directly and were physically passing through, just calling that they were going somewhere, that they were at the border, that they had already arrived somewhere in Poland, and if they needed accommodation. These were mainly honorary apartments offered.

(PL01, F, NGO focused on immigrants)

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## PROVIDING INFORMATION

Another important aspect of the process of reception was providing information. A lot of refugees who came to Poland or Romania came with no plans. However, they somehow knew the organizations that helped. At the early stage of receiving Ukrainians fleeing from war, refugees somehow knew the phone numbers of individual workers/volunteers of the organizations:

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**//** The longest break between incoming phones was probably 11 minutes, and on average it turned out that he received a call every three minutes during the day.

(PL10, M, volunteer)

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The helpers soon realized that they needed to elaborate more efficient ways of giving information to UWR(wD). They recognized which channels of communication Ukrainians used so that organizations could reach them more effectively. Finally, the service providers introduced the following solutions:

1. People with a command of either Ukrainian or Russian and Polish/Romanian were hired so that they could communicate with refugees on the one hand, and on the other, they would be able to track information available in Polish/Romanian;
2. Social media channels and social media groups popular among refugees were identified. Facebook is not as popular among Ukrainians as in the UK. Organizations started to use media popular with UWR to pass on information;
3. The places in the cities visited by UWR were identified. In Bucharest, it was Romexpo, which happened to be not only a refugee centre but also a place where Ukrainians could go to get some material aid and collect their vouchers. Romexpo was also a venue for various sorts of events, which made it a good contact point, where information could be distributed quite easily, even to the people who were not staying there. Posters and flyers were laid around so they could be taken to where they were staying;
4. Establishing helplines: regular ones over the phone and video helplines for the deaf.

Regular helplines were opened very soon after the outbreak of the war and they became very popular among refugees so organizations had to hire people.

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**//** We quickly opened a large helpline, and we also quickly realized that we needed to hire people, not just rely on volunteers, although volunteer support is incredibly important. The helpline started operating in early March.

(PL02, F, NGO focused on immigrants)

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Another challenge was providing information to the deaf. Even though the Polish and Ukrainian verbal languages are similar and it is easy to communicate, this is not the case for sign language. Ukrainian sign language is very different to Polish sign language, therefore communication with deaf people turned out to be much more difficult.

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// We also had a team of deaf people, so communication was difficult with them. No one spoke sign language. We also used an application created by the Polish Association of the Deaf for communication in Ukrainian. So, I think, looking at the conditions that were there, it's really good that we managed. But it was also my issue. And also knowledge of such an application because no one knew about it. Regarding contact with deaf people, the people who worked there were delegated from the city. So, they didn't even know that such a thing existed.

(PL16, F, public administration agency)

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Being aware of the problems with accessing information, the Polish Association of the Deaf established a video helpline for the deaf.

Another aspect of conducting information policy was the exchange of information between organizations. A very important element of helping RwD was providing information about which organization, place, institution and what type of assistance a refugee with a disability could receive.

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// So, I remember that people from the help centre contacted us and asked about the areas, who they could refer to, and so on. So yes, [name of the NGO] is known to us, and we always remember about them, also in cases where someone with a disability appears.

(PL20, F, NGO focused on immigrants)

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## DISABILITY CERTIFICATES

UWRwD who came to Romania and Poland had to apply for disability certificates in the receiving countries. Neither Poland nor Romania recognized Ukrainian disability certificates. If a person wanted to be under national healthcare services and in social security programmes for people with disabilities they had to apply for a disability certificate. The application procedure was the same as for Poland's and Romania's citizens. It may seem a fair solution but, one needs to bear in mind that UWR usually do not have command of the health-related language necessary for filling in administrative documents.

They also did not know how the system in receiving countries worked. So many UWR who applied for disability certificates needed support in organizing medical appointments, filling in documents and, finally, translating during visits to the doctor's office.

Another problem was that due to many applications, there was a delay in issuing decisions. In some cases, Ukrainians did not receive the degree of disability they expected. Or they received a disability certificate, the same as in Ukraine, but the scope of assistance was different. In the first case, they appealed against the decision, in the second case, it was necessary to explain that the system works differently in Poland or Romania than in Ukraine. In both of these situations, they needed support, which was mainly provided by non-governmental organizations.

## HEALTH-RELATED SUPPORT

As previously mentioned, UWRwD came to receiving countries with almost nothing. Very often they were not able to take their medications with them, which could become a life-threatening situation in the case of some chronic illnesses. So, there were cases in which medical appointments had to be arranged as soon as possible so that the person could get a prescription for the medication they needed. Another immediate need was to provide people with movement impairment with the equipment they needed to enable mobility as well as with access to rehabilitation.

## MATERIAL AID

Material aid was provided to RwD from the very beginning of their stay in receiving countries. After the first weeks of the war, people in Romania and Poland made a lot of material donations for refugees: clothes, shoes, and bed linen. But over time this help began to expire, and the organizations had to come up with procedures for registration and for giving material aid.

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**//** So, in material assistance, we operate a point that looks a bit like a free shop. Individuals or families come, register with us, and receive a specified amount of points for shopping at our point. The number of points depends only on the number of people in the family, and if it's a single parent, they receive a bit of a bonus. And individuals...

And how many of such points are per person?

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It's like they don't multiply, so if a person is alone, they have 120 points; if there are two adults, it's 150; if it's an adult with a child, it's 180. These are kind of like... [...]

We regularly buy household chemicals, cleaning supplies, and such items. In addition to the regular assortment, we added adult nappies, and indeed, many people take them.

*(PL20, F, NGO focused on immigrants)*

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However, donations from society could not meet the needs of people with disabilities, as they required special equipment. Some organizations specialized in providing material help to people with mobile impairments. They provided them various kinds of mobility aids:

// We have had the warehouse for over a year and a half now, and various families – nappies, crutches, wheelchairs, various orthopaedic wheelchairs, specialized ones. And many, many other needs... Medical supplies, clothing, bedding, and so on.

And did the outbreak of war create any new needs, new challenges?

Well, that was the new challenge. Because when we were gathering before the war, we planned to deal with immigrant families with disabled children. Now we have redirected a bit to refugee families because there was a need in that, not for immigrant families but for refugee families.

*(PL08, F, NGO focused on people with disabilities)*

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## REHABILITATION AND MEDICAL APPOINTMENTS

Medical assistance and rehabilitation were some of the most important aspects of helping RwD. Support in this area was provided both in the reception and integration phases. Support for refugees included arranging visits, especially in the initial phase of their stay when the refugees were not familiar with the system, organizing an assistant who accompanied the refugee to the doctor, or arranging transport, and translation during the visit. Even later on, organizations supported RwD with this matter.

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**//** Support related to medical treatment and rehabilitation was still ongoing. So, there was a change in approach, but we honestly maintained that it was not yet the time to completely withdraw from immediate support, as these individuals still faced difficulties in accessing suitable housing and so on.

(PL15, F, NGO focused on people with disabilities)

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Assistance in organizing visits also included medical visits as part of the procedure for applying for a disability certificate. The organization's employees also helped in completing documents that were only available in Polish. In the case of decisions perceived as unfair, they helped write appeals.

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**//** [...] we enrolled our beneficiaries in the National Health Fund (NFZ), where it often just prolonged everything. Especially if these were visits to doctors, and these visits were supposed to result in a disability decision later. You had to collect several visits, several papers, so to speak, from different specialists because, for example, disabilities were conjoined. All this took a long time. [...] And there's the first, second, third visit. And then something needs to be repeated, submitted, do an ultrasound, go to that doctor again, sometimes it can take two, or three months, waiting for appointments even longer.

(PL07, F, NGO focused on people with disabilities)

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Obtaining a disability certificate gave refugees in Poland several rights for obtaining material assistance and medical care. In Romania, obtaining a certificate was not that important for getting access to medical care. This was due to two different medical care systems. In Poland, medical care is based on the public system, and private care complements the public system. Therefore, obtaining full access to it is important, and refugees could obtain this by obtaining a Polish disability certificate. In Romania, the basic care system is the private system, as it is easier to navigate and recognizes Ukrainian disability certificates, whereas public care is perceived as ineffective, forcing patients to spend a lot of time navigating it. Therefore, in Romania, the Ukrainian disability certificate was much more often accepted than in Poland.

Even though the main care system in Poland is public care, refugees used private medical care, just like in Romania, because the waiting period for an appointment with a specialist can range from several months to several years. Therefore, an important

element of support in the area of providing medical care was obtaining financial resources to pay for visits to private medical offices.

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// And they stopped, didn't have it [rehabilitation] for months, for example. They come to Poland, and they have to go through the whole process of referrals, and getting to the rehabilitation clinic... [...] On the NFZ, which also takes time. And getting that rehabilitation. [...] Yes. So, these are things that, initially, we didn't have a budget for a doctor, for medical visits, for example. But then when we had... Unfortunately, we don't have it again now, but when there was a longer period when we had it, it was really smoother. It was also smoother for our employees because it's easier for them to schedule visits with a private specialist.

(PL07, F, NGO focused on people with disabilities)

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Another form of support was organizing translations for medical appointments:

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// Yes. And there, going to Romanescu with different things, because at first, I went to get prescriptions for them, yes, they couldn't do it themselves. Until Romanescu said: Viviana, I want them to come, I want them to come...

Is it far from here?

At Baba Novac. And me going there for one thing, another, for them, I saw refugees, other refugees, from other centres, who came alone, without a translator. Well, there, Romanescu has a translator on Tuesdays. But they came, so they manage.

(RO09, F, public administration agency)

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This also required obtaining financial resources, but also finding people who knew both languages well enough to translate medical terms. However, refugees did not like this solution because the presence of a stranger during a conversation about the refugee's health was embarrassing. A much better, cheaper and easier solution to organize was the introduction of digital voice interpreters, which provided professional translation and did not disturb the intimacy of the visit.

Another form of health-related support was organizing caregivers and places in a social assistance care centre, as there were people whose condition was so severe that they could not stay in a regular long-term stay centre.

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**//** If the person is not independent and requires care services, we allocate a caregiver to provide services at their place of residence. For Ukrainian war refugees, we implemented this form of support, even in collective accommodation points. Some individuals were also directed to social care homes due to their health condition. Here at the social assistance centre, we prepare the necessary documentation for admission to social care homes. However, the decision to admit to a specific social care home is made by the Warsaw Family Support Centre. We can also provide financial support if the person qualifies for it.

*(PL14, F, public administration agency)*

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## PSYCHOLOGICAL SUPPORT

Psychological support was offered to UWRwD both in Poland and Romania. Organizations provided this in various forms: psychological assessment sessions for people with traumatic experiences to decide if long-term therapy is necessary, support for neuro-sensitive children, but also more soft forms of help such as mentoring and coaching. The consultations were arranged on a short-term basis. The most important aspect of organizing psychological support was to find psychologists and psychiatrists speaking fluent Ukrainian.

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**//** Yes, yes. Psychological support in several languages and also the option of consultations with a translator if needed. However, as the psychological support department expanded in 2022, it quickly started to run out of available slots for appointments. There's a possibility to consult, not on a long-term basis, but to consult and have a psychologist or psychiatrist explain what's happening and determine whether therapy is needed or what they think.

*(PL20, F, NGO focused on immigrants)*

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**//** Yes, yes, the first support they receive is mentoring and coaching sessions from our trainers. The trainers are also Ukrainian speakers, some of whom arrived during the war, while others have been living here for a long time. They have extensive experience in psychology, coaching, psychotherapy, and group support leadership, and they provide mentoring for these individuals. They answer various questions raised during individual meetings with those working in the field. This mentoring takes place every month, twice a week, and family consultants and support leaders benefit from this kind of support

*(PL03, F, NGO focused on issues other than refugees or people with disabilities)*

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An important part of the support for Rwd was aimed at children; neuro-sensitive children or children who had multiple disabilities including intellectual ones. The children were very often in bad mental shape after the hardships of evacuation, and could not live in overcrowded short-term or long-term residence centres. When they were directed to NGOs, the workers could easily see that the children needed some psychological support and many of them had not been diagnosed. Therefore, the top priority for them was to persuade parents (mothers mainly) to agree to psychological appointments (PL07, F, NGO focused on people with disabilities).

Another aspect of helping people with mental disorders is helplessness. Interviewees described situations in which they could see that a person needed psychological support, but they could do nothing. A person cannot be forced to see a psychologist or psychiatrist.

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**//** [...] there have been individuals who refused psychological consultation. If a person consistently refuses, then there is nothing we can do.

*(PL20, F, NGO focused on immigrants)*

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## MAKING UWRWD INDEPENDENT

One of the tasks in the integration phase of refugees into which people supporting refugees put a lot of effort was trying to make Rwd and/or their caregivers independent. The scope of independence was, of course, adapted to the capabilities of individual refugees. Very often, it involved mundane activities such as arranging doctor's appointments or, in the case of people who could work, taking up employment.

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// But now, with the changes in ordinances, we realize that the state wants to encourage them to manage on their own, so we are doing that too. We want to encourage them, and we are working on it, to manage on their own. If I, as a medical assistant, took care of them and scheduled appointments with the family doctor, now, for about two months, let's say, for at least a month, we tried to encourage them to make their own appointments, to go on their own... They have been going on their own for a long time, but not all of them.

(PL20, F, NGO focused on immigrants)

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RwD were also provided with regular integration support such as language courses and vocational training.

