

The Lithuanian Red Cross is a non-governmental organisation that provides social, humanitarian and legal assistance to refugees, asylum seekers, stateless persons and

other migrants regardless of their legal status.

Adhering to the fundamental principles of the Red Cross and Red Crescent Movement, the Lithuanian Red Cross strives to protect life and health and to ensure respect for the human being, to relieve the suffering of individuals, being guided solely by their needs and without discrimination as to nationality, race, religious beliefs, class or political

opinions, and does not engage in controversies of a political, racial, religious or

ideological nature.

In this document, we present the quantitative results of the survey the Lithuanian Red Cross conducted among Ukrainian refugees in January 2023, as well as respective

summary conclusions and recommendations.

This document is for information purposes only and does not create/entail in itself rights

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Reference to the source is required for quotation or distribution of this thematic study

report:

Lithuanian Red Cross. (February 2023). Ukrainian refugees in Lithuania: needs

assessment survey results

Cover photo: Lithuanian Red Cross



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UKRAINIAN
REFUGEES IN
LITHUANIA:
NEEDS
ASSESSMENT
SURVEY
RESULTS









**3 862** 3 569 women 293 men

36-50 y. - **46.14%** 18-35 y. - **39.90%** 51-65 y. - **9.48%** over 65 y. - **4.48%** 



With family members (including minors) - **63.57%** With family members (adults only) - **18.72%** Singles - **12.48%** 



From spring 2022 - **73.03%** From summer 2022 - **13.96%** From autumn 2022 - **11.70%** From beginning 2023 - **1.27%** 



# 98% have a place to live

Temporary - **51.68%** Stable - **46.25%** Pending - **0.91%** Do not have - **1.17%**  Vilnius - **32.94%**7 main cities - **44.66%**Other cities and districts - **22.40%** 



41.55% have indications of vulnerability\*

Retirement age - 26.06% Chronic diseases - 22.74% Disability - 22.24% Unaccompanied children - 11.98% Inability to work - 8.58% Pregnant - 2.69%

\* - the indicated percentage includes persons living in the same household together with those who completed the survey

## Survey period

in 2023 January 16 - February 1

### The target group

Refugees from Ukraine living in Lithuania

#### Survey method

Anonymous structured survey consisting of closed and open questions; access via link; the survey is available in Ukrainian and Russian

#### Survey distribution channels

(1) email letter sent through the Qualtrics XM platform where refugees from Ukraine previously registered for humanitarian assistance; (2) link to the survey shared by Lithuanian Red Cross (LRC) local branches, as well as by LRC case managers working with refugees from Ukraine; (3) link provided within Ukrainian community groups on social networks, etc.

#### **General context\***

During the entire period since the beginning of the war in Ukraine, 73,774 refugees have been registered in Lithuania (6,173 - persons up to 6 years old, 19,433 - 6-17 years old, 44,485 - 18-64 years old, 3,683 - persons over 65 years). A bit more than 5 percent of all registered persons filled out this survey. Some of the persons may have already left Lithuania, there is no complete information about those who have left.

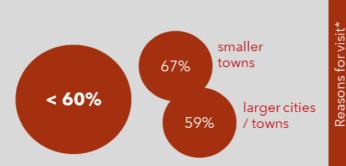
\* - Based on publicly available data of the State Data Agency during the survey period (at the end of January 2023). More - www.stat.gov.lt







# VISITING MEDICAL FACILITIES



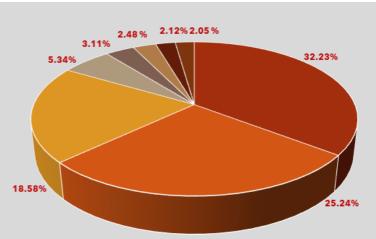
know that they have a right to receive necessary healthcare services free of charge

~ 80%

6%

U

visited Lithuanian medical facilities planning to visit in the nearest future



- Due to children's diseases
- Due to acute physical health disorders
- Due to chronic diseases
- Due to minor injuries
- Due to long-term or acute mental health disorders
- Due to reproductive health issued
- Due to childbirth
- Due to serious injuries

371 more respondents (8.85%) indicated other reasons, some of which fully or partially fall into the categories mentioned above. 4 respondents stated that they applied because of sexual abuse and/or abuse, other gender-based violence or abuse and/or abuse against children.

