

DEC 2B UKRAINE HUMANITARIAN APPEAL

FINAL EVALUATION



HUMANITARIAN
IMPACT INSTITUTE
Inclusive Learning



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List of Acronyms and Abbreviations

AAP	Accountability to Affected Populations
AAH	Action Against Hunger
AiBi	Amici dei Bambini - Moldova



AMI	Asociația Moașelor Independente (Independent Midwives Association)
ANAIS	Asociația ANAIS
CEO	Centrum Edukacji Obywatelskiej (Centre for Civic Education)
CHS	Core Humanitarian Standard
CP	Child Protection
CPIMS+	Child Protection Information Management System Plus
CNPAC	Centrul de Prevenire al Abuzului față de Copii (The National Centre for Child Abuse Prevention)
DAC	Development Assistance Committee (OECD)
DEC	Disasters Emergency Committee
DEIS	Asociația pentru Dezvoltare prin Educație, Informare și Susținere (Association for Development through Education, Information and Support)
EU	European Union
FCDO	Foreign, Commonwealth & Development Office
FCRM	Feedback, Complaints and Response Mechanism
FDDS	Fundația Dajemy Dzieciom Siłę (Empowering Children Foundation)
FGD	Focus Group Discussion
GBV	Gender-Based Violence
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit
HII	Humanitarian Impact Institute
HNRP	Humanitarian Needs and Response Plan
IDI	In-Depth Interview
ICR	Indirect Cost Recovery
IOM	International Organisation for Migration
JF	Jedność Foundation (Unity Foundation)
KII	Key Informant Interview
M&E	Monitoring and Evaluation
MERL	Monitoring, Evaluation, Research and Learning
MHPSS	Mental Health and Psychosocial Support
MoLSP	Ministry of Labor and Social Protection (Moldova)
MPCA	Multi-Purpose Cash Assistance
NGO	Non-Governmental Organisation
NRC	Norwegian Refugee Council
OECD	Organisation for Economic Co-operation and Development
PALS	Parenting and Adolescent Life Skills
PA	Partnership Agreement
PFM	Polish Migration Forum
PiM	Plan International Moldova
PiP	Plan International Poland
PiR	Plan International Romania
PUP	Parenting under Pressure
REACH	REACH Initiative (humanitarian data platform)
RESTART	Moldova Child Protection Reform Strategy
RRP	Refugee Response Plan
SDG	Sustainable Development Goal



SEL	Socio-Emotional Learning
SRHR	Sexual and Reproductive Health and Rights
TPM	Third-Party Monitoring
ToR	Terms of Reference
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children’s Fund
VfM	Value for Money
VSLA	Village Savings and Loan Association
Y4Y	Youth for Youth Romania Association



Executive Summary

Plan International (PI) commissioned the Humanitarian Impact Institute (HII) to conduct an independent endline evaluation of the DEC Phase 2B Ukraine Response in Romania, Moldova, and Poland. The evaluation applied the OECD DAC and CHS criteria to review the programme’s relevance, efficiency, effectiveness, sustainability, inclusion, and coordination.

The DEC 2B portfolio achieved strong results across highly complex and dynamic settings. Despite funding volatility, administrative changes, and social fatigue in host communities, the programme demonstrated flexibility, broad reach, and tangible improvements in people’s lives. Partners showed exceptional ownership and adaptability, ensuring that interventions remained relevant and grounded in community realities.

Across all three countries, interventions were closely aligned with community priorities and adapted continuously to changing needs. The response built on existing capacities and addressed both immediate and longer-term challenges faced by refugees and host populations. The ability of partners to anticipate shifts, adjust delivery models, and maintain relevance under evolving conditions was a defining strength of the portfolio.

Implementation was both agile and adaptable. PI’s approach to financial and operational management gave partners the room to act quickly while maintaining oversight. The ability to adjust budgets, recruit specialists, and redirect funds ensured that resources were used effectively. Partners consistently described the collaboration as constructive and transparent, allowing for rapid problem-solving and collective decision-making.

Delivery was extensive. Most projects met or surpassed their initial targets, and additional DEC funding rounds enabled partners to expand services in real time. Activities reached thousands of participants across the three countries—from children accessing psychosocial support to young people benefiting from skills training and SRHR information. Even with limited qualitative data, the evidence points to a consistent record of delivery and responsiveness.

The programme also contributed to meaningful social and emotional change. Participants described gaining confidence, stability, and stronger social connections through inclusive spaces, mentoring, and group activities. These outcomes show that the interventions not only addressed immediate needs but also supported longer-term well-being and self-reliance. Partners, however, cautioned that these positive outcomes may not be sustained without continued access to structured support, mentoring, and safe community spaces.

Sustainability was strongest where activities became part of existing systems or organisational practices. Many partners viewed the DEC 2B work as part of their long-term strategies rather than as a stand-alone project, embedding sustainability into their planning from the outset.

Gender equality and inclusion were integrated throughout. The portfolio reached diverse groups—including women, girls, Roma communities, LGBTQ+ youth, and persons with disabilities—through inclusive design and tailored outreach. Several interventions, such as Romania’s SRHR helpline, moved towards gender-transformative practice. The mix of in-person and online delivery helped ensure broad accessibility across both rural and urban areas.

Partnership and coordination were key strengths. Partners consistently highlighted PI’s openness, flexibility, and respect for local expertise. Regular meetings and close communication fostered trust and efficiency, while technical guidance in safeguarding,



education, and inclusion helped strengthen programme quality. This cooperative model encouraged shared ownership and enhanced partners' long-term capacities.

Overall, the PI DEC Phase 2B response in Romania, Moldova and Poland demonstrated clear relevance, strong delivery, and genuine impact in challenging conditions. It strengthened local actors, reached people at scale, and helped improve well-being, safety, and inclusion across three countries. The combination of partner commitment, flexible management, and alignment with local priorities ensured that the programme's benefits extended beyond the project itself—laying the foundations for continued progress in protection, participation, and community resilience.



Introduction

Context and Background

Now in its fourth year, the war in Ukraine continues to generate acute and widespread humanitarian needs both within the country and across its borders. As of early 2025, an estimated 12.7 million people in Ukraine require humanitarian assistance, while 3.6 million remain internally displaced¹. Globally, more than 6.8 million refugees from Ukraine have been registered by UNHCR². As displacement becomes increasingly protracted, the nature of needs has shifted from immediate relief towards long-term challenges—particularly economic insecurity, mental health, social integration, and sustained access to education and protection services.

As of³ 31 August 2025, Romania hosted roughly 192,944 Ukrainian individuals granted refugee status. Refugees are increasingly vulnerable to economic hardship as savings are depleted. Adolescents and young people continue to encounter administrative and legal barriers to education and employment, which heightens the risks of child labour and early marriage. The humanitarian response has prioritised legal protection and youth livelihoods programming, consistent with Plan International’s (PI) focus under DEC Phase 2B.

In Moldova, approximately 100,000 of the 135,000 Ukrainian refugees registered in the country were receiving assistance from 62 organisations by mid-2025. Public institutions—particularly in health, education, and mental health and psychosocial support (MHPSS)—remain overstretched. Access to sexual and reproductive health (SRHR) services and parental education is still limited. Local NGOs and community-based organisations continue to function as the main interface for service delivery, though often with restricted human and financial capacity.

Poland continues to host one of the largest Ukrainian refugee populations in the EU, with close to one million people residing in the country as of mid-2025⁴. The majority are women and children, predominantly located in major urban centres such as Warsaw, Kraków, and Gdańsk. While many refugees have integrated into the labour market, most remain employed below their qualification levels. Economic strain, linguistic and bureaucratic barriers, and persistent credential recognition⁵ challenges have placed additional pressure on households. Protection actors also report a growing prevalence of social isolation and gender-based violence, as early coping mechanisms and community support structures weaken over time⁶.

Each of the 24-month DEC Phase 2B projects (September 2023 - August 2025) builds upon the foundations established during Phase 2A, with a renewed emphasis on strengthening partnerships, expanding geographic reach, and deepening programmatic impact. Child protection and MHPSS remain the central pillars across all three countries, complemented by additional country-specific components. In Poland, programming includes safeguarding, adolescent leadership, and informal education; in Moldova, non-formal education; and in Romania, integrated support across SRHR, basic needs, GBV (prevention and response), and protection for children and caregivers.

¹ UNHCR. Ukraine Situation Report. Available at: <https://www.unhcr.org/us/emergencies/ukraine-emergency>. 2025

² UNHCR Global Data Portal - *Ukraine Refugee Situation*, accessed October 2025.

³ UNHCR. UNHCR Romania: Ukraine Refugee Situation Update, Weekly Update #148. 26 May 2025

⁴ Reuters (19 August 2025) - "Ukrainians Keep Propping Up Poland's Labor Market, Fitch Says."

⁵ Reuters - "Ukrainian Refugees Give Poland Big Economic Boost, Report Says" (10 June 2025)

⁶ IRC - Protection Monitoring Report, Poland Q1 2025



This evaluation focuses on the DEC Phase 2B implementation in each of these three countries.

DEC 2B Plan International Romania (PiR)

PiR supported refugee and host-community children, young people, and caregivers through a multi-partner, integrated model combining protection, psychosocial well-being, SRHR, and socio-economic inclusion. The programme maintained an integrated model where specialized organisations worked across protection, education, health, and youth empowerment, ensuring coherent and complementary delivery.

ROUA DEIS operated a community centre providing safe, inclusive spaces and daily activities for Ukrainian children, including play sessions, online schooling, and homework support. These services enhanced children’s psychosocial well-being while enabling their mothers to pursue employment or manage administrative responsibilities. Ukrainian psychologists and social workers offered individual and group psychosocial support, while community facilitators guided families in accessing legal, health, and social services—ranging from hospital interpretation to home visits for vulnerable individuals.

Carousel combined shelter management, community centre operations, and mobile outreach to reach both refugees and host-community members. The organisation provided accommodation, food and hygiene assistance, case management, and psychosocial services, alongside child-friendly activities and dedicated women’s spaces within its shelter. Mobile teams distributed essential goods and provided information on protection and SRHR services. In the project’s final months, SRHR sessions and products were accessed by women—and some of their male partners—at a community centre.

ANAIIS expanded access to legal and psychosocial support for survivors of domestic violence through counselling, court representation, and referral pathways. The organisation also conducted an assessment of police handling of GBV cases, developed advocacy recommendations, and led public awareness campaigns promoting protection and gender equality.

Youth for Youth (Y4Y) trained peer educators on SRHR, consent, and GBV prevention, preparing them to conduct awareness-raising sessions with adolescents. Activities held in schools and public spaces promoted safe behaviours and inclusion, while plans were developed to extend peer-led outreach in future programming cycles.

The Association of Midwives (AMI) strengthened SRHR knowledge through in-person and online courses and maintained a helpline accessible in both Romanian and Ukrainian. The team produced health education videos, distributed medical and menstrual hygiene products, and provided case management and referrals for individuals at risk of GBV or SRHR-related issues.

Fundația Națională pentru Tineret (FNT), the National Youth Foundation, promoted youth participation and integration through podcasts, Romanian-language classes, and career guidance materials. These initiatives supported linguistic and professional adaptation among young refugees, with both online and in-person learning opportunities.

DEC 2B Plan International Moldova (PiM)

Under DEC 2B, PiM and its partners—AVE Copiii, CNPAC, AIBI Moldova, CRIC, and The Moldova Project—continued an extensive protection and MHPSS response for refugee and host-community children, while also contributing to systemic reform within Moldova’s evolving social assistance structure.



AVE Copiii led child protection system strengthening and case management, building on the establishment of the PRIMERO+ platform during Phase 1. The organisation developed policy materials aligned with the government’s RESTART reform and maintained service continuity during a period of widespread institutional restructuring. Despite these transitions, partners sustained strong coordination with local authorities, identifying and referring at-risk and refugee children through community focal points and internal case management systems. Priority groups included children with disabilities, unaccompanied or separated children, and Roma communities.

The initiative placed particular emphasis on capacity development, delivering blended (in-person and remote) training to community social workers, multidisciplinary teams, and specialists in child protection, MHPSS, and safeguarding. A cascade Training-of-Trainers model, endorsed by the Ministry of Labour and Social Protection, expanded professional coverage nationwide and established a pool of local trainers embedded within the public system.

Through CNPAC, the programme delivered MHPSS services for children and adults affected by the crisis, with a focus on refugees in RACs and community centres. Activities encompassed social cohesion initiatives, social assistance and referral services, and prevention programmes such as Safe Children for younger audiences and 12PLUS, an online platform designed to build resilience against sexual abuse and exploitation.

A new SRHR component, implemented with AVE Copiii, produced a contextualised manual for adolescents—including Roma and other vulnerable youth—covering SRHR, GBV prevention, and gender equality. Complementary interventions implemented by AIBI Moldova, CNPAC, CRIC, and The Moldova Project focused on parenting, education, and inclusion. Structured parenting programmes (such as PUP, NO SLAPS, CONECT, and PALS), summer schools, and Romanian-language learning promoted integration and social cohesion among refugee and host-community children. Play-based learning through EduTechLabs, Ludotecas, and mobile Ludobus outreach further strengthened well-being, social cohesion and informal education in community settings.

DEC 2B Plan International Poland (PiP)

PiP supported refugee and host-community children and adolescents affected by the Ukraine crisis through a comprehensive package of child protection, education, and MHPSS services. The DEC 2B portfolio prioritised:

1. Safer systems and services for children.
2. Expanded, trauma-informed psychosocial and psychiatric care.
3. More inclusive learning environments and enhanced teacher capacity.

Working through national partners, the programme integrated direct service delivery with systemic change. FDDS led specialised child protection and MHPSS interventions through Child Advocacy Centres and a youth helpline, while embedding safeguarding standards in hospitals and sports institutions via new policies, staff training, and professional guidance. Polish Migration Forum (PMF) delivered in-house psychological counselling, community casework, intercultural mediation in schools, and resilience-building groups. Its Multicultural Centre in Warsaw became a key hub for integrated service provision.

CEO developed secondary-level social and emotional learning (SEL) resources and trained educators to manage multicultural classrooms, co-designing and piloting materials with teachers and students. Jedność (Unity) Foundation promoted adolescent well-being and



agency through mentoring, theatre, art therapy, and yoga sessions—low-threshold, inclusive spaces that rebuilt confidence and social connectedness.

PiP coordinated learning, quality assurance, and capacity strengthening across the portfolio. It organised regular partner meetings, monitoring visits, and thematic workshops, including Storytelling in Fundraising. The team also finalised the Polish translation and rollout of the Child Protection Minimum Standards (CPMS)⁷, contributing to national-level safeguarding improvements.

The approach remained adaptive throughout implementation: partners adjusted schedules and scopes as contexts evolved, intensified casework in response to emerging protection risks, and ensured continuity in SEL and MHPSS interventions.



⁷ Alliance for Child Protection in Humanitarian Action (2025) “The CPMS is now available in Polish and more!”, 11 February. Available at: <https://alliancecpha.org/en/news/cpms-now-available-polish-and-more>



Methodology

Evaluation Purpose and Objectives

PI commissioned the Humanitarian Impact Institute (HII) to conduct an independent summative endline evaluation of the PI DEC Ukraine Response in neighbouring countries. The evaluation uses the OECD DAC criteria as the evaluation framework, assessing relevance, efficiency, effectiveness, sustainability, cross-cutting issues and coordination /coherence. For the evaluation questions, the Core Humanitarian Standard (CHS) Quality Criteria have been used. The evaluation matrix can be found in Annex 1.

The evaluation covered almost the full 2-year implementation period, from 1 September 2023 up to July 2025 and focused only on the DEC Phase 2B. The programme ended on 31 August 2025.

The objectives of this evaluation are therefore to:

- Assess the relevance, effectiveness, efficiency, impact, sustainability, and coherence of the project against DEC criteria and CHS Commitments.
- Examine how well the project identified and addressed the diverse needs and priorities of children, adolescents, and caregivers, including those in marginalized or hard-to-reach groups.
- Determine what real changes the project has brought to the lives of participants and whether there were any unintended positive or negative effects.
- Review the extent to which the project promoted gender equality, inclusion, and accountability to affected populations, including the effectiveness of consultation and feedback mechanisms.
- Analyse the quality of coordination with partners, local authorities, and other actors, and whether partnerships were equitable and coherent.
- Identify key programmatic learning, lessons, and good practices, including innovative approaches that could strengthen the sustainability of results.
- Formulate actionable recommendations for PI offices and partners to improve future programming.



Evaluation Questions

DEC & CHS	Criteria &	Evaluation Questions
Relevance	CHS Commitment 1 & 2	1 To what extent did the program meet the needs and priorities of the target group?
		2 How were the different needs and views of the stakeholders taken into consideration in the design and delivery of activities?
Efficiency	CHS Commitment 9	3 Were the activities and outputs of the program consistent with the overall goal and desired impact of its objective?
Effectiveness	CHS Commitment 9	4 Were the program activities delivered on time, to the right people, of the right quality as set out in the program documents and as reported?
		5 To what extent were resources used efficiently to achieve the program's objective?
Impact	CHS Commitment 4	6 What has contributed to the successful/unsuccessful implementation of program activities? What are the lessons learned?
		7 To what extent was the project's 'objectives achieved?
		8 What real difference/changes have the activities made to the target group? How do the adolescents, caregivers and other activities participants see the impact themselves and how do they describe the changes?
Sustainability	CHS Commitment 9	9 What potential positive or negative unintended consequences the program might be generating?
		10 How did the program mitigate any unintended negative consequences?
Cross Cutting Issues	CHS Commitment 2, 4 and 5	11 To what extent are the benefits of the program going to continue, or are likely to continue?
		12 Were any innovative approaches or practices introduced which contributed to improved sustainability?
		13 What were the major factors which influenced the achievement or non-achievement of sustainability of the program?
Coordination & Coherence	CHS Commitment 6	14 How has gender been integrated throughout the project?
		15 How effectively did the project identify and address the specific needs of minority groups and persons with disabilities?
CHS Commitment 6	CHS Commitment 6	16 To what extent were individuals in remote areas provided with support and actively included in the project?
		17 What consultation as well as specific feedback mechanisms were considered and implemented for this project and how effectively did they work (CHS 5)?
CHS Commitment 6	CHS Commitment 6	18 To what extent was the relationship between PI offices and implementing partners equitable?
		19 How did the organisations harmonize and coordinate their interventions with other partners?



Approach

Secondary Data and Desk Review

HII conducted an extensive desk review of project and organisational documentation relevant to the DEC-funded interventions in Poland, Moldova, and Romania. The review covered partnership agreements (PAs), narrative reports (12-month and 18-month, final), and project proposals and extensions for all implementing partners under PI's portfolio. These were complemented by Monitoring, Evaluation, Research and Learning (MERL) materials, Output Trackers (12 months, 18 months, final), Gender-Transformative Marker files, risk registers and partner-level evaluations and After-Action reviews. The review also incorporated PI global frameworks on Procurement, Safeguarding Children and Young People, Gender Equality and Inclusion, and Data Privacy, as well as ethical and safeguarding risk assessments produced under the GLO-MER initiative.

In addition to project documentation, HII examined secondary data sources to situate project findings within the broader humanitarian and protection context. For Ukraine and regional trends, this included UNHCR Operational Data Portal⁸, UNOCHA Humanitarian Needs and Response Plan (HNRP) updates⁹ and displacement and mobility tracking reports.