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// These actions included, for example, Polish language courses, vocational training, obtaining a driver's licence.

(PL15, F, NGO focused on people with disabilities)

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However, refugees were not very eager to participate in this kind of activity. Supporters stressed that people who stay in long-stay centres are very unwilling to make an effort to become independent (Group interview). It is difficult to say why it is so. Some language and vocational courses were offered too soon, in the summer of 2022, when people were still traumatized and believed that they would get back home soon. But now it is more difficult to find an explanation, apart from the fact that people with disabilities usually are not able to have full-time jobs, the same explanation can be used for caregivers of people with disabilities.

## NEEDS NOT COVERED BY THE EXISTING PROGRAMMES

The assistance provided by Polish and Romanian stakeholders was not able to respond to all the needs of RwD. Some needs were met until funds were exhausted, and others were met occasionally. Some needs could not be met at all. The analysis below identifies the unmet or not fully met needs. The main cause of the needs not covered by the existing programmes is the lack of migration policies both in Poland and Romania.

This chapter has a limited scope, the results apply only to Warsaw and Bucharest, and it does not describe all the needs of refugees, these are narrowed down to the needs stemming from the disability of a person and other intersecting identity parameters.

## Needs of service providers

### THE NEED FOR PROCEDURES

One of the first unmet needs was the lack of procedures for evacuating and receiving RWD. The experience of receiving UWRwD, as previously mentioned, was based on the learning-by-doing paradigm. The solutions provided for UWRwD very much depended on how observant the service provider was, and to what extent they were ready to take risks and introduce new solutions.

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**//** It was a continuous response to needs. We see a need; we create a helpline. We see a need; we create reception points. We see a need, there's one reception point and a support point.

(PL07, F, NGO focused on people with disabilities)

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But for people's engagement and involvement in the reception process, many more needs would not have been met.

The first weeks of helping refugees was a time of hard, almost non-stop work and great effort. In a very short time, burnout was a common experience. Employees of non-governmental organizations realized that they could not work at full speed all the time, that changes were necessary and systematization of the support was necessary if it was to be effective and the costs for NGOs were to be optimized. This situation applied to both Poland and Romania. Individuals and civil society organizations were the first to help. The state reacted after a while when formal regulations were ready.

A similar situation occurred in public institutions, which did not know how to operate effectively. Employees of the institutions were given tasks they had never done before, such as establishing reception centres or organizing a system of volunteers.

## THE NEED FOR LONG-TERM POLICY ON RECEIVING AND INTEGRATING RWD

Poland has developed migration and integration policies, Romania has one. As a result, there are no long-term, government-financed programmes to support people with migration experience. Therefore, NGOs and other actors are not able to plan and run long-term programmes directed at migrants. The same applies to Rwd, who should be given additional support in the areas of social, economic, and cultural integration, as well as the support necessary to maintain their health and wellbeing which is suitable for the type and degree of disability.

## THE NEED FOR ADEQUATE FINANCIAL RESOURCES

Entities supporting Rwd expressed the need for increased, stable, and long-term financing of their activities. In the first months of accepting refugees, NGOs could count on material and financial donations, as well as the work of volunteers. However, over time, the aid began to expire and the organizations started to run out of resources. Organizations had to start raising funds through fundraising and the grant system. These methods of financing meant that assistance usually responded to a narrow range of needs (Group interview, Poland).

The grant system of financing support for Rwd does not ensure appropriate activities. Competitions usually have a thematic scope, which does not always respond to the current needs of migrants. NGOs reported the need for a more flexible grant system so that they could finance activities that respond to the needs of Rwd (Group interview, Poland).

The situation of public institutions was even more difficult. Employees of municipal institutions have had their scope of duties increased to include those related to helping refugees from Ukraine, but their old duties have not been removed, their remuneration has not been increased, and additional collaborators have not been organized. The lack of additional financial resources was compensated for through longer than usual working hours of the social service and municipal workers.

## The needs of UWRwd

### THE NEED FOR REGULAR LONG-TERM ACCESS TO MEDICAL SERVICES

Rwd (and refugees with chronic diseases) needed regular and continuous access to medical services and rehabilitation. This was a complex problem because it involved financial and linguistic issues. Furthermore, the problem was related to the preparation of specialists to work with a patient from a different culture. Firstly, for this need to be

met, funds were necessary, because in Poland the waiting time for an appointment in public care was very long. In Romania, the private medical care system was dominant over the public one, so funds were an even more important barrier to accessing medical services. Secondly, there were very few doctors who speak either Russian or Ukrainian, therefore refugees needed an interpreter during their visits. This was difficult because the number of available interpreters was limited, and secondly, it was embarrassing when a stranger was present during an intimate event such as a doctor's visit. Furthermore, not every doctor's visit could be translated, with an example of such a visit being a psychological/psychiatric consultation.

### THE NEED FOR PSYCHOLOGICAL SUPPORT

One of the most difficult forms of medical support to organize is a psychological/psychiatric one. A visit to a psychologist or psychiatrist should take place in the patient's own language. However, the organizations had psychologists who spoke either Polish or English (PL14, F, public administration agency). Once therapy is started, it should continue, but there were not enough specialists to support all the refugees who were in need.

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**//** But if someone wants to get into therapy, I don't know how available it is now; it probably depends on the person's language. But, you know, it's difficult because when someone enters therapy, for example, here with us, it takes some time. Also, the people who work here have a limited capacity to accept clients, and at some point, those slots are filled.

*(PL20, F, NGO focused on immigrants)*

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There is another problem with this type of medical visit: the lack of diagnostic tools that would be embedded in a language and cultural and social context that would be understandable to the refugee (Group interview. Poland). The lack of tools adjusted to the capabilities of a patient results in an inadequate diagnosis.

Finally, psychological/psychiatric visits were expensive in both Poland and Romania, and very few refugees could afford them, especially since for this kind of medical support one visit is not enough.

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**//** I had to tell people that we have a few specialized services that provide behavioural therapy for autistic children. Private, but they are few and expensive, and those people probably couldn't afford to pay around 120 lei per hour, minimum, or I don't know. I directed them to the child services of the DGASPCs. Now we are only talking about services specialized in autism. So, apart from the few in Bucharest, privately, there are also a few centres, at least one is specialized in autism, which is in Sector 1. At DGASPC. I don't remember exactly if there are others specialized in autism in other sectors, but they could have gone there.

*(RO08, F, NGO focused on people with disabilities)*

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## THE NEED FOR ACCESSIBLE FACILITIES FOR REFUGEES

The accessibility of reception points and short-stay centres and adjusting them to the needs of people with disabilities was one of the biggest problems. The vast majority of the reception centres were not accessible to refugees with limited mobility. This is also the case of the headquarters of NGOs supporting RWD. There were no elevators or wheelchair ramps, stairs only. Sometimes RWD can use back doors.

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**//** And indeed, we have some stairs, no ramp, but it's easy to get into the yard. Yes, and from there, we are the ones who handle any case. Yes, we're not on an upper floor, but we don't have a ramp.

*(RO03, F, NGO focused on issues other than refugees or people with disabilities)*

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The buildings inside were also not adjusted to the needs of people with disabilities. The doors were not wide enough for a wheelchair to go through. The bathrooms were not adjusted to the needs of people with disabilities. The centres were not adjusted to the needs of the refugees confined to beds – they did not provide enough privacy for caregivers to perform hygiene routines. The applied solution was to put up screens around the bed. Residential centres were also not adjusted to the needs of neuro-sensitive people, as they were huge open spaces, overcrowded, and always busy without separate rooms to calm down.

## THE NEED FOR ACCOMMODATION

The need for accommodation had two aspects. One was accessibility; there were very few apartments accessible to people with mobility impairments, affordable, and

preferably in the city centre. Apartments in new buildings were usually better adjusted to the needs of people in wheelchairs, but they were more expensive. Apartments on the outskirts were more affordable, but usually not accessible and far away from specialists and rehabilitation facilities.

Another problem with accommodation was in long-stay centres when the authorities decided that the people who stayed there needed to pay for them. In Poland, disability was the basis for being exempt from this fee. The decision belonged to the facility manager. In Romania, to be able to live free of charge in long-term stay centres, one had to provide a certificate of employment and, if you had a child, a certificate that the child was attending school. In the case of people with disabilities and other vulnerable people, this was problematic because such people could not take up employment. Romanian law did not provide a solution for such a situation, and whether such a person could remain in the residential centre depended on the creativity and goodwill of the person managing the facility.

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**//** [...] example the vulnerable groups I was talking about, the elderly, mothers who cannot get a job because they have no one to leave their child with, children, people with various health problems, in the sense that they were forced to get a job to stay in the centre and continue to receive assistance. I know there was a gap in this area, from what I've been talking about, and I consulted with the heads of the centres regarding legislation. Not all these needs are very well covered by the legislation, and they were trying to find solutions to address them. I remember personalized interventions at one of the centres, where they said we should kick them out, but I went to talk to the head of the DGASPC in my sector to find a solution to keep them, because, look, I have a mother with five children, she has nowhere to leave them, what should she do, stay and guard her children? I mean, these are punctual situations, exceptions, and they do not find a solution according to the law. I think the legislation should somehow cover these exceptional or justified cases, with documents, and from case to case provide, not necessarily exceptions but be flexible. I don't know, what do you want to add here?

*(RO03, F, NGO focused on issues other than refugees or people with disabilities)*

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# STAKEHOLDERS' PERSPECTIVES ON THE ORGANIZATION OF HELP AND THEIR OWN EVOLUTION

## Cooperation between actors

Dealing with the refugee crisis/situation was, in Warsaw as well as in Bucharest, an effort based on cooperation between different types of stakeholders, such as public institutions, civil society and international organizations. Even though, in time, the funds available for the actors providing services to the refugees from Ukraine have decreased, competition did not seem to become the rule. Instead, the already established networks of cooperation, some of them pre-existing the refugee crisis, some of them put in place at the beginning of the conflict, still functioned.

### THE BASES OF COOPERATION

In order to provide a proper response to the needs of refugees, service providers referred beneficiaries/potential beneficiaries to relevant NGOs or stakeholders. Coordination appears, in this context, to have been extremely important, based on having the necessary knowledge and information about what providers are available and what each of them offer:

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**//** Of course, of course. Because as I mentioned, at the beginning, last year, we directed them to many different organizations that were helping, we directed them to, for example, ... to accommodation. Somewhere for underwear and bedding. Somewhere else, there was something, something like that.

(PL08, F, NGO focused on people with disabilities)

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Some stakeholders provided services, others were able to purchase different items needed by the refugees. These constituted the premises for a complex interdependence and a vast array of relations between different actors.

Personal networks seem to be vital for ensuring the spread of information about what each stakeholder has to offer and, consequently, for cooperation between actors. In turn, through cooperation, the shortages of the public sector are overcome, as the NGOs get involved:

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// Communication agreements exist if you have people, in general, the personal network functions. Information circulates between institutions, especially since public authorities, that's my perspective, needed the support of NGOs because they were understaffed in terms of human resources, under capacity in terms of services. So, somehow, the system needs what the sector can provide, so the public sector needs the services developed by NGOs.

(RO20,F, NGO focused on immigrants)

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This vertical and cross-sectional cooperation is considered to be/have been fundamental for the response to the refugee crisis. In the case of residential centres, for example, in both Warsaw and Bucharest the first steps towards collaboration were usually taken by the NGOs, who offered their services and expertise and spread the word about how they could be reached.

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// [...] when it comes to refugees from Ukraine, mainly, again, mainly residential centres. So, we cooperate with many, many organizations, I also have the feeling that if it weren't for these organizations, we wouldn't have achieved much. [...] Answering the question of how we acquire these collaborations, in this case, we didn't really make much effort because these organizations found us themselves in the crisis we had. Many organizations came, actively left, but also several, actually a dozen or so, we still cooperate with today.

(PL13, F, public administration agency)

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// Now, speaking about the centre somehow, and about the needs encountered at the centre. Have you ever directed people to certain NGOs that offer specialized services or based on their needs?

Yes, because there were NGOs that came and told us what they do, gave us pamphlets in their language and in Romanian, and told us they could help in a certain way. So, we always had this when there was an opportunity and when we had a chance from an NGO, an organization where they could go personally and address, they were directed.

(RO10, F, public administration agency)

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Private individuals who chose to participate, usually as volunteers, were also important resources. But, as detailed in other sections of this report, the involvement of volunteers was significant at the beginning of the crisis and has decreased ever since, as well as the interest of donors from the private sector.

What gave structure and direction to the whole process was the repertoire of specific needs, coupled with what was available in terms of services or, generally speaking, assistance. With these needs in mind, the search for solutions and partners in providing help to those in need could start:

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**//** Try to find from various foundations, various options, and so on, because also, and in the description, you can apply for help for a specific thing. Usually, it is granted some amount up to 100 PLN, 200 may be for a specific purpose you can enter, and usually they give that money, if they have it, it also depends there.

(PL01, F, NGO focused on immigrants)

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## THE HURDLES OF THE PUBLIC SECTOR

In both Warsaw and Bucharest, the public service providers encountered hardships in catering to the needs of refugees from Ukraine, be they disabled or not. Complicated and lengthy administrative procedures sometimes made it impossible to solve specific issues in due time, and in these cases relying on external help, such as that described below, coming from IOM, made things easier:

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**//** I admit that I preferred to seek the help of those from IOM, who had a programme focused on health, and to the extent that we identified these singular situations, we asked them to help us, and they gave us a mobile phone, a phone number from the person who was in charge of this health programme because they could also ensure the payment of some medical tests and more complex medical services, such as surgeries. So, this aspect was very helpful for us, especially since in Romania, you encounter difficulties in reimbursing a surgery or other more extensive investigations. So, we directed them to IOM because it was more, I don't know, cost-effective, including financially.

