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Rapid Protection Assessment- Evacuations

Sumy Oblast — May 2025



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Introduction

The security situation in Sumy Oblast significantly deteriorated in March 2025, with at least 6,927 explosions recorded due to attacks from the Armed Forces of the Russian Federation. These hostilities resulted in at least 14 fatalities and left 148 people injured. Of particular concern was the emergence and subsequent expansion of "grey zones" (insecure border areas that are not under full control of either side of the conflict, these locations are characterised by frequent shelling, limited state presence, and restricted humanitarian access) in Yunakivska and Khotivska hromadas, indicating areas with reduced control and increased risk to civilians.

The deterioration in the security situation prompted local authorities to issue mandatory evacuation orders in several frontline communities. On 13 March, the Sumy Regional Defence Council mandated the evacuation of residents from eight settlements in Yunakivska and Myropilska hromadas due to escalating hostilities and a dramatic increase in shelling (Suspilne, 13.03.25 [Евакуація із Сумщини: що відомо на сьогодні — Суспільне Суми](#)). Subsequently, on 27 March, authorities extended evacuation orders to four additional settlements in Krasnopilska hromada—Osoivka, Khmelivka, Vesele, and Lozove—following a notable intensification of attacks in the area (Ukrinform, 27.03.25 [На Сумщині ще з чотирьох сіл оголосили обов'язкову евакуацію](#)).

The communities of Yunakivska and Krasnopilska hromadas bore the brunt of these attacks. Yunakivska hromada reported a total of 2,284 explosions. Krasnopilska hromada faced 1,884 explosions, including an alarming frequency of guided aerial bombs (596 incidents). This severe bombardment caused widespread physical destruction, displacement, and considerable psychological distress among the local population (Cukr, 03.2025 [Показуємо на мапах обстріли Сумщини в березні – Цукр](#)). By early April, evacuation efforts had intensified across the region. In Krasnopilska hromada alone, around 4,000 individuals were evacuated over two weeks, leaving only about 150 residents, primarily elderly individuals who either chose to stay or planned to leave later (Espresso.TV, 02.04.2025 [global.espreso.tv](#); Ukrainska Pravda, 28.03.2025 [Українська правда](#)).

On 5 May 2025, the authorities announced the evacuation of residents of two additional border towns in Sumy Oblast—Vorozhba and Bilopilnia—due to intensified shelling and deteriorating security conditions. According to open sources, the combined population of these towns exceeds 10,000 people. Both towns are located along the Sumy–Kyiv railway line, raising concerns about potential disruptions to critical civilian transport routes and broader logistical consequences. This expansion of evacuation orders reflects the continued escalation of hostilities and the growing scale of displacement in the region.

Assessment methodology

DRC conducted a rapid protection assessment in Sumska and Lebedynska hromadas in Sumskyi raion. The assessment was not designed to be an in-depth study but rather a brief snapshot of the key protection risks faced by evacuees, challenges they face in the evacuation process, and to evaluate evacuees' safety perceptions and intentions. The assessment was intended to complement

regular and ongoing protection monitoring activities carried out by DRC in the targeted locations. The data collection was conducted from the 25th of March to the 28th of April 2025.

DRC conducted four focus group discussions (FDGs) consisting of 36 evacuees, including 20 female and 16 male participants. A further 21 key informant interviews (KIIs) were conducted with evacuees and service providers involved in the evacuation process, including 13 female and eight male participants. DRC used a mixture of random and purposive sampling to identify participants for the assessment. All interviews were carried out in person by trained Protection staff. While the assessment aimed to include diversity considerations among the participants, it is not representative of all diverse groups in Ukraine.

Assessment Findings

Evacuation Process

Findings from the assessment, indicate that the evacuation experience varied significantly across communities in Sumy Oblast during March-April 2025. It was reported that some evacuees benefited from timely notifications through door-to-door communication by local officials and telephone calls, enabling preparations for departure. However, others reportedly faced abrupt evacuations triggered by the sudden intensification of hostilities, notably aerial bombardments, artillery shelling and drone attacks, leading to heightened risks and challenges.