- For Romania, the team reviewed UNHCR Romania Response Plan updates, IOM and UNFPA situation briefs, and national NGO coordination reports focused on refugee inclusion and SRHR service coverage.
- For Moldova, the review drew on UNHCR and UNICEF joint situation reports, Moldova Refugee Coordination Forum minutes, and Government-UNHCR protection dashboards tracking child protection, GBV, and education interventions.
- For Poland, the review drew on the Protection Working Group situation updates¹⁰, UNHCR Protection Analysis Updates¹¹, and the Regional Refugee Response Plan (RRP)Hi reports on refugee legal access and protection risks.

Staff & Partner Key Informant Interviews

The KIIs captured nuanced, context-specific perspectives that could not be obtained through document review or monitoring data. They provided insight into how PI and its partners perceived the implementation process, the challenges encountered, and the outcomes achieved under the DEC-funded projects.

Eight KIIs were conducted with members of PI's country teams, including Project Managers, Officers, and Technical Advisors directly involved in project design, coordination, and oversight. Discussions focused on the relevance, effectiveness, efficiency, coherence, and sustainability of interventions, alongside cross-cutting dimensions such as gender equality, inclusion, and safeguarding.

A further 13 KIIs were held with staff from partner organisations across the three project countries. These explored the extent to which project objectives and design responded to evolving needs and priorities, as well as key lessons emerging from the response.

⁸ UNHCR. (2025). *Ukraine Situation: Operational Data Portal*. United Nations High Commissioner for Refugees. Retrieved from <https://data.unhcr.org/en/situations/ukraine>

⁹ OCHA. (2025). *Ukraine: Humanitarian Needs and Response Plan (HNRP) Updates*. United Nations Office for the Coordination of Humanitarian Affairs. Retrieved from <https://response.reliefweb.int/ukraine>

¹⁰ UNHCR (2025). *Poland: Protection Working Group Situation Updates*. UNHCR, Inter-Agency Coordination Group on the Ukraine Refugee Response. Retrieved from <https://data.unhcr.org/en/working-group/309>

¹¹ UNHCR. (2025). *Poland: Protection Analysis Update*. United Nations High Commissioner for Refugees. Retrieved from <https://data.unhcr.org/en/situations/ukraine>



Table 1: Partner Organisations Interviewed by Country

Romania	Moldova	Poland
CARUSEL	AiBi	Unity
ANAIIS	CRIC	CEO
Y4Y	CNPAC	PFM
DEIS	TMP	

The KIs also examined the nature and quality of local partnerships between PI and its partners, including how collaboration has been established and maintained, the level of support provided to local actors, and the extent to which these partnerships have contributed to strengthening local capacities and ensuring a more locally led response.

Participants reflected on how project objectives and approaches responded to shifting needs in each country context. Interviews examined the effectiveness and efficiency of economic empowerment and community resilience activities, the integration of climate-resilient practices, and the adequacy of resource allocation and scaling strategies. They also addressed internal management arrangements, team capacities, and safeguarding systems, highlighting both intended and unintended results.

In addition, KIs explored perspectives on sustainability, local ownership, and partnerships, identifying how PI and its partners worked alongside other actors, and how these collaborations contributed to longer-term outcomes. The discussions also examined progress toward gender-transformative change, including male engagement, and the meaningful inclusion of persons with disabilities and diverse groups.

All interviews were conducted in English, transcribed in note form, and thematically coded to identify key patterns and insights. These findings directly informed the evaluation’s analysis of effectiveness, sustainability, and inclusion across the DEC 2B projects.

Focus Group Discussions (FGDs)

FGDs were conducted across the three project countries to capture community-level perspectives and lived experiences of participants involved in DEC-funded activities. They explored perceived changes in well-being, safety, livelihoods, and community resilience, as well as participants’ feedback on the accessibility, inclusiveness, and relevance of services provided. Discussions also examined participation and agency, gender norms, male engagement, and the inclusion of persons with disabilities and other marginalised groups, paying particular attention to the differing experiences of women, men, adolescents, and youth.

A total of eight FGDs were organised across Romania, Moldova and Poland. Groups were segmented by age and gender to allow for intersectional analysis and ensure that a range of perspectives was represented.

- Three FGDs (n=15; w=10; m=5) were held with adolescents and youth aged 17-20 (one female group, one male group, and one mixed group)
- Five FGDs (n=37; g=17, b=20)
- were conducted with children aged 7-18 (mixed groups).

Table 2. Summary of FGDs Conducted



Country	Target Group	Number of FGDs	Partner	Modality
Romania	Youth adolescents and	2 (4 young men and 5 young women)	Y4Y	Online
	Children	2 (9 boys and 6 girls)	ROUA DEIS	Online
Poland	Youth adolescents and	1 (1 young man and 5 young women)	Jedność Foundation	In Person in Krakow
Moldova	Children	3 (11 boys and 11 girls)	AiBi	In Person in Bălți & Cărpineni

All FGDs were facilitated by trained local researchers using participatory techniques (e.g. visual prompts and the River of Life tool for children) to create a safe and enabling space for discussion. Informed consent and assent were obtained prior to participation. Notes and transcripts were anonymised and coded for thematic analysis to triangulate findings from KIs and desk review.

Caregiver In-Depth Interviews (IDIs)

A total of ten In-Depth Interviews (IDIs) (w = 5; m = 5) were conducted with caregivers to better understand children’s daily experiences, well-being, and coping strategies, as well as the perceived impact of project activities on family dynamics.

Researchers used the IDI guide as a flexible framework, adapting questions to respondents’ comfort level and context while maintaining an emphasis on active listening and creating a safe, respectful, and meaningful environment for participants to share their experiences.

Table 3: Summary of Caregiver IDIs

Country	Target Group	Partner	Respondents	Modality
Romania	Caregivers	DEIS	5 (5 W)	Online
		Carousel	5 (5 W)	Online

Adults & Practitioner IDIs

Ten IDIs (w = 8; m = 2) and 13 practitioner IDIs (n = 13) were conducted with adult participants in Moldova and Romania engaged in community-based and psychosocial support activities. The aim was to understand how adults perceived changes in their well-being, sense of safety, inclusion, and access to support as a result of participating in DEC-funded interventions.

Table 4: Summary of Adult & Practitioner IDIs

Country	Target Group	Partner	Respondents	Modality
Romania	Adults	Y4Y	5 (3W, 2M)	Online
	Adults	Ave Copiii	5 (5W)	Online
Moldova	Specialised practitioners	AiBi	5 (5W)	Online
		TMP	5 (3W)	Online
		CRIC	3 (3W)	Online



Stakeholder KIIs

Stakeholder KIIs were designed to include representatives from relevant government bodies, coordination mechanisms, donors, and other humanitarian actors to capture external perspectives on relevance, coordination, and complementarity. However, the planned scope could not be fully achieved due to limited availability and engagement of external stakeholders during the data-collection period. As a result, interviews were conducted only with two grassroots partners working alongside implementing organisations, which restricted the ability to capture broader institutional and donor perspectives on coordination and complementarity.

A total of three interviews were conducted with the sample listed below.

Table 5: Summary of Stakeholder KIIs

Country	Target Group	Organisation / Role	Respondents	Modality
Romania	Stakeholders	ROUA Community Centre / Manager	1 (1 W)	Online
Moldova		Nicolae Gogol Theoretical High School Director	1 (1W)	Online
		Sipoteni / Social Worker	1(1W)	Online



Limitations

The evaluation faced a number of methodological limitations, although steps were taken to mitigate their impact.

First, the evaluation did not have a quantitative component. The planned survey was cancelled at the request of partners due to feasibility, which removed the opportunity to triangulate findings with quantitative data. To compensate, the team relied on a broader set of qualitative sources – KIs, FGDs and partner reports – and sought to balance perspectives across different types of stakeholders, including youth, parents, frontline workers, and partner staff. However, qualitative sample sizes were also limited compared to the scale of the response. Small sample sizes and the absence of primary quantitative data mean the results are not generalizable across different geographic and demographic groups.

In addition, data collection was uneven across countries. In Poland, primary data collection with the project participants was limited to one FGD (with six people) and one IDI with one project participant. This restriction stemmed from the safeguarding and protection policies of the PI Poland partners—particularly PFM and FDDS—which do not permit direct engagement with project participants by external evaluators because many of the project participants were minors. The result is that the analysis in Poland over-relied on partner perspectives, partners’ internal evaluations and project documents – insufficient sources to make objective and high confidence findings for Poland. This level of primary data was insufficient for the evaluation because it did not include first-hand accounts from participants, which are essential to understanding whether activities met their needs, how they experienced support, and what real changes occurred in their lives. Without these direct perspectives, the evaluation could not fully assess the projects’ effectiveness or verify reported outcomes by the partners. This limitation could not be mitigated, and the reader should interpret the analysis for Poland within this context. A further limitation was the inability to reach several project partners. By the time data collection took place, some projects had already closed, and relevant staff were no longer available, while in other cases practical constraints prevented direct engagement. As a result, the evaluation could not capture the same level of detail for all partners. Moreover, PI’s partners made efforts to identify external stakeholders for interviews; however, many individuals who had engaged with the programme over time had changed roles or moved on from their organisations. This limited the ability to reach those with sustained involvement and, consequently, reduced the range of external perspectives available. Nonetheless, the discussions conducted provided valuable insight into local-level coordination and service delivery realities. As a result of this limitation, assessment of external coordination—including relationships between PI offices, implementing partners, clusters, and other actors—was based solely on partner statements and PI/partner reports. The absence of perspectives from other stakeholders, such as cluster representatives, local NGOs, or government counterparts, constrained the ability to verify coordination practices or assess how equitable and effective these relationships were in practice.

Over reliance on self-reporting introduces the possibility of bias. Many services were valued highly, and partners had long-standing community relationships, which may have shaped responses. To reduce this risk, the evaluation deliberately cross-checked self-reports against independent participants accounts and community feedback



Findings

Relevance

Summary



The DEC 2B activities in Romania were highly appropriate to the priority needs of both Ukrainian refugees and host communities. They were designed in response to the evolving needs of the refugee and host populations and addressed the most pressing social and economic challenges that persisted into 2025.

In Moldova, the DEC Phase 2B portfolio was highly relevant in addressing structural gaps left by the underfunded child protection and social welfare system. PI's partners effectively stepped in to provide services for Ukrainian refugees and host communities.

In Poland, the DEC Phase 2B portfolio remained highly relevant to the evolving needs of both refugee and host populations, responding to persistent service gaps in child protection, mental health, education, and youth integration.

EQ1 To what extent were the activities appropriate to the needs of refugees and host communities in the target countries?

Romania

Under DEC Phase 2B, PIR supported refugee and host-community children, youth, and caregivers through a multi-partner approach addressing protection, psychosocial wellbeing, SRHR, and socio-economic inclusion. The programme maintained an integrated model in which specialised organisations worked across protection, education, health, and youth empowerment, while addressing administrative, legal, and language barriers that affected refugees' access to services, education, and employment. Core interventions included emergency shelter, language and vocational courses, psychological counselling, SRHR information and services and family and youth support, implemented for both refugee and host populations.

The approach remained highly relevant in the Romanian context, where refugees continued to face complex integration challenges, and host communities—particularly marginalised groups such as Roma—experienced increased pressure on social services and deepened inequalities.

Basic needs support remained essential from 2023 through 2024 and into early 2025. Under DEC Phase 2B, PI's partner Carusel provided food, hygiene, and NFI assistance to families in private accommodation, as well as to those accessing emergency shelters and community centres, primarily through mobile outreach teams. Interviewed refugees described this assistance as highly relevant and significant, as it enabled them to meet essential needs that would otherwise have remained unmet. This assistance was particularly important for newly arrived families and those who had not yet established stable income sources or access to public support systems.

"They bought me a lot of medicines I couldn't otherwise afford... Without this support, I couldn't provide these things for my daughter."

-IDI, Project Participant, W, Romania



The majority of interviewed refugees found the assistance to be timely, useful, and relevant. The main area identified for improvement concerned consultation and communication about the assistance. Only one participant described being actively consulted about her needs, noting that Carusel adapted medical and hygiene products to her daughter's allergies. Other participants reported that the assistance was predetermined, with fixed food and hygiene packages and no opportunity to suggest changes. The partner indicated that hygiene kits were personalised for specific groups, such as trans women; however, this could not be verified through the evaluation, as no trans women were among the respondents.

DEIS's interventions were particularly relevant for children and adolescents who faced isolation, disrupted schooling, and limited opportunities for social interaction. The centres also offered PSS services and PALS activities. Interviews with children and youth revealed that the centre created a safe and welcoming environment where young people could reconnect and make friends. They also highlighted the opportunity to participate in diverse activities such as sports, creative workshops, and counselling sessions. The centre was described as "a second home" where they learned to communicate, build confidence, and interact with Romanian peers—an essential step for social integration. Younger children valued the sense of fun and normalcy—playing outdoors, celebrating birthdays, or cooking together—while older adolescents highlighted learning about self-protection, mental health, and intercultural understanding.

The centre offered a range of recreational, cultural, and therapeutic activities, including art therapy and creative workshops, cooking and cultural exchange sessions, aquatic therapy, family events such as "Celebrating Love," and seasonal celebrations like the Spring community events.

All adolescents and youth in the FGD reported that they were consulted about their preferences and the activities were organised in the way that they suggested. The PI team noted that the partner was able to strengthen the participatory approach through an extension in the final months of DEC Phase 2B (funded through an additional DEC allocation). Under this extension, activities organised in the centre as part of the youth-friendly space. One example was a three-day outdoor youth camp, which was not included in the original activity plan but was introduced following participants' suggestions to spend time together in nature, strengthen social connections, and reflect on shared experiences.

Protection needs were addressed through ANAIS, which supported survivors of GBV, and AMI, which offered SRHR awareness and services. Carusel distributed dignity kits and ran SRHR awareness raising sessions, which participants valued as these services are difficult to access in Romania.¹² . However, coordination between protection and SRHR components was minimal, and referrals between partners were not structured.

The evaluation team interviewed the Y4Y's school counsellor trainees on SRHR and GBV. All interviewed counsellors from Romania reported the content was directly usable in class and counselling, citing practical tools they now apply (e.g., "river with crocodiles" moral-dilemma debates, visual card sets to surface emotions/risks, stepwise bullying discussions, role-plays, and decision scenarios). Counsellors said the training helped them speak more confidently and clearly about SRHR and GBV. They also became better at referring students for specialized support—for instance, one counsellor connected a pregnant student to the Y4Y team. Students were more engaged during sessions, especially when activities were led by peer educators, whom they related to more easily than to school staff. To keep the training relevant, counsellors suggested a few improvements. Materials should be adapted for younger grades and distributed to all trainees. They also recommended short refreshers and

¹² Plan International. 18 Months Narrative Report. Romania



mentoring, involving more teachers to handle sensitive topics, and adding modules on inclusion, substance use, and identity.

“For sixth graders, some of the exercises did not fit their developmental level. It would be more effective to have different versions of the same instrument, adapted for age groups, or at least guidance on how to adjust them.”

-IDI, Counsellor, W, Romania

SRHR awareness sessions were especially relevant in contexts where adolescents had almost no access to reproductive health information. During the interviews, two adolescents mentioned that this was the first time anyone explained reproductive health to them. Moreover, they praised the openness of the conversations, which they said was often lacking in their homes.

“I liked contributing to education on a taboo topic in Romania and passing information along to others who may not get it at home. On the way home from school, classmates were discussing sexually transmitted infections and didn’t know much about HIV. Thanks to the peer training, I could explain the difference, transmission, and progression.”

-FGD Participant, W, Romania

Echoed by all partners, the main limitation was not the type of activities offered but their scale. Language classes and psychosocial services were consistently oversubscribed, with demand far exceeding partners’ capacity.

“We had to turn people away from language courses—demand was far higher than what we could cover.”

-KII, Project Partner, M Romania

Moldova

The projects’ relevance was shaped by the limited public investment in state child protection and social services. UNICEF’s 2020 evaluation of Moldova’s child protection system concluded that public financing was *“insufficient to deliver on the child protection strategy, particularly for inclusive services and children with disabilities”*¹³, while a 2023 Country Factsheet by Hope and Homes for Children/CCF highlighted¹⁴ that the national child protection project remained underfunded and called for increased budget allocations to family support. These gaps meant that refugees and vulnerable Moldovan families often lacked access to social services, and psychosocial support. Partners therefore stepped in to fill these functions during the DEC phase 2B.

Case management and referrals, delivered by the partners Ave Copiii became the first and sometimes only entry point for families needing assistance at the border. By using CPIMS+ platform, the partner provided systematic monitoring and follow-up that could be used as a mechanism to support the state authorities.

The Moldova portfolio included activities targeting both children and families. The activities implemented by AiBi, such as the EduTechLab model were highly relevant to both refugee and host-community children’s needs. Focus group participants consistently described the clubs as enjoyable, safe, and supportive spaces that met their desire for structured learning, recreation, and social interaction. These children faced limited access to stimulating activities and psychosocial support, particularly those living in dormitories or low-income households. AiBi’s model effectively addressed these gaps by combining education reinforcement, Romanian language learning, and psychosocial play, allowing children to regain motivation

¹³ UNICEF (2020). *Evaluation of the Child Protection System in Moldova*.

¹⁴ Hope and Homes for Children / CCF (2023). *Moldova Country Factsheet: I*



and routine while promoting inclusion between groups. Children described a strong sense of belonging and confidence emerging from the sessions. They emphasised the value of having a space where they could rest, learn, and interact freely.

CNPAC's interventions were highly relevant to the wider need for community-based psychosocial support in Moldova. At a time when mental health services were limited and mainly institutional, CNPAC's mobile-team model directly addressed access barriers faced by families in both refugee and host communities. As PI reports revealed¹⁵, CNPAC's intervention reached and caregivers in dispersed and rural areas. The organisation's collaboration with local authorities and integration into existing community structures also responded to the recognised need for greater referral consistency and coordination between state and non-state actors. Demonstrated by the indicators, the projects were designed with strong sensitivity to age, gender, and cultural context. At the institutional level, CNPAC's investment in staff training reflected a strategic understanding of Moldova's broader capacity challenges in MHPSS and child protection. Strengthening the skills of its 34 staff members, including 32 frontline workers, addressed the systemic shortage of qualified specialists in the sector and enhanced the organisation's role as a key national actor within the protection network.

Relevance was also reinforced by continuity. Due to DEC-funded projects and the additional four funding allocations throughout the project period, PI and its partners returned to the same communities across phases and had stable funding for longer than expected.

"One project followed another, so trust was built... communities already knew us well, so when needs arose, they felt free to tell us."

- KII, Project Partner, M, Moldova

This repeated presence enabled more accurate needs identification and adaptation – such as adding psychologists to activities when families requested it. Finally, parenting and school-transition activities (summer school, back-to-school activities) were highly relevant, supporting children's adjustment to overcrowded classrooms while reducing caregiver stress.