(RO07, F, public administration agency)

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The responses of the public administration were perceived in both cities as being delayed. This initial inertia made civil society organizations the first responders and the ones who had to struggle in order to find swift solutions for the problems ahead:

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// [...] can talk about many things, probably a difficulty was also that cooperation with public administration was useless, oh well, colloquially speaking, it simply meant that reactions were delayed. We had to motivate and engage entities enough by stating what the needs were, where they actually had and have resources, not us.

(PL15, F, NGO focused on people with disabilities)

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When it comes to the situation of RWD, the importance of cooperation between the public sector and other entities such as NGOs or international organizations is even greater. Refugees have the obligation to be integrated into the labour market in order to maintain the state provided benefits. In order to be exempt from this obligation, individuals with disabilities need to have their status officially recognized, and this is usually a process that takes a while. Especially in this timeframe, as explained by the interviewees with a background in public services, the activity of the NGOs makes up for the administrative shortcomings.

## TRANSNATIONAL COOPERATION

What appeared to play/have played a significant role, especially in cases of intersectional vulnerabilities, was the cooperation across national borders.

In Bucharest/Romania, an example is provided by (chronic) patients associations, entities that closely collaborated with their peers and fellow federation members from other European countries:

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**//** Our contacts were given to them by their association in Ukraine, meaning the association, so the association in Ukraine, just like us, member associations, are under an umbrella at the European level. It's called the European [anonymized] Consortium. At that time, we even had meetings, with the European [anonymized] Consortium, with the World Federation where countries close to Ukraine, us, the Hungarians, Bulgarians, Serbians, Poles, etc., had meetings to see how we could support people with [anonymized] coming to one of these countries. And then somehow our contacts were given to us by email, by SMS, however they could communicate them.

(RO18, M, NGO focused on people with disabilities)

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In Warsaw/Poland, this transnational character was apparent especially in relation to evacuation, but also when it came to finding suitable destinations (social and material infrastructure) for people with specific and stringent needs:

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**//** However, while I hope that Rubikus, despite these drops in subsidies, will continue to operate, but when it comes to organizations like Helping to Leave, which, for example, also cooperates with the government of Ukraine, in Ukraine and with large organizations such as UNHCR and had large grants there for internal refugees, on the other hand, unfortunately, there is no money, the money for foreign relocation is running out.

(PL04, M, NGO focused on immigrants)

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## DIFFERENCES BETWEEN THE TWO RESEARCH SITES

As detailed in the chapter describing the methodology employed in this research, there were notable differences between the composition of the samples in Warsaw and Bucharest. In turn, this was considered to be an indicator of the differences between the two contexts/social environments when it comes to approaching disability, when providing humanitarian assistance but also in general.

In Warsaw, the sample included representatives of various NGOs that are specialized in providing services for people with disabilities and that were/are also involved in working with refugees from Ukraine. In contrast, in Bucharest there were not many respondents coming from organizations in the field of disability and those

organizations had scarce involvement in the refugee crisis management, if any. At the same time, there seems to be a deep disconnection between the two domains that could be traced back to the general attitudes (including institutional ones) towards disability and to the fact that both types of actors have a lot to deal with – NGOs for refugees due to this crisis and NGOs for people with disabilities due to the social infrastructure in Romania:

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// There were various social care organizations, who had come from social to migrations, and then they covered the spectrum of disabilities, and they had expanded their scope with support for refugees rather than the other way around. There are also organizations that offer support in... legal, within CDMIR, such as CNRR, yes, we work closely with them, who, having the capacity, being large organizations, have expanded with legal support, legal, on disabilities. It's true that the major federations or the Federation of Persons with Disabilities and the major disability organizations were not directly involved, but I can understand that because they are now overwhelmed by the problem itself.

(RO14, M, NGO focused on immigrants)

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The lack of services designed for people with disabilities seemed to be common knowledge in the interviews. Help was often obtained via more or less informal channels, but there were also cases in which the relevant actors found themselves unable to participate in helping refugees due to their already busy schedules:

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// [...] They asked us to go there because they had some groups of autistic children, and if we could help them. We were very busy and postponed until we simply couldn't, and they somehow gave up inviting me. We were too busy, kept postponing, said we couldn't do it now, let's try... We had these projects, and we had two projects one after the other, where we couldn't breathe.

(RO08, F, NGO focused on people with disabilities)

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## ORGANIZING EVACUATION FROM THE CONFLICT ZONES

Evacuation from the conflict zones is one of the topics that reflects the differences between Warsaw and Bucharest in what concerns the involvement of actors in

the refugee crisis. In Bucharest, we did not find any entities, be they institutions, informal groups or individuals, to have taken part directly in the evacuation process. In Warsaw, the situation was different, as reflected by the pool of respondents.

The complexity of getting people out of the way of the conflict was deepened by the existence of disabilities, a fundamental variable to be taken into account. In this context, cooperation was a necessary condition for the success of evacuations:

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**//** And often, it was necessary to take, and how to take people with disabilities? How to take those lying down, with all the equipment they have, in a safe way, because they won't stand up? Or in the safest way, how to take those lying down? This cooperation had to be.

(PL05, F, NGO focused on issues other than refugees or people with disabilities)

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Fleeing the war territory is only the first step, one that must be followed by securing proper accommodation and access to services. This brings up two aspects, as exemplified in the excerpt below: a niche for speculation and exploitation and the need for the cooperation of entities across borders, in order to bring people to safety:

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**//** There are specialized companies in Russia, for example, that transport refugees for 350 dollars and simply drop them off at the Western Station; then they have to manage on their own.

Yhm.

Or there are organizations like Rubikus, a foundation registered in Germany, or Helping to Leave, registered in Prague. The first gathers Russian-speaking volunteers worldwide. The second, Helping to Leave, is a purely Ukrainian organization, and about 90 per cent of its activities take place in Ukraine, dealing with assistance to internally displaced persons with all the benefits of inventory. However, about ten per cent of their activities are dedicated to helping people, especially those who are sick, elderly, and disabled, to leave because it is increasingly difficult for such people to provide care in Ukraine. A separate category is the wards of Rubikus, which, in turn, primarily, let's say „fifty-fifty,” is also involved in evacuating from occupied territories.

There we have this... it slightly disrupts our image of the average refugee, a woman with children, and so on, because there are whole families, there are also men who are currently also at risk of being drafted into the Russian army.

(PL04, M, NGO focused on immigrants)

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## Organizational development

In the case of service providers for Ukrainian refugees, organizational growth was a natural response to the complicated situation that arose. The research revealed that there are quite a few NGOs, as well as individuals working/collaborating with the NGOs, that decided to take action simply because they saw/they perceived that there were needs that were overlooked by the formal responses to the crisis. Their activity during the refugee crisis was compared to a marathon, underlining the importance of rationing one's strength so as to make it in the long run.

At service providers, matters are handled by new staff combined with the already existing employees. Services and activities were developed for the specific needs of the beneficiaries (tailored services), and this meant that an increase in human resources was mandatory.

### THE NECESSITY TO ADAPT TO A NEW SITUATION

The Ukrainian refugee crisis was an unprecedented situation for both Poland and Romania, given the (geographical) closeness of the three countries. Neither Poland nor Romania had extensive experience in dealing with issues related to the reception of large numbers of refugees. Thus, at least in the days right after Russia's attack, improvisation and quick adaptation were often put in place by stakeholders in order to try to respond to the needs of those fleeing the war:

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**//** Romania wasn't prepared for this; we lacked the experience, mobilization, and humanitarian assistance. We hadn't faced such a situation before. In the early days, everyone was trying to help as best they could. With time, the organizations' actions became more structured. We identified the needs and aligned ourselves more effectively. However, at the beginning, it was more of an improvisational effort.

(RO03, F, NGO focused on issues other than refugees or people with disabilities)

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In both Warsaw and Bucharest, as exemplified by the excerpts presented below, it took a while for things to become more structured and for organizations to gain a bit of experience in providing humanitarian help so close to the conflict zone:

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// Some departments were quickly set up on the go. It was mainly about the housing department, and they hired employees. After two months, they hired both employees and volunteers. We helped, and after a while, they offered me a job in the housing department.

(PL01, F, NGO focused on immigrants)

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The novelty of the situation was also felt in relation to the coordination and limits of the interactions with beneficiaries. For service providers engaged in monitoring and, ultimately, control, establishing boundaries and finding the recipe for giving space to the beneficiaries were challenging aspects:

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// Maybe, indeed, there should be a width for them to choose if they come to us, and yes, maybe this monitoring area should be better, I don't know how to say it, better established between institutions. Because, somehow, I felt that everyone was on their own, and once in Romania, we are welcoming, but further, if... I mean, each entity works without the other knowing or collaborating, understanding how we can work together so that they are best in Romania.

(RO07, F, public administration agency)

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## ORGANIZATIONAL GROWTH

In the interviews, there are numerous accounts of organizational growth: learning new things/fostering new skills, but also expanding the team of employees. The new skills or the improvement of existing ones was a direct result of having to work with this new category of beneficiaries, and having to manage stressful unpredictable situations. As the organizations started to address the needs of a new category of beneficiaries, it became apparent that the number of employees, as well as the array of available professionals, should increase.

The significant growth that took place in a short time brought changes in the way organizations functioned and in their internal structure. People/employees had to

work under pressure (external pressure – having to respond to the needs of refugees, that changed at a very fast pace; internal pressure – having to find their place within the organizational structure and to integrate their activity in the existing workflow), sometimes redirecting their energy and resources from advocacy to hands-on approaches and work in the field.

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**//** There are organizations that have spread from three border points to 20 or, well, not 20, to 10, from two regions to six, and so on. But this comes with tremendous pressure on the people there; they have to find their own teams to work with; changes are quite frequent; there is burnout, and even though there has been money throughout this period, that is, budgets of organizations have increased a lot, very little time has been left for the common working part [...]

(RO14, M, NGO focused on immigrants)

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Further, a niche was created for bilingual and multilingual individuals, who had the opportunity to change careers in response to the yet unfulfilled need for language skills to enable communication between Ukrainian refugees and service providers in both Poland and Romania:

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**//** I think here many organizations also experienced this sudden growth, and a lot of new people were hired, who often had to be trained because, as we mentioned, bilingual individuals were in high demand, and many of them, like me, completely changed their profession. So, it was necessary to quickly acquire a lot of knowledge. But also, the quantity of benefits provided, and the awareness that war is very close, very nearby, is seen differently, of course.

(PL02, F, NGO focused on immigrants)

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Sometimes, service providers used specific strategies in order to somehow control the number of potential beneficiaries and to avoid possible blockages. One such strategy was to avoid offering cash assistance and focus on services instead:

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**//** If you think about the number of beneficiaries you serve, have you exceeded your capacity?

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**//** Not at the moment. We have enough personnel. One factor that helped us somewhat was that we offered very little cash assistance, and we didn't have as large influxes of people as happened at [GRS], which found the street full of people at its gate.

(RO02, F, NGO focused on issues other than refugees or people with disabilities)

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## HUMAN RESOURCES: CHALLENGES AND OPPORTUNITIES

In terms of human resources, there has been an obvious upscaling among the service providers represented in the sample. This expansion in team size was necessary due to the increase of potential beneficiaries, naturally associated with the addition of new services in the organizations' offers. Various examples are provided by the interviewees, and one of the recurrent themes is housing.

Administrative skills proved to be indispensable and are mentioned by participants throughout the interviews. They constitute the basis of an organization's activity and, as such, need to increase/expand/become more complex once the organization's activities broaden. The difficulty accounted for by interviewees relies on the fact that administrative issues are often invisible or taken for granted, and one is forced to raise awareness concerning their importance:

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**//** Because, what's the use if... I often had discussions with organizations; they say it's great that you have funds for us, that we can help, but we don't have people to implement it if you can't cover the costs for us. If you can't even partially cover the coordinator's position, how can we organize support, like daily stays for these individuals here, if we don't have people? Because we can barely manage our own activities. So, it's a plus, and I see the attentiveness of these organizations to what we reported earlier, and you can see it in the goals and activities planned for the coming months.

(PL15, F, NGO focused on people with disabilities)

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But the growth of the administrative departments and, consequently, the need for more staff, was an inherent part of the organizational growth triggered by having to provide services for this new and intersectionally vulnerable population:

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**//** So, our administrative department grew because the number of contracts increased, and these contracts are different, depending on whether someone has a residence card, a Polish card, is on a visa, or has a Ukrainian status.

(PL07, F, NGO focused on people with disabilities)

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In terms of specific skills, finding the appropriate staff proved to be a rather complicated issue. On the one hand, there were certain skills that were necessary, such as language and communication skills, and on the other hand, there were the administrative/bureaucratic aspects related to the relation between service providers and their sponsors:

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**//** Of course, there were difficulties from the beginning because, at the beginning, we had to recruit staff, that was the hardest part. It involved recruiting staff, finding a new headquarters, [...], acquisitions, offices, technical equipment, everything, everything that meant [...]. Between April and June was a horror for us in management to do all these [...]. There are a few checkboxes, but behind them are many more bureaucratic procedures.

