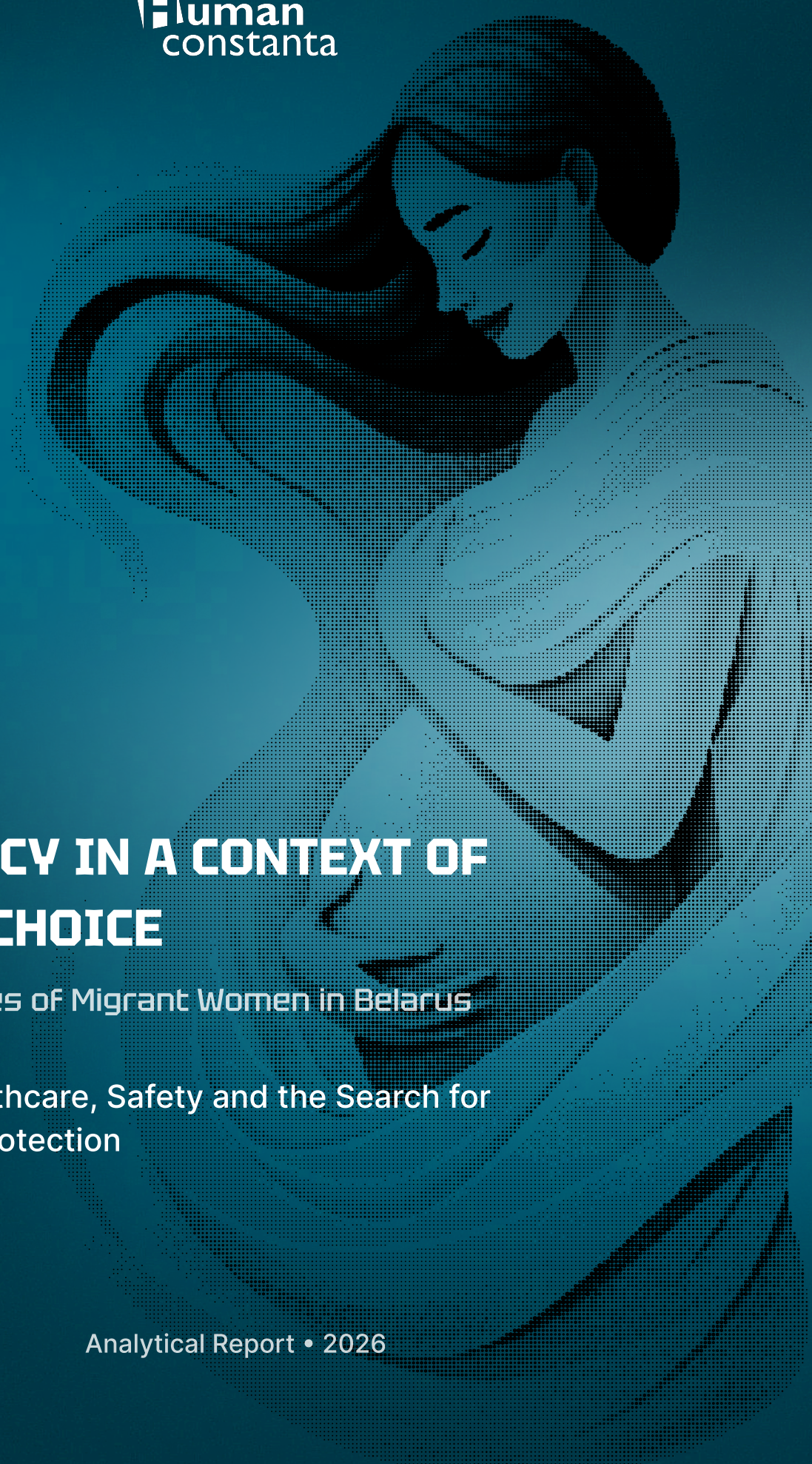




PREGNANCY IN A CONTEXT OF LIMITED CHOICE

The Experiences of Migrant Women in Belarus

Access to Healthcare, Safety and the Search for
International Protection

This report examines the situation of migrant women who were pregnant while in Belarus, including those who intended to continue their journey to the European Union. The study included women with both regular and irregular migration status, including those who had arrived to study. Their plans to move on may have taken shape before they arrived in Belarus or while they were living in the country. The report examines women's access to medical and humanitarian assistance, their living conditions, safety and opportunities to obtain international protection.

The decision to conduct this study arose from Human Constanta's work: we were receiving increasing numbers of requests from pregnant women facing a combination of financial hardship, insecure housing, difficulties accessing healthcare and fear of detention, removal or separation from their child. Changes to the rules governing access to international protection at the Poland-Belarus border, which provide an exception for pregnant women, added new questions and expectations about the possibility of crossing the border and obtaining protection to these existing problems.

We decided to draw together our accumulated experience and speak directly to women to better understand their needs and the circumstances in which they make decisions. We also wanted to examine whether pregnancy was linked to plans for onward migration. Comparing the interview findings, the organisation's casework and the legal framework reveals how financial, housing and legal difficulties compound one another and shape the ways in which women seek safety.