Another example was the set of trainings delivered by Ave Copiii. These sessions were highly relevant to the participants' roles and capacity gaps, particularly given the rapid expansion of Moldova's child protection workforce in 2023–2024. All interviewed specialists had entered their positions recently, often with backgrounds in law, education, or social work but limited experience in case management or inter-institutional coordination. The training content – focusing on case management, intersectoral collaboration, documentation standards, and communication with vulnerable or refugee families – directly matched these needs. Participants consistently reported that the sessions helped them gain the confidence, structure, and procedural clarity required for daily decision-making. The training's relevance was reinforced by its practical orientation and iterative adaptation. Specialists said trainers asked for feedback during each session and adjusted content to address their expressed priorities – including handling refugee cases, violence prevention, and coordination across mayoral offices, schools, and police. The use of case studies and group exercises mirrored their real work environments, making the sessions "immediately applicable" and "reflective of daily realities."

While relevance was unanimously affirmed, several participants mentioned limited pre-assessment or early consultation on content design. For example, specialists explained that

¹⁵ Plan_DECPh2b_Narrative_UHA22_MOL_Final



training agendas were largely predetermined, and their input was collected only during or after sessions rather than before the curriculum was finalised.

Poland

In Poland, the DEC Phase 2B projects effectively addressed key gaps in child protection, safeguarding, mental health, education, and youth inclusion. While the overall reach of the projects was necessarily limited given the scale of need in the country, their interventions complemented existing services within an overstretched municipal system, where adolescent mental health and social support demands continued to exceed national capacities.

The portfolio's major partner, FDDS implemented activities focused on embedding child protection and safeguarding standards in hospitals and sports clubs, aligning closely with national priorities under the Kamilek Act (2024)¹⁶. Evidence from PIP's internal evaluation on FDDS (December 2024) confirms that the intervention directly responded to institutional gaps in implementing these legal requirements. At the time of project design, few hospitals or youth sport clubs had clear procedures for identifying or reporting abuse, and staff lacked training to recognize early warning signs. By training more than 900 healthcare professionals and 98 sports clubs throughout Poland, the project strengthened institutional readiness and offered practical tools to comply with new standards¹⁷. The content was sector-specific, addressing the distinct risks and behavioural norms in medical and sports environments, which reinforced the project's contextual relevance. However, the same evaluation noted that consultation during design was limited. Frontline staff and coaches were mainly engaged during implementation rather than in shaping tools or training materials, and children's views were not formally sought. As a result, some institutions found the guidance less adaptable to their specific operational contexts. These gaps were later addressed through iterative piloting, feedback from participating institutions, and collaboration with public bodies, which helped refine the tools and align them more closely with national safeguarding standards.

Jedność implemented creative, non-formal education activities for Ukrainian adolescents and youth in Kraków, including theatre, art, leadership, and project-based learning (Polit school¹⁸ or the flight programme). The activities were highly relevant to participants' psychosocial and developmental needs, providing a sense of stability, belonging, and self-expression in a context of prolonged displacement. Young people described Jedność as "a second home," where they felt safe, listened to, and able to make mistakes without judgement – a rare space for rebuilding trust and confidence after upheaval. The mix of artistic, physical, and reflective sessions addressed both emotional wellbeing and social reintegration.

While the approach was strongly participatory in practice – youth described being regularly heard and consulted by facilitators – physical accessibility and outreach to Polish peers remained limited. Participants noted that Polish people "rarely came" to mixed events despite announcements in Polish, and that the centre's location and lack of accessibility

¹⁶ The Kamilek Act (also known as the Act on Counteracting the Threat of Sexual Crime and the Protection of Minors), enacted in Poland on 15 February 2024, introduces strengthened safeguards for children, including new vetting requirements for organisations working with minors and enhanced standards of protection in institutions such as hospitals, sports clubs, educational and leisure facilities. [Kamilek Act- Obtaining Services- Government of Poland](#) Accessed: 22.10.2025

¹⁷ The new standards refer to the child protection procedures introduced under the Kamilek's Act which mandates all institutions working with children—including hospitals, sports clubs, and educational or leisure facilities—to establish safeguarding policies, vet staff against the national sex-offender register, train employees in identifying and reporting abuse, and create safe reporting mechanisms for children. [Poland Insight – Child Protection Standards in Poland](#) Accessed: 22.10.2025

¹⁸ The organisation refers to the educational initiative in which students gain knowledge and skills by working collaboratively on real-world projects over an extended period.



features (stairs, no elevator) posed barriers for mothers with strollers or people with disabilities.

“Polish people rarely come to our events at all – they’re hard even to find. Even if we post in Polish, run ads in Polish – they just don’t come. We wish to have more Polish friends.”

-FGD Participant, W, Romania

A distinctive feature of the Poland portfolio was that PI directly implemented activities, unlike in Romania and Moldova. PI focused on capacity development with local organisations and on community-based child protection activities.

In Poland, the portfolio included both direct support to children and youth, and their parents/caregivers and more systemic activities aimed at improving psychosocial and educational environments. For example, CEO implemented a project focused on developing and piloting socio-emotional learning (SEL) resources for teachers and adolescents, including short films, animations, and workshops promoting emotional literacy and wellbeing in schools. The intervention was highly relevant in the Polish context, where emotional education was assessed less apparent in formal curricula. According to the partner, psychologists often report low preparedness to address stress, anxiety, and trauma among refugee and host-community students. CEO’s community assessment, conducted during project inception, confirmed these gaps: even in relatively well-resourced areas such as Poznań, many teachers felt “not equipped to tackle emotions in schools.” By targeting this capacity gap, the project directly responded to a system-level need. As another example, FDDS implemented an approach that was aligned closely with the needs of children and caregivers exposed to violence, trauma, or psychosocial distress. The organisation provided multi-layered services through its Child Advocacy Centres (Warsaw, Gdańsk, Starogard Gdański) and 116 111 Helpline. The individual and group therapy, psychiatric consultations, and trauma-informed caregiver support directly addressed identified protection gaps for displaced and host community families. Moreover, FDDS expanded access by partnering with local CACs in Wrocław, Głogów, and Olsztyn, which resulted expanding its geographical reach.

PMF designed its support model around the changing situation of refugee children and families. It offered psychological and psychiatric consultations, school-based resilience programmes (ReSET, WISE), and case management for vulnerable households, while introducing prenatal classes, midwifery consultations, and infant first-aid workshops when demand among refugee mothers rose. Creation of the Warsaw Multicultural Centre (2025) provided a sustainable response to reduced state housing and integration support. Its flexibility in adapting group formats, redistributing funds to meet service gaps, and maintaining psychosocial support amid rising anti-refugee rhetoric shows that programming remained grounded in real-time needs and contextual shifts

Relevance was further strengthened by the participatory design of learning materials. Teenagers were engaged in focus groups, testing sessions, and even acted in the films, which allowed their perspectives to shape the content and format of the resources. This approach enhanced ownership and ensured that materials reflected young people’s lived realities.



EQ2 How were the different needs and views of the target groups were taken into consideration in the design and delivery of activities?

Romania

Partners in Romania described a strong emphasis on tailoring activities to the expressed needs of different groups, while also adapting services as those needs evolved. This was achieved through a combination of prior expertise, ongoing consultations with communities, and the flexibility provided by PI. Across the portfolio, the design of activities showed a commitment to inclusion across gender, age, disability, and residential status. However, the activity reporting was not always disaggregated. PI reported this was because disaggregations were not required by the DEC output tracker reporting template.

Women and girls were the most prioritized focus for both refugee and host communities. For example, one partner explained that PI's support allowed them to sustain and expand services at their long-running counselling centre for survivors of domestic violence. Women's feedback was collected through satisfaction questionnaires as well as informal discussions recorded in case files, ensuring their voices shaped the quality and scope of support.

Adolescents and young people were also prioritized. Y4Y reported that before launching activities, they undertook an extended process of documentation, consultation, and learning in UNHCR coordination groups. They reported that this helped them understand how best to address sensitive SRHR issues in the Romanian context. The interviews revealed that the consultations were effective as it resulted in alignment to the needs. They adopted youth-led approaches such as the Intimisfera exhibition, which combined art and education to make sexuality and reproductive health accessible.

"At Intimisfera we have an exhibit called "The Fingerprint of Sexuality," which explores different sexualities and ends with the idea that we're all made of the same "stuff"—we're all human. Here we also run an activity on types of abuse, including harassment—what it is, why it isn't OK, and how it shows up in society."

-FGD Participant, M, Romania

Persons with disabilities and older people were considered through both physical modifications in the community centres? and changes in services? delivery models. Some partners provided online legal and psychosocial counselling when premises were not accessible, while others invested in ramps and accessible spaces, which are appropriate needs-based adaptations.

Y4Y explained the structural barriers Roma women and girls faced in accessing SRHR and gender equality programming. Facilitators played an important role in supporting Roma participants, helping them navigate services and overcome initial hesitation to engage in activities. This approach helped prevent exclusion and instead promoted participation, inclusion, and stronger connections across cultural differences.

Although partners engaged actively with participants, accountability practices remained mostly informal and varied across organisations. This approach worked reasonably well in day-to-day interactions, but the evaluation found limited evidence of the more structured elements expected under CHS—such as documented follow-up, and visible communication back to communities. PI reported sharing its own feedback channels through the partners, however, did not receive enough feedback. These gaps did not translate into reported concerns from participants, but they did make the process harder to demonstrate. Simple steps such as introducing light documentation tools, clarifying who follows up on feedback,



and routinely sharing back decisions with communities would strengthen the full accountability cycle.

“We note comments from families during activities, but we don’t have a way to track them or close the loop.”

-KII, Project Partner, M, Romania

Moldova

Rather than relying on large-scale or stand-alone needs assessments, most partners drew on ongoing interaction and direct observation while assessing the needs. For all interviewed partners, trust and continuity were central to how needs were identified and addressed. Partners emphasised that their proximity to communities – both geographic and relational – enabled them to detect needs early and adapt support as conditions evolved.

Their longstanding engagement with local social services, schools, and community groups created the basis for open dialogue and feedback, particularly with refugee and vulnerable host families. PI staff shared a similar perspective, noting that local partners’ embedded presence allowed for a more accurate understanding of community priorities and a more sensitive response to gender, age, and displacement-related vulnerabilities.

Across the portfolio, this proximity informed both the design and delivery of activities. Needs assessments were often iterative, combining formal consultations with continuous observation and informal feedback channels such as parent groups, community meetings, and online communication. This approach meant that interventions – from child protection and psychosocial support to education and SRHR activities – remained aligned with community priorities and responsive to emerging needs.

According to the partners, continuation of engagement across project phases helped partners build familiarity and credibility with both project participants and authorities. When needs shifted, people felt comfortable communicating them directly to partner teams, resulting in adjustments were possible.

“Parents asked if psychological support could be provided again, so we reintroduced it into the project”.

KII, Project Partner, W, Moldova

Activities were further adapted using consultation mechanisms such as child-friendly questionnaires, adult surveys, and focus group discussions. These allowed children to express what they enjoyed or disliked in activities, and adults to raise more practical concerns. During the interviews, children in Bălți (AiBI) noted that the facilitators were responsive to their needs.

“They asked us what to bring, what treats, candies, cookies. And then they brought them.”

FGD Participant, Child, Girl, Moldova

Similarly, in the child protection portfolio, AVE Copiii engaged closely with the Ministry of Labor and Social Protection (MoLSP), contributing evidence and recommendations drawn from local-level practice. Through the development of policy materials on capacity building and intersectoral cooperation in child protection, the partner ensured that lessons from community implementation were reflected in national reform discussions under the RESTART Strategy. The validation of these materials with the MoLSP, planned for mid-2025, represents an effort to link project learning with broader system strengthening and government ownership.



Poland

In Poland, activities were shaped through continuous consultation with children, adolescents, caregivers, and frontline staff. Partners used surveys, focus groups, and informal discussions to define priorities, and then adapted sessions in response to participant feedback. Due to the nature of the projects and the close relationships with the communities, partners mostly relied on verbal communication to assess the needs.

“We used non-formal methods... to collect needs before launching the program. We directly went into the community.”

KII, Project Partner, W, Poland

Children, adolescents and youth in Poland were not passive recipients but contributed to shaping activities through direct consultation and feedback. Facilitators asked children about preferences for recreational sessions, creating a sense of ownership over the projects. Adolescents highlighted that structured feedback mechanisms, such as anonymous online forms, were genuinely acted upon, with timetables and activities adjusted accordingly. Beyond logistics, young people also experienced spaces as psychologically safe, where they could express ideas, make mistakes, and engage in open dialogue without judgement.

“We had a Google Form where feedback could be left anonymously... the schedule changed according to what we said.”

-IDI, Project Participant, Youth, Women, Poland

EQ3 Were the activities and outputs of the program consistent with the overall goal and desired impact of its objective?

Romania

PI's DEC Phase 2B projects in Romania centred on protection, psychosocial wellbeing, SRHR, and socio-economic inclusion. Activities were designed within these areas, combining legal and administrative assistance, MHPSS, and social integration support for both refugees and host-community members.

Language classes and legal counselling were designed to remove barriers to integration, while psychosocial support addressed the stress and uncertainty facing families. Protection objectives were pursued through GBV and SRHR programming.

Evidence from primary data supports this alignment, with parents noting visible improvements in their children's emotional wellbeing and reduced tension.

“Our children stopped fighting as a result of the project.”

-KII, Project Partner, M, Romania

Moldova

In Moldova, activities on school transition (parenting support, psychosocial sessions, back-to-school initiatives) were fully consistent with objectives that emphasised educational continuity.

However, the intended effect in some cases – smoother school enrolment – was only partly realised. This was not due to a lack of delivery but because the objective relied on an



assumption about the state education system’s capacity. Moldova’s schools, already facing overcrowding and chronic underfunding, could not always absorb refugee children, even when parents were prepared and NGOs provided additional support.

“We helped the parents prepare the paperwork, but the school simply said there were no more places.”

-KII, Project Partner, M, Moldova

Poland

In Poland, the portfolio was well harmonized across psychosocial, educational, and protection activities, creating a coherent support system for refugee and host communities. Interventions at school, family, and community levels complemented each other – emotional education materials, youth mentoring, and family counselling reinforced shared goals of inclusion and wellbeing. This consistency helped translate project objectives into visible outcomes such as improved confidence, participation, and emotional literacy. However, the scale of activities remained modest compared to the high nationwide demand for psychosocial and educational support, meaning that effectiveness relied more on depth and quality than coverage.



Efficiency

Summary



The projects were implemented with a high level of efficiency, supported by clear coordination between PI and partners, adaptive management systems, and responsive decision-making processes. PI's flexible approach to forecasting, procurement, and financial management allowed rapid adjustments to changing circumstances while maintaining transparency and accountability.

Partners noted that this flexibility enabled timely fund reallocations, swift recruitment of specialists, and continuity of service delivery. However, heavy workloads across partner teams placed considerable pressure on staff, requiring continuous effort to sustain implementation quality. Despite these constraints, resources were managed effectively, and activities were delivered on time and to a consistently high standard.

EQ4 Were the program activities delivered on time, to the right people, of the right quality as set out in the program documents and as reported?

The DEC Phase 2B portfolio was largely delivered on time and reached the intended target groups across Romania, Moldova, and Poland. Partners showed strong adaptability—adjusting delivery schedules, modifying modalities, and reallocating budgets when necessary. In several cases, activities continued beyond the official project period, sustained through volunteer engagement or complementary funding.

Minor administrative delays in contracting or procurement reportedly occurred but did not affect the overall continuity of services. Across contexts, partners reached their core target groups—children, youth, and caregivers affected by displacement—while also including vulnerable host-community members.

Quality standards were maintained. Flexible budget reallocations (within budget categories) allowed partners to channel resources where they were most effective (such as prioritising Ukrainian-language helpline support in Poland).

Project participants consistently reported improvements in psychosocial well-being, protection, and education access. None expressed dissatisfaction; most described the support as essential and respectful. PI partners' interventions were highly relevant and responsive to participants' needs; therefore, the ending of certain activities understandably caused disappointment. Some participants in the PFM AAR noted that the ending of certain (e.g., cooking workshops) created frustration.¹⁹ During the primary data collection of this evaluation, project participants reported similar concerns (English classes with adults or the dance classes). Additionally, two people who received the in-kind support Romania described that the abrupt closure of the Carousel food and kits assistance was distressing.

“Probably, the only challenge was that it ended suddenly. It stopped very suddenly, without warning or preparation. It was like giving a child candy every day, and then suddenly taking it away without explanation. This situation left us feeling lost.”

IDI, Project Participant, W, Romania

¹⁹ AAR PFM - 11 August-2025



EQ5 Considering the operational context, including the humanitarian nature of the response and local conditions in the Country of implementation, to what extent were resources used efficiently to achieve the program's objective?

Romania

Efficiency in Romania was closely linked to trust-based collaboration. Monthly meetings were viewed as constructive rather than bureaucratic, allowing issues to be discussed openly. For instance, when a training could not be held as planned, PI requested rescheduling and approved the changes suggested by the partner. This partnership model prevented the inefficiencies often caused by rigid donor compliance. Instead, it created an environment where partners could adapt activities based on evolving needs and operational realities without fear of financial or reputational repercussions. Partners reported that the absence of punitive measures encouraged timely communication and joint problem-solving, which in turn safeguarded programme continuity and resource use. This flexibility, combined with mutual accountability, proved instrumental in maintaining both pace and quality of delivery.

Compared with donors offering multi-year grants, partners with shorter implementation cycles reported that they needed to invest in more frequent adaptation. During the DEC 2B period (Sep 2023–Aug 2025) additional funding rounds were introduced periodically. These enabled partners to expand activities, reach new locations, and engage additional organisations, strengthening the overall responsiveness of the response. However, each new allocation required revisions to plans, budgets, and reporting, which increased administrative workload and coordination demands. While this adaptability supported timely delivery, it also placed pressure on staff capacity and reduced efficiency at the organisational level.

Moldova

Efficiency in Moldova was influenced by both external and internal factors. Some partners initially had issues with contextualising the materials, though most of these were resolved by Phase 2B. Some partners had challenges (such as internal restructuring within their organisations) which caused administrative delays in staffing and reporting. Despite these challenges, resources were ultimately used effectively.

Procurement was described as smooth and enabling. Unlike other donors with lower ceilings, PI's rules allowed partners to directly contract specialists when needed. For example, the €2,500 direct procurement ceiling meant organisations could rapidly hire qualified trainers for the PALS programme without launching a competitive tender that would have taken weeks. This procedural flexibility saved time and ensured quality by securing experienced facilitators.

Poland

In Poland, efficiency was shaped by a balance of strong oversight and operational flexibility. Structured monthly reporting meetings allowed PI to closely monitor activities without imposing rigid control. Partners described these sessions as useful for surfacing small issues.



In many examples, activities were rescheduled or readjusted (to take account of changing needs or context changes), rather than cancelled, ensuring that resources were not wasted.

In one example, one partner admitted to a miscalculation in planning training attendance because the proposal was written in January without accounting for the high number of bank holidays in May. Attendance was lower than expected, but this was not treated as a failure of efficiency. Instead, PI's willingness to accept the explanation and allow adaptation was praised.