(RO15, M, NGO focused on immigrants)

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In this context, being able to find and employ people who could speak Ukrainian and/or Russian was an important asset for service providers, especially given the sensitive nature of their work and the limited extent to which volunteers could be used:

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**//** It was very difficult to find them because all NGOs grew in a similar manner, and it was very challenging. I think a significant advantage we brought to the market, so to speak, was that we hired people who could speak Ukrainian or Russian. So, there are people from the Republic of Moldova and Ukraine in our team. We hired social workers because we didn't have social workers. Psychologists were also challenging to find, and many positions are still vacant.

Do you use volunteers?

Yes, but to a lesser extent because it's quite specialized work. Yes, when we organize events with many children, such as sports and cultural activities, we use volunteers, but in day-to-day work, we use volunteers less.

(RO02, F, NGO focused on issues other than refugees or people with disabilities)

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Apart from the skills related to the specific professions of those working with refugees, the hard skills referred to in the excerpt below, the ability to cope with exposure to traumatic life stories was also needed. Setting boundaries between professional and personal lives was often challenging, and this had direct consequences on the teams of professionals working directly with refugees: people came and went, as they could not cope with the emotional turmoil they were exposed to.

// Indeed, not only did we need knowledge and access to information to provide people with reliable, good, and up-to-date information, but also psychologically, it was challenging. We learned a lot in those first months, but we also understood that the knowledge and so-called hard skills we have need improvement. Also, as employees on the first line, we need improvement in the emotional sense to take care of ourselves, our rest, and our overall wellbeing. Improving qualifications in working with people in crisis is essential.

(PL02, F, NGO focused on immigrants)

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## Dependence on financing

Apart from the constant resources from parent organizations (where this is applicable), there are multiple sources of financing mentioned by the respondents in both Bucharest and Warsaw: international (humanitarian aid) organizations; private sponsors/companies; public funds.

Writing project applications and entering project-based competitions constitute the most common way of obtaining funds. The type of projects for which one is eligible depends on the specifics of the organization, and substantial grants are combined with smaller ones, upon availability.

## SOURCES OF FINANCE

### International (humanitarian aid) organizations

International organizations, such as UNICEF or UNHCR, are important actors when it comes to financing local/national service providers. Various forms of partnerships between stakeholders at different levels existed/exist. Examples of such complex collaboration are the Blue Dot Hubs (<https://www.unicef.org/eca/what-are-blue-dots-hubs>). But, apart from these, international organizations offer project-based funding which enables service providers to conduct their activities:

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**//** And because I am not responsible for the financial side of the project, I can say that this project from ESPD, yes, is funded by UNICEF, another project that we implement, hmm, in cooperation with MOPS, with MOPS is also funded by UNICEF, and a project like activation for refugees over 30 years old.

(PL03, F, NGO focused on issues other than refugees or people with disabilities)

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### Private donors/companies

Private companies are often mentioned as donors by service providers' representatives in our sample. It should be mentioned that, in the perception of service providers' representatives, the willingness of private companies to contribute with donations depends on a number of factors, especially PR related. The case of Ukrainian refugees in Romania posed difficulties, due to the fact that Romania is perceived as a poor country, with its own marginalized or impoverished citizens, without having to cater to the needs of foreigners, albeit ones facing major distress:

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// Is it the same with the funders, because it seems to me that the funders somehow follow the community trend because a company doesn't want to give money to a cause that isn't very, um, appealing, like, we also received comments on our Facebook posts about refugees, and some of them were mean, like „we finished helping all the Romanians, and now...”, from that category. I mean, there is this perception that we are a poor country that can't afford to help our citizens. Yes, our people. Now we are mobilizing resources for refugees. Yeah, well, everyone has their perspective, but this is also felt at the level of company involvement, including at the level of company involvement. I know that in the beginning, it was, well, very, I don't know, very emotional, especially because it was, I don't know, in our proximity.

(RO03, F, NGO focused on issues other than refugees or people with disabilities)

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Cases of negotiation between service providers and donor companies were also described, as donors might have their ideas and requirements regarding how funds are spent:

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// [...] in material assistance, we have 80 per cent of individuals from Ukraine because that's how it is in reality. However, we can't say to two families simultaneously, one from Afghanistan and one from Tajikistan, who come to our open point at the same time, „You won't receive this support because it's only for...” So, the people who work with businesses always negotiate to allocate a percentage if the aid is intended for Ukraine. For example, let's make 70 per cent of this assistance go to individuals from Ukraine, and that's indeed how it works because we see that it looks like this.

(PL20, F, NGO focused on immigrants)

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Apart from companies, individuals with close connections to a certain cause were also mentioned as contributing and financing service providers. As expected, due to the nature of the predicament in the case of refugees, this is especially the case of NGOs active in the field of disabilities, who obtain donations from people with disabilities. This type of contribution was extremely important, as it allowed NGOs to stay flexible and find ways of providing services to a new category of beneficiaries (UWRwD) at the beginning of the war:

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For the longer part of the first year, especially, we operated with financial support from friends of people with disabilities from all over Europe. After the first year, the willingness to provide material assistance somewhat decreased, but we try to apply for various types of grants. For example, we use a grant from the Orlen Foundation, which sponsored us with a several-month supply of clinical materials and orthopaedic equipment so that we could continue these activities. Additionally, a significant part was simply from the foundation's own funds.

(PL09, F, NGO focused on people with disabilities)

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The evacuation of individuals with disabilities proved to be a challenge and a task whose accomplishment depended on collaboration, including providing funds, between actors at different levels and located in different countries:

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However, while I hope that Rubikus, despite these drops in subsidies, will continue to operate, but when it comes to organizations like Helping to Leave, which, for example, also cooperates with the government of Ukraine, in Ukraine and with large organizations such as UNHCR and had large grants there for internal refugees, on the other hand, unfortunately, there is no money, the money for foreign relocation is running out.

(PL04, M, NGO focused on immigrants)

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## Public funds

Public actors are often involved in financing private service providers/civil society organizations. In our research, this was extremely visible in the case of Warsaw, but instances were observed in the case of Bucharest as well. Even though there might not be financial resources directed from public institutions to NGOs and private service providers, public contributions might be in the form of buildings/spaces designated for the provision of services, or coverage of specific expenses, such as those related to transportation. This public aid is combined with funding from other sources, such as grants, various sponsors, etc.:

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// Regarding funding, for the task assigned by the Voivode to operate the Stay Points, we are financed by the Mazovian Voivode. Additionally, we receive funds from donors, donations, and our own budget at [anonymised].

(PL13, F, public administration agency)

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## STRATEGIES FOR EFFECTIVE RESOURCE GATHERING

As seen throughout the excerpts presented above, a common strategy for dealing with resource shortage is to obtain financing from multiple sources. This is the case for a (residential) refugee centre in Bucharest, for which donations were obtained from private companies, as well as international organizations and NGOs. The centre is closely linked with the town hall, the institution being seen as *its protector*. However, it is presented by the interviewees as the result of receiving donations from multiple sources:

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// So, the centre here was sponsored, and everything you see, yes, it was renovated by Habitat, furnished by IKEA.

(RO09, F, public administration agency)

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Another way is to focus on specific needs, while investing time and effort in raising awareness, on a continuous basis:

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// Rather, we just try to raise awareness and gather funds for specific needs or initiatives. For example, there's an initiative within our initiative called „Przewijamy Polskę [Change a nappy for Poland]”, where we create so-called „comfort rooms”, adapting toilets for the needs of dependent persons. So, we try to fund it on an ongoing basis, looking for funds based on the current situation.

(PL05, F, NGO focused on issues other than refugees or people with disabilities)

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Combining small grants, dedicated to specific activities, with substantial ones, that could also sustain the employment of additional specialists, is also described. In these situations, the significant sums associated with grants from institutions or infrastructures such as UNHCR or the Asylum, Migration and Integration Fund are those that keep the service providers running, while the smaller ones contribute to situational developments or to supplementing the activity:

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// At the beginning of the conflict, we had about three or four, but small amounts. It's one thing to receive a grant or project of 10,000 from UNHCR or 10 million euros, or whatever it was last year. It's another thing to receive a grant of 3–4,000, which is for specific activities we want to do with the community, like going out, going to the zoo, things like that. Yes, but large sums of money, significant amounts, no. Last year, we received grants from Norwegian, no, from the Danish Refugee Council, which was a bit more substantial. But apart from those, we stick to our mainstream partners, AMIF, UNHCR, ACF. So, no, not large sums of money. And this year, we received some from the 3.5% of the income tax, and we also received some for specific things.

(RO15, M, NGO focused on immigrants)

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## EVOLUTION OVER TIME – DECREASING NUMBER OF OPPORTUNITIES

Over time, the interest in the refugee crisis has diminished and, consequently, so have the funds directed towards managing it. If at the beginning of the war in Ukraine there were numerous funding opportunities, even exceeding the capacity of service providers to absorb the available funds, now there are situations in which projects and activities have to be terminated due to the lack of economic resources:

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// Well, unfortunately, just like everywhere else, now there is less and less help for people from Ukraine. And this project just ran out, so they predicted that maybe there will be some additional funding, but at the moment, it looks like we don't have something like that.

(PL01, F, NGO focused on immigrants)

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Apart from the fact that the amount of finance has decreased, the structure of the social environment and the stakeholders have changed. The refugee crisis ceased to be a priority, and private companies, for example, started to direct their attention and donations elsewhere.

At the same time, the humanitarian crisis in Ukraine has determined a decrease in the funds available for other domains. This was felt by service providers outside the field of immigration and refugees, that had to rely on fewer resources or find new avenues to pursue:

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**//** Of course, donors, somehow, their interest has increased a lot in the refugee segment, and it's clear that the funding area has been affected because those funds have decreased, a significant part of the money and interest going towards refugees.

(RO06, F, NGO focused on people with disabilities)

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## FACING TEMPORARINESS

Interviews reveal that there is a strong connection between funding, temporariness, human resources and organizational growth. Ever since the war broke, service providers have had to deal with a complicated situation: responding to the refugee crisis without having the capacity or the (extensive) experience to do so. In the very first moments, before the organization of a formal response and acquiring the necessary funds, problems with staff shortages were often dealt with by overburdening the existing employees and by people getting involved on a voluntary basis:

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**//** Because we only had substantive employees in other projects who had their own tasks to perform, so they didn't come to us to reorganize immediate aid for others. So, that was also a deficiency that we couldn't delegate our employees to those activities, so we got involved ourselves. Well, I think that's all, it seems to me, so skills, practice, those were the initial needs, and also needs related to personnel, and finances probably, because...

(PL15, F, NGO focused on people with disabilities)

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After securing funds, civil society organizations involved in the provision of services for Ukrainian refugees expanded, as they hired more personnel. However, this growth is dependent on those sources of funding and, given their temporary nature, it is a reversible process:

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**//** When the funding ends, it is very likely that other funding will come, but it's not a guarantee. I mean, in principle, we want to continue with the project because it is evident that some of them will stay in the country like other classic refugees. I mean, we have projects for classic refugees as well.

(RO12, F, NGO focused on issues other than refugees or people with disabilities)

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## THE PUBLIC SERVICE PROVIDERS IN BUCHAREST

The structure of the samples of respondents in each of the two research sites influenced the presence of some topics and the absence of others. For example, various interviews were conducted in Bucharest with public service providers at a local level, which allowed us to gain insight into the problems faced by these entities when it comes to funding and carrying out their activity. These entities/institutions operate in a more inflexible environment compared to NGOs, with significant administrative burdens and, as such, their adaptation capacity is limited:

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**//** And because you asked about funding issues, you know very well that it is important if you have a number of beneficiaries from the community or, well, a reference number, only then can you claim to provide a specialized service just for them. But otherwise, practically, that's why they were assimilated to the existing services already because there was not, let's say, an overwhelming number.

(RO07, F, public administration agency)

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Various instances of cooperation between NGOs and state institutions/service providers have been described. From the perspective of the latter, sometimes finding a donor is a matter of begging and using personal connections. Using resources in a sensible manner, trying to make them last for as long as they possibly can is a day-to-day exercise, especially given the fact that the funds directed by private entities to humanitarian aid started to decrease at some point:

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**//** There was bedding, detergents, there were also from individuals, there were donations to [anonymized], cleaning materials, and associations that had collaboration agreements with [anonymized], especially Incubator Social. Terre des Hommes helped us, but also there were individuals we knew who helped us for a while with fruits and bakery products for a short period, because everyone, well, knows their calculations. But these ceased at some point in early June; there were no more funds, and we had to manage. With the little we had, we stretched it as much as possible. Because a minimum level of hygiene has to be provided, or else there's no way. And as an institution there, you become infested, filled with bugs. So, you have to be very careful.

(RO10, F, public administration agency)

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## BARRIERS TO HELP AND INTEGRATION

Within the complicated landscape of a large refugee flow, proving care is a delicate endeavour, that faces barriers from the existing institutional framework, existing facilities, attitudes of refugees, carers, service providers or general population, etc. In the following section, we provide an extensive list of such barriers, as a result of our interviews. We stress all potential obstacles that we noticed, with the observation that when more exceptions are present, the respective issue is mentioned by a larger number of respondents.