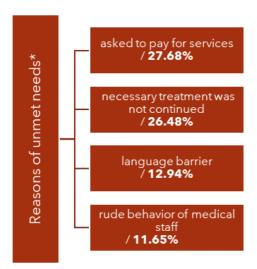
# **RESPONDING TO MEDICAL NEEDS**

~ 6%

26%

unmet needs

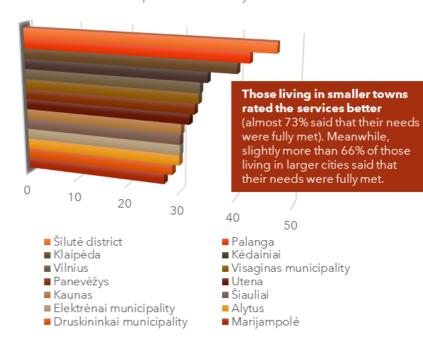
needs partially met



Those who paid for the healthcare services indicated that they paid for the consultation of doctors of various specializations, also diagnostics, analysis performed (blood sample, ultrasound, X-ray, etc.), materials used for treatment, Covid-19 test, vaccination, health check commission, etc.

# Needs unmet or partially met (%)

% of total responses for each city/town or district





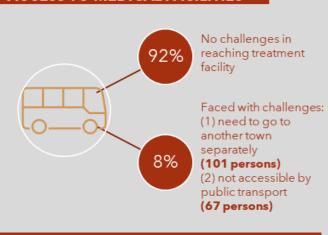


<sup>\* -</sup> respondents could indicate one or more reasons

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# **ACCESS TO MEDICAL FACILITIES**



71 respondents indicated that assistance related to access to healthcare services, such as transportation, mediation, translation, etc., would be relevant.

# Specialized Medical Equipment

**Medicines and Specialized Medical Equipment** 

# < 40% take prescribed medication

69% of them stated that medicine is not reimbursed 19% - partially reimbursed

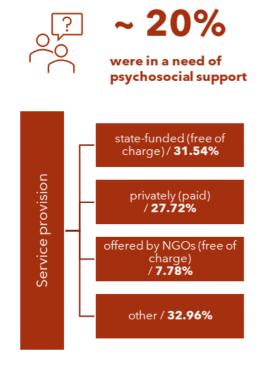
~60% of them would be interested in specialized support related to reimbursement of medicine

# ~ 4% (145 persons) - specialized medical equipment is/was relevant

~64% (92 persons) stated that equipment was/is not reimbursed

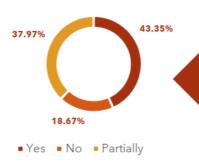
~ 43% of them would be interested in support related to specialized medical equipment

# **PSYCHOLOGIST SERVICES**



**Other:** not yet applied for the services; could not find or do not know where to look; no free of charge services found. Some of the respondents indicated that they use the remote services in Ukraine, as well as call various help lines regularly.

# Meeting the needs (%)



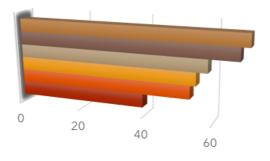
Reasons for not responding or partially responding to needs\*

lack of service continuity (38.44%) language barrier (19.89%) service quality (14.52%)

\* - respondents could indicate one or more reasons for unmet or partially met needs

## Needs unmet or partially met (%)

% of all responses from each city/town (responses from smaller towns and districts are evaluated collectively due to the insufficient ratio between the volume of services provided and the number of respondents)



Those living in larger cities and towns rated the services better (44% said that their needs were fully met). Meanwhile, only 39% of those living in smaller towns said that their needs were fully met.