Another source of efficiency was the ability to make rapid adjustments in resource allocation. Funds could be reallocated between budget lines to better respond to actual needs, and partners reported that such modifications were approved without lengthy delays. In some cases, however, the short duration of some PI projects was seen as a limitation. For example, CEO implemented a six-month project and Jednosc managed a similar six-month mini grant supporting refugee youth through mentoring and psychosocial activities, which was later extended by one month. In both cases, the brevity of the funding cycle limited the extent to which results could be observed during implementation. While partners valued the responsiveness, they also noted that short projects increased administrative and reporting burdens compared to multi-year frameworks, reducing efficiency at the organisational level.

PI aimed to regularly measure the efficiency through an indicator review, however, this was not possible for some partners in Moldova and Poland as their outputs were only reported at the end /or even after the project period. For instance, one partner had set a limited number of targets, and while few were achieved within the project timeline, most were met only towards its completion, which was only due to the nature of the project and its design.

"Because of the nature of the project - resources development - we were only able to report first indicators mid-project, and most indicators at the end. PI was worried, but helpful. In the end all indicators were over delivered."

KII, Project Partner, W, Poland

The efficiency observed by partners directly aligns with PI procurement framework. The Supply Chain Operations Manual²⁰ defines procurement thresholds that balance speed and accountability: direct purchase for small values, three written quotations for medium purchases, and formal tenders for the largest procurements. Value for Money (VfM) is defined not as lowest price but as the "optimal balance of cost, quality, and availability," ensuring that efficiency includes effectiveness and timeliness.

At the same time, several partners highlighted that maintaining efficiency came at a cost to their teams. Although the situation had improved since the initial phase of the Ukraine response, staff continued to face demanding workloads and limited human resource capacity. One organisation described operating with around seventy field staff while struggling to recruit in a competitive labour market, noting that "everyone was hiring" and that they had to choose between maintaining essential functions or hiring a dedicated M&E specialist. Another reported that internal restructuring at the start of the project period increased administrative tasks and stretched management capacity. One partner noted that the decline in the funding resources created additional reporting and proposal demands that reduced organisational efficiency. Others referred to high staff turnover on both sides during the early months, which required constant adaptation and re-briefing. While volunteer and youth-led teams helped sustain activities, several partners said they were already working at full capacity, with limited predictability to retain trained professionals or expand their coverage.

²⁰ GLO-SCOM-Supply_Chain_Operations_Manual-Final-IO-EN-Jan2022



Effectiveness

Summary



The programme met, and in many cases surpassed, its targets across all three countries. It stayed responsive as needs evolved, with partners adapting activities quickly during each new DEC funding round. Because these allocations allowed partners to scale up their work, many indicators were overachieved.

In some areas demand was also higher than anticipated, and several of the original targets had been set cautiously before the scale of need and additional funding became clear. As a result, the result targets became less useful for judging effectiveness over time.

In all three countries, there were almost no qualitative or satisfaction-based indicators in Phase 2B, and PI did not measure participant perceptions of service quality or relevance through its framework. Qualitative or satisfaction-based data were largely absent in Phase 2B, meaning the evaluation can speak to the scale of delivery but less to how people experienced or benefited from the support. Despite this, the small groups interviewed as part of this evaluation were largely satisfied with the support provided by PI's local partners.

Implementation was extensive, and partners delivered a wide range of activities while needing to scale up rapidly as new funding became available.

EQ6 – What has contributed to the successful/unsuccessful implementation of project activities? What are the lessons learned? What were the major internal and external factors influencing the achievement or non-achievement of the objectives, and how did the project adapt to these challenges?

Romania

The effectiveness of implementation in Romania was largely driven by the strong specialisation and complementarity among partners, which allowed services to reach diverse groups – from survivors of GBV to adolescents and parents in need of psychosocial support. Partners operated in distinct yet reinforcing domains, creating a balanced ecosystem of child protection, SRHR, and mental health services. This structure helped maintain continuity despite turnover and administrative challenges. Adaptation and responsiveness were also critical to success. Partners adjusted activities to the changing national context – such as reduced state support and rising living costs – by expanding psychosocial services, introducing supermarket vouchers (DEIS), and incorporating online sessions to sustain participation. Interventions like community centres and outreach models ensured that support remained accessible for both refugees and host communities, especially for women and children with mobility or legal constraints.

However, coordination between thematic areas remained uneven. While linkages between SRHR, child protection, and MHPSS were strengthened within organisations, cross-partner referral pathways were informal and not systematically tracked.



From an effectiveness standpoint, the main lesson was the value of localisation and flexible partnerships – national actors already trusted by communities implemented activities efficiently and were able to adapt programming as needs evolved. Going forward, improved inter-partner coordination (such as the Y4Y training provided to Carusel staff in SRHR) and clearer referral mechanisms could enhance coherence and reinforce the impact of Romania’s holistic protection model.

Moldova

Implementation in Moldova benefited from a number of enabling factors that directly shaped project success. Locating EduTechLab centres inside schools provided both visibility and sustainability. School administrations became natural allies, ensuring children attended regularly and helped normalize participation: one school director noted that “children still arrived in May, even during exam season, asking if the centre would be open.” This institutional anchor distinguished Moldova from other contexts where spaces had to be rented or newly established.

The main lesson learned from Moldova is that continuity, localization, and flexibility were decisive in ensuring activities met needs. Conversely, systemic fragility and donor-driven project cycles limited depth and coverage. Partners emphasised that without longer-term frameworks, efficiency gains risked being lost between cycles.

Poland

The path to effectiveness in Poland lay in the adaptations made – such as modality changes, scope adjustments, and maintaining quality continuity.

Partners highlighted that effectiveness was strengthened by responsive design and holistic interventions. The projects targeting Ukrainian youth (for instance the Jedność Foundation) built reportedly clear psychosocial and behavioural outcomes because they combined emotional support, creative expression, and structured social interaction. Activities like theatre, yoga, and leadership mentoring allowed adolescents to process stress, rebuild confidence, and form new peer relationships, addressing both emotional recovery and community integration at once.

Partners demonstrated strong adaptability throughout implementation, making timely adjustments to sustain delivery and quality despite external constraints. Under time pressure, several partners replaced planned focus group discussions with online surveys to reach a wider audience, while others rescheduled activities affected by public holidays or poor weather instead of cancelling them. As needs evolved, the project scope was also refined: some partners shifted from broader outreach to deeper, longer-term casework for families, while others expanded eligibility beyond Ukrainians to include other migrant groups. However, this represented only a small proportion of the overall caseload, as the main target group remained people with refugee experience from Ukraine. The Individual Protection Assistance (IPA) was introduced to meet immediate needs, and intercultural assistants were embedded in schools to support integration. Quality continuity was maintained through thoughtful adjustments—such as retaining a single video producer to preserve character consistency across CEO’s SEL films and adding voice coaching sessions to strengthen the impact of Jedność theatre activities.

Across partners, a clear lesson emerged on the value of flexibility and foresight in design. Approval processes should remain light and paired with regular “no-surprises” check-ins, allowing partners to adapt without bureaucratic delay. Planning around the school calendars, or the seasons—accounting for exam periods, holidays, and weather-sensitive seasons—was seen as essential for maintaining attendance and momentum. Across all partner projects,



demand for psychosocial and educational support continued to exceed capacity, though flexible reprogramming and local partnerships allowed gaps to be minimized.

EQ7 – To what extent were the project’s objectives achieved?

The DEC disbursed several funding allocations to member organisations over the course of implementation. PI UK reported that they received eight allocations in total. Each new funding stream required adjustments in design, scope, and delivery timelines, yet the corresponding programme targets were rarely revisited. As a result, later activities were delivered under revised budgets but within the same framework contributing to the high achievement rates observed across the portfolio.

Romania

The Romania portfolio largely delivered against its targets, with most outputs meeting or slightly exceeding their planned figures. Despite the high number of indicators, most of them were achieved. However, a number of indicators showed exceptionally high overachievement, suggesting that targets were set conservatively during the planning phase and did not reflect the scale of emerging demand—particularly in mental health, SRHR, and youth employability components.

Table 6: DEC-2B Overachieved Figures Romania

Output	Output	Indicator	Output target	Result	Achievement
A1.1.1.	Safe Spaces are provided for children, adolescents, women and girls	Number of children aged between 3 to 12 years participating in supervised drop-in play sessions and artistic activities conducted by trained staff	195	445	228%
A1.1.2	Safe Spaces are provided for children, adolescents, women and girls	Number of youth participating in youth activities	464	866	187%
A1.2.1	Girls, boys and their caregivers have access to information on CP and GBV risks and support services	Number of individuals who have received information and support service guidance	500	948	190%





A1.3.2	Women and girls will receive dignity kits both through shelter and mobile teams	Number of girls, boys, women and men receiving hygiene products	1615	2538	157%
A1.5.1	Adolescents, young people, adults and staff members receive training, education and materials about SRHR, GBV, and sexual harassment issues	Number of peer educators trained in SRHR education	60	67	112%
A1.5.3	Adolescents, young people, adults and staff members receive training, education and materials about SRHR, GBV, and sexual harassment issues	Number of school counsellors trained in preventing (sexual) harassment and violence & GBV	60	68	113%
A1.5.4	Adolescents, young people, adults and staff members receive training, education and materials about SRHR, GBV, and sexual harassment issues	Number of social, education, humanitarian staff trained in basic SRHR	12	15	125%
A1.5.5	Adolescents, young people, adults and staff members receive training, education and materials about SRHR, GBV, and sexual harassment issues	Number of workshops held	1	1	1100%
		Number of adolescents	20	77	385%





A1.5.6	Adolescents, young people, adults and staff members receive training, education and materials about SRHR, GBV, and sexual harassment issues	Number of school adolescents reached with SRHR education, sexual harassment and GBV related materials and activities	900	1188	132%
A1.5.7	Adolescents, young people, adults and staff members receive training, education and materials about SRHR, GBV, and sexual harassment issues	Number of out-of-school adolescents and youth reached with SRHR materials and contraception	500	817	163%
A1.5.8	Adolescents, young people, adults and staff members receive training, education and materials about SRHR, GBV, and sexual harassment issues	Number of individuals of all ages reached with SRHR education with an artistic approach through Intimisfera	1029	1151	112%
A1.6.3	Adolescents, young people, adults and staff members receive training, education and materials about SRHR, GBV, and sexual harassment issues	Number of individuals at SRH/GBV risk identified and referred to case management services	150	246	164%





A1.6.5	Adolescents, young people, adults and staff members receive training, education and materials about SRHR, GBV, and sexual harassment issues	Number of videos created for health education and SRHR awareness raising campaign	1	2	200%
B1.1.1	Adults, children, young people and staff members receive basic and specialized humanitarian support	Number of individuals receiving PSS services	317	334	105%
B1.1.2	Adults, children, young people and staff members receive basic and specialized humanitarian support	Number of individuals receiving basic humanitarian support	375	750	200%
D5.2.1	Practical skills training for young people	No. of individuals trained in [employability skills] i.g Romanian language	2100	3130	149%
D5.3.1	Support for young people to engage with employment and education opportunities through online tools (podcasts, website, online resource)	No. of individuals reached by the podcasts series	7	10	143%
D5.3.2	Support for young people to engage with employment and education opportunities through online tools (podcasts, website, online resource)	No. of individuals accessing university or job search resources on the website	1942	2742	141%



D5.3.3	Support for young people to engage with employment and education opportunities through online tools (podcasts, website, online resource)	No. of organisations accessing the career counseling manual translated to Ukrainian	12	20	167%
D5.3.3	Practical skills training for young people	No. of individuals (learners and educators) accessing the Romanian language manual	190	214	112%

All the above indicators were exceeded, reflecting partners' strong delivery capacity and adaptability. The repeated reallocations during the DEC 2B period had enabled expansion to new locations and additional participant groups, which pushed results beyond initial targets and plans. As targets were repeatedly raised, their function as meaningful benchmarks gradually diminished, with many indicators overachieved to a point where proportional interpretation is difficult. This reflects the and responsiveness but also shows that the scale of expansion eventually outgrew the original results framework.

Table 7: DEC-2B Achieved Figures in Romania

Code	Output	Indicator	Output target	Result	Variance
A1.1.3	Safe Spaces are provided for children, adolescents, women and girls	Number of adolescents and parent/caregivers with children (aged 10-19) benefitting from Parenting and Life Skills (PALS) program	30	30	0
A1.3.1	Women and girls will receive dignity kits both through shelter and mobile teams	Number of girls/women receiving dignity kits	250	250	0
A1.4.1	300 women, girls, and elderly survivors of domestic violence will gain improved access to specialized services, including social, legal, and psychological counselling, court representation, and support groups through ANAIS Association's Centre.	Number of individuals (women, girls, elderly) accessing social, legal, and psychological services	412	412	0



A1.6.6	Women and girls will receive SRHR supplies through community centres	Number of girls and women receiving SRHR supplies	40	40	0
B1.1.5	Adults, children, young people and staff members receive basic and specialized humanitarian support	Number of HHs receiving winterization/hygiene NFI kits	485	485	0
B1.1.4	Adults, children, young people and staff members receive basic and specialized humanitarian support	Number of individuals receiving food assistance in shelter and community settings	1615	1615	0
C1.1.1	Carousel team management will improve their capacity to manage human resources	Number of staff trained in human resources management	3	3	0
C1.2.1	Civil society staff improve capacities to raise awareness of SRHR issues amongst adolescents and caregivers	Number of civil society organisation staff that are training on methods for raising awareness of SRHR	15	15	0

PI and its partners in Romania achieved all seven targets exactly as planned during the Phase 2B. There were no deviations for these indicators in general. These outputs focused on the provision of essential services and materials – such as dignity kits, SRHR supplies, and hygiene kits – as well as access to specialised support for survivors of violence.

Table 8: DEC-2B Underachieved Figures in Romania

Code	Output	Indicator	Output target	Result	Variance
A1.2.2	Girls, boys and their caregivers have access to information on CP and GBV risks and support services	Number of individuals accessing GBV services and other specialized services	55	36	66%
A1.5.2	Adolescents, young people, adults and staff members receive training, education and materials about SRHR, GBV, and sexual harassment issues	Number of peer educators trained in preventing (sexual) harassment and violence & GBV	20	16	80%



A1.6.1	Adolescents, young people, adults and staff members receive training, education and materials about SRHR, GBV, and sexual harassment issues	Number of individuals receiving medical and/or menstrual hygiene products	200	176	88%
A1.6.2	Adolescents, young people, adults and staff members receive training, education and materials about SRHR, GBV, and sexual harassment issues	Number of individuals participating in informative sessions on SRH/GBV issues	400	163	41%
A1.6.4	Adolescents, young people, adults and staff members receive training, education and materials about SRHR, GBV, and sexual harassment issues	Number of individuals accessing SRH/GBV services through the helpline	500	423	85%
B1.1.3	Adults, children, young people and staff members receive basic and specialized humanitarian support	Number of children, parents/caregivers, and adult siblings receiving psychosocial support through the Child-Friendly Space (CFS) within the shelter	100	56	56%
B1.1.6	Adults, children, young people and staff members receive basic and specialized humanitarian support	Number of individuals satisfied with the quality of the shelter's infrastructure and facilities. Number of individuals provided with accommodation	100	99	99%
D5.1.1	Support for young people to engage with employment	No. of individuals registered for further education	35	18	51%
D5.1.2	Support for young people to engage with employment	No. of individuals found employment	35	12	34%
D5.2.2	Practical skills training for young people	No. of individuals [young people] trained in [employability skills]	150	144	96%

→ The underachievement reflected in several output indicators was largely due to external and timing-related factors rather than poor delivery. The AMI component (covering SRHR information sessions, hygiene product distribution, and helpline access) explains several of the shortfalls – particularly A1.6.1, A1.6.2, and A1.6.4. According to the narrative report, AMI experienced delays in implementation, especially within its communication and awareness campaign, due to internal approval challenges and staff



turnover in early 2025 and resulting in lower reach for SRHR sessions and medical product distribution.

- Other protection indicators such as A1.2.2 (GBV service access) and B1.1.3 (PSS for children and caregivers in shelters) were influenced by contextual and policy shifts. Legislative changes in Romania led to the closure of Carusel’s emergency shelter at the end of 2024, reducing the number of new GBV cases and children reached through Child-Friendly Space activities. The project subsequently focused on outreach and follow-up rather than volume-based delivery, explaining lower achievement levels.
- The employment-related shortfalls (D5.1.1 and D5.1.2) under FNT are explicitly discussed in PI’s narrative report²¹ while many youth received training and counselling, few could secure jobs or register for further education due to structural labour barriers and the short duration of project funding. FNT notes that these were *longer-term integration outcomes*, unlikely to be achieved within a single-phase project cycle.

Overall, PI noted that the underachievement were linked to contextual constraints and sequencing, not underperformance. Despite these challenges, partners-maintained service continuity and achieved strong results in awareness, capacity development, and individual support.

Moldova

The DEC Phase 2B programme in Moldova achieved a very high degree of objective fulfilment, with most outputs and outcome indicators surpassing their planned targets.

Table 9: DEC-2B Overachieved Figures in Moldova

Code	Output	Indicator	Output target	Result	+ / -
A2.1	Quality assurance of quality child protection support to girls and boys at risk	No. of children at risk identified and referred to case management services.	400	976	244%
A3.1	Capacity building activities are delivered to local specialists.	No of. local specialists trained in child protection, MHPSS, and territorial roles and responsibilities	40	51	128%
A4.1	Border and community monitoring/focal points support the identification and referral of UASC	No. of cases newly identified and registered in Primaro/CPIMS and by focal points	2000	5353	268%
B1.1	Quality psychosocial services are available through Mobile Teams for refugee children and their caregivers affected by the migration crisis in Ukraine	No. of children accessing MHPSS protection programmes	1032	2056	199%
B2.1	Quality psychosocial services provided through Mobile Teams for caregivers of children affected by migration crisis in Ukraine	No. of caregivers accessing MHPSS in protection programs	400	520	130%

²¹ Plan_DECPh2b_Narrative_UHA22_ROM_Final



B3.1	Children’s reporting on rights to opinion, hygiene and sanitation, sexual education, including emotional intimacy	No. of children consulted during the Children’s Platform activities	25	63	252%
C2.1	Enhance the educational integration of Ukrainian refugee children into the Moldovan school system through summer camps and readiness activities.	No. of children who participated in the Summer School Activities	200	240	120%
C3.1	Enhance the educational integration of Ukrainian refugee children into the Moldovan school system through summer camps and readiness activities.	No of children attending activities in EduTech Labs and Ludoteca	1000	1216	122%
C4.1	Development of educational integration of Ukrainian refugee children into the Moldovan school system through PALS capacity trainings	No of participants reached by PALS capacity trainings	300	624	208%
D1.2	Comprehensive SRHR manual developed and disseminated among vulnerable population and CSOs	No of CSO partners engaged in contextualization of SRHR training sessions according to the SRHR manual	2	7	350%

The project achieved its objectives to a high degree. The initial targets were based on the first DEC allocation and reflected the available resources at that time. As additional DEC funding was received through eight further rounds, the programme expanded in scale and scope.

Partners described learning through practice—adjusting content to community needs, co-designing psychosocial activities with beneficiaries, and maintaining engagement despite high staff turnover and shifting priorities. Activities such as the children’s platform, summer camps, and community outreach were described as meaningful, with some continuing voluntarily after project closure.