Nevertheless, our intention was not to observe which barriers are more frequent and which are marginal. Noticing such facts happened is not part of our core interest. The main outcome of our research is to stress as many as possible of the potential obstacles that hinder integration and/or proper help, in order to trigger warnings about their presence, and then to suggest potential solutions. Without diminishing the salience of the most frequent barriers, it is less important whether they affect tens or thousands, but that they act as bottlenecks and to know whether simple, effective and cost-efficient solutions could be used in order to alleviate their impact.

### Accessibility and other physical barriers

Typical physical barriers include difficulties for those who are locomotory disabled in accessing reception centres and offices of various sorts. Sometimes people with disabilities could eventually enter a building only with the help of others. Most of the time, there is not just one physical barrier that a refugee with disabilities and their corresponding carers should overcome. Various types of daily life facilities need adjustments for RWD, and such adjustments were rather absent in the refugee centres, in particular in the early months of the crisis. This includes missing ramps, improper toilets, beds, tables, access to outlets to charge mobile phones, virtually everything.

Specific conditions when hosted by local families are difficult to meet, in terms of devoted rooms, special beds, etc.:

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// We have this solid base of people willing to host refugees, if there were often reported needs, that there is a need for a separate room for a family with a disabled person, or a special bed, or in general, architectural amenities, it was difficult to find. And it was difficult to find people who are willing to accept such families, so that's why the numbers of accommodated people with disabilities with us were very, much smaller, and then very often we turned to organizations that directly deal with people with disabilities. Sometimes it worked, but in comparison, if you will, with other families, this process was much, much more difficult.

(PL02, F, NGO focused on immigrants).

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The same type of difficulty applies when hosting larger families that include people with disabilities.

However, accommodation could be seen as a mere nuisance, when contrasted with transportation, which sometimes is reported to become a nightmare, since public transportation, in both capital cities, is said to be less friendly to people with a disability.

## **Making ends meet: personal security**

In some cases, providing proper security at refugee centres was/is problematic. We have been told that the centres sometimes became a target for criminal behaviour, such as drug dealing, petty theft, etc. In this respect, NGOs are indicated as having more resources and providing better help.

Antisocial attitudes and behaviours of refugees were reported, but also as part of their interaction with local communities, and as consequence of the impossibility of providing security in the refugee centres:

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// Yes, there is a young adult, an offender, who has friends, some minors from the centre, and teenagers being teenagers, don't listen to what you say. Their mothers are overwhelmed with work, jobs, health problems, with more children, and such. We find it very difficult to control this offender from entering; he is not allowed. We evacuated him; he threatened the translator with a knife last year, he uses drugs, drinks, he comes here, we kick him out, and so on. And the teenagers get upset, I mean, I'm afraid they might actually run away from home. There is a girl, well, if it crosses her mind, who knows what he tells her, and she runs away with him. I mean, we try to handle it so as not to make it worse. It would be simple, very good, he doesn't step in, you don't go out. But she might run away if she feels misunderstood, and we don't want that, and so on. I mean, we don't need her to be vulnerable to trafficking as well.

(RO11, F, public administration agency)

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## Communication and language

Communicating when not knowing the language of the other person could be a nuisance irrespective of whether the refugee is disabled or not. Sometimes, Russian could be used as a communication means, in particular in Poland. However, the same past that means the Russian language is handy also acts as a barrier for using it. This becomes very difficult for organizations that do not have staff who understand Ukrainian or Russian. Despite finding solutions, the existing palliative actually takes time and on the one hand, sometimes a quick intervention is desirable, but on the other hand, there is a general shortage of time when assisting refugees:

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// I don't know, I can't tell you. I don't understand their language... They showed me some... I have no way of knowing. And you need a translator; nobody stays to translate everything... [...] I sometimes have an assistant, a volunteer when I can't manage effectively, and they help me. With the phone, by voice, and they understand a bit, and we know a bit too: what meal means, what tomorrow means, breakfast, I mean, we manage. The language barrier is not a problem because you might not manage at that moment, but in 5, 10 minutes, you find a form of help.

(RO10, F, agency of public administration)

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People with auditory disabilities face specific needs related to their potential to communicate with others. Most derive from the lack of correspondence between sign languages, and from the absence of translators understanding, for instance, both Polish and Ukrainian sign languages.

And the local language proves to be a perpetual asset one needs to master. Getting a certificate of disability or any other document is sometimes hindered by not mastering the language. Access to health services is often hindered by a lack of doctors who speak Ukrainian or Russian. The problem becomes even more complicated in the case of regular therapy, where people need to be there on regular basis, meaning that they need a translator all the time. The same applies to education, while assistance for finding rent and dealing with landlords faces the same communication difficulties.

Even when interpreters are available, sometimes they leave the impression that they filter the content, despite being of great help.

## Attitudes

### REFUGEES: UNCERTAINTY AND MISTRUST

Refugees are reported to feel a certain need for security, for certainty, that is likely to determine many of their everyday choices. Refugees' mistrust of the methods of carers in the host society may also act as obstacle for receiving proper care. The situation is reflected in the difficulties persuading the carers and UWRwD about the legitimacy of the proposed care, due a mixture of mistrust, shame in reporting things such as a disability or psychological trauma and accepting, for instance, therapy.

Part of the above-mentioned reticence to accept treatment is related to cultural differences in defining disability and psychological needs. They are also likely to derive from low confidence in institutions. In fact, fear and lack of confidence in institutions are reported to hinder applying for receiving disability benefit:

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**//** However, for us, the more challenging situations are when we have to convince individuals with disabilities that we can help them and that it may be easier for them to help themselves.

(PL09, F, NGO focused on people with disabilities)

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For UWRwD and their carers, it was quite often reported during the interviews that they avoid declaring their disability in order to avoid stigmatization.

As in any other society, antivaxers are also part of the refugee flow, and sometimes they refuse the normative care that is in place in the receiving country.

Frustration is added to the list when misunderstandings about the existing regulations and the misfit between Ukrainian and Polish/Romanian ones hinder personal wellbeing.

### REFUGEES: IMBALANCE BETWEEN ASPIRATIONS/ PREFERENCES AND THE SUPPORT PROVIDED

Sometimes it is difficult to provide the refugees with services that fit their expectations:

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**//** We also have a rather demanding group of stay point residents, I would say, with very high expectations. For example, regarding meals, we had a situation where a complaint was filed because the salad was too peppery or salty; I don't remember exactly. It was not reported directly to the point manager but elevated quite high in the city administration structure. So, residents, especially those currently present in our stay points, are a more selectively demanding group of individuals who have high expectations but are also passive, so it's a kind of challenge.

(PL13, F, public administration agency)

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Shame is said to be common among some refugees and refusing to perform daily life chores in understaffed refugee centres appeared sometimes in the discussion, often also associated with inter-ethnic relations:

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// I mean, they live with a shame; they have a shame. They are still hesitant; they are still depressed. And they have a shame, a disgrace. Now, a gentleman, [name of the person], just passed by, who is of Roma ethnicity, and since I returned from vacation on Sunday, it's been a week, the man is very ashamed. It's a shame for him to take his rights, the morning supplies, which are in the bag on the table at the reception, for us to see that they come, who doesn't come, what remains to give to the elderly or to those who said, „I don't eat, but I want to give my part to Alina.” And he is very ashamed; he is ashamed to ask for a pill, he is ashamed to...

(RO09, F, public administration agency)

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Apathy and a lack of involvement are reported as outcomes. And they have further consequences, as refugees in this condition are unwilling to engage in the process of integration (Group interview, Poland)

## INTER-ETHNIC ATTITUDES AND MISTREATMENT OF ETHNIC ROMA

Ukrainian refugees were reported to develop an anti-gypsy attitude that has to be considered when providing help to those in need. Antigypsyism was also reported among service providers, in particular among volunteers.

### Anti-immigrant attitudes

Anti-refugee feelings started to occur at the time of data collection. They were explained by one social worker in a public agency as being similar to any anti-immigrant sentiment:

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// ... different things happened. For example, the 50-20 accommodation option, everything that was said in the media and written on social networks, [disgusted] Romania a lot. Because, well, like us, Romanians, when they went abroad to work, if they made two or three mistakes, they were labelled. The same happened with them, with the 50-20 accommodation. Some didn't take care of the apartments where they were accommodated, others I don't know what they did, and a label was put on Ukrainian refugees. Maybe you know, maybe you heard, [...]

(RO09, F, public administration agency)

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As in other setups, anti-immigrant sentiment is sometimes justified by an argument on redistribution. Those against receiving or helping refugees are reported to claim that money and help could be better used if directed towards local people instead of Ukrainians:

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// That suddenly we have to help someone else besides all of this. Of course, on the one hand, we already have certain paths worked out, but that doesn't change the fact that this is another problem, that this is another situation where, additionally, there's the hate, which is terrifying, but which we have been fighting for X years.

Hate towards refugees?

And towards Ukrainians, and then towards those people who help. Because why do we help, and why don't we help others, I don't know, people with disabilities or others, or Poles?

(PL05, F, NGO focused on issues other than refugees or people with disabilities)

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## Policy and legal barriers

Legislation, type of policy, inconsistency in applying the existing regulations, and the whole institutional setup is the second largest group of challenges after the ones due to language and communication. It appears in both capital cities, but it is prevalent, in particular from the point of view of practice, in the case of Bucharest.

Barriers of this sort come from the regulations themselves. However, the problem is often not in the regulations referring to refugees but resides in the mis-design and cluttered application of the regulations referring to the entire population, including Polish or Romanian citizens, respectively. More present in the Romanian case, confusion results from a legislative construction that is depicted by the interviewees as lacking internal institutional coherence and being marked by quarrels between various ministries and agencies. Bureaucracy, untrained human resources, and some programmes designed to provide too much help are pointed out as additional factors that hinder providing proper help to refugees. Practices delaying intervention are observed, bearing the implicit message to immigrants that the society is not fully welcoming them, despite the huge effort to give some comfort. People with disabilities are even more exposed to such unreceptive incidents.

## CONFUSING LAWS AND REGULATIONS

Legislation is sometimes reported to be a sort of language barrier:

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**//** Most often, because they need this comprehensive and more advanced actual assistance, as we know, the documentation processes are very challenging, often even for Poles, not to mention individuals who also have language barriers.

(PL02, F, NGO focused on immigrants)

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Sometimes, well-intended legislation lacks proper provisions, or refers to specifications in other laws, that in case of people with disabilities leads to the limitation of rights or makes it impossible to access benefits. In many instances, Polish or Romanian citizens are reported to be facing the same issues. In other instances, the practice and the conflicting regulations make the law's provision futile. In some cases, legislation is accused of being decoupled from the real situation of those requesting protection.

A timely response is also indicated to be lacking:

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// Yes, and that was probably because later on, regarding these issues, I can talk about many things, probably a difficulty was also that cooperation with public administration was useless, oh well, colloquially speaking, it simply meant that reactions were delayed. We had to motivate and engage entities enough by stating what the needs were, where they actually had and have resources, not us.

(PL15, F, NGO focused on people with disabilities)

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In many cases, the above-mentioned legislative failures combine with long waiting times and the situation looks like a „dump road” (RO19, F, public administration agency).

Quarrelling between different public administration agencies is also invoked as a cause for confusion and incoherently applying the law, being reported more often by Romanian interviewees. One Romanian interviewee goes further and indicates political ambitions and quarrelling as the reason for inadequate and timely interventions. The same outcome results from too much fragmentation of decision making.

In some instances, the law is not applied consistently. After various hesitations, the Romanian government, through the Ministry of Work and Social Protection, informed that receiving social welfare benefits in Romania is not conditional on receiving the same benefits in Ukraine. While the double benefit is difficult to be logically understood, it is probably a pragmatic choice to avoid unbearable administrative costs related to an eventual mean-tested evaluation. At the time of data collection, we discovered that a decision that was at least 3 months old did not reach all potential targets even in public administration, despite the existence of some attempts to communicate within the larger community of service providers that help Ukrainian refugees. Narratives from the Polish interviews show the same decoupling between the laws and how the laws are applied.

Considering everything, the Romanian legislative system is defined by many interviewees as being confusing. In the end, after going through a lot of effort to receive help, some of the refugees develop fear and a lack of confidence in the institutions in the host country:

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// Well, not everyone has a severe degree; some have a mild or moderate degree according to Romanian law. So, they receive a few bucks there, you know? It seems very complicated to them, although we do the complex work for them, but they get scared along the way.

(RO11, F, public administration agency)

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## POTENTIAL DISCRIMINATION BY LAW AND POSTPONED ACCESS TO SOCIAL SERVICES

The condition for receive help only if working (or in specific exceptional cases) is questioned as being discriminatory. In both capital cities, there are interviewees reporting that people with disabilities face similar problems:

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// Regarding systemic barriers, it's a bit higher, concerning decision making, and it's not something that can be changed immediately. But overall, I feel that there's a lack of options for disabled individuals in Warsaw or generally in Poland. There are a few non-governmental organizations, but systemically, there hasn't been much in terms of support for these individuals.

(PL13, F, public administration agency)

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In some cases, there is a certain mismatch between the available information and the beneficiaries that such information should reach. This mismatch leads to confusion and hinders access to service provision.

In other cases, the impossibility of making ends meet with disability benefits when caring for those in need, leads to them no longer declaring the impairment. This situation illustrates the lack of information with respect to the rights to access further welfare benefits:

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**//** The most difficult situations really occur when parents or guardians cannot work due to care, because then the financial situation is usually very difficult. But sometimes there are also disabilities, really, in children with mild degrees, and here it is very individual and very different. But also, disabilities come into play, well, in terms of mental illnesses. There are really various situations here. But often it is the case that if people know that, whether it's an older person or a younger one, or a child will have only a mild degree of disability, very often they will even give up confirming it here.