In communities such as Myropillia and Yunakivka, assessment participants advised that evacuations were relatively organised by local authorities, police, and volunteer groups. Notably, the specialised police evacuation unit known as the "White Angels" was frequently mentioned by respondents as playing a crucial role. It was reported that volunteers also significantly contributed by evacuating vulnerable individuals, including persons with disabilities who required stretchers and blankets. An older female assessment participant from Krasnopillia, who evacuated with her husband in their car, reported, **"People knew that the White Angels were evacuating every day, so they were gathering at 5-6 am and waiting for them."** Respondents highlighted significant involvement from non-governmental organisations and the police unit White Angels, who coordinated with local authorities to evacuate residents from severely impacted areas.

Testimonies collected through key KII and FDGs revealed significant discrepancies in experiences of evacuation support, even within the same hromadas. Some respondents from Bilopillia and certain parts of Krasnopilska hromada (including Uhroidy and remote villages near the border) reported a lack of coordinated evacuation, describing scenarios where residents had to self-evacuate amidst active hostilities. **"We left the Bilopilska hromada ourselves. Before the evacuation, the starosta [head of hromada] came and told us about the evacuation and that we had to leave,"** shared one FGD participant. Another noted, **"No one organised anything in our village. If the soldiers had not taken me away, I would have died from the loss of blood. The drone flew into my house"** (Bilopillia community).

These contrasting experiences appear to stem from several intersecting factors, including the timing of evacuation (before, during mandatory orders or at the end of the evacuation when the security situation had further deteriorated), the level of social connectivity of individuals, and geographic location. Evacuees who left before mandatory orders were issued often lacked access to organised transportation, while those in remote or frontline settlements reported almost complete absence of organised evacuation efforts. As one evacuee from Myropilska hromada explained, **“There was no evacuation. We were lucky that public transport was still running. But many rode bicycles or walked to Rybitsa.”** Another FGD participant added, **“We left the village with a motorbike... we had drone fibre-optic cables right in front of our faces. We had to clear the road from it ourselves.”**

In some areas, elderly people and those without internet or smartphones were less likely to receive evacuation updates in time. **“Evacuation information was posted on Facebook, but how should an old, deaf, lonely person know about this?”** one elderly couple from Krasnopillia asked. An elderly woman from Yunakivka noted, **“It would be better if the evacuation was announced on the radio, because many people had to find out about it on their own.”** A woman evacuated from Krasnopillia stated that her niece found crucial contact information online, highlighting the difficulties faced by elderly individuals without internet access or smartphones. **“Workers from the Ministry of Emergency Situations drove around the village announcing evacuations via loudspeakers, but I couldn't understand clearly,”** she explained. **“I had to walk 9 kilometres to reach the evacuation point.”** Additionally, multiple respondents reported insufficient official communication about evacuation plans. Instead, information dissemination heavily relied on digital platforms that is often inaccessible to many elderly residents and on drivers who provided real-time updates during transportation. A 69-year-old woman described being evacuated spontaneously after being spotted by a humanitarian organisation, emphasising a complete absence of communication about the evacuation process beforehand.

Several respondents emphasised the need not only for organised evacuation, but also for clear communication about the process. As a participant stressed, **“It is necessary not only to organise the evacuation process, but also to explain where people are going, where they will live, and for how long.”** Many respondents highlighted the vital role of evacuation drivers as primary information sources during transit, providing essential details about destinations, available accommodation, and immediate next steps. A 63-year-old disabled man from Krasnopillia recounted his experience, **“I was taken directly from home by local authorities. The driver explained during our journey where we were headed and what to expect.”** However, he noted waiting three days after registering due to high demand and limited transportation capacity. In some settlements, including Krasnopillia, it was reported that local authorities compiled such informal lists on their own initiative to better organise evacuation and plan transportation capacity.