80 ■ Alytus ■ Klaipėda ■ Panevėžys ■ Vilnius ■ Kaunas ■ Šiauliai





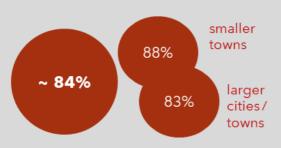




- More than 85% of the respondents indicated that healthcare services were/are relevant to them.
- The largest number of respondents (one third) indicated that they visited Lithuanian medical institutions due to children's diseases.
- People living in smaller towns are better informed about access to healthcare services.
- Roughly one third of the respondents who visited treatment facilities indicated that their needs were not met or partially met.
- People living in smaller towns rate the response of health care services better, however, in some cases several smaller municipalities or districts stand out with worse ratings.
- Access to medical facilities is not a major problem, however, some refugees from Ukraine, especially those living in smaller or more remote settlements, face difficulties due to lack of public transport, distance, etc.
- About 40% of the respondents indicated that they had to take the prescribed medicines, but almost 90% of them stated that medicines were/are not reimbursed or partially reimbursed, and about 60% of them would need additional support related to medicine reimbursement.
- Every fifth refugee from Ukraine living in Lithuania needed/need the services of a psychologist. Almost 60% of those who used the services of a psychologist said that their needs were not met or only partially met.
- Psychologist services were rated better by people living in larger cities/towns.







know that refugee children from Ukraine have the right to free education in Lithuania

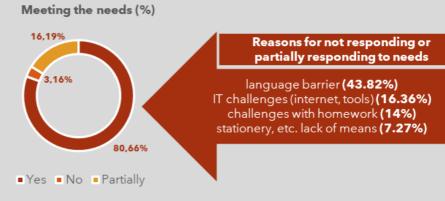
~ 62%

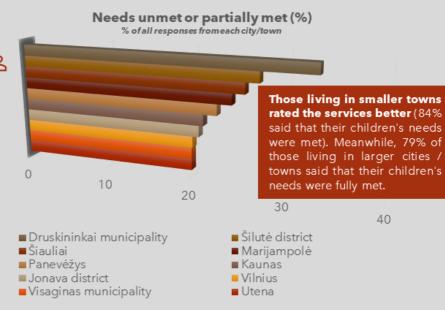
registered children planning to in Lithuanian educational institutions

register in the nearest future

274 respondents from those who did register\* stated that their children continue the education process in Ukraine remotely. 28 indicated that they do not see the point of starting the educational process in Lithuania, because they do not plan to stay here, 17 - do not want children in Lithuania to study in a language other than their mother tongue. Another 781 respondents indicated other types of reasons. The main one is not allowing children to an educational institution due to their age (for example, children under 2 years old).

\* - respondents could indicate one or more reasons







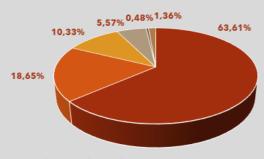
 Almost 70% of the respondents stated that they have registered or planning to register their children in Lithuanian educational institutions. About 300 cases indicate that children continue their education in Ukraine remotely. Similarly, in as many cases it is indicated that children are not registered due to their age (up to 2 years) or even older preschool children stay at home with their parents, grandparents, etc. Those who live in smaller towns rate educational services better. However, in certain cases, worse evaluations can also be seen in smaller municipalities or districts.





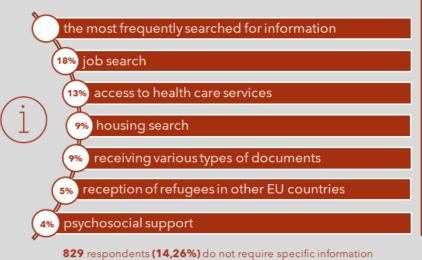






- Social networks and community groups / 63,61%
- Do not prioritize a specific channel / 18,65%
- Publicly available state channels / 10,33%
- Don't know where to look for information / 5,57%
- Information provided by NGOs / 0,48%
- Other channels / 1,36%

The clarity and comprehensibility of information is rated better by residents of smaller than larger towns (65% and 62%, respectively).







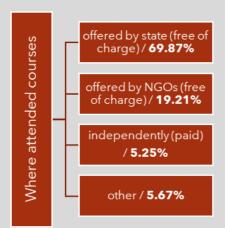
 Majority of respondents search for a relevant information on social media, networks and community groups. More than a third of the respondents say that the information they receive is not understandable and clear or is partially so. The main challenges are the abundance of information sources, their different content and the overload of information itself. Clarity and comprehensibility of information is slightly better appreciated by people living in smaller towns.