Report prepared by Enira Bronitskaya with support from the Human Constanta team working to protect the rights of foreign nationals and stateless persons, as part of the activities of the Humanitarian Observatory of Central and Eastern Europe (HO CEE).

About the Organisation

Human Constanta is a Belarusian human rights organisation founded in 2016 and operating in exile since 2020. Its mission is to operate as a cross-sectoral, transnational organisation with Belarusian roots, responding to current human rights challenges. Human Constanta's long-term goal is a civic space in which repression can no longer succeed by leaving people without legal protection and vulnerable to digital threats.

The organisation's current priorities include addressing:

- the lack of accessible, qualified legal assistance and legal agency for people in Belarus;
- the vulnerability of foreign nationals and stateless persons in the country;
- the high risk of politically motivated persecution of people both within and outside Belarus.

The organisation works with people who take action: activists and grassroots initiatives, lawyers, students, people facing political pressure, as well as foreign nationals and stateless persons who have no one else to turn to for help in Belarus.

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Key Findings

During pregnancy, women have a particular need for healthcare, safe housing, adequate means of subsistence and legal support. Yet financial hardship, the lack of stable housing, problems with documents and fear of approaching the authorities prevent them from obtaining the assistance they need and finding safe living conditions.

Healthcare remains fragmented. Access to individual consultations and examinations does not ensure regular follow-up or the ability to follow prescribed treatment. Limited insurance coverage and the need to pay for routine antenatal care, medicines and further treatment out of pocket create barriers to continuous care.

Temporary housing does not always provide safety. Staying with acquaintances helps women avoid sleeping on the streets but can leave them dependent on their hosts. A lack of accessible alternatives limits their ability to leave unsafe accommodation, increasing the risk of exploitation and violence.

Risks arise even before women lose their migration status. Regular migration status does not in itself ensure stability. For female international students, education, housing and migration status are closely linked: the loss of financial support can jeopardise all three at once. Pregnancy, in turn, increases expenses and the need for support and may also limit employment opportunities.

Violence and fear of seeking protection deepen the crisis. Fear of document checks, detention and removal prevents women from seeking help and asserting their rights. Where a woman also lacks safe housing and access to the support she needs, the consequences of violence compound her existing vulnerability in relation to health, finances and legal status.

The exception for pregnant women to the restrictions on accepting applications for international protection at the Poland-Belarus border shapes expectations about access to protection. Pregnant women retain the opportunity to apply, but this does not guarantee that protection will be granted automatically or that they can travel safely from Belarus to Poland. Awareness of this opportunity and an intention to use it do not in themselves indicate that a pregnancy was planned to gain access to the procedure. Migration decisions are shaped by living conditions, the needs of the mother and child, and the scarcity of safe alternatives.

One-off assistance does not resolve prolonged vulnerability. The need for housing, food, medical care and legal support continues throughout pregnancy and after childbirth. Once a child is born, obtaining the child's documents, preserving family unity and accessing care for the newborn become additional concerns. The shrinking infrastructure of independent assistance in Belarus makes it harder to provide the sustained support needed to overcome the crisis.

Methodology

Data Sources and Interviews

The study draws on interviews with women, Human Constanta's casework, and an analysis of legal and publicly available materials. Comparing these sources places migrant women's personal experiences within the broader context of access to medical and humanitarian assistance, the conditions of their stay, and the legal protection mechanisms in place.

Interviews and written testimonies. Between March and September 2026, interview materials were collected from 15 migrant women. At the time of the interviews, 14 participants were pregnant; one had already given birth and described her pregnancy, childbirth and subsequent events. All participants were offered a common set of questions, but not all answered every question or followed the proposed format: some information took the form of open narratives and additional comments. All 15 interviews were included in the study, regardless of how complete the responses were or the form they took. [Accounts № 1-15] Each account was assigned a fixed number from 1 to 15. These numbers are used throughout the report to refer to participants' testimonies; the source materials are not published.

Human Constanta's casework. The study also draws on Human Constanta's practice and the work of its Free Legal Office: statistics on requests for assistance in 2024-2025, experience of providing legal and humanitarian support, monitoring findings, and reports from women seeking assistance and from partners. These materials cover a broader group of people than the interviews and help explain the conditions women face and the barriers to obtaining assistance. They are used in the thematic analysis and are not included in the quantitative interview findings. The statistics are published in the Free Legal Office's annual reports for 2024 and 2025.

Legal and publicly available materials. The study analysed Polish rules on access to international protection, Belarusian compulsory medical insurance

rules, a clarification from Belgosstrakh, international standards and public recommendations on migrant health. These sources inform the analysis of the legal and institutional context in which decisions are made and women's access to assistance and protection is shaped. Links to these materials are provided in the relevant sections.

Analysis of Responses and Counting Principles

The questionnaire contained 20 questions covering participants' origins, migration routes