Another evacuee from Khmelivka praised local community efforts, indicating, **“Communities made lists well in advance, contacting residents individually to confirm their willingness to evacuate.”** Other evacuees also highlighted the logistical challenge, noting there was only one centralised evacuation point. Evacuee from Krasnopillia shared: **“When we were leaving, there was no electricity or communication. And how can you evacuate in only one place?”** An elderly woman from Krasnopilska hromada shared her evacuation experience: **“A mass evacuation was organised**

in the open air. Drones were flying. We were afraid to go there. We also have a 97-year-old grandmother. She does not walk. The White Angels helped us to leave”.

Assessment participants reported that evacuation conditions varied greatly, with strict limitations on personal belongings often imposed due to limited vehicle space. A 75-year-old woman from Krasnopillia explained, **“We had only 10 minutes to pack medicines and a change of clothes because space was so limited.”** Similarly, a disabled 55-year-old woman from Khmelivka recounted, **“I could only carry essential items as I had crutches, making it impossible to take larger items like bedding.”**

Despite some organisational success, significant gaps remained in supporting low-mobility and isolated elderly residents, who were often reliant solely on volunteer efforts. A 62-year-old woman from Krasnopillia noted, **“Many elderly and disabled people were left behind without any support from the community authorities; volunteers were their only hope.”**

Overall, while some evacuations were commendably organised by local authorities and humanitarian actors, substantial inconsistencies across Sumy Oblast exacerbated protection risks, particularly affecting vulnerable populations.

Access to Information and Services Following Evacuation

Evacuees frequently reported inadequate and inconsistent access to information about the evacuation and post-arrival phases. Many individuals were unaware of their destination, the conditions awaiting them, or what assistance they could receive. As one focus group participant remarked, **“It is necessary to organise not only how to leave, but also to explain where people are going and where they will live.”** This lack of clarity contributed to heightened anxiety and confusion, especially during moments of departure.

Information about services, accommodation, and available support was often conveyed by evacuation drivers, though the quality and completeness of this information varied. While some evacuees were informed during transit, others described feeling lost and uncertain. **“There is no information about available dormitories,”** one participant stated, underscoring a significant gap in timely and accessible guidance. Many evacuees were initially unaware of their accommodation destination upon departure. One woman from Krasnopillia explained: **“We came to Sumy and didn’t know where and to whom we could go, so we rented an apartment for 2 days for 3,000 UAH. Until we went to the transit centre for consultation, we had no plan for further actions.”**

Upon arrival, the Transit Centres in Sumy played a crucial role in bridging the information gap. Respondents consistently reported receiving detailed and structured assistance there. A 65-year-old evacuee from Khmelivka shared: **“They tell you everything in the Transit Centre: where to register as an IDP, where to get a certificate of mandatory evacuation, what assistance you can get.”** Another family added, **“When we arrived at the Transit Centre, we were explained what was going to happen here, who to contact, what documents were needed, and what help we could get.”** However, long queues were a frequent complaint, usually reportedly resulting in delays in service provision.

Access to information is especially limited for elderly persons, individuals with disabilities, and those without smartphones or internet. A respondent from the collective centre noted, **“We want to know the news, the situation in the country, whether the house is safe. But our phones are old, still push-button, and we don't have a TV.”** Suggestions included posting printed announcements in communal areas or having dormitory managers and local officials disseminate information directly. **“It is desirable that the dormitory manager should tell us, or community representatives should call and tell us about available assistance,”** one participant proposed.