Table 10: DEC-2B Achieved Figures in Moldova

Code	Output	Indicator	Output target	Result	+ / -
A1.1	Develop advocacy material for improved implementation of relevant legislation	No. of individuals (specialists and members of multidisciplinary teams) informed about child protection and sustainable practices towards refugee children through policy papers created by this project	2	2	0
C1.1	PUP training program is delivered to parents and caregivers	No. of parents and caregivers trained in PUP	17	17	0



C5.1	Equipping youth centre with equipment and necessary materials for social cohesion activities	No. of centres equipped	1	1	0
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In three indicators, PIM achieved exactly the target that was set.

From a protection standpoint, producing and disseminating two advocacy materials met the immediate target but represents a minimal contribution to systemic change. The activity's value depends less on the number of materials and more on their uptake by child-protection actors, which PIM considers after the project.

Table 11: DEC 2B Underachieved Figures in Moldova

Code	Output	Indicator	Output target	Result	Achievement
B3.1	Frontline staff working in target communities are supported through training, coaching, and mentoring	No. of frontline staff trained in integrated MHPSS, including PFA, psychosocial support, protection, child safeguarding, and PSEA topics	18	15	83%
D1.1	Comprehensive SRHR manual developed and disseminated among vulnerable population and CSOs	No of participants reached by SRHR contextualized manual	230	190	-17%
D1.3	Comprehensive SRHR manual is developed and disseminated among vulnerable population and CSOs	No of individual trained in SRHR topic areas	50	46	92%

A small number of outputs fell below targets.

- B3.1 - Training of frontline staff (83%) The minor shortfall is explained by timing and external scheduling constraints. The training took place towards the end of the school year, when many teachers were engaged in exam preparation and administrative duties. This limited participation rather than delivery capacity.
- D1.1 and D1.3, the piloting and roll-out of the SRHR manual were extended until August to finalise the design, printing, and dissemination stages²². PI staff explained that this was due to some child friendly spaces closing right before the implementation of the project; together with the refugee accommodation centres they were located in.

Poland

According to PiP final output tracker, most indicators were over-achieved, reflecting both the strong performance of partners and high demand. Nearly all outputs were extremely overachieved – some by 800-1200% – yet this cannot be read as over-performance. It

²² Plan_DECPh2b_Narrative_UHA22_MOL_Final



reflects the persistence of demand in a setting that is no longer an emergency but not yet stable enough for systems to cope alone.

Table 12: DEC-2B Overachieved Figures in Poland

Code	Output	Indicator	Target	Result	Achievement
Output 1.1	30 children receive quality protection support through the FDDS CACs	Number of children who receive quality protection support through the FDDS CACs	10	35	350%
Output 1.1	30 children receive quality protection support through the FDDS CACs	Number of children who receive quality protection support through the FDDS CACs	10	81	810%
Output 1.1	30 children receive quality protection support through the FDDS CACs	Number of children who receive quality protection support through the FDDS CACs	10	126	1260%
Output 1.3	20 adults receive quality protection support to parents offered by FDDS CACs	Number of adults receive quality protection support to parents offered by FDDS CACs	4	41	1025%
Output 1.3	20 adults receive quality protection support to parents offered by FDDS CACs	Number of adults receive quality protection support to parents offered by FDDS CACs	8	69	863%
Output 1.3	20 adults receive quality protection support to parents offered by FDDS CACs	Number of adults receive quality protection support to parents offered by FDDS CACs	8	87	1088%
Output 2.1	240 children receive quality protection support to children via cooperation with local partners and CACs	Number of children who receive quality protection support to children via cooperation with local partners and CACs	80	101	126%
Output 2.1	240 children receive quality protection support to children via cooperation with local partners and CACs	Number of children who receive quality protection support to children via cooperation with local partners and CACs	80	193	241%
Output 2.1	240 children receive quality protection support to children via cooperation with local partners and CACs	Number of children who receive quality protection support to children via cooperation with local partners and CACs	80	254	318%
Output 2.2	260 adults receive quality protection support to parents via cooperation with local partners and CACs	Number of adults who receive quality protection support to parents via cooperation with local partners and CACs	85	232	273%





Output 2.2	260 adults receive quality protection support to parents via cooperation with local partners and CACs	Number of adults who receive quality protection support to parents via cooperation with local partners and CACs	90	103	114%
Output 3.1	Child Protection Standards are mainstreamed in two hospitals	Number of hospitals Child Protection Standards are mainstreamed in	2	3	150%
Output 3.1	Child Protection Standards are mainstreamed in two hospitals	Number of psychiatric wards who receive recommendations on CP Standards to enhance Child Protection in health system	100	111	111%
Output 3.2	Healthcare professionals have increased understanding of child abuse and their role in preventing it	Number of individuals (health care professionals) trained/whose capacity has been strengthened in Child Protection	500	943	189%
Output 3.2	Healthcare professionals have increased understanding of child abuse and their role in preventing it	Number of universities who receive awareness materials to enhance Child Protection in health system	35	50	143%
Output 3.3	Child Protection Standards are mainstreamed in other healthcare institutions	Number of recommendations of CP Standards for one-person practices of medical professions to enhance Child Protection in health system	1	3	300%
Output 3.5	Child protection standards are mainstreamed in sports, tourism and recreation systems	Number of training based on a scenario for sport clubs / associations to enhance Child Protection in sport / tourism / recreation system	20	131	655%
Output 3.5	Child protection standards are mainstreamed in sports, tourism and recreation systems	Number of sport clubs provided with Child Protection Policy consultations to enhance Child Protection in sport / tourism / recreation system	30	98	327%
Output 4.1	Professionals working with children have access to up-to-date knowledge available locally	Number of people who attended the "Childhood Without Violence" national conference in Warsaw	400	558	140%
Output 4.1	390 children and 150 adults will be reached with the services that mitigate risks and support the wellbeing of children	Number of children supported by child protection specialist	30	59	197%



Output 4.1	390 children and 150 adults will be reached with the services that mitigate risks and support the wellbeing of children	Number of children who will benefit from long-term individual and/or group psychosocial support	210	321	153%
Output 4.1	390 children and 150 adults will be reached with the services that mitigate risks and support the wellbeing of children	Number of children and adult family members who will benefit from the integrated protection services delivered by caseworkers	300	367	122%
Output 4.1	390 children and 150 adults will be reached with the services that mitigate risks and support the wellbeing of children	Number of families who will receive individual protection assistance	15	19	127%
Output 4.2	3000 youth and children have access to information on the legal child protection framework in Poland and the reporting options	Number of youth and children will be provided with information on the legal framework in Poland relevant to children and youth, through the awareness raising campaign	3,000	4,500	150%
Output 4.3	300 children and youth will benefit from the group sessions: will strengthen psychological resilience, improve stress management, practice social skills	Number of children and youth who will benefit from the group sessions: will strengthen psychological resilience, improve stress management, practice social skills	300	764	255%
Output 4.4	Psychosocial activities building resilience through tailored support to families	Number of Ukrainian refugee families that will participate in integration meetings	25	63	252%
Output 4.5	Intercultural assistance for students with refugee experience to facilitate integration processes	Number of Ukrainian refugee children who will be supported by an intercultural assistant	20	30	150%
Output 5.1	100 adults will be empowered to create safe and supportive environments for their children	Number of adults who will be empowered to create safe and supportive environments for their children	100	253	253%
Output 5.2	325 teachers and educators will have strengthened skills and capacities to lead multi-cultural classrooms	Number of teachers and educators whose skills and capacities will be strengthened through trainings and webinars	325	1,478	455%





Output 6.1	Partner staff supported to maintain good mental health throughout implementation of the project actions	Number of individuals accessing MHPSS support - available through Plan for partners	6	36	600%
Output 6.2	Activities related to MERL, accountability to affected populations & safeguarding for partners are rolled out	Number of individuals sharing lessons on AAP	20	33	165%
Output 6.2	PMF's staff skills strengthening and development	Number of PMF's employees who will participate in the capacity building program	20	45	225%
Output 7.1	The educational materials of 'School Full of Emotions' are tailored to the needs of adolescents and support materials for teachers are developed	Number of educational materials for teachers and students produced as a result of the project	18	20	111%
Output 7.2	A series of open webinars promoting SEL for teachers is delivered (with a particular focus on secondary schools and adolescents)	Number of unique viewers	200	313	157%
Output 7.3	The teaching materials are consulted with teachers and adolescents, the piloting is done and the materials are finalised	Number of teachers and students involved in consultations	220	350	159%
Output 7.3	The teaching materials are consulted with teachers and adolescents, the piloting is done and the materials are finalised	Number of students completing the evaluating questionnaires	200	335	168%
Output 8.2	Ukrainian teens and youth will take part in a mentoring program that combines civic engagement, leadership training, and project implementation skills	Number of Ukrainian teens and youth who will take part in the mentoring program	15	35	233%



Output 8.3	Ukrainian and Polish youth will take part in a series of workshops focused on topics such as sexual education, self-defence, gender equality, communication skills, and LGBTQI+ inclusion	Number of Ukrainian and Polish teens and youth who will take part in the series of workshops focused on sexual education, self-defence, gender equality, communication skills, and LGBTQI+ inclusion	50	65	130%
Output 8.4	Ukrainian and Polish youth enhance their emotional well-being and resilience through yoga, reducing stress and supporting their adaptation to new environments amidst displacement	Number of Ukrainian and Polish teens and youth who will yoga classes	10	12	120%

Across all outcomes, delivery in Poland far exceeded the planned targets, in some cases by several hundred per cent. Overachievement was most visible in case management, awareness, and training outputs, where flexible programming and strong partner networks allowed for rapid scale-up once systems were in place. FDDS, PMF, and CEO expanded existing mechanisms—such as child and parent support through CACs, professional training, and awareness campaigns—far beyond initial projections.

The scale of results suggests that initial targets were set conservatively, based on early funding assumptions and pre-implementation projections, while successive DEC allocations enabled partners to widen outreach. While the quantitative gains are impressive, the pattern also indicates that the planning framework did not keep pace with the programme’s adaptive growth, making output targets a limited measure of effectiveness. Overall, Poland partners demonstrated exceptional implementation capacity and responsiveness, but future phases would benefit from more dynamic target revision as funding and demand evolve.

Table 13: DEC-2B Achieved Figures in Poland

Code	Output	Indicator	Output target	Result	Achievement
Output 3.4	Sports professionals and leaders have access to evidence of child protection issues within the sector	Number of learning studies to enhance Child Protection in sport / tourism / recreation system	1	1	100%
Output 6.2	Activities related to MERL, accountability to affected populations & safeguarding for partners are rolled out	Number of individuals participating in AAR and capacity building sessions	27	27	100%
Output 7.3	The teaching materials are consulted with teachers and adolescents, the	Number of schools where the consultations took place	12	12	100%



piloting is done and the materials are finalised.

In contrast to the widespread overachievement across the portfolio, the few outputs that were achieved exactly as planned relate to structured, institutional activities – such as the learning study in the sports sector, partner capacity building on accountability and safeguarding, and school consultations for educational materials. These were technical and predefined tasks, less exposed to the fluid demand and scaling dynamics that characterised the service delivery and outreach components.

Table 14: DEC-2B Underachieved figures in Poland

Code	Output	Indicator	Target	Result	+ - %
Output 1.2	2000 children receive consultations and health interventions through the helpline and 100 children receive life saving interventions through the helpline	Number of children who receive health and protection interventions through the helpline	8.000	1.332	16%
Output 1.2	2000 children receive consultations and health interventions through the helpline and 100 children receive life saving interventions through the helpline	Number of children who receive health and protection interventions through the helpline	100	11	11%
Output 2.2	260 adults receive quality protection support to parents via cooperation with local partners and CACs	Number of adults who receive quality protection support to parents via cooperation with local partners and CACs	85	69	81%
Output 2.3	2 trainings with 10 local partners (estimated 10 unique people) to strengthen capacity	Number of individuals trained/ whose capacity has been strengthened in Child Protection	20	10	95%
Output 2.3	2 trainings with 10 local partners (estimated 10 unique people) to strengthen capacity	Number of individuals trained/ whose capacity has been strengthened in Child Protection	20	19	95%
Output 2.3	2 trainings with 10 local partners (estimated 10 unique people) to strengthen capacity	Number of individuals trained/ whose capacity has been strengthened in Child Protection	20	8	75%
Output 3.6	Professionals working with children have access to skill building resources	Number of articles published to support professionals working with children	24	18	16%
Output 4.2	MHPSS supervision sessions for the FDDS staff (psychologists and psychotherapists): Support for supporters	Number of partner's staff participating in MHPSS support sessions	20	17	85%
Output 4.6	Psychiatric consultations for refugee children and caregivers from Ukraine recommended by PFM psychologists.	Number of psychiatric consultations for Ukrainian refugee caregivers	120	46	38%



Output 8.1	Ukrainian teenagers and youth will take part in activities which will enhance their emotional well-being and self-expression focusing on various mediums to encourage participants to use art as a means of communication and reflection.	Number of Ukr teens and youth who will take part in activities to promote emotional well-being	55	53	97%
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Underachievement in Poland was limited and primarily linked to specialised or professional-level activities rather than direct service delivery. The most significant gap concerned psychiatric consultations for refugee caregivers, which were lower than planned due to decreased demand shortly after the activity was launched. After consulting with PIP, the resulting budget savings were redirected to expand psychiatric consultations for children, enabling PMF to exceed the target for psychiatric consultations for refugee children. For the remaining outputs, the differences were marginal and operational in nature. Slight reductions in MHPSS supervision participation and the number of published resources suggest adjustments in workload and publication priorities rather than cancellation. Similarly, the youth art-based wellbeing activity reached nearly all intended participants, indicating that the intervention was delivered at scale despite minor timing constraints.



Impact

Summary



Across Romania, Moldova, and Poland, the projects led to clear improvements in confidence, inclusion, and well-being among children, youth, and caregivers.

Participants described moving from isolation to participation and from dependence to self-confidence.

Many of these changes reflected deeper behavioural and attitudinal shifts—such as increased emotional strength and trust.

Partners cautioned that these outcomes remain dependent on sustained mentoring, structured activities, and continued access to inclusive community spaces.

No major negative unintended consequences were reported by any of the groups interviewed. The only concern that emerged related to the project's closure in Romania, where some caregivers felt anxious that they would have “no other places left to come,” raising the risk that recent gains in confidence and social engagement might weaken without continued support.

EQ8 What real difference/changes have the activities made to the target group? How do the adolescents, caregivers and other activities participants see the impact themselves and how do they describe the changes?

Romania

The projects in Romania targeted significant improvements in integration, wellbeing, and protection across different target groups.

Interviewed youth and adolescents described a visible transformation in classroom dynamics: students who were initially disengaged, uncomfortable, or joking about sensitive topics became more open, respectful, and participative over time. Through repeated weekly sessions and interactive activities, such as “The Ball of Violence” and decision-tree exercises on contraception, educators helped young people approach complex issues critically rather than reactively. The gradual shift from taboo and embarrassment to active curiosity and informed discussion demonstrates a significant attitudinal change, with students beginning to internalize messages about respect, consent, and self-awareness. Students not only retained accurate information on sexual health, anatomy, and violence prevention but also shared it with peers and friends, extending the project's influence beyond the classroom.

From a broader protection perspective, the intervention went beyond awareness-raising to actively reduce exposure to protection risks. By strengthening psychosocial well-being, promoting informed decision-making, and building young people's confidence, it helped prevent negative coping strategies and encouraged safer choices. The safe, youth-centred spaces created through the project also enabled early disclosure and timely referral when risks did arise. In this way, the initiative bridged prevention, response, and risk mitigation—transforming protection from a reactive service into a proactive and empowering process.

Partners echoed these perspectives and highlighted both immediate protective outcomes and longer-term changes. The emergency shelter run in Bucharest was described as “a great



support for families arriving in Romania without knowing anyone and without a place to go.” Other partners emphasised that continuity of support over multiple years created lasting impact, with some former project participants employed within their organisations. Partners also highlighted immediate protective outcomes. ANAIS noted that PI’s support allowed them to sustain services at their counselling centre, where survivors of domestic violence accessed free legal and psychological support, often for the first time.

Partners described emotional and professional growth as a lasting dimension of impact. Many had worked directly on the front line during the crisis and saw their own roles shift from project managers to social workers, mentors, and community advocates. Over time, they observed refugees and youth moving from withdrawal and fear to openness and participation, confirming that change is gradual but possible when people feel safe and respected. At the same time, partners acknowledged that these achievements remain delicate. Progress depends on continued funding, staff capacity, and institutional stability; without these, gains in protection, psychosocial well-being, and youth empowerment risk losing momentum.

This fragility was also reflected at the individual level among trainees and educators, who recognized the value of the training but emphasised the need for sustained support to consolidate learning. Some trainees noted that while the project enhanced their knowledge and confidence, its long-term impact will depend on ongoing mentoring and access to teaching materials. Their feedback suggests that the training successfully equipped them to apply new approaches, but sustained results will require continued guidance and institutional support. Strengthening follow-up mechanisms would help trainees translate their learning into lasting change within their schools and communities. Despite efforts of civil society in Romania and legislative frameworks protecting access to SRHR services, lack of formal SRHR education in public schools remains a gap that requires a structural change to sustain longer term impact.

“I will continue to use the knowledge and tools in the long term. Mentoring would help me deepen practice. Additional practical materials would be very useful for ongoing activities. Volunteers used cards and questionnaires during sessions, which were promised to be given to us but still we did not received any. I hope these materials will be shared during the school year, which would support sustained use at school level.”

-IDI, Teacher, W, Romania

Moldova

Partners in Moldova described clear and tangible change at both institutional and individual levels. Schools and community centres were transformed into open, inclusive learning environments. One partner noted that the newly equipped centre—complete with a library, EduTechLab, and interactive games—became a shared public space where children from across the city could study and play, not only those enrolled in specific projects. Teachers adopted new, technology-based methods that made learning more engaging and participatory. Ukrainian children who were once hesitant now read and translate Romanian with growing confidence, and educators highlighted that these interactive lessons strengthened integration and motivation among both refugee and host-community students.

Beyond the classroom, the project generated social transformation among parents, particularly mothers of children with disabilities or those previously isolated at home. Through structured sessions and informal online groups, mothers-built confidence, developed friendships, and began to see themselves as active members of their communities. The change was visible not only in attitudes but also in behaviour: parents



reported giving up punitive discipline, entering the workforce for the first time, and embracing self-care as part of their caregiving role. These networks evolved into sustainable peer-support systems that continue to exchange advice, share cultural experiences, and provide emotional reassurance even after the project formally ended.

Children described the EduTechLab and after-school clubs as spaces that made school more engaging, supportive, and enjoyable. They valued the improved environment—colourful classrooms, personal desks, books, and educational games—and emphasised how these changes made learning feel fun and accessible. The new facilities also gave them a sense of pride and ownership over their school environment. Alongside academic improvements, children highlighted growth in social skills and confidence, describing themselves as more cooperative, active, and friendly. Participation in games, cultural visits, and community events encouraged teamwork and strengthened their connection to school life.

Partners emphasised that these achievements, though significant, remain fragile. Continued supervision and modest resources are required to maintain open access to the centres and to keep parent networks active. The impact is therefore best understood as one of continuing momentum: early evidence of social healing, confidence, and inclusion that could consolidate into long-term resilience if local systems sustain engagement. In Moldova, the project's success lies not in rapid scale but in quiet, enduring change—children and parents who now participate, communicate, and belong.