■ Yes ■ No ■ Partially

~ 42% 22%

to attend courses

had the opportunity did not have the opportunity but would like to



Other: courses were organized by employers; courses at universities (state and private, e.g., LCC Klaipėda), other clubs (e.g., seniors' university of the third age), informally helped and taught by volunteers or fellows Lithuanians. Some indicated that they study individually.



Other: lack of time; incompatible work schedule; family situation; poor physical or mental health; retirement age; logistical challenges; there are no courses in the area where the person lives; cannot find courses free of charge, would like to study remotely; prefer more widely used foreign languages; in general poorly mastering foreign languages, etc.



Those living in smaller towns had more opportunities to attend Lithuanian language courses (52%), while those living in larger cities had 39%, respectively.

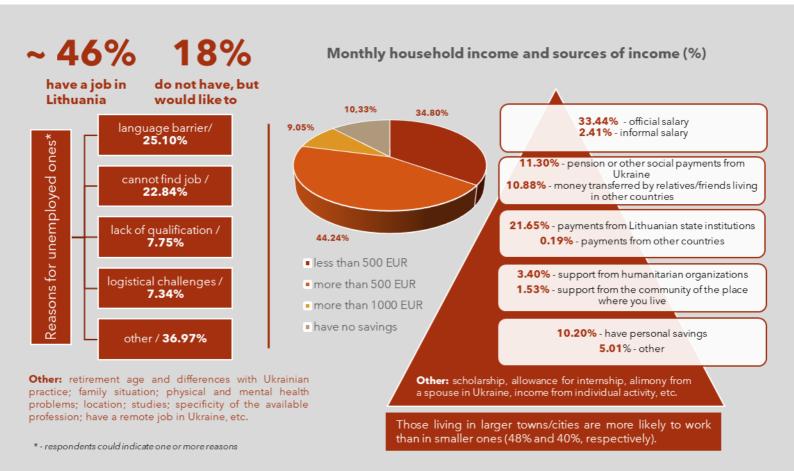


 More than 40% of respondents attended Lithuanian language courses. Most of them chose courses offered by the state free of charge. Those living in smaller towns attended the courses more often. The main reason cited by those who did not attend courses and did not express such a desire is that they do not feel language barrier in Lithuania.











- Almost every second respondent stated that they have a job. Another 20% do not have one, however, expressed their desire to work. Persons living in larger cities/towns have greater opportunities for employment.
- More than a third of the respondents stated that their monthly household income is less than EUR 500. Another 10% say they do not receive income and have no savings. The major part of the received income consists of a salary and payments from Lithuanian state institutions.





- People living in smaller towns are better informed about their right to receive various services and also find the information they need easier compared to those living in larger cities/towns. However, the lack of clarity and comprehensibility of information, as well as its overload is a problem in general. Therefore, joint efforts should be made to manage the information flow more effectively by reviewing the information made available, updating it if needed, communicating about it, etc.
- Although healthcare services in smaller towns are rated better in general, several smaller municipalities stand out as those where not only healthcare, but other services, such as education, were rated lower as well. Thus, we recommend a comprehensive assessment of why one or the other separate municipality is evaluated worse in the general context.
- More than every third Ukrainian refugee has to take medicines. Provision of relevant and reliable
  information about the compensation (at least partial) for medicines and (for a smaller target group)
  specialized medical equipment should be a priority.
- Every fifth refugee from Ukraine needs the services of a psychologist. In the current situation, the psychologist services are not sufficient, therefore, in this area, joint efforts should be made to scale-up the provision of psychosocial support both in the quantitative and the qualitative terms.
- A significant number of children were not enrolled in Lithuanian educational institutions. While a certain part
  of the school-age children seem to continue their studies remotely, a part of preschool children are simply
  staying at home, making it a kind of gray area for those tasked with monitoring the well-being of children and
  parent/guardian behavior. It is necessary to find a way to deal with gray areas like this and make sure that
  the best interests of all the children concerned are fully ensured.
- The needs of Lithuanian language courses are not fulfilled, and it is necessary both to scale-up their number and make access to these courses more flexible by accounting for, e.g., working hours of people employed full-time, people living in remote areas, etc. In this regard, on-line courses might be an option.
- Insufficient standard of living and income, inability to work due to family situation or health/mental conditions encourage to consider potential mechanisms of additional financial support, especially for vulnerable persons, single mothers, people with disabilities or chronic diseases, etc.







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