Access to health services was another reported concern, especially for evacuees with mobility issues or chronic illnesses. A 63-year-old man with a disability highlighted: **“There is a lack of transportation services for evacuees with reduced mobility to government and medical facilities.”** While some reported being able to reach family doctors by phone or receive house visits, this support was not uniform. **“Our doctor moved here to Sumy. She also sees people over the phone,”** one participant said. Another shared: **“My mother, when she was sick, the doctor came to our dormitory.”**

Additionally, many evacuees emphasised the need for psychosocial support. Feelings of loneliness and confusion were commonly reported. A KII respondent noted the need for **“assistance in solving logistical issues, social and individual support, and organisation of common leisure activities for evacuees so that people do not feel confused and lonely—board games, watching TV programmes, listening to the radio.”**

Barriers to legal and administrative services also emerged. Loss or absence of documents complicates access to assistance or compensation, especially among the elderly. A service provider explained that **“many people, especially those from remote villages, do not have any documents for their homes. Or it was built, but the documents were not drawn up. Or it was bought against a signature.”** Several evacuees shared that they forgot or lost essential documents during the evacuation process, which significantly impacted their ability to register for assistance. One focus group participant stated, **“My house documents were left at home. I don't know if my house is still intact.”** Another respondent explained, **“I have no ownership rights to my house. I bought the house in 1985. Back then, everything was easier with documents... Now there are a lot of documents. I only have a residence permit.”**

Elderly evacuees and persons with disabilities faced additional challenges in accessing administrative services due to mobility and financial limitations. A 63-year-old man with a disability shared, **“I don't receive pension payments and need to go to the pension fund in Sumy to resolve this. But I suffer from coxarthrosis—I limp and experience severe pain when walking. I can't get there on my own by public transport, and I can't afford a taxi.”**

In conclusion, despite effective support at centralised facilities like the Sumy Transit Centre, critical information gaps persisted before and during evacuation. These disproportionately affected the persons most at risk—those isolated, digitally excluded, or with limited mobility. Participants consistently highlighted the need for alternative communication channels, personalised assistance, and proactive information-sharing by humanitarian actors and local authorities to ensure that evacuees are adequately informed, connected, and supported.

Access to Safe and Secure Accommodation

Accommodation quality and adequacy varied widely across Sumy Oblast. Some evacuees described positive experiences, particularly in Lebedyn, where they received bed linen, food from volunteers, and warm rooms with hot water. However, these cases appeared to be the exception rather than the norm. **“The most urgent need for evacuees, those who cannot rent a house on their own or have no relatives, is to find a roof over their heads,”** shared a 65-year-old man from Khmelivka, highlighting the centrality of housing among displaced populations.

Other respondents faced serious shortcomings, ranging from inadequate water quality, which reportedly led to health issues such as diarrhoea, to the absence of necessities, including hygiene products, cooking utensils, and bedding. **“People are leaving everything they have, and the rest is just a roof over their heads, and it is temporary,”** stated a humanitarian worker conducting evacuations. A service provider further noted: **“The primary need is housing. After three years of war, there is nowhere to take people. Nothing is equipped. For example, people were provided with premises in the Shostka prison. This is not normal.”**

Even when accommodation was available, cost, conditions, and length of stay remained unclear for many. One evacuee shared: **“It was said that for now, people can live in this dormitory for an indefinite period, but the terms and cost of living in the future were not announced.”** Another mentioned that she was paying 1,200 UAH per month for heating, which would decrease to 500 UAH during summer. Financial and humanitarian aid distribution was also reported to be inconsistent, leading to gaps in securing adequate living conditions. As one evacuee stated: **“I registered twice for financial aid but still have not received any funds,”** reflecting poor coordination between service providers. These financial challenges left many unable to consider alternative housing options. A 55-year-old woman with a disability from Khmelivka said: **“People have nowhere to go, no money to rent a house. Everyone is concerned about one question: what to do next, where to live.”**

Many evacuees expressed a strong desire to live separately from strangers or in private housing. **“People want to return to their homes, or to be able to live separately, not in a dormitory, in the same room with strangers,”** shared a 73-year-old woman currently living with her husband and daughter in a collective centre. The lack of privacy, limited space, and dependence on humanitarian assistance exacerbated feelings of instability and emotional fatigue.