Poland

In Poland, the primary evidence from participants is limited due to the data collection constraints. Across partners, the perceived impact of the DEC Phase 2B activities in Poland was consistently positive, focusing on children's increased self-confidence, emotional regulation, and social engagement. Partners described clear behavioural and attitudinal changes among participants: children became "more active, friendlier, and calmer," while parents reported that youth who previously spent time unsupervised "no longer hang out on the streets but stay engaged in activities." Theatre, yoga, and leadership sessions were cited as especially transformative in helping children open up, build confidence, and develop teamwork and communication skills.

Some partners highlighted children's growing initiative and ownership – for instance, youth independently organized a theatre performance in a café, arranged logistics, and cleaned afterwards. Others started a debate club as a continuation of the mentoring sessions, showing how the project nurtured leadership and self-directed learning beyond project boundaries. A similar perception was seen in the IDI, where the respondent also described the hub as a place of safety and support.

"The hub was the only place where we felt safe and supported."

-FGD Participant, Youth W, Poland

One partner shared particularly striking examples from psychological support groups and integration activities: a boy travelling 100 km each week to attend sessions, a child beginning to speak Polish thanks to project materials, and another who said he attended because "he felt seen and heard." Partners emphasised that "every completed therapy is a success story" and that the project left "two years of wonderful successes and memories."



EQ 9 What potential positive or negative unintended consequences the program might be generating?

EQ10 How did the program mitigate any unintended negative consequences?

None of the interviewed groups reported any direct negative impacts of the intervention. Partners largely mitigated the negative consequences, however, some concerns about the discontinuity of the assistance appeared.

In Romania, PALS sessions initially designed for refugee parents were also taken up by Romanian parents, strengthening school-parent communication beyond the intended target group. Community hubs became informal gathering points for both host and refugee families, enabling new support networks. At the same time, cultural barriers limited the participation of some minorities. One partner explained that “the girls and women from these families were often hesitant to address or discuss these topics... in high-risk situations because of their communities. “To address this, partners deliberately mixed groups so differences were less visible, ensured psychologists adapted activities for children with disabilities, and established women-only safe spaces to encourage mothers from traditional backgrounds to participate. Some interviewed caregivers in Romania expressed deep concerns about the project’s closure, revealing that its impact, though meaningful, remains fragile. Three out of four participants stated they “*have no other places left to come and communicate*” and that the end of the assistance would leave families feeling unsupported again. They also expressed a fear that children would again become withdrawn or lose confidence once the activities stopped. Therefore while the changes in attitude, behaviour and wellbeing are real, their long term sustainability likely depends on ongoing community structures and spaces.

In Moldova, summer schools and clubs initially targeted at Ukrainian children also attracted Moldovan peers, creating inclusive spaces and reducing stigma. Adolescents’ participation in SRHR sessions revealed unexpected interest in subjects originally considered secondary, broadening the learning scope.

In Poland, intercultural debate clubs and mixed activities created integration opportunities beyond the original scope, with adolescents noting that “if people who speak Polish come, we all switch to Polish; if they don’t, we speak Ukrainian.” Some activities also generated unexpected therapeutic benefits, such as theatre sessions that helped one girl overcome stuttering.



Sustainability

Summary



Across all three countries, sustainability was strongest where activities were taken up by existing institutions or became routine organisational practice. Training materials, teacher and peer-educator networks, digital learning tools (such as EduTechLabs), translated curricula, and youth-led formats like exhibitions or debate clubs are all likely to continue without additional funding because they require minimal resources to maintain. School-based SEL and SRHR activities, the use of manuals, and the planned use of educational films and online platforms in Poland are similarly durable.

However, direct services such as legal, psychosocial, and SRHR support remain highly vulnerable to funding gaps, and growing social and economic pressures – including public fatigue and uneven local engagement – limit their continuation. Overall, the DEC 2B portfolio strengthened the long-term capacity and credibility of partners, but the endurance of results will depend on future funding and policy commitment at national and local levels.

EQ11 To what extent are the benefits of the program going to continue, or are likely to continue?

In Romania, sustainability was strongest where partners embedded activities within their institutional mandates or national systems, and weaker in areas reliant on specialized staff and external funding. The most durable outcomes came from long-standing institutional experience, permanent structures, and replicable resources.

Several organisations have already integrated project learning into their operations. One partner is opening a new day centre for migrants and refugees, building directly on the infrastructure developed under DEC 2B, while two existing centres continue to assist Ukrainian and other migrant clients. This reflects how humanitarian interventions have evolved into inclusive, long-term community services. Partners providing psychological and legal assistance noted that the DEC support allowed them to maintain core operations during a financially difficult period. However, such services remain precarious—when funding for counsellors or lawyers ends, organisations lose both capacity and trained staff. As one explained, while the benefits for clients were tangible, sustaining those changes requires predictable financing.

At the systemic level, sustainability was visible through institutional partnerships and youth engagement. Violence-prevention and SRHR activities were extended through collaboration with the Ministry of Labor and Youth, and peer educator and teacher networks established under DEC continue to operate and produce new materials. Youth involvement in content creation has become routine, indicating that skills and ownership have outlasted project timelines.

However, partners identified funding and societal factors that threaten continuity. Limited national resources for SRHR, high dependency on external donors, and growing anti-refugee sentiment have made some activities less visible or more constrained. To protect the project participants, some organisations now operate with lower public visibility and rely on trust-based engagement.



In Moldova, partners viewed sustainability as contingent on local ownership and institutional engagement, but uneven across locations. Activities were most likely to continue where local authorities and schools had formally assumed responsibilities. In Bălți, for example, children continued to visit EduTechLab centres voluntarily, and teachers maintained learning and recreational activities after the project ended. These centres also supported social inclusion—particularly for children with special needs—and fostered habits that schools and families are motivated to sustain.

At the systems level, initiatives such as the PALS programme left behind ready-to-use materials and a trained network of teachers and psychologists able to replicate the model. CRIC’s children’s rights monitoring created a long-term reporting mechanism aligned with the state’s obligations to the UN Committee on the Rights of the Child.

Still, sustainability remains fragile without formal funding or institutional embedding. Continuation depends on volunteer motivation and school goodwill rather than structural commitments. Partners noted that vulnerable groups—especially Roma and low-income families—require continued support, and that parent-focused interventions remain underfunded. As one partner observed, “PUP and PALS should run hand in hand—supporting parents and children in parallel.”

In Poland, sustainability was linked to partners’ ability to embed project results within existing frameworks and create resources with lasting value. Most organisations saw DEC 2B as part of their long-term strategies rather than a stand-alone intervention. For some, continuity emerged naturally—children continued to visit community centres using leftover materials, forming small, mixed groups of Ukrainian and Polish participants that have persisted beyond the project.

At the national level, sustainability focused on knowledge products and digital tools. Educational films, manuals, and online materials were translated into Ukrainian, Russian, and Ukrainian Sign Language, while the teacher platform continues to grow, with plans for integration into the Ministry of Education’s e-learning system. These outputs are considered flagship products and are featured in partners’ fundraising campaigns.

Partners acknowledged that direct services—such as legal or psychosocial counselling—remain vulnerable to funding cycles but noted that staff training and collaboration with PI strengthened institutional capacity and preparedness for future work. As one organisation stated, “This wasn’t just a project; it became part of how we deliver our mission.” Despite these achievements, sustainability is not assured. Partners pointed to ongoing reliance on external funding for core services and limited accessibility of physical infrastructure. While some mitigation measures, such as online delivery or referrals, have been introduced, long-term continuation depends on whether local and national systems adopt and finance these initiatives.

EQ12 Were any innovative approaches or practices introduced which contributed to improved sustainability?

Partners introduced a series of innovations that strengthened the continuity of services and institutionalized practices beyond the project cycle.

In Romania, Carusel responded to legislative changes with an exit strategy that supported families moving from shelters, to avoid any cuts in the services. ANAIS established the GRAAL group to advocate legal reform on domestic violence. Through GRAAL groups, the partner noted that they are pushing for legal reforms, and once these are adopted, these will remain regardless of projects or funding cycles. Y4Y’s peer-education and Intimisfera exhibitions



created youth-led formats that continue outside donor funding. The exhibitions are planned to continue even after donor funding ends. AMI complemented this with multilingual SRHR helplines.

In Moldova, EduTechLabs became part of school infrastructure, securing their role as digital learning hubs. EduTechLabs are part of the schools; children use them daily, besides project activities. ROUA DEIS also anchored Ukrainian professionals in community centres, strengthening ownership and ensuring continuity of psychosocial services. Furthermore, the SRHR Manual, adapted to the context and needs of vulnerable young adolescents, will continue to be used in the child friendly spaces and contribute to the broader discussion around Comprehensive Sexuality Education for in-school and out-of-school settings.

In Poland, FDDS expanded the Child Advocacy Centre model, providing integrated services such as psychosocial support, legal and educational assistance, advocacy, and help for parents and caregivers. At the same time, the organisation advanced a complementary initiative to embed child protection and safeguarding standards in hospitals, schools, and sports clubs – a strategic step toward system-wide change. PMF ensured durability by securing a municipal competition to operate the Warsaw Multicultural Centre. CEO's social and emotional learning curriculum offered teachers tools to integrate refugee students beyond the project's lifetime, while Jedność Foundation enabled refugee youth to lead civic projects, shifting ownership to young people themselves. The initiative was innovative in seeking lasting contextual change, though its continuation remained uncertain.

EQ13 What were the major factors which influenced the achievement or non-achievement of sustainability of the program? What further steps could be considered for the future?

Innovation across the DEC 2B portfolio emerged through adaptive and locally driven approaches rather than new technology. In Poland, partners created accessible digital learning resources and a teacher platform translated into multiple languages, expanding inclusive education. In Romania, partners transformed humanitarian interventions into permanent service models and engaged youth in co-designing SRHR and violence-prevention materials. In Moldova, the combined PUP and PALS approaches introduced a new model linking parental and child support. While PUP was targeting caregivers; PALS was able to be adapted in school settings. While both programmes showed value in sustainability, partners recommended integrating both approaches for cohesion and complementarity for parental and child support covering schools and out-of-school settings. Across all contexts, partners showed creativity in sustaining services with limited resources, embedding new practices into community and institutional systems.

For PI's DEC 2B supporting sustainability included embedding services in public institutions such as hospitals, schools and municipalities, which created continuity beyond the project. The transfer of skills to teachers, medical staff, and social workers ensured that knowledge and practices could outlast donor funding. Localization strategies—working with national NGOs, employing Ukrainian professionals, and supporting refugee- and youth-led organisations—strengthened ownership and made services more relevant and durable. The development of durable tools such as CPMS translations, SEL curricula, manuals for



language learning and career guidance, and SRHR awareness materials further contributed to sustainability.

Factors constraining sustainability were mainly external. Policy volatility undermined service continuity, as seen in Romania where legal changes forced the closure of Carusel’s shelter. Decreasing humanitarian funds in the region created uncertainty and threatened service continuity, particularly in specialized areas such as MHPSS and legal aid. Partners also highlighted the risk of losing trained professionals if financial support ended. Organisational pressures—including high workloads, staff turnover, and reliance on short-term contracts—further weakened sustainability. Systemic barriers such as discrimination, limited language support, and occasional bias against minority or refugee groups within local systems – also restricted prospects for longer-term integration.

Future steps should focus on securing multi-year donor funding to maintain trained staff and avoid service gaps; formalizing government partnerships with NGOs so tested models are integrated into state systems; and supporting refugee- and youth-led organisations with predictable funding to consolidate leadership. Expanding safeguarding and integration approaches in schools, healthcare facilities and sports clubs, and promoting regional peer-learning between Poland, Romania and Moldova, would reinforce sustainability across the response.



Cross Cutting Themes

Summary



Gender was systematically addressed across DEC 2B projects, with most interventions assessed as Gender Aware and some, such as AMI's helpline in Romania, reaching Gender Transformative standards. Participation was broadly balanced between girls and boys, though patterns varied: girls were more engaged in psychosocial and hygiene-related activities, while boys participated more in recreational and sports components. However, most indicators focused on participation figures rather than outcomes, providing limited evidence of sustained gender equality change.

Approaches to inclusion of minority groups and persons with disabilities differed across countries. In Romania, partners took a proactive stance, adapting activities for Roma, LGBTQ+ youth, and persons with disabilities through tailored materials, personalized kits, and partnerships with specialist NGOs. In Moldova, inclusion was mainstreamed through school and community-based activities that helped reduce stigma and adapt learning for children with disabilities. In Poland, inclusivity relied more on open access and non-discrimination principles rather than structured mechanisms.

Partners also used decentralised service models to extend reach to remote or underserved areas. In Romania, services expanded nationwide through online delivery and home visits, though specialized legal and psychosocial support remained concentrated in urban centres. In Moldova, activities were anchored in schools and border districts, while in Poland, regional sub-grants and national helplines enabled wide coverage.

EQ14 How has gender been integrated throughout the project?

All DEC 2B projects considered gender in their design to some extent. PI teams reviewed the gender integration through Gender Transformative markers. According to the assessments, most of the projects were scored as having a high potential to *address barriers to improve the condition and position of girls and young women* and most of them were Gender Aware²³. Some projects, such as AMI's (Romania) Youth helpline, SRH and GBV information, support, and services - Knowledge is freedom and power' were scored as Gender Transformative with high potential to impact the gender roles in the targeted communities. PI Poland's direct response was scored Gender Neutral.²⁴

The primary data shows that opportunities were shared between girls and boys, but the ways activities were taken up varied. Indicators mainly reflect participation and focused on counting the number of people joining the activities. There is less evidence on whether longer-term changes in gender equality were achieved.

²³ PI Romania GLO-Gender_Transformative_Marker_ANAIS

²⁴ GT Marker - DEC2B Plan Poland



Participants consistently reported equal opportunities to participate. However, engagement patterns differed by country. In Romania, partners and staff observed that adolescent girls and women more frequently sought psychosocial and counselling support, while boys engaged more with recreational and group activities. In Moldova, children reported that both host and refugee girls and boys were able to participate equally, though their interests diverged: girls valued hygiene sessions and after-school clubs, while boys highlighted sports and games.

In Moldova, some examples of exclusion also surfaced, for example, one boy was prevented from participating in activities, reflecting how broader gender norms can persist even in inclusive spaces. However, this was found to be a case of abnormality, rather than a general practice.

“Last year the girls were making waffles. I also wanted to cook with them, but unexpectedly the social worker told me to watch a movie instead.”

-FGD Participant, Boy, Moldova

EQ15 How effectively did the project identify and address the specific needs of minority groups and persons with disabilities?

The project’s effectiveness in identifying and addressing the needs of minority groups and persons with disabilities varied across the three countries.

In Romania, the approach was comprehensive. Partners engaged with a wide spectrum of groups—Roma, LGBTQ+ youth, and persons with disabilities. Partners showed examples on how they adapted activities accordingly. For example, Carusel reported that hygiene kits were personalised for the use of trans women according to the needs and some activities were adjusted for those that were illiterate. Participants with Roma background were included in the activities. For disability, organisations partnered with specialist NGOs, recognizing their own limits while ensuring access. Some accessibility issues in physical infrastructure remained but were offset by online service provision and referrals.

“For disability cases, we partnered with local specialist NGOs instead of pretending to have expertise. Sometimes we used budget lines to buy specific items (e.g., a wheelchair). With adolescents, sessions on gender roles, respect for women, violence against women, sexuality, etc., were included (e.g., under PALS).”

-KII, Project Partner, M, Romania

Moreover, inclusion was addressed through community facilitators, bilingual Ukrainian staff, and adjustments for those with disabilities and reduced mobility. Another partner reported:

“With adults and children, we worked only with Ukrainians. We prepared the venues for physical disabilities (ramps, accessible spaces). Later we added home delivery of material aid for people unable to travel—often elderly women.”

-KII, Project Partner, M, Romania

Moldova partners applied a mainstreaming and stigma-reduction approach within school and community activities. Minority groups, particularly Roma children were integrated to the activities despite initial stigma. Partners reported that the Roma children were present in school and community-based activities but faced risks of labelling and exclusion. Project



supporting staff, such as facilitators or animators actively worked to mitigate stigma by designing activities that made differences invisible, ensuring that Roma children could participate without being singled out. PI also supported the partners through a specialized training to adapt games for children with special needs, which were extended to Roma children who often carried overlapping vulnerabilities.

"(...) If we talk about the Roma children, initially, there was the issue of labelling. If a child was having difficulties or causing concern, they were labelled as "Roma children". There was even one activity where the children did not want to shake their hands, but that was the exception. But the animators knew very well how to organise the activities so that, among the 40-50 children participating, it would not be obvious who was who."

-KII, Project Partner, M, Moldova

Two partners from Moldova also highlighted the support received from PI when engaging with children with disabilities. PI's technical staff provided training to adapt activities and strengthen inclusiveness. The Ludobus model further reinforced this approach by embedding psychologists within the teams, who tailored games and methods for children with hearing, vision, or mobility impairments.

In Poland, the evaluation found limited direct evidence of deliberate inclusion of specific vulnerable groups, mainly due to the small number of interviews and the scope of available data. Some partners stated that there were no deliberate actions, mainly due to the nature of the projects. Partners emphasised open access, noting that "all are welcome," but did not mention structured mechanisms for identifying or targeting specific groups. One partner reported that disability was not a focus area of their project, but it was managed in other projects. Another said, due to the nature of the projects, physical accessibility remained a barrier. LGBTQI+ participants were involved, but there was no systematic outreach to minority groups. However, according to PI's reporting and partner documentation, a range of inclusion-focused activities were undertaken. PMF and FDDS implemented integration initiatives bringing together refugee and host communities, contributing to social cohesion. PMF's caseworkers also supported children with disabilities and special educational needs, including assistance with obtaining state certificates confirming disability status and facilitating enrolment in appropriate schools or kindergartens. Both PMF and FDDS extended support to LGBTQI+ youth through case management, psychosocial support, and helpline services. Additionally, FDDS conducted a learning study on violence in sports with a focus on girls' safety and participation. While the evaluation could not independently verify these activities, the available evidence from partner reports indicated a consistent focus on inclusion and gender-sensitive practice across the Polish portfolio.

EQ16 To what extent were individuals in remote areas provided with support and actively included in the project?

Across all three contexts, the project relied on light, distributed channels (helplines and online platforms) and decentralised partners (regional CACs in Poland; border focal points and school-based labs in Moldova; remote services and home visits in Romania) to include people outside of main urban centres. These systems were designed to make services more accessible in smaller towns and rural areas. The coverage was quite diverse.

In Romania, several components were deliberately set up for nationwide and remote access. For example, the partner AMI reported²⁵ that they ran services "nationwide with remote

²⁵ Plan International. PA AMI.



support” through helplines and online sessions, while DEIS complemented centre-based work with home visits for clients with mobility or access barriers. These initiatives targeted those living outside large cities. And Carusel provided support through the outreach mobile teams.

