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# Rapid Assessment Experiences and Needs of Adolescent Girls

Koriukivskyi and Nishynskyi rayons, Chernihiv Oblast



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## Introduction

Adolescent girls in emergencies are especially vulnerable to gender-based violence (GBV) due to their age and gender intersectionality. The ongoing war has severely affected the lives of adolescent girls in Ukraine. The UN Women Progress Report on Gender Equality and Women's Empowerment in Ukraine (2023)<sup>1</sup> indicates that the conflict worsens existing gender inequalities, increasing adolescent girls' risk of GBV, including sexual violence, trafficking, and exploitation. These girls also experience significant disruptions to their education, healthcare, and social support systems, along with added burdens related to unpaid care work, as noted in a Rapid Gender Analysis by CARE International<sup>2</sup>. The conflict's trauma has led to serious mental health issues, including anxiety, stress, and depression, stemming from exposure to violence and loss of support networks. The UNICEF Ukraine Humanitarian Situation Report (2023)<sup>3</sup> underscores the urgent need to enhance mental health and psychosocial support services to meet the psychological needs of these vulnerable girls, who often lack access to such resources

In 2023, DRC established GBV programming in Kharkiv, Mykolaiv, Chernihiv and Zaporizhzhia Oblasts and in 2024 DRC began implementing the [Girl Shine Life Skills Curriculum](#) as part of the Girl Shine programme model developed by the International Rescue Committee with adolescent girls in the project locations. DRC completed a rapid assessment with adolescent girls, their caregivers and key informants to understand the needs and experiences of teenage girls to help inform its GBV activities with girls. The assessment was not designed to be an in-depth study, but rather a brief overview of the needs and experiences of adolescent girls in the assessed hromada's.

## Assessment methodology

The Rapid GBV Assessment on Experiences and Needs of Adolescent Girls was conducted in Koriukivskiyi (Sosnytska and Koriukivska hromada's) and Nizhynskiyi rayons (Bakhmatska and Borznianska hromada's) of Chernihiv Oblast, between 9 September and 4 October 2024. DRC completed four focus group discussions (FGDs) and 6 key informant interviews (KIIs), with 49 participants, including 1 male and 48 females ranging in age from 15 to 60+ years.

DRC used a mixture of random and purposive sampling to identify participants from the assessment. Assessment participants included community members and representatives from healthcare actors, teachers, state social services and adolescent girls. While the rapid assessment aimed to include diversity among the ages, locations, and vulnerabilities, it does not represent all diverse groups in Ukraine. The assessment was carried out by the GBV team by staff members who have received training in GBV assessments, GBV core concepts, and responding to disclosures.

## Assessment Findings

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<sup>1</sup> Empowering Women and Girls in Ukraine, UN Women Progress Update, January-June 2023, available [here](#)

<sup>2</sup> Rapid Gender Analysis, Ukraine, CARE, August 2024, available [here](#)

<sup>3</sup> Ukraine Humanitarian Situation Report n°35, UNICEF, January-December 2023, available [here](#)

## Needs of Adolescent Girls

The conflict has significantly affected the mental health and well-being of adolescent girls. It was reported that many have become more anxious, withdrawn, aggressive, and prone to risky behaviours such as regularly missing classes, spending time in unsafe places and experimenting with drugs, alcohol or tobacco products. The constant threat of air raids and disrupted education has contributed to these challenges. During focus group discussions in Koriukivska and Borzna adolescent girls have reported a shift in their responsibilities and leisure activities since the war started because many men (fathers) in Chernihiv Oblast had to go to the army indicating increased domestic burdens. *“The girls took on the responsibilities of a father in half with their mother”* (Focus group discussion parent participant, Koriukivska hromada, Chernihiv Oblast). This shift affects their ability to enjoy leisure time, and the additional burden of household tasks and decision-making can lead to social isolation.

Despite the efforts of the Social Service providers in Koriukivskyi and Nizhynskyi rayons, there is a lack of dedicated spaces and resources for adolescent girls to meet, socialise, and receive support. This is particularly evident for girls with disabilities. While there are efforts to provide information on sexual and reproductive health, internet safety, and career guidance, there is a need for more comprehensive and accessible programmes that address the specific needs of adolescent girls. Adolescent girls with disabilities face even greater challenges in terms of access to social activities and support. The lack of safe spaces for adolescents to gather and seek support is a pressing concern. *“There is a specific need for a place where they can gather informally... they meet in the streets and parks”* (Key informant, Borznianska hromada, Chernihiv Oblast). Safe spaces in the community for adolescent girls to meet are crucial for fostering connections and mutual support, particularly during armed conflicts where traditional social networks may be disrupted.

## Safety and Protection from Violence

During focus group discussions in Koriukivska and Borzna adolescent girls express a strong sense of safety at home but feel vulnerable in specific areas of their town/village with no streetlights and a lack of sidewalks. It exacerbates their safety concerns while walking, especially in the dark. Additionally, they mentioned carrying pepper spray for self-defence and frequently calling parents for pickups. Adolescent girls expressed concerns about men with substance abuse issues, who often exhibit aggressive or unpredictable behaviour, as well as safety worries about releasing inmates and stray dogs in their surroundings.