Long-term housing solutions remained largely undefined, with unclear communication regarding costs, conditions, and duration of stay. According to another service provider, **“In the villages, houses cost 50,000 UAH, and the registration of the house will be even more expensive. There are villages where there is free housing, but there is no work. And in those villages where there is work, there are no free houses. And the state does not take on the responsibility for the settlement but shifts the responsibility to humanitarian organisations.”**

The economic hardship of displacement was a persistent theme. A 54-year-old man with a disability from Yunakivka expressed: **“It’s hard to live in the city, food is expensive, and we have to pay for housing. As soon as the situation changes, and we all hope so, we will go home.”** A 58-year-old

single mother from Krasnopillia shared: **"We have no choice because we have no money. I want to find a house in the city or the countryside and settle there with my family. I would plant a garden to grow my own vegetables and berries."**

In summary, while emergency shelter was often made available to evacuees, the lack of comprehensive and dignified housing strategies, combined with ambiguous policies, financial constraints, and poor communication, left many vulnerable individuals and families in states of uncertainty and distress. Urgent attention is needed to develop coherent, affordable, and inclusive housing solutions for displaced populations—especially for those with limited mobility, disabilities, or no support networks.

Safety and Intentions

Safety perceptions among evacuees remained mixed, primarily due to ongoing shelling near temporary places of living. Many respondents frequently expressed anxiety, noting continued shelling in areas such as Sumy. **"We feel anxious because the city continues to be shelled. We regularly use the shelters,"** one evacuee reported. Specific concerns arose about living in multi-story buildings, perceived as particularly vulnerable, as articulated by one participant: **"If there's a shelling, the building will collapse."** Access to shelters was particularly problematic for mobility-impaired individuals, who depended significantly on community support to reach safe locations during alarms. Respondents emphasised the need for better-equipped shelters catering specifically to individuals with disabilities.

Significant security incidents in evacuees' original locations greatly influenced their anxiety and decisions to evacuate. One respondent from Ugrody vividly described their experience: **"At home in recent days, the house was constantly shaking from explosions."** Another evacuee recounted the severity of shelling, stating, **"We spent the night in the cellar because of the heavy bombing. It was the worst night of our lives. Our street was destroyed completely, and we saw horrific outcomes from the attacks."** Furthermore, numerous respondents described severe security threats, including guided aerial bombings, missile strikes, and drone attacks, highlighting a critical need for secure shelter infrastructure in frontline communities.

Despite these safety concerns, participants generally reported an absence of additional threats, such as crime or harassment, in their temporary accommodations, demonstrating effective community management of safety within displacement sites.

Most evacuees expressed a strong desire to return home once the security situation permits. Respondents emphasised emotional and practical attachments to their homes, gardens, and livestock. **"We really hope we will be able to return home,"** one evacuee from Krasnopillia stated, indicating their willingness to remain temporarily until conditions improve. Another participant echoed similar sentiments: **"People realise they need evacuation yet hope until the last moment that the security situation changes, allowing them to stay home."**

Evacuees underscored various practical constraints influencing their intentions, particularly financial limitations. **"We have nowhere else to go. We will stay here until it's safe to return"**

home," summarised the prevalent sentiment. Many respondents cited the high costs associated with renting alternative accommodations and paying utilities as key barriers to relocation.

The psychological toll from evacuation and ongoing insecurity was evident. A respondent described heightened stress and fear, talking about a place of temporary living, saying, **"People hear fighter planes, explosions constantly. This makes living here very stressful and uncomfortable."** Many evacuees reported emotional distress from ongoing uncertainty and frequent reminders of violent experiences. One participant recounted a potential traumatic moment from direct attacks, noting, **"The House of Culture was smashed by missile attacks, leaving us without electricity and communication."**

Although a majority expressed intentions to return home, some evacuees considered alternative longer-term plans, including relocation to safer regions or living arrangements outside collective centres due to safety concerns. One respondent noted their family's hope to move closer to relatives in Ivano-Frankivsk, highlighting ongoing discomfort with safety conditions in Sumy.