Despite the breadth of services, the coverage was uneven. This reflected the programme’s intended geographic focus rather than a design gap. DEC 2B in Romania was built around partners already operating in Bucharest, Baia Mare and Suceava—cities where the largest numbers of Ukrainians had settled and where services could be established quickly. Within these locations, partners delivered a broad range of activities, from community-centre support and youth programmes to SRHR sessions and legal counselling. However, specialised services such as legal, psychosocial and SRHR support were harder to extend beyond these urban areas, as outreach relied on existing staff capacity, partner networks and the practical limits of remote assistance. As a result, some rural or harder-to-reach groups benefitted less, reflecting both the programme’s geographic scope and the resource demands of expanding specialised services beyond established hubs.

“Unfortunately, we do not have the human resources to extend this service across the country. It is very difficult to do so without having a specialist—specifically, a lawyer—who can personally assist the person.”

-KII, Project Partner, M, Romania

In Moldova, capacity and services were placed close to borders and across districts. Around 20 border focal points (Ave Copiii) and the national social-assistance network (ATAS/TASA) helped cascade training and referrals, ensuring outreach to smaller localities rather than concentrating support in Chişinău. Project activity sites also included RACs and schools in Bălţi and Cărpineni, with EduTechLabs to sustain access where people actually live. NPAC’s mobile teams also operated across multiple regions and RACs, extending protection and psychosocial support to children and caregivers. The PALS training reached teachers from several rayons, including Chişinău, Bălţi, Edineţ and Căuşeni, strengthening the capacity of schools to identify and respond to protection risks. AVE Copiii additionally provided SRHR sessions in schools, libraries, community centres and Refugee Accommodation Centres across Bălţi, Cahul, Ştefan Vodă, Cimişlia, Leova, Nisporeni, Comrat and Vulcăneşti in the Găgăuzia region, as well as in Chişinău. PUP was implemented in Criuleni, Sipoteni, Chişinău, Dubăsarii Vechi and Delacău, reinforcing localised outreach to children and youth. The FGDs conducted in Cărpineni confirmed that the children living in remote areas were able to reach the schools.

In Poland, PMF operated in schools in Masovian voivodeship, and covered the whole of Poland through the webinars, and workshops. FDDS widened coverage by through CACs in Gdańsk, Starogard Gdański and sub-granting to regional CAC members in Wrocław (Non-Licet), Głogów (SZANSA), and Olsztyn (ARKA). By piloting child-protection and safeguarding standards in health facilities, including a hospital in Suwałki. Together with the national child helpline (116 111), this provided multiple access points outside Warsaw.

While these mechanisms demonstrate a clear intention to reach people in remote areas, there was no separate or disaggregated data collected to measure how many individuals in rural or remote areas were actually included. Neither the partner reports nor the KIIs/IDIs documented quantitative outreach figures (e.g., by district or rural/urban breakdown). As a result, the evaluation can only rely on qualitative descriptions of outreach systems and partner accounts, rather than verified data on coverage



EQ17 What consultation as well as specific feedback mechanisms were considered and implemented for this project and how effectively did they work (CHS 5)?

PI reports and partner interviews described the use of multiple feedback channels, including sealed boxes, QR and paper surveys, hotlines, and direct email contacts. FCRM (feedback, complaints and response mechanism) posters and stickers explaining how to submit feedback were found to be displayed at activity sites, and each partner operated its own system alongside PI's central FCRM. Plan confirmed that these mechanisms were operational, though awareness-raising and communication around them varied across contexts, which may explain lower reporting rates.

During the primary data collection for this evaluation, partners mentioned that the relatively small scale of participant groups meant direct, informal channels—such as conversations with caregivers, weekly meetings in shelters, or feedback collected by psychologists during activities. This often made the response highly responsive and flexible, with partners able to adjust services quickly based on community input. At the same time, these systems had some limitations. Feedback was usually partner-specific and rarely aggregated across projects, which weakened traceability and learning beyond the immediate response. PI reported that it was challenging to isolate feedback specific to DEC activities, as partners did not disaggregate participant feedback by project, given that their services were funded through multiple concurrent grants.

Romania

Partners in Romania relied heavily on face-to-face dialogue with project participants as their main consultation mechanism. Weekly group meetings in shelters and informal one-on-one conversations were pointed out as the means for communication. These mechanisms were effective in producing rapid adaptations. For example, in the emergency shelter, after residents asked for a space to cook, a kitchen container was installed; when families requested outdoor space, a terrace was created; and women's groups were introduced following demand from mothers. This suggests consultation leading to tangible programmatic adjustments.

"Needs were identified both through collaboration with authorities at the start and, more importantly, through continuous dialogue with the project participants themselves, which allowed us to adapt the services as we went along."

-KII, Project Partner, M, Romania

Refugee children in FGDs said they liked having mixed activities with Romanian kids and felt listened to when they suggested "more outdoor activities." Some groups reported these were added later (sports, excursions).

Moldova

In Moldova, consultation and feedback were embedded across project delivery, with multiple channels established to capture input from teachers, parents, and children. According to partners and PI's reports, schools acted as the main entry point: EduTechLabs, parenting sessions, and extracurricular activities were designed not only as delivery mechanisms but also as spaces where participants could express concerns or suggestions. Teachers and school administrators relayed these inputs regularly, and partners used them to refine lesson structures and session content.

Training sessions played a dual role, equipping facilitators with tools while also functioning as consultation spaces. Teachers and parents were able to share difficulties or areas needing



more attention. Child-friendly questionnaires and focus groups were another channel highlighted by the partners, ensuring that children could express whether activities felt useful and enjoyable, and whether they wanted adjustments. Interviewed children mostly confirmed that these consultations occurred. At the organisational level, joint workshops, PI monitoring visits, and debrief meetings served as structured opportunities for partners to feedback their experiences and shape subsequent programming.

Despite these multiple channels, feedback remained largely informal and tied to direct interaction with facilitators and PI staff. Partners did not report the results from the independent or anonymous mechanism, such as a hotline or third-party complaints channels. This broadly challenged the issue of anonymity.

Poland

PI reported that multiple channels for feedback were available in Poland. Partners had their own feedback mechanisms that were integrated to the response. While there were no unified mechanisms available for feedback and complaints, and the full feedback cycle, PI reports demonstrated examples of feedback response. PIP's own channels, however, were not commonly used to submit feedback or complaints, as participants tended to use the channels of partner organisations, which were perceived as more accessible and closely connected to the community.

The PMF's internal evaluation report confirms that feedback was systematically collected and registered. Although it does not provide a total count or categorical breakdown—since feedback was often general and covered multiple donor-funded projects—it offers detailed insights into the process. All feedback, including complaints, was documented in a secure feedback database managed by the MEAL team, with each entry assigned a unique identification number and categorised by type and risk level.

Feedback was collected through multiple channels, including surveys, phone, email, WhatsApp, in-person reporting, focus groups, interviews, and social media. The internal report also documents examples of registered and addressed feedback related to the DEC 2B project, such as one complaint regarding a psychologist's conduct and another gender-related complaint during culinary workshops. In total, the report contains around 56 feedback-related references, many of which reflect positive participant feedback—particularly regarding psychological consultations, caseworker support, and group activities. Parents and caregivers consistently praised the professionalism, empathy, and responsiveness of staff, with satisfaction scores frequently reaching the highest possible ratings.

During the CPMS roll-out training conducted by PIP as part of direct implementation, five feedback responses were received, with overall satisfaction ratings ranging from 3 to 5 on a 5-point scale. Trainers were rated positively for clarity and presentation of concepts, though participants noted varying levels of engagement and suggested improvements in group activities and time management. Three out of five respondents indicated they would recommend the CPMS document.

During the primary data collection for this evaluation, the partners reported that the consultation project participants were primarily integrated into the design and testing of educational and psychosocial resources. Rather than treating feedback as an afterthought, organisations working under the DEC 2B portfolio created structured opportunities for teachers and adolescents to express their views.



Coordination & Coherence

Summary



Partners described PI as approachable, responsive, and flexible, despite the inherent structural imbalance of donor-partner relations. They consistently highlighted mutual respect, access to decision-making, and collaborative problem-solving, often contrasting PI's style positively against other INGOs and UN agencies. Limitations were noted around initial staff turnover, which disrupted continuity until stable focal points were in place.

PI's added value was seen in technical guidance, monthly check-ins, and support beyond compliance. Partners valued capacity exchanges—such as safeguarding, education training, and study visits abroad—which helped adapt practices (e.g. inclusive methods for children with disabilities). Partners valued opportunities for capacity strengthening—such as safeguarding and education training, and study visits abroad—which helped them adapt practices (for example, inclusive methods for children with disabilities). However, these exchanges were largely one-way, with limited reciprocal learning opportunities for PI staff. Partners benefited from PI's technical inputs but there was the evaluation found limited instances where PI staff received training, consultation or technical input directly from partner teams, suggesting that mutual learning—beyond standard training formats—was not yet systematically embedded within partnership practice.

EQ18 To what extent was the relationship between PI offices and implementing partners equitable? Were plans for coordination with clusters, DEC members and local NGOs, government services in place, and followed?

The relationship between PI International and its partners was shaped by the reality that PI managed the donor funds and compliance requirements. This inevitably created a structural power imbalance experienced in most INGO-LNA programs – final decisions on budgets, allocations, and reporting were PI's responsibility. Yet, many partners described the relationship as equitable in practice, noting that PI staff were approachable, responsive, and supportive beyond compliance. Equity was therefore experienced less as formal "equal power" and more as mutual respect, access to decision-making spaces, and genuine partnership in delivery.

"We had to ask for approval, but then we had a lot of flexibility. We felt like we were trusted."

-KII, Project Partner, M, Poland

Across country offices, the partners described PI's engagement as collaborative and accessible. A partner highlighted how PI's monthly check-ins and technical advice allowed them to adapt quickly during legislative changes, which they felt was a sign of trust and shared problem-solving rather than top-down supervision. PI was always available for support when needed.

Decision-making was also described as flexible, with PI open to partner-led adjustments. Partners often used the words equitable, open, attentive and flexible while defining their



partnership with PI. PI's country team's understanding the context, and close attention to the projects were valued.

"It felt like a partnership, not supervision it was 100% equitable partnership. Of course, we knew that we had to wait for a decision on various matters and questions. Definitely, PI was an extremely attentive donor and also very flexible. The teams also made our work much easier."

-KII, Project Partner, M, Moldova

PI was also recognised for investing in capacity exchange. PIP reported²⁶ several initiatives to strengthen partner capacity and address institutional gaps, including support for 33 partner staff (32 women, 1 man) through activities such as the translation and validation of the CPMS into Polish and targeted Storytelling in Fundraising trainings to enhance organisational capacity and resource mobilisation for the Ukraine response. From this experience, PIP identified the value of tailoring capacity-building initiatives to the specific needs and experience levels of each organisation and highlighted this as a good practice for future programming. This adaptive approach was reflected in the design of the Storytelling in Fundraising training, which was delivered in two separate modules—general and advanced—depending on the partner's existing level of fundraising expertise. Partners also reported that this approach often increased the relevance of the training, improved engagement, and strengthened their sense of ownership over organisational development. Similarly, the Romania response²⁷ incorporated several capacity-building components aimed at strengthening local partners' technical and organisational competencies. Partners reported staff training on HR management, safeguarding, SRHR, gender equality, and psychosocial support, alongside mentoring and peer-exchange between organisations such as Y4Y and Carusel.

Partners highlighted safeguarding and education trainings, as well as more creative forms of support provided by PI. While PI staff described the partnership as mutually informative, the evaluation found limited documented evidence of structured or reciprocal learning flowing back to PI. Partners may have contributed contextual insights informally during routine collaboration, but these contributions were not captured or framed as part of a systematic knowledge-exchange process. As a result, mutual learning appears to have taken place in day-to-day interactions rather than through formal mechanisms, and it is not yet embedded as a consistent or deliberate practice within partnership structures.

Capacity building was a cross-cutting focus within the Moldova response and aimed to improve partner and institutional ability to deliver protection and social services. Partners such as AVE Copiii and CNPAC conducted extensive training sessions for child protection and MHPSS professionals, while PI Moldova organised accountability and safeguarding trainings for partner staff. The report also indicated that continuous adaptation of training materials and formats was considered important to meet the evolving needs of participants. However, there was no reference to a specific or self-managed budget for partner-led capacity building or staff well-being, suggesting that these efforts were framed within the project's technical priorities rather than being independently managed by partners.

Finally, many partners compared all PI offices positively to other INGOs and UN agencies, underlining that the relationship felt more human, less bureaucratic, and more problem-solving oriented. PI was seen as a colleague, who is co-writing proposals, and working with them on a daily basis. This style of working gave partners confidence that their input mattered and encouraged them to take initiative.

²⁶ Plan_DECPh2b_Narrative_UHA22_POL_Final

²⁷ Plan_DECPh2b_Narrative_UHA22_ROM_Final



Limitations were also acknowledged. Several partners, particularly in Moldova, noted that high staff turnover at the beginning created discontinuity, as they had to re-explain activities and priorities to new PI staff. Once stable focal points were established, collaboration became smoother, but the early rotation left some partners feeling uncertain about consistency.

EQ19 How did the organisations harmonize and coordinate their interventions with other partners?

The evaluation had very limited stakeholder engagement for a response at this size. Assessment of the external coordination was made solely through the statements of partners and PI/Partner reports.

According to the partners, harmonization in Moldova was dense and operational. Schools, municipalities and local CSOs worked with PI partners to co-plan activities (language support, parenting sessions, EduTechLab activities, align calendars, and share facilities). Coordination with UN-led structures (Refugee Coordination Forum; Protection, Education and AAP groups) provided a common frame for standards and referrals, while the INGO Forum was used to align with contextual shifts. Importantly, local institutions were directly consulted in planning and monitoring; head-teachers and social workers described being trained, equipped and involved in iterative feedback.

Coordination in Romania combined inter-agency mechanisms with detailed harmonization at the level of individual community centres. At system level, partners engaged with UNHCR and county-level meetings to avoid overlap (e.g., staggering language classes across NGOs; signposting between legal, MHPSS and social assistance). With government services, partners worked with social assistance directorates, health providers and emergency services to channel urgent cases and co-manage referrals.

At project level, community centre operators described tight, daily coordination among multiple funders. Teams divided responsibilities by budget lines and donor priorities, shared space and schedules, and kept constant contact to ensure full coverage (e.g., Romanian classes, English classes, MHPSS, admin support). Where policies or contexts shifted, partners used participatory planning and wrap-up meetings at the end of each phase to carry lessons into the next—maintaining coherence across cycles.

“We all worked very closely together (with other organisations). Each of us was accountable to our donors for the activities financed under their budgets, so we needed to coordinate tightly.”

-KII, Project Partner, W, Romania

Partners also highlighted that training and technical support often came from other organisations in addition to PI. Carousel, for example, worked with Oxfam, IRC, HIAS, UNICEF and WHO to strengthen service quality.



Conclusion

The DEC 2B portfolio achieved significant results despite operating in a highly challenging and resource-constrained environment. It provided essential services at a time when needs were high and often unmet by state systems. In all three countries, the response demonstrated flexibility and responsiveness: partners adapted their activities to shifting legislation, local needs, and community feedback, while PI maintained an accessible and collaborative management style.

The evaluation was commissioned to assess the performance and results of the DEC 2B portfolio across the countries, drawing on available documentation, monitoring data and interviews with the partners and the participants. Due to the time of the evaluation, sensitivities about the program and the partner preferences, evidence availability was uneven across the context. Primary data was almost absent in Poland, which affects the level of confidence in findings for that context. However, the evaluation still found that the scale-up was demonstrated convincingly across the countries, with PI and partners able to expand the activities and maintain delivery as the program grew.

Importantly, the portfolio did not only deliver short-term results, but it also invested in tools, practices, and institutional linkages that give the response a degree of durability uncommon in short-cycle humanitarian funding.

Sustainability was visible in different ways across the three contexts. In Romania, new centres, strengthened legal standards, and youth networks show how services were embedded in existing mandates or youth-led structures. In Moldova, the integration of EduTechLabs into schools, teacher networks, and PALS training manuals, which is an originally PI concept, was embedded to partners' implementation modules. In terms of sustainability, the PRIMERO+ platform for case registration and management was also introduced to strengthen long-term system linkages. Furthermore, the PALS programme was mapped—alongside programmes designed and implemented by national and local CSOs—through the Consultative Platform on Parental Education, initiated by the Ministry of Education with the objective of developing a formal curriculum in this area. In Poland, resources co-developed with teachers, peer mentoring networks, and the continuation of multicultural centres under other funding demonstrate that sustainability was an integral part of the response. Partners often viewed the DEC 2B project not as a stand-alone grant but as complementary to their broader organisational strategies, built on the needs of the communities they served. These examples highlight that the portfolio left behind not just activities but systems, habits, and knowledge that continue beyond the immediate life of the grant.

At the same time, the evaluation underlines that this sustainability is partial and uneven. Direct services such as psychosocial support and legal aid remain highly vulnerable to funding cycles. Partners repeatedly stressed that retaining trained professionals is a major risk, as lawyers, psychologists, and social workers cannot be maintained without stable resources. Short project timelines limited planning horizons, forcing partners to deliver at full capacity without certainty about what comes next.

The strain on partners was another clear finding. Many organisations reported that they operated at the edge of their capacity with high caseloads, and limited staff. Their determination and commitment were critical to delivering results, but this approach is less sustainable outside of an emergency response. Recognising these pressures, PI introduced internal MHPSS support for partner staff, responding to a critical need identified through the partner needs assessment. This inclusion—secured despite not being part of the original



proposal—was a significant achievement, ensuring psychosocial care and continuity for teams working under intense pressure. The outcome was ultimately joint: PI’s institutional support and partners’ extraordinary individual efforts together sustained delivery quality throughout the DEC 2B period.

Inclusion efforts were visible and evident yet not always documented well. While open-access models ensured that many groups could participate, children with disabilities, Roma communities, and women facing restrictive gender norms still encountered barriers. Partners worked to mitigate these challenges, but such efforts were often ad hoc, dependent on staff capacity and local relationships rather than systematic strategies. Also, PI and its partners did not systematically measure inclusion.

Taken together, the evaluation shows that the DEC 2B portfolio consisted of projects that were relevant, responsive, and, in many respects, sustainable. What remains fragile are intensive services requiring ongoing professional support, which cannot be maintained without predictable funding. Policy volatility, shrinking humanitarian budgets, and structural inequalities all add further uncertainty. Local partner future programming will need to move away from multi-year donor funding – which are unlikely in a shrinking funding space – and more on embedding proven models into public systems, diversifying funding bases, and adjusting delivery models to work within tighter resources. Continuing localisation will be equally important with predictable, smaller-scale support to refugee- and youth-led organisations, alongside measures that protect partner capacity from erosion due to overwork stemming from the more complex caseloads that require more time per case.

In conclusion, DEC 2B delivered more than emergency relief. It created a lasting impact in the practices, resources, and partnerships that give the response a degree of durability. However, the impact in some areas is fragile without follow-on support of some type.

The partner-led approach has been central to the portfolio’s effectiveness, relevance and impact. The approach in the portfolio demonstrates that sustainability is possible even in a humanitarian context.



Recommendations

Recommendation 1

Adopt safety and wellbeing-based outcome level indicators to measure CP & MHPSS activities

PI, in future projects should adapt safety and wellbeing-based outcome indicators to assess CP and MHPSS activities. These should capture whether participants feel safer and emotionally supported, whether referral and supervision systems function effectively, and whether service continuity can be maintained beyond the project cycle.