(PL02, F, NGO focused on immigrants)

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The failure to prove a disability leads to delaying access to service provision, as also documented in various parts of this report. The situation is common for people from other refugee flows as well. In some cases, delays in implementing legal provisions harm the recipients, and may add to their pain.

Bureaucratic behaviours and overloading the personnel involved also lead to time-consuming procedures:

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**//** Depending on how much time the commission has, these documents have a response time of 30 days. Or it tells you if you need more documents or not. They come to talk to the person in question, and it must be at the same time with the translator. The translator doesn't have the same working hours as social assistance. We have to find them a common schedule, and the person with disabilities must be there at the same time. The evaluation discussion takes place, after which the certificate is issued in another 30 days.

(RO11, F, public administration agency)

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In many instances, the service providers faced attempts to abuse the law and, for instance, receive the same service twice. To prevent such behaviours, the regulations included various checks. However, such verifications hinder quick access to services by those that actually qualify for the corresponding help and leads to further reasons for postponing actual help.

In some cases, the law states the obligation to provide certain benefits, but lack of budgeting makes it impossible to access them. Sometimes the ultimate problem is not in the public sector, but in the private sector. In one example, taken from Bucharest, it is the banking sector that failed to prepare itself for the incoming flow of refugees, and even six months after the beginning was reported by our interviewees to still be lagging behind with clear and uniform conduct. In fact, dealing with money proves to be quite complicated.

Apart from such barriers, establishing who is the legal representative in the case of unaccompanied minors is always a very difficult process, even when close relatives are the carers.

Nevertheless, such difficulties naturally occur from the mere need to protect the interest of the minor, and to avoid exploitation, trafficking, etc. However, clear protection procedures in such cases seem to be absent in both societies.

## TOO MUCH HELP

Somehow paradoxically, some groups of refugees, in time, become over-served and start to refuse help. Typically, this is a side effect of an under-documented policy intervention that over-prioritizes certain target groups or types of support:

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**//** At first, people were super stressed, and it was like, okay, there's someone there, pretending to be happy, happy, joy, take the child, I see him, as it was in a sports hall, the other centre. I see the child, it's okay. At first, there was no resistance, I didn't see it. Now I think there are enough services for refugees from various organizations, and I have encountered this reaction from parents, where they say: What more do you want from me? You're giving me again, you're calling me again? Yes... There are services in the centre. There are all kinds of workshops and therapy options for parents, and I understand that they don't often show up, or they show up and don't talk, they show up and don't want to participate. Because at some point, I understand them, there's also this annoyance... Okay, sometimes we don't understand that there are funds to provide services, but the person also needs to be asked if they need those specific services. I mean, you don't force them on them...

(RO17, F, NGO focused on issues other than refugees or people with disabilities)

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## SPECULATIVE BEHAVIOURS

The regulations to provide housing support for war refugees that rent on the private market faced the speculative behaviour of the landlords, who simply increased the rental prices for lower-quality units to the maximum amount allowed by law. This situation is mentioned in both Warsaw and Bucharest. In its mere manifestations, such gestures are also demeaning for Ukrainian refugees. It may act as a sign of being not welcome, since it symbolically transmits that a person/family cannot live out of work, given that their salary barely covers the cost of housing.

## RECOGNITION OF DISABILITY CERTIFICATES

Getting the Ukrainian certificate recognized in Poland or Romania probably remains the main legislative challenge for UWRwD both in Bucharest and Warsaw. The issue is extensively approached in a dedicated chapter of this report.

## Human resources

The lack of human resources noticed in Bucharest, where help is provided by a variety of workers, few being qualified for such work, is said to be defining for the institutional system. Anecdotal examples indicate people with no expertise in caring for others being involved as leaders or executives in the receiving of refugees and helping people with disabilities. The situation seems to be prevalent in Romania, both in NGOs and public administration units, and to a lesser extent in Poland.

Part of the above-mentioned difficulties is tied up with there being little experience in dealing with refugees and a societal choice to give less importance to professionalization. In the Romanian public sector, many of those that were tasked with providing support to refugees had no experience or willingness to work in the area, and they perceived the task as an extra burden.

Sometimes service providers indicate that public administration is reluctant to provide help or to simply apply the law:

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// So, the big difficulty was that we didn't really have allies among public administration who would try to do something here with equal commitment. Of course, it looked different, you know that it also changed over time, but it seems to me that this lesson is still not completely learned, I mean, I don't want to go too far into the future, but I also wonder, yes, if there were a repeat, what would it look like? Whether there would really be some lessons learned.

(PL15, F, NGO focused on people with disabilities)

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For some interviewees, in particular in Bucharest, the legislative barriers are not due to the quality of the regulations but depend on their actual knowledge and skills:

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// You mean they're not capable, is that what you're saying?

No, it's not that. And because there's this tendency to interpret the law and create additional rules. The additional requirements that are outside the law are, I don't know, maybe they're afraid of the Court of Accounts, I don't know, I can't tell. That's brought up as an argument every time, that the Court of Accounts won't allow it. But I think it's simply because the administration is weak.

(RO02, F, NGO focused on issues other than refugees or people with disabilities)

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## Financial and economic barriers

Money, spaces, personnel, equipment are all depending on available funding. Most interviewees depict budgeting as a continuous struggle. With the service providers increasing their scope and size, they still fight to get proper assistance to refugees, even as the initial enthusiasm decreases, and getting help from volunteers and donors reduces.

## FUNDING THE ACTIVITY AS A WHOLE

NGOs report a need for financing in order to provider proper service to their beneficiaries:

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**//** Without funding, you can't provide the activities... Yes, yes, I think that's the problem for all associations. If you don't have a reserve budget or other funders to help you, it's a shame for the expertise, the services developed, everything each association has done. You close the door, and there's no way to cover it. There are huge expenses for [...], experts, and these products. So, the monthly basic needs, all the costly activities, are very high...

(RO02, F, NGO focused on issues other than refugees or people with disabilities).

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**//** I mean, we also had a moment of glory when there were still organizations that financially helped us, but they themselves lost the support of such large, larger international structures. We received money, for example, from [anonymized], which is a fairly large international organization, but unfortunately, unfortunately, it ended.

(PL04, M, NGO focused on immigrants)

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Sometimes, unexpected small issues could not be financed, including for instance bathrobes and underwear. In other cases, organizations decided to refuse to help refugees despite being willing to, due to lacking capacity and funds.

## THE CAPACITY TO PROVIDE SERVICES

Both the NGOs and the public sector often lack capacity to help more refugees in general and UWRwD specifically, particularly when considering spaces and human resources. The dependence on funding limits the type of equipment they can provide for beneficiaries with disabilities.

Some jobs are funded through limited schemes. When the project ends, sometimes there is no other provision to support the beneficiaries. In some instances, the formerly-paid workers become volunteers and continue to provide the service.

Recruiting new personnel or retaining existing ones is also a question of available money.

The complexity of helping people with disabilities is said to further complicate matters when helping UWRwD, which is also reflected in postponing or refusing to help refugees due to lacking human resources or adequate spaces.

## INADEQUATE FINANCIAL HELP FOR REFUGEES

There are claims that the daily allowances for refugees are too low for living in Warsaw or Bucharest. However, one may ask whether it would not be more feasible to relocate the refugees to smaller localities.

The comparison to the relatively more abundant resources at the beginning of the war, when the emotional reactions brought more help, reveals that at that time more needs were addressed and financial support made intervention easier for both refugees and their helpers.

## Cultural differences

Despite the cultural differences in the cases of Ukraine-Poland and Ukraine-Romania being small, it still sometimes creates difficulties in understanding the institutional environment in the host society and how to deal with it, knowing your rights and duties:

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**//** And they need informational support, they need someone to help them integrate into Poland, and that's why it may be that a person will be surprised and simply surprised because, due to the fact that the assessment systems and generally the systems in Poland look different, government ones, various, and applications to various public institutions, for example, Ukrainian families most often need support even in understanding what MOPS is responsible for, what services ZUS provides, meaning they start from scratch. ... From the basics of understanding the Polish system of institutions, how they operate, and with what problem to which institution one can turn.

(PL03, F, NGO focused on issues other than refugees or people with disabilities)

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The cultural differences are also reflected in the specific case of understanding the rights a person with disabilities has in Romania or Poland, while caring methods may also sometimes be different and considered with reluctance, as we already indicated in a previous section of this report.

Even age or marital status may sometimes be subject to relativity. Relativity is triggered by Ukrainians being reported becoming mothers and wives at younger ages. The cultural issue is replaced by a legal one in Romania, where a minor can only cross borders accompanied by either both parents or having a declaration from the parent(s) that is(are) not accompanying them. However, there are teenaged Ukrainians who come into refuge by themselves or, in any case, without parents:

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// There was a 17-year-old girl who entered Romania alone, only with her life partner, who was Senegalese and, well, worked in Ukraine during the war. But they were already life partners, practically, in Ukraine. Since she was 17 and considered an adult. Well, the young woman, anyway, a very emotionally mature young woman, with a lot of responsibility. Indeed, she did not want to end up in foster care because she did not appreciate that it was necessary, did not appreciate that she needed it. They had some financial possibilities to manage in the community, and besides, the partner's family in Senegal helped her, sponsored her, and even his mother came to Romania.

(RO07, F, public administration agency)

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## School attendance

Increasing the percentage of Ukrainian refugee children who attend schools becomes one of the biggest challenges for service providers. When children with disabilities are considered, it is even more difficult, due to both the language barriers and to the disability status. Often, in case of disabled youngsters, avoiding the education system is also a common behaviour among local people, which becomes a practice that produces barriers that deflect the integration of UWRwD.

School enrolment is also hindered by the hopes of many Ukrainian refugees that the war will end soon. When hoping to return soon, many refugees are reluctant to let their children join local education systems and tend to avoid enrolling them with local general practitioners or applying for various social welfare benefits.

With respect to the school enrolment of refugee children with disabilities, communication about the advantages could be enhanced. For instance, the Polish system is reported to be friendlier towards pupils with disabilities:

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**//** Well, it's better organized because, for example, in Ukraine, there is no such thing that a child can go to school and can go to school until the age of 25. And with a disability, that's a big, just a big plus. [Parents] are extremely happy about it. They are deeply moved by the fact that the child can be busy up to a certain age, go to school. And it's not like in Ukraine, just staying at home.

(PL08, F, NGO focused on people with disabilities)

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The Romanian system allows refugees to attend school, as observers, without any obligation to be assessed. This sort of exposure to the educational system does not end with a qualification of any type, but may encourage the future enrolment of refugees with disabilities:

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**//** A 15-year-old boy who has been attending for a year and learned Romanian being an attendee, doesn't know how to read... doesn't know the Latin alphabet, but speaks in Romanian. It's an adaptation that their age allows.

(RO16, M, NGO focused on issues other than refugees or people with disabilities)

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## Health and mental care

Healthcare provision is always a crucial aspect for people with disabilities. However, UWRwD and their helpers have to face multiple barriers in order to access proper healthcare.

First, the service providers face the challenge of properly identifying the healthcare needs:

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**//** Yes, the lack of access to information and the lack of access to the services they need. The identification of the health problem, let's say. Yes, they have health problems, we know they have health problems. They've come with health problems. I don't know, I don't know how many of them were identified.

(RO05, M, NGO focused on issues other than refugees or people with disabilities).

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Second, it is about quickly providing care, before doing all paperwork, to those that arrived ill. Refugees with disabilities often require quick action to ensure access to proper medication.

Third, costs add to the issue. In Bucharest and Warsaw, doctors and therapists are reported to be quite busy, and this goes beyond being expensive and the typical language barrier.

Fourth, it is also a problem of missing proper treatment in Warsaw or Bucharest:

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**//** I know that many of them used to go abroad to seek help, especially those with significant disabilities requiring the care of third parties. In our intervention assistance system, there wasn't really space to support these individuals, so that was a barrier.

(PL13, F, public administration agency)

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Fifth, there is a systemic problem and local people are said to often face similar difficulties:

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**//** So, the deadlines, however, I don't think they will change because they are not related to laws, not related to procedures; they are related to difficulties accessing specific medical services for Romanian citizens as well.

(RO20, F, NGO focused on immigrants)

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Sixth, the attitudes of service providers sometimes show the need for more time for each case, better understanding of the needs, and for more empathy towards those in need. The need to professionalize the service providers is mentioned by several interviewees.

Seventh, there are specific needs brought by the intersectionalities between being a refugee, being disabled, and being in a country with a different culture and institutional set up. For instance, providing post-traumatic support is required for many, and in particular for people with disabilities, but few service providers could deliver such support.

Eighth, there is a need for specialization: The specific needs of people with disabilities put service providers with no experience of working with people with disabilities under stress.

## Finding a job

As in the case of all people with disabilities, UWRwD also face a tough time getting employment. However, let us note that the difficulties finding a job most of the time were mentioned mainly in relation to mastering the language, accessing better paid jobs, or caring obligations in case of those caring for children, the elderly or disabled. Additional challenges came from differences in retirement ages (it happens a few years earlier in Ukraine, therefore one may become pensioner, then flee from war and be a refugee in Romania, where the pension age is 65 and the refugee is back on the labour market).