In conclusion, most evacuees demonstrated a desire to return home, driven by strong emotional connections and practical constraints. Their decisions and intentions were heavily influenced by severe and ongoing security threats in their original locations, financial realities, and the availability of supportive measures at displacement sites. Effective long-term strategies must prioritise security improvements, clearly communicate available support, and ensure adequate shelter provisions tailored to diverse needs.

Psychological and Physical Needs

The psychological and physical toll of evacuation on affected populations in Sumy Oblast remains alarmingly high. Evacuees frequently described a profound sense of fear, confusion, and exhaustion caused by both the evacuation itself and the traumatic events preceding it. Many individuals report that they continue to live in a state of heightened anxiety, with little sense of safety or stability even after relocation. As one participant stated, **"People feel physically safer, but morally it is very hard. Everyone's thoughts are at home."** A sense of safety is crucial for the psychological recovery process after a highly distressing episode. If the sense of safety is not recovered soon, the risk of developing anxiety disorders, including PTSD, increases. The overwhelming emotional burden of displacement, loss of homes, and uncertain futures has significantly impacted mental well-being across all age groups.

A common narrative among evacuees is the persistence of anxiety and sleeplessness, particularly in temporary shelters and transit centres. Conditions at these facilities were described as chaotic and mentally distressing. **"The first night in the Transit Centre was very difficult. I stayed awake all night because I couldn't sleep: people were walking around all night, shouting, eating, crying, moaning... Psychologically, it was hard, I was thinking all night long about what to do next, how to live,"** reported one individual. Another evacuee added, **"I am very tired, I want to take a bath and sleep. What kind of sleep is there: someone is moaning, someone is crying, someone is walking around at night."**

The psychological strain is compounded by the long-term uncertainty of their situation. People frequently described a sense of being "stuck" — unsure of what the next step should be or whether they would ever return home. ***"But I don't know what to do next, I am morally depressed,"*** shared one respondent. The emotional burden was often linked to concerns about housing, education, safety, and family separation. ***"There are new topics to think about at night: what to do next, where to go, where my son will study next year,"*** said another.

Physical conditions are also concerning. In addition to injuries sustained during shelling or evacuation, individuals reported ongoing physical exhaustion and deteriorating health conditions. ***"My physical condition is bad. There is emptiness and uncertainty in my life,"*** expressed one participant. Despite evident needs, access to psychological support remains limited. As one elderly participant emphasised, ***"Everyone here lives in constant tension and fear."***

Elderly individuals particularly reported heightened vulnerability and anxiety, exacerbated by physical limitations and loss of independence following evacuation. This demographic repeatedly called for increased psychological and emotional support tailored to their specific circumstances. Many evacuees continue to experience symptoms related to anxiety even in perceived safer locations such as Sumy. One woman described ongoing distress: ***"I feel anxious because there is shelling nearby. We run away, and they catch up with us everywhere. But it's still safer here than it was at home."*** This sense of never being fully safe — even after evacuation — can contribute to chronic psychological stress and complicates recovery. Facing a stressful event that exceeds the capacity to cope might activate some people to develop basic defence mechanisms such as 'denial', then, in the long term, hinder the recovery and adaptation process. A man currently living in a dormitory expressed disbelief and sadness about the situation: ***"I don't want to believe in what is happening... I am still in a state of confusion and therefore do not understand how to cope with the new circumstances."***

It was reported that the impact of the conflict on mental health is widespread and worsening. One respondent explained, ***"The psychological state of everyone is difficult. We used to see the war only on TV, but now we see it in real life."*** She also shared that she had been treated for depression and anxiety disorder. People who already had certain difficulties in mental health related to depression and or anxiety face exacerbations of the previous symptoms, making it more difficult to cope with the current distressful events. Another evacuee stated plainly: ***"People only think about the near future. People are frightened and confused, they plan nothing longer than a few weeks."*** This short-term mindset is indicative of survival-focused coping, which further reflects the scale of distress and disorientation among the affected population.