Recommendation 2

Enrich localisation efforts with institutional capacity building for the partners

Develop a structured approach to partnership management that balances flexibility with stronger institutional support for local partners – including technical supervision frameworks, manageable workload planning, and measures to retain trained staff. Document and share good practices from partners that demonstrated sustainable ownership and effective localisation under DEC 2B, such as flexible management that allowed rapid decision-making, and internal staff development systems that strengthened organisational capacity.

Recommendation 3

Encourage cross-partner capacity exchange as a model of sustainable localisation

Build on the positive example of partners training and mentoring one another during DEC 2B implementation by formalising such peer-to-peer capacity exchanges in future programmes. Structured collaboration between partners – for instance, joint trainings, supervision exchanges, or shared technical workshops – can strengthen collective expertise, and promote sustainable localisation grounded in mutual learning rather than external support.

Recommendation 4

Ensure results frameworks remain realistic and useful throughout the programme.

Designing targets with a wider range of expected scenarios—and updating them more systematically—would help maintain the logframe as a meaningful tool for tracking progress. Including a few qualitative indicators would also strengthen the assessment of effectiveness beyond numbers.

Recommendation 5

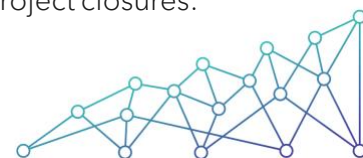
Promote coherence and visibility of FCRM systems across all partners

Have a unified FCRM system, or request data from partners to understand how the full feedback and response cycle is achieved, including how complaints are received, processed, resolved, and communicated back to participants. Regularly measure awareness regarding the existing channels and identify any barriers for groups with specific vulnerabilities.

Recommendation 6

Strengthen sustainability through system linkages and continuity of support

Embed protection, MHPSS, and referral models within existing public and community systems to ensure continuity of services beyond the funding period. This may include formal collaboration with local authorities, integration of training modules into institutional curricula, and maintaining community-based networks that can continue support after project closures.



Recommendations addressed to DEC

Recommendation 7

DEC to establish regular, predictable coordination spaces across the DEC members, whenever feasible.

Where feasible, face to face meetings would give a structured platform to exchange updates, align activities, and collaborate more effectively.

Recommendation 8

DEC to provide a brief consolidated overview of member activities, locations and timeline at the start of each phase to support coordination and planning.

A clear summary of interventions, locations, and timelines would give DEC members and their partners a shared reference point, helping them plan more coherently. This would also help them to understand where other members are operating, reduce overlap across the response, and identify opportunities to work together more effectively.

Recommendation 9

Simplify the reporting template to enhance usability and consistency across phases.

PI and its partners faced challenges during the reporting periods, particularly for the Output Tables. A more streamlined template—focused on essential indicators and clearer formatting—would reduce the administrative workload for DEC Members and local partners.



Annex 1: Evaluation Matrix

Method	Participants	Sample			Sampling Method	Evaluation Questions*	Triangulated Purpose
		Poland	Moldova	Romania			
Secondary Source Document Review	Project documents and external literature (protection working group/cluster response plans and relevant reporting)	All available project proposals, project narrative reports, financial reports, previous evaluations (e.g., Poland), partnership documents, lessons docs, ToC, baseline, output trackers, internal evaluations, safeguarding assessments, gender markers, risk registers,			N/A	EQ 1,3, 4, 5, 6, 7, 8, 13, 16, 18,19	Ongoing to reinforce findings and the initial review informs the inception report and data collection tool development.
Semi-Structured Qualitative Key Informant Interviews (KII)	PI staff, UKNO and DEC	3	3	3	Non-probability Purposive Non-probability Purposive	EQ 1,2,3, 4, 5, 6, 7, 8, 13, 16, 17, 18,19	Reflections on program design, goals, donor alignment, perspectives on implementation, timeliness, efficiency and quality, sustainability, internal coherence and coordination.
	Project partners	6 (PMF, CEO, Fundacja Jedność)	10 (AVE Copiii, CNPAC, TMP, AIBI, CRIC)	12 (FNT, Carusel, Roua Deis, Y4Y, ANAIS, AMI)		EQ 2, 5, 6, 7, 8, 14, 16, 17	Perspectives on implementation, adaptation to local contexts, use of funds/resources, coordination and sustainability.
	Specialized practitioners	5 (teachers, school counsellors, social workers, child psychologists)	8 (social workers, child protection officers, psychologists, teachers, animators)	6 (community facilitators, psychologists and social workers)		EQ 5, 8, 10, 11, 12, 14, 16, 17, 18	Insights on quality, appropriateness, and delivery of activities, observations on observe psychosocial impact and educational shifts, systemic enablers/blockers for sustainability, unintended impacts, inclusion.





	Stakeholders (government officials, cluster coordinators, local groups, institutions and bodies)	5 (municipal authorities, local education departments, CP or MHPSS, education working groups)	8 (representatives from ministries, CP, education, and MHPSS working groups)	10 (representatives from local authorities, CP, education, health and MHPSS working groups)		EQ 2, 8, 14, 15-	Understand coordination, local system ownership, consultation with stakeholders and inclusion and sustainability.
Semi-Structured Qualitative Focus Group Discussions (FGDs)	Project participants	2 FGDs with caregivers, (1 female and 1 male group) 2 FGDs adolescents in leadership (12-17 age, 1 female and 1 male group, 20% persons with disabilities in each group) 2 FGDs with youth (18 and above; 1 female and 1 male group)	2 FGDs with caregivers, (1 female and 1 male group) 2 FGDs adolescents in leadership (12-17 age, 1 female and 1 male group) 2 FGDs with youth (18 and above; 1 female and 1 male group - including Roma community members)	2 FGDs with caregivers, (1 female and 1 male group) 2 FGDs adolescents in leadership (12-17 age, 1 female and 1 male group) 2 FGDs with youth (18 and above; 1 female and 1 male group)	Gender segregated / 20% persons with disability stratified quotas	EQ 1, 10, 11, 12, 17, 18, 19	Views on impact, relevance, gender, feedback mechanisms, engagement, inclusion and agency, gender, age or ethnicity specific insights for an intersectional analysis, unintended consequences
Child-friendly Qualitative In-Depth Interviews (IDs) – River of Life	Child Beneficiaries	6 (female and male children, children with disabilities)	8 female and male children, children with disabilities, Roma children)	6 (female and male children, children with disabilities)	Gender segregated on 50% / 20% persons with disability stratified quotas	EQ 1, 9, 10, 11, 12, 18	Insights into developmental, emotional, and social changes, views on impact and safety





Structured Quantitative Survey	Project participants	100 (adolescents aged 12-17, caregivers/parents and youth)	100 (adolescents aged 12-17, caregivers/parents and youth)	100 (adolescents aged 12-17, caregivers/parents and youth)	Gender segregated on 50% / 20% persons with disability stratified quotas	EQ 1, 5, 6, 9, 10, 11, 17, 19	Quantifiable perceptions of program relevance, impact, and satisfaction, feedback on project delivery, unintended effects, and feedback mechanism use
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Annex 2 : Partner Profiles

DEC 2B Plan International Moldova (PiM)

Partner	Profile	Role in DEC 2B Project
AVE Copiii ²⁸	National NGO founded in 2011, specialised in child rights, protection, and family empowerment. Recognised for close collaboration with local schools, municipalities, and national child protection structures. They are a frequent implementing partner for UNICEF, UNHCR, and other donors.	Led Outcome A (child protection services at border areas) Outcome D (SRHR/GBV/SGBV manual and outreach, including Roma communities). Their role combined systems-strengthening with direct service provision to vulnerable youth.
CNPAC (National Centre for Prevention of Child Abuse) ²⁹	Established in 1997, CNPAC is one of Moldova's leading NGOs in child protection. They have longstanding expertise in prevention of child abuse, awareness campaigns, and training frontline professionals.	Implemented Outcome B by delivering psychosocial support activities for children, caregivers, and frontline workers, using informal and community-based methodologies to build resilience.
The Moldova Project (TMP) ³⁰	Grassroots organisation working since 2008 to support vulnerable families and communities, with a focus on social inclusion, parenting skills, and child welfare. Known for its outreach in rural areas.	Delivered Outcome C by providing training and sessions for parents and caregivers to strengthen gender-responsive parenting practices and improve support to children.
Amici dei Bambini (AiBi) ³¹	International NGO with an active branch in Moldova, focusing on vulnerable children, particularly those in institutional care or at risk of family separation. They are well known for community-based alternatives to institutionalisation.	Supported protection and education-related activities under Outcome C, with emphasis on psychosocial and educational support.
CRIC (Child's Rights Information Centre)	Local resource centre specialising in disability inclusion, training, and advocacy. They provide technical expertise to NGOs and government actors on integrating children with special needs into education and community life.	Provided support to teachers in understanding and contextualising PALS programme and tools to the school environment (outcome C), and ensured children's voices are considered in the report on child's rights to the UN (outcome B).

DEC 2B Plan International Romania (PiR)

Partner	Profile	Role in DEC 2B Project
Carousel ³²	Carousel is a Bucharest-based NGO founded in 2011 that works in harm reduction and	Outcome A (Child protection & emergency support): Operated

²⁸ Website: <https://www.avecopiii.md/> Accessed: 23.09.2025

²⁹ Website: <https://www.cnpac.md/ro/> Accessed: 27.09.2025

³⁰ Website: <https://www.themoldovaproject.org> Accessed: 27.09.2025

³¹ Website: <https://www.aibi.it/ita/> Accessed: 27.09.2025

³² Website: <https://carousel.org/> Accessed: 27.09.2025



	<p>human rights. It provides social and medical services to people experiencing multiple vulnerabilities including those who are homeless, people who use drugs, sex workers, and individuals living with HIV, TB or infectious diseases. It engages in advocacy, training and research, and operates field programs to help vulnerable populations access services.</p>	<p>the Emergency Temporary Shelter (until Dec 2024), later expanded to a new day centre for migrants/refugees. Provided legal aid, psychosocial support, SRHR services, and exit support for families.</p> <p>Outcome B (Psychosocial support & resilience): Delivered psychosocial support in shelters and dispersed housing, and organised group activities.</p> <p>Outcome C (Capacity Building): investment in organisational capacity and human resource management)</p>
<p>ANAIIS³³</p>	<p>Asociația ANAIS, established in 2011, promotes and protects the rights of women, children, and young people, with a strong focus on supporting victims of domestic and gender-based violence. The association offers psychological and legal counselling, group support, and referral to specialized services. It also works on policy and legislative advocacy. Recently, it has extended its activities to support refugee women and children, including through hubs and projects that help with integration, information, and psychosocial support.</p>	<p>Outcome A (Child protection & emergency support): Strengthened legal and psychosocial services for survivors of domestic violence, including legal counselling, court representation, and psychological support. Introduced court protection orders to improve survivor safety.</p>
<p>Youth for Youth (Y4Y)³⁴</p>	<p>Youth for Youth Foundation (Tineri pentru Tineri, Y4Y) was founded in 1991 and is one of Romania's oldest youth NGOs. It focuses on sexual and reproductive health education, using peer education, teacher training, and behaviour change campaigns to equip young people with knowledge and skills for informed decision-making. Y4Y works with adolescents, teachers, and communities across the country, developing educational tools, training peer educators, and promoting youth participation in health and education policies.</p>	<p>Outcome A (Child protection & emergency support): Ran peer education, youth leadership activities, and the Intimisfera exhibitions on SRHR and prevention of sexual violence.</p> <p>Outcome C (Youth empowerment & education): Built peer educator networks and delivered youth leadership training, including collaboration with Carusel on SRHR capacity building.</p>
<p>ROUA DEIS³⁵</p>	<p>Asociația DEIS managed the ROUA Community Centre in Maramureș between 2022 and 2025, offering a safe and inclusive space for Ukrainian refugees. The centre provided psycho-social support, Romanian and English language classes, educational and recreational activities for children, humanitarian aid, and employment assistance. Over this period, DEIS and ROUA supported more than 2,500 people</p>	<p>Outcome A needs to be added</p> <p>Outcome B (Psychosocial support & resilience): Managed a youth centre providing psychosocial counselling, vouchers, and group activities.</p>

³³ Website: <https://asociatia-anais.ro/> Accessed: 27.09.2025

³⁴ Website: <https://y4y.ro/> Accessed: 27.09.2025

³⁵ Website: <https://www.deis.ro/centrul-comunitar-roua/> Accessed: 27.09.2025



	with help from a mixed Romanian-Ukrainian team.	
AMI (Independent Midwives Association) ³⁶	The Independent Midwives Association (Asociația Moașelor Independente, AMI) is a non-profit organisation dedicated to advancing midwifery in Romania according to European standards. It promotes woman-centred, respectful maternity and perinatal care, offers free prenatal and postnatal education, counselling, and health services for women and children, including for refugees. It also advocates for stronger recognition of sexual and reproductive health rights.	Outcome A to be added
Fundația Națională pentru Tineret (FNT) ³⁷	The National Youth Foundation (Fundația Națională pentru Tineret, FNT) was founded in 2007 as an umbrella organisation bringing together county youth foundations. It works to promote youth rights, participation, and access to opportunities for people aged approximately 14 to 35. FNT supports local youth NGOs, manages youth centres and clubs, and is active in youth policy, both nationally and in international youth networks.	Outcome D to be added

DEC 2B Plan International Poland (PiP)

Partner	Profile	Project Outcomes
FDDS ³⁸	Fundacja Dajemy Dzieciom Siłę (FDDS), known in English as the Empowering Children Foundation, is a Polish NGO founded in 1991 that works to ensure children grow up in safety, free from violence, abuse, and neglect. Based in Warsaw, FDDS runs a network of Child Help Centres in various Polish cities, providing psychological and legal support to children who have experienced abuse and their caregivers. The foundation also operates helplines, including the 116 111 number for children and teenagers, organizes educational programs and campaigns for children, parents, and professionals, conducts research on the prevalence of violence, and advocates for stronger child protection laws. Since the	Outcome A: Child survivors of abuse and neglect and their parents/caregivers access holistic support in safe, protective and supportive environments through Child Advocacy Centres Outcome B: The Child Advocacy Centre Network provides child survivors of abuse and neglect and their parents, access to holistic support, with increased capacity and coordination within the network.

³⁶ Website: <https://moasele.ro/> Accessed: 27.09.2025

³⁷ Website: <https://rotineret.ro/> Accessed: 27.09.2025

³⁸ Website: <https://fdds.pl/> Accessed: 23.09.2025



	beginning of the war in Ukraine, FDDS has additionally supported refugee children and their families in collaboration with UNICEF.	Outcome C: Child Protection Standards and risk mitigation are embedded and mainstreamed in non-child protection sectors, including sport and healthcare.
Non Licet Foundation Wrocław ³⁹	Established in 1994, Fundacja Non Licet is a Wrocław-based NGO dedicated to supporting individuals affected by domestic violence and crisis situations. The foundation offers free psychological, legal, and medical assistance to children and adults, including specialized services for Ukrainian families affected by the war. It operates the Children's Aid Centre and the Crisis Intervention Point, providing comprehensive support to victims of violence.	Outcome B: The Child Advocacy Centre Network provides child survivors of abuse and neglect and their parents, access to holistic support, with increased capacity and coordination within the network.
SZANSA Głogów ⁴⁰	Founded in 2001, SZANSA is an NGO in Głogów focused on preventing all forms of violence against children and youth. It offers psychological, legal, and educational support to children in crisis and their families. The association operates the Children's Aid Centre, providing a safe space for children and youth to receive comprehensive assistance.	Outcome B: The Child Advocacy Centre Network provides child survivors of abuse and neglect and their parents, access to holistic support, with increased capacity and coordination within the network.
ARKA Olsztyn ⁴¹	Stowarzyszenie Pomocy Dzieciom i Rodzinie "ARKA" (Olsztyn) Founded in 2002, ARKA is an NGO in Olsztyn dedicated to supporting children and families in difficult life situations. It operates the Day Care Home "Arka," providing educational, therapeutic, and recreational activities for children from disadvantaged backgrounds. The association also offers social assistance, family support, and activities promoting national and cultural awareness.	Outcome B: The Child Advocacy Centre Network provides child survivors of abuse and neglect and their parents, access to holistic support, with increased capacity and coordination within the network.
PMF ⁴²	Polskie Forum Migracyjne (PFM) is a Polish foundation established in 2007 to promote the rights and integration of migrants in Poland. The organisation provides psychological, legal, and employment support to foreigners, focusing on migrant women through initiatives like maternity schools and support groups. PFM also conducts intercultural education, organizes workshops and city games for children and youth, and offers training for teachers, psychologists, and public officials. The foundation is known for innovative approaches, such as creating Poland's first online advisory system for migrants and establishing libraries featuring migration literature. PFM is registered in the National	Outcome D: At risk children access holistic community-based PSS services and case management. Outcome E: The families and schools are environments where children can receive reliable and trusted support to cope with and mitigate protection risks.

³⁹ Website: <https://www.nonlicet.pl/> Accessed: 27.09.2025

⁴⁰ Website: <https://szansa.glogow.pl/> Accessed: 27.09.2025

⁴¹ Website: <https://arkaolsztyn.pl/> Accessed: 27.09.2025

⁴² Website: <https://forummigracyjne.org/> Accessed: 27.09.2025



<p>CEO⁴³</p>	<p>Court Register (KRS 0000272075) and operates as a public benefit organisation.</p> <p>Centrum Edukacji Obywatelskiej (CEO) is a prominent Polish non-governmental organisation founded in 1994. As the largest educational NGO in Poland, CEO collaborates with over 10,000 schools and engages approximately 40,000 teachers and school leaders annually. CEO's mission is to support all students in gaining valuable school experiences by collaborating with educators, school administrations, and students. The organisation offers a wide range of programs aimed at enhancing the quality of education and promoting civic knowledge, including professional development for teachers, educational programs in civic, economic, and global education, and initiatives supporting student self-governance and media literacy. CEO operates independently as a public benefit organisation under Polish law and is recognized for its contributions to education and civic engagement.</p>	<p>Outcome G: Adolescents have engaged in informal learning sessions, fostering increased self-awareness and strengthened leadership skills.</p>
<p>JF⁴⁴</p>	<p>Fundacja Jedność (Unity Foundation) is a Polish non-governmental organisation based in Kraków, established in 2014 by a group of educators and psychologists from Ukraine. Following the escalation of the war in Ukraine in 2022, the foundation relocated to Poland to continue its mission of fostering a peaceful, inclusive society through education and cultural exchange. In 2024, it engaged 1,555 children and 873 adults across 1,865 hours of classes. Key initiatives include the "Unity Connects" program for adults and the "Open Academy of Culture," which provides language courses and cultural workshops. Additionally, the foundation runs the "Unity" multicultural centre to promote tolerance and social cohesion among diverse communities in Kraków. Fundacja Jedność is primarily funded through individual donations and grant programs.</p>	<p>Outcome H: Ukrainian & Polish adolescents develop emotional resilience, self-awareness & coping mechanisms</p>

⁴³ Website: <https://ceo.org.pl/> Accessed: 27.09.2025

⁴⁴ Website: <https://fundacjajednosc.pl/> Accessed: 27.09.2025





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