## Organizing help

In many cases, the organizations that provide help first needed to learn how to provide that help. While the increase in knowledge is addressed in another chapter, it may also be useful to note that dealing with local volunteers was difficult in the initial stages:

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**//** At first, there were a lot of volunteers. I really realized that there's a problem in Romania with volunteering because people don't have a volunteering culture, and they don't even have the basic idea, you know, of what it entails, that you need organization, a schedule. They didn't accept it. They felt that if I am giving my time for free, which is very valuable, but when I volunteer, I do what I want, not what you tell me. I mean, if I made a list of things to do, no, they wouldn't accept it. I mean, everyone wanted to play with the children, for example. No one wanted to fix the shower or something like that.

(RO11, F, public administration agency)

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## SOLUTIONS

It is not easy to overcome all the potential barriers, but there is a good repertoire of solutions that resulted from the interviewees. We list them in the following section,

adding at the end of some sections our own additional reflections that summarize the findings on how systems could be improved and expanded, and who are the ones to benefit from such developments.

Nevertheless, the main improvement from a system that did not start to receive refugees, and also for the Polish and Romanian ones, is to improve the quality of the services directed to their own citizens who are in a vulnerable situation. This creates the premises of better services for refugees as well, and refers to all involved factors: institutions, professional skills, experience and expertise, efficiency, physical resources, benevolent attitudes, etc.

## Physical barriers

Nevertheless, some barriers are physical, and overcoming them depends merely on the design of the office buildings. Others are only partial, allowing limited access:

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**//** Yes, the ground floor is [accessible to people with disabilities], but only the ground floor. Unfortunately, the first floor is not. Because the advantage is, it has two entrances, and one of the entrances allows access for people with locomotory disabilities. [...] Yes, yes, yes, yes, plus a good part during the spring-summer-autumn, a good part, a part of the activities take place in the yard because we have our own yard, which is a huge advantage.

(RO16, M, NGO focused on issues other than refugees or people with disabilities)

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The mobilization of donors also helps, in particular for providing transportation to those in need.

It was easy to observe that the initial enthusiasm in the first days of the war brought potential access to resources provided by various individual and corporate donors. Physical barriers, being the most tangible and easy to understand bottlenecks, can be alleviated through the efforts of such donors, coordinated by service providers.

## Language and communication

A series of solutions for smoother communication is widely used in both Warsaw and Bucharest:

- Hiring staff who speak Ukrainian or Russian was another solution that many organizations followed. They were recruited from Ukrainian immigrants in the case of Poland, or from Moldavians in the case of Romania.
- Searching for volunteers among university students provides another solution.
- Google Translate is reported to be, in many cases, a kind of necessary friend.
- Nevertheless, an interpreter should be added as part of a complex toolbox.
- Service providers support time and personal costs in order to assist refugees who are in reception centres and need to access medical care.
- Sometimes, complex solutions are put in place that combine all of the above.
- Specialization and training in sign language is also useful as part of a human resources strategy.
- Having a hotline in the Ukrainian language is reported as a successful endeavour.
- Financial provision through legislation was suggested as solution by one of the interviewees.
- In time, the language barrier fades away. With the flow increasing in size and refugees staying for a longer period in the host society, they start speaking the language and providing support to newcomers.
- Finally, note that forcing refugees to learn the local language might be not a good idea, despite some of the interviewees claiming there is a need for more courses in this respect.

Two ideas arose with respect to communication, beyond language:

- Ukrainian refugees tend to use Telegram as a communication medium, so many service providers also used it, along with other Ukrainian-based media and social media.
- Clear communication about the services provided avoids confusion and smooths the implementation of programmes.

Referring to the knowledge possessed by immigrants who already live in the host country seems to be a good idea. We encountered Ukrainians, Estonians, Moldovans, and Indians, to give just a few examples. Beyond mastering a language that refugees can also use for daily communication, they also have the advantage of being in the host societies at the same time as the refugees, and being part of it, many having been settled for a long while in Warsaw or Bucharest, and some being married to local people. Their position creates bonds with the refugees and eases communication.

## Counselling

Counselling and emotional support are reported to work properly, as one could easily anticipate.

Explaining the principles of caring for people with disabilities is needed in many instances and stands out as the second main solution for communication needs.

The need to address the emotional needs of the refugees is a reminder of the necessity to have professional workers in all units that deliver services to those fleeing from war atrocities. Psychologists and social workers are the most qualified in this respect. The allocation of volunteers should also consider their background and empathetic potential.

## Healthcare and mental care

It is quite clear that, beyond the access to treatment itself, knowing how to deal with bureaucratic requirements is key in easing such access. Therefore, service providers stressed the need to learn the rules as a pre-emptive part of their intervention.

Sometimes, recognizing the inability to deal with a special case is more helpful than trying to provide lower-quality substitutes.

Again, finding specialists with a Ukrainian or post-Soviet background is a potential solution.

As already documented when depicting the barriers, healthcare difficulties can be overcome by using voluntary work by doctors and therapists, or by the involvement of private clinics and hospitals in helping refugees.

The professionalization of service providers becomes a salient need in this respect. Trained social workers should be the best for such jobs.

## Patience and time

Time can sometimes be a healer if the service provision is done correctly. As indicated in the „barriers” chapter, sometimes carers and people with disabilities are reluctant to define their condition as such and to accept help. However, after being exposed to receiving help, they change.

The same applies to understanding and adjusting legislation.

## Legislation and funding public agencies

A two-pillar legislative toolkit results from the interviews as part of the solution:

- Temporary exceptions were reported to act as patches to fill legislative gaps in the case of Romania. These actually apply to all refugees and sometimes to Romanian citizens as well as Ukrainians, stressing the fact that legislation is lacking provision in general, not only with respect to Ukrainians.
- Facing under-financing and low legislative provision in this respect, some public agencies also patch their facilities in unorthodox ways.

The Polish and – to a lesser extent – Romanian welfare provision for people with disabilities is reported to be superior to that in Ukraine. Interviewees also referred to Western European societies being better off in this respect. A learning process would be useful, including training for service providers by people with proven positive experience in helping refugees. Such a process faster growth of the capacity and skills for helping refugees in general, and those with disabilities in particular. The resulting human resources could be used for transferring the knowledge and intervention to postwar Ukraine, or to other war/postwar zones.

## Long-term vision

In both countries, the institutional system is adjusted every few months to provide an adequate response to the dynamics of the refugee flow. While constant adjustments are natural, since no one can accurately predict the evolution of the war, a long-term vision is needed as a general stance towards the faith of those seeking protection. As one of the interviewees puts it, the current situation is simply increasing anxiety and uncertainty among the refugees:

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**//** What do you do after nine months, let's say, in which you haven't registered, haven't found a job, what happens to them? Do they have to leave Romania, come, end up in whose care? Because we are approaching the expiration, let's say, of the number of months they foresaw. Yes, no, I took what I had, health, disabilities, I had education and access to... Many of them, because we don't have developed social services, have been taken over by NGOs, but even there the funding has been, maybe still is, but in terms of immediate perspectives, I know it's shrinking, I mean NGOs no longer receive funding, sensitivity is not as great, interest has shifted to other areas of the world where concentration is needed, humanitarian aid.

(RO20, F, NGO focused on immigrants)

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## Expertise and flexibility

The more one deals with cases of refugees, the more one understands how to deal with the welfare support system, and can quicken the process.

Such expertise is typically said to be acquired by other immigrants who could then be involved in helping refugees.

Quick reactions are often reported to benefit from NGO flexibility, both in terms of intervention and budgeting, in contrasted to public agencies.

Those without disabilities also find it difficult to gain employment, and dedicated assistance proved to be necessary, and may act as a long-term solution for integration, that can be also applied to people with disabilities

Aside from bureaucratic expertise, an additional need for expertise is related to the professionalization of the helpers, in terms of competencies in social work and counselling.

## Education

In Warsaw, to increase school attendance, a Ukrainian school was created.

In Bucharest, NGOs provided non-school educational services to children. Similar practices are to be found in Warsaw, and the interviewees suggested that creating bonds with the beneficiaries helps in promoting such actions.

## Post-integration help

Available service provision in the host society might be a problem in the long run and assistance in finding proper care is sometimes required.

The same applies to various other services, showing the need for long-term assistance.

# DISCUSSIONS

In spring 2022, both Poland and Romania started to receive Ukrainian war refugees. The refugee flow consisted mainly of women with children and the elderly, and it was different from an economic migration flow that consists mainly of men. Apart from the group mentioned, there were people with disabilities who turned out to be a completely new type of migrant.

The presence of people with disabilities among the refugee flows seemed surprisingly large and diverse to aid actors. This diversity concerned not only the types of disability but also other socio-economic, age and health parameters.

Neither Poland nor Romania was prepared to receive such a high number of refugees from Ukraine. However, the response from civil society was immediate, and NGOs and private citizens did not wait for the countries' governments to take action. Most of the help was given when refugees crossed the borders of the countries, with engagement in the evacuation among our interviewees being marginal. They were mainly focused on the reception and integration stages.

As actors helping UWR elaborated ways of helping in a very short time, the first weeks of providing help were based on the learning-by-doing mode and were very intense. The organizations' employees made every effort to help all those in need. This resulted in the professional and emotional burnout of these service providers. Despite the difficulties, it was easy to observe that the initial enthusiasm in the first weeks of the war brought the potential to access resources provided by various individual and corporate donors.

Actors, mainly NGOs, developed many solutions to help RWD in as effective and efficient a way as possible. Evidence proves that one of the most important aspects of helping was communication and cooperation between stakeholders. This constituted the basis for the effective and adequate provision of services to beneficiaries. In dealing with this fairly new type of reality (the war in Ukraine), service

providers relied on their networks, both personal and professional, and, based on their knowledge of the field, referred clients/beneficiaries to relevant providers. This only adds new evidence to the importance of communication and of having easy, unrestricted access to information in order to properly address new situations that might arise, with new vulnerabilities and categories of beneficiaries. Apart from co-national actors working together to provide services, transnational cooperation was also important, especially for organizing the evacuation from conflict zones.

Another aspect of helping was actions directed at refugees themselves, and many of these were focused on communication. They included establishing helplines operated by bilingual or multilingual people and video lines for deaf people, identifying places in the city that were visited by refugees on a regular basis and making them into a kind of information hub, identifying social media used by refugees, and posting information there.

An important aspect of creating a refugee-friendly environment was making use of immigrants in host societies. Their position creates bonds with the refugees and eased communication. They served as role models and living proof that it is possible to be successful in a new country. They also mediated cultural differences to newcomers.

The second critical aspect is the availability and adaptation of reception and long-term stay places to the mobility limitations of people with disabilities.

Finally, the supporting institutions and organizations need better-structured solutions and procedures rooted in migration and integration policies so that they can run long-term activities for RWD.

Nevertheless, the main improvement for a social system, regardless of its experience with refugees, is to improve the quality of service directed to their own vulnerable citizens. This creates the premises of better services for refugees as well, and refers to all the factors involved: institutions, professional skills, experience and expertise, efficiency, physical resources, benevolent attitudes, etc.

The core of the help was focused on supporting UWRwD get various forms of health-related and material support. Refugees were also helped to find accommodation and organize transportation. At some point, integration activities were introduced such as language courses and vocational training. Even though civil society puts a lot of effort into helping RWD, the situation is not perfect.

Protection policies for UWRwD in Romania and Poland aimed to provide support, but the reality was often far from the ideal. In Romania, there were accessible social services and facilities similar to those for Romanian citizens, but the procedures for

obtaining a disability certificate were complicated. In Poland, although RwD had access to various forms of support, including transport and medical assistance, they often faced difficulties in obtaining recognition of their disability status. Both countries were attempting to adapt their laws to the needs of people with disabilities, but the effectiveness of these efforts remains limited by bureaucracy and procedural differences.

Another issue was providing financial resources for helping. Just after the war broke out, people and companies donated money to organizations supporting refugees, but, with time, this has changed. Obtaining the necessary funds in order to continue their activity became more and more problematic for service providers, as the societal attention shifted from what was, at the beginning, a major, unprecedented event: the war in Ukraine and the resulting displaced population. The number of funding opportunities decreased, as well as the number of volunteers and the resources received from private donors. As such, the organizational growth that took place in the first period after the start of the war became hard to sustain. A common strategy was to combine funds or sponsorship from multiple sources and, even though a time- and resource-consuming activity, to try to invest in raising awareness.

Many of the needs of RwD have not been met. The main reason for unmet needs in the area of support for RwD is the lack of procedures and long-term financing of activities, primarily support in the area of the health of people with disabilities. A special area is that of psychological support, where there is a lack of specialists who speak the refugees' own language. Another problem is the lack of diagnostic tools that would be appropriate for diagnosing people from a different cultural area. Finally, psychiatric therapy never ends with one visit, a series of meetings is usually needed, which is why financial support is necessary in this area, because refugees mainly use the services of private doctors.

The story of helping UWRwD is also the story of the changes that NGOs experienced. One of the most important aspects that became visible in the research was the importance of having a contingency plan and being able to react sooner to such humanitarian crises. Organizational learning and going through this experience is seen as a contribution to having such a plan for the future. Growth, in terms of significant changes in a very short time, led to changes in the internal structures of organizations and to challenges in maintaining communication and organizing/managing activities. Finding adequate professionals was often difficult. Language skills proved to be crucial for front-line workers, and, subsequently, their absence became one of the most important barriers to the provision of services.

The results show that Poland and Romania were not prepared to receive RwD, even though civil societies put a lot of effort into helping those in need.