Overall, the psychological and physical consequences of the evacuation in Sumy Oblast are severe and continue to affect people's daily functioning and well-being. There is an urgent need for tailored mental health, psychological and psychosocial support services, particularly in host communities and dormitory-style accommodations. Special attention should be given to vulnerable groups such as the elderly, children, and those who have been injured or separated from family. Without comprehensive support, the long-term recovery and resilience of evacuees remain at serious risk.

Recommendations

Based on the key findings of this Rapid Protection Monitoring Report, the following recommendations are proposed to address identified gaps in protection, improve the quality and consistency of the evacuation process, and strengthen humanitarian support for displaced populations in Sumy Oblast:

1. Enhance coordination and information systems for evacuations

- Actively disseminate information about the existing evacuation hotlines in high-risk hromadas, especially among vulnerable and isolated populations, using accessible and offline channels (low awareness among respondents indicates it is currently underutilised).
- Encourage local authorities in high-risk hromadas to proactively compile voluntary evacuation lists in advance of escalation, including key needs and mobility restrictions of residents, to support more efficient planning and transport allocation.
- Develop and disseminate easy-to-understand pre-evacuation checklists in high-risk communities, covering essentials to pack, where to go, what to expect, and how to access follow-up support, with versions tailored to elderly audiences.
- Improve multi-channel communication strategies by disseminating timely evacuation-related information via local loudspeakers, community networks, printed notices, and door-to-door outreach, especially targeting elderly and digitally excluded populations.
- Strengthen coordination mechanisms between local authorities and non-governmental organisations to ensure consistency in evacuation messaging and reduce disparities in evacuation quality across locations.

2. Improve accessibility and inclusion in evacuation and reception

- Expand social taxi or transport assistance services in host municipalities to support low mobility evacuees (e.g., older persons, people with disabilities) in accessing healthcare, social services, and administrative offices.

3. Strengthen access to information, documentation, and legal aid

- Organise regular (e.g., monthly) outreach visits from social protection workers to collective centres to update residents on available services, address concerns, and refer individuals for further support. These sessions should cover topics such as social assistance, relocation options, and access to healthcare, etc.
- Organise regular legal and administrative support to collective centres and host locations to assist evacuees with IDP registration, updating residence information, and accessing financial assistance schemes.
- Provide clear and written guidance (e.g., leaflets or posters) on entitlements, available services, and steps for relocation, tailored to various literacy levels and distributed in all shelters and transit centres.

4. Improve health and psychosocial support services

- Facilitate mobile outreach visits (e.g., monthly) from healthcare workers or representatives of local health departments to collective centres, especially those housing elderly populations, to monitor health status and refer for specialised care.
- Expand access to mental health and psychosocial support through trained staff or mobile psychologists, especially in high-density displacement sites. Psychosocial interventions should address anxiety, trauma, and social isolation.
- Promote group-based psychosocial activities, including recreational programming (e.g., movie screenings, board games, creative workshops), to foster social interaction and psychological recovery.

5. Ensure minimum standards in the collective centres' conditions

- Encourage municipalities to develop and disseminate clear guidelines on rules, rights, and obligations within collective centres (e.g., duration of stay, payment requirements, contract procedures) through leaflets and verbal orientation upon arrival.
- Standardise reception conditions in transit and collective centres to ensure the provision of basic items such as bed linen, hygiene kits, kitchen supplies, and clean drinking water.
- Improve access to reliable internet connections in collective centres to ensure evacuees can access news, online services, and communicate with relatives.

6. Support long-term accommodation and integration

- Expand support to evacuees searching for long-term housing solutions, including legal, financial, and logistical assistance. Collaborate with municipalities and humanitarian actors to identify available housing stock, provide support with repair works if needed and match to vulnerable households.



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