Domestic violence remains a significant risk for adolescent girls, including physical punishment from caregivers, such as hitting with a belt and witnessing domestic violence between caregivers. Many girls do not receive support from their parents and are vulnerable to abuse. *“The biggest risk and problem are domestic violence... Many families do not identify these cases as violence”* (Key informant, Sosnytska hromada, Chernihiv Oblast). Many families and parents are not ready to respond to or report cases of domestic violence, often due to stigma and fear. Emotional instability among adolescents is a significant issue linked to exposure to violence. *“Many girls have become aggressive and withdrawn... they find it difficult to make social contacts”* (Key informant, Koriukivska hromada, Chernihiv Oblast). According to the participants of FGDs, there is a need for more comprehensive GBV prevention and response mechanisms, including accessible reporting channels, shelters, and counselling services.

It was reported that adolescent girls face security threats online, including cyberbullying, harassment, and exposure to harmful content, including content depicting war which often brings feelings of anxiety and fear. During FGDs, adolescent girls indicated a preference for turning to friends, parents, and teachers for support.

*“First of all, to turn to friends, parents, police, teachers”* (FGD adolescent girl participant, Koriukivska hromada, Chernihiv Oblast).

## Sexual and Reproductive Health and Rights

Access to quality sexual and reproductive health services and accurate information is essential for empowering adolescent girls to make informed decisions about their bodies, relationships and sexual health. The assessment noted that adolescent girls have limited access to comprehensive information on sexual and reproductive health, leading to misconceptions. Their primary source of information is the Internet, followed by advice from peers and influencers. Many girls lack comprehensive knowledge about their bodies, reproductive health, and rights. Misinformation can lead to risky behaviours and poor health outcomes.

Societal stigma and taboos surrounding sexual health and sexuality can prevent open discussions and access to services and can prevent girls from seeking the necessary information and services. There may be limited availability of sexual and reproductive health services, particularly in rural areas and for girls with disabilities. The stigma surrounding sexual health can hinder open discussions between adolescents and their parents. *“The biggest barrier is the lack of awareness among parents... not all adolescent girls can discuss such issues with their parents”* (Key Informant, Sosnytska hromada, Chernihiv Oblast). Educational programmes targeting parents are essential to bridging this gap and fostering healthier communication at home.

The conflict has disrupted access to healthcare services, including those related to sexual and reproductive health. Transportation to the medical facility from remote villages is among the main barriers. Many healthcare systems are not equipped to address the specific needs of adolescents, often lacking youth-friendly services and confidentiality. A Key informant stated, *“Teenagers have difficulty accessing gynaecologists... parents are often required to be present”* (Key informant, Borznianska hromada, Chernihiv Oblast). Offering confidential and youth-friendly services is vital to ensure that adolescents can seek help without fear or embarrassment.

## Adolescent Participation

Adolescent participation in family decision-making is crucial for their development and well-being. While many adolescents during focus group discussions in Koriukivska and Borzna feel their opinions are valued, barriers to open communication still exist. While some adolescents find it easy to share their ideas, others struggle with this process. Half of the girls mentioned, *“It was easy for me to share my ideas with adults”* (FGD adolescent girl participant, Borznianska hromada, Chernihiv Oblast), while the other half reported difficulties. This disparity suggests that family dynamics and communication styles vary widely, indicating a need for improved dialogue between parents and adolescents.

Additionally, they mentioned carrying pepper spray for self-defence and frequently calling parents for pickups. It indicates that parents recognise the importance of adolescent input, yet the extent to which these influence decisions may vary based on individual family dynamics. Factors such as ongoing conflict and social pressures can influence the extent of adolescent participation. Adolescents reported feelings of anxiety about their future and the state of their country, which may hinder their ability to engage fully in discussions. *“There is a war, there are worries about the country and parents”* (FGD adolescent girl participant, Borznianska hromada, Chernihiv Oblast).

## Recommendations



- Conduct awareness-raising campaigns to challenge harmful stereotypes and promote open discussions about sexual health.
- Humanitarian actors should support the creation of safe spaces for adolescent girls where they can engage in peer-to-peer support, receive psychological services, and participate in empowerment activities. These spaces should offer educational programmes on GBV, sexual and reproductive health and provide a safe space for socialisation, mental health support, educational programmes, and career guidance.
- Develop inclusive programmes and facilities that cater to the needs of adolescent girls with disabilities.
- Develop and deliver age-appropriate educational programmes on sexual and reproductive health, internet safety, and career guidance. Collaborate with schools and community organisations to ensure widespread access to this information.
- Provide educational programmes targeting caregivers to challenge the stigma surrounding adolescent sexual and reproductive health and promote communication between adolescents and caregivers.