The proposed solutions are provisional and if the accumulated knowledge is not institutionalized, it will be quickly forgotten. If Poland and Romania have to accept another wave of RwD as some point in the future, the learning-by-doing paradigm of action will be launched once again, and service providers will again bear the burden of high organizational and emotional costs.

Our research also shows how small the role of the state and its institutions was in supporting the organization of assistance for RwD. The state must strengthen its commitment to helping RwD, primarily by creating policy in this area and ensuring stable financing.

We are aware that the results presented in this report do not represent the entire spectrum of experiences related to helping RwD. The study was limited to Warsaw and Bucharest and does not take into account assistance in other large cities in Poland and Romania, smaller towns and finally in the border areas. It should also be remembered that these results show aid directed to a specific group of refugees who automatically received temporary protection without having to apply for it. Other groups of refugees are treated in a completely different way.

# RECOMMENDATIONS FOR INTERVENTIONS/ ACTIONS/ PROGRAMMES/ POLICIES

## **1. Building a knowledge base and systematically collecting data**

Poland and Romania experienced accepting RWD on such a big scale for the first time in modern history. As the experience is fresh, there is a lack of systematized knowledge and data on RWD in Romania, Poland, and the whole region of Central and Eastern Europe. It is necessary to collect and organize the knowledge that was created while helping RWD in 2022–2024. From a long-term perspective, it is also necessary to regularly collect both quantitative data, which shows the scale of the phenomenon, and qualitative data, which will allow describing and understanding the experiences of not only refugees but also those supporting them. It is essential to combine perspectives from migration studies and disability studies in order to capture the complexity of the phenomena without replicating stereotypes regarding both refugees and people with disabilities as distinct groups. The knowledge base will be useful in creating policies for supporting RWD and creating grant programmes.

## **2. Creating a functional communication infrastructure for service providers**

Our research shows that systematic communication between stakeholders dealing with refugees and stakeholders in the field of disability was lacking. This had

detrimental effects on the capacity of service providers to extend/offer adequate help to those in need. Fostering communication between actors will only increase the chances of proper responses in a new, extreme situation, and will have a positive general impact on social solidarity.

### **3. Creation of policy for supporting RwD**

Romania and Poland do not have policies supporting RwD. Due to EU temporary protection, UWRwD are supported in the same way as countries' nationals with disabilities only if they meet formal conditions. This solution is not satisfactory as RwD need additional forms of support. Many of them have had traumatic experiences, do not speak the language of the receiving country, come from cultures that have a different approach to disability and to supporting people with disabilities, and much more. Therefore, RwD have a much broader scope of needs than citizens with disabilities in a hosting country. As they need additional support, policies should be created so that the actors who help them can create long-term schemes of support and get stable financial support to be able to do so.

### **4. Creation of evacuation procedures and standards of humanitarian assistance for people with disabilities**

For the first time, Poland and Romania experienced the inflow of a large number of RwD in a very short time. It cannot be assumed that this will not happen again. Romania and Poland, as states and societies, must be ready to accept RwD. Evacuation and reception procedures are necessary as actors who help refugees know what to do and how to proceed even if they do not have much experience in the field, so they can help more effectively and efficiently. What is more, when evacuation and reception are carried out by the procedures, it affects the condition of the refugees who are subject to evacuation. Evacuation and reception procedures should take into account the fact that the model of care for people with disabilities is different in various countries. Different procedures for evacuation and reception are needed depending on whether this is for individuals or institution. Another issue that must be taken into consideration is the diversity of disabilities as well as impact of other intersecting identity characteristics (such as gender, age, ethnicity etc). People with disabilities are not a homogeneous group, so the procedures must be adjusted to each type of disability and other characteristics.

### **5. Creation of evacuation procedures and standards of humanitarian aid for chronically ill people**

Refugees often do not have the time or opportunity to take enough medication with them. Upon arrival in the receiving country, they should be able to obtain prompt access to the necessary medical supplies. Due to long waiting times for a doctor's visit, such people may be left without medication, which may worsen their health or even threaten their lives.

**6. Creating an information policy tailored to the needs of people with disabilities**

This should be produced, for example, in national sign languages, international sign language, easy-to-read text, regarding the possibilities of support during evacuation and reception in the host country.

**7. Securing the legal situation of refugees with disabilities**

Currently UWRwD can legally stay in Poland and Romania (and other EU countries) because of the temporary protection activated by the European Council on 2 March 2022. People with disabilities cannot apply for international protection on the basis of disability. The end of the war will result in the end of the threat situation, and therefore also in exclusion from international protection. Many Rwd will not be able to return to the war-ravaged country, and at the same time they will not be able to apply for international protection in the host country or for temporary residence.

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# APPENDIX: LIST OF SUPPORT PROVIDERS IN BUCHAREST

Name	Website	Address	Email	Phone number	Scope
CNRR – Consiliul Național Român pentru Refugiați	<a href="https://www.cnrr.ro/index.php/en/">https://www.cnrr.ro/index.php/en/</a>	Strada Viesparilor, nr. 19, etaj 2, sector 2, București, România	office@cnrr.ro	+4 021 312 62 10 +4 031 405 02 75	Provides services to refugees
AIDRom – Asociația Ecumenică a Bisericii din România	<a href="https://www.aidrom.ro/?page_id=67&amp;lang=en">https://www.aidrom.ro/?page_id=67&amp;lang=en</a>	Strada Ilarie Chendi, Nr. 14, Sector 2 București	aidrom@gmail.com	021 212 4868	Provides services to refugees
Terre des hommes	<a href="https://www.tdh.ro/en">https://www.tdh.ro/en</a>	Strada Corbeni Nr. 6, Sector 2, Cod postal 020783, București, România	rou.office@tdh.org olga.mititelu@tdh.org	0756 772 239	Provides services to refugees and migrants (children affected by migration)
ARCA – Romanian Forum for Refugees and Migrants	<a href="https://www.arca.org.ro/">https://www.arca.org.ro/</a>	Strada Austrului, nr. 23, Sector 2, Bucuresti	office@arca.org.ro	+40 212527357	Provides services to refugees
JRS – Jesuit Refugee Service	<a href="https://jrs.net/en/home/">https://jrs.net/en/home/</a>	Maior Ilie Opreș street, sector 4, Bucharest, Romania, Postal code 041378	jrsromania@gmail.com	Ukrainian language 0040744405657 English/Romanian language 0040732129238	Provides services to refugees

Name	Website	Address	Email	Phone number	Scope
Salvați Copiii	<a href="https://www.salvaticopiii.ro/">https://www.salvaticopiii.ro/</a>	Intr. Ștefan Furtună nr. 3, sector 1, 010899, București, România	secretariat@salvaticopiii.ro	+40 21 316 61 76	Extends services to refugees
World Vision Romania	<a href="https://worldvision.ro/">https://worldvision.ro/</a>	Str. Roțașului, Nr. 7, Sector 1, București, 012167	General: comunicare_ro@wvi.org For Ukrainian refugees: SupportUCR@wvi.org	General: +40 731 444 013 For Ukrainian refugees: +40754600244	Extends services to refugees
FONPC – Federația Organizațiilor Neguvernamentale pentru Copii	<a href="https://fonpc.ro/">https://fonpc.ro/</a> <a href="https://fonpc.ro/membri-fonpc/">https://fonpc.ro/membri-fonpc/</a>		office@fonpc.ro	0753 012 866 / 0753 012 896	Federation of NGOs providing social services to those in vulnerable situations. Extends services to refugees through some of its members.
Youth Centre – FNT	<a href="https://rotineret.ro/">https://rotineret.ro/</a> <a href="https://www.facebook.com/centruldetineretfnt/">https://www.facebook.com/centruldetineretfnt/</a>	Căderea Bastiliei 11 București Sectorul 1, Romania, 010611	office@rotineret.ro	+40 763 661 036	NGO focused on services for youth, extending their services to young Ukrainian refugees.
ICAR Foundation	<a href="https://www.icarfoundation.ro/en/">https://www.icarfoundation.ro/en/</a>	Bd. Unirii 70, Bloc J5, Sector 3, București, Cod postal: 030836	icar@icarfoundation.ro	+40 21 321 22 21	Provides services to refugees
Fundația Iocenți (Romanian Children's Relief)	<a href="https://inocenti.ro/">https://inocenti.ro/</a>	str. Gh. Tattarescu 4, Bl. P1, Ap. 57, Sector 3	office.bucuresti@inocenti.ro	+40 075 124 2282	Provides services for children with health problems, extends services to Ukrainian refugees.

# APPENDIX: LIST OF SUPPORT PROVIDERS IN WARSAW

Name	Website	Address	Email	Phone number	Scope
Biuro Rzecznika Praw Obywatelskich	<a href="https://bip.brpo.gov.pl/pl/content/zlozenie-wniosku-do-rzecznika-praw-obywatelskich">https://bip.brpo.gov.pl/pl/content/zlozenie-wniosku-do-rzecznika-praw-obywatelskich</a>	Al. Solidarności 77, 00-090 Warszawa, Woj Mazowieckie	biurorzecznika@brpo.gov.pl	22 551 77 00; Infolinia: 800 676 676	Deals with violation of civil rights
CARITAS POLSKA	<a href="https://caritas.pl/">https://caritas.pl/</a>	Caritas Polska ul. Okopowa 55 01-043 Warszawa	caritaspolska@caritas.pl	+48 22 3348500, +48 22 3348585	Social support to various groups
Centrum Pomocy Uchodźcom Z Niepełnosprawnościami	<a href="https://www.fundacjaavalon.pl/programy/centrum-pomocy-uchodzcom-z-niepelnosprawnosciam/">https://www.fundacjaavalon.pl/programy/centrum-pomocy-uchodzcom-z-niepelnosprawnosciam/</a>	Domaniewska 50A, 02-672 Warszawa	pomoc@fundacjaavalon.pl; kontakt@fundacjaavalon.pl	534 452 357	Support for people with disabilities
Chcemy całego życia	<a href="https://chcemycalagozycia.pl/">https://chcemycalagozycia.pl/</a>	n/a	inicjatywa@chcemycalagozycia.pl	n/a	Support for people with disabilities
CPK Warszawa	<a href="https://cpk.org.pl/">https://cpk.org.pl/</a>	ul. Wilcza 60 lok. 19 00-679 Warszawa	sekretariat@cpk.org.pl	800 10 7777	Support for women
Fundacja „Nasz Wybór” (Ukraiński Dom w Warszawie)	<a href="https://naszwybor.org.pl/projekty/ukrainski-dom/">https://naszwybor.org.pl/projekty/ukrainski-dom/</a>	ul. Zamenhofa 1 00-153 Warszawa	48 727 805 764	biuro@naszwybor.org.pl	Support for migrants
Fundacja Aktywnej Rehabilitacji „FAR”	<a href="https://far.org.pl/">https://far.org.pl/</a>	Łowicka 19, 02-574 Warszawa, Woj Mazowieckie	22 651 88 03	info@far.org.pl	Support for people with disabilities
Fundacja Avalon	<a href="https://www.fundacjaavalon.pl/">https://www.fundacjaavalon.pl/</a>	ul. Domaniewska 50A 02-672 Warszawa	534 452 357	kontakt@fundacjaavalon.pl	Support for people with disabilities

Name	Website	Address	Email	Phone number	Scope
Fundacja Kulawa Warszawa	<a href="https://www.kulawawarszawa.pl/">https://www.kulawawarszawa.pl/</a>	n/a	+48 796 866 601	fundacja@kulawawarszawa.pl	Support for people with disabilities
Państwowy Fundusz Rehabilitacji Osób Niepełnosprawnych (PFRON)	<a href="https://www.pfron.org.pl/">https://www.pfron.org.pl/</a>	al. Jana Pawła II 13, 00-828 Warszawa	22 581 84 10	programy@pfron.org.pl	Support for people with disabilities
Polski Głuchych Związek Zarząd Główny	<a href="https://www.pzg.org.pl/">https://www.pzg.org.pl/</a>	ul. Białostocka 4 03-741 Warszawa	+48 22 831 40 71	biuro@pzg.org.pl	Support for people with disabilities
Polskie Forum Migracyjne	<a href="https://forummigracyjne.org/">https://forummigracyjne.org/</a>	ul. Górczewska 137, 3 piętro 01-109 Warszawa	+48 692-913-993	info@forummigracyjne.org	Support for migrants
Polskie Forum Osób z Niepełnosprawnościami	<a href="https://pfon.org/">https://pfon.org/</a>	ul. Białostocka 4 lok. 2, 03-741 Warszawa	(+48) 22 299 18 62	biuro@pfon.org	Support for people with disabilities
Stowarzyszenie Mudita	<a href="https://stowarzyszeniemudita.pl/">https://stowarzyszeniemudita.pl/</a>	ul. Jaracza 24/31, 31-216, Kraków	kontakt@stowarzyszeniemudita.pl	+48539866471	Support for people with disabilities
Warszawskie Centrum Pomocy Rodzinie	<a href="https://wcpr.pl/">https://wcpr.pl/</a> <a href="https://wcpr.pl/kontakt/warszawskie-centrum-pomocy-rodzynie-targowa">https://wcpr.pl/kontakt/warszawskie-centrum-pomocy-rodzynie-targowa</a>	ul. Targowa 81 03-408 Warszawa	sekretariat.targowa@wcpr.pl	22 270 30 22	Warsaw social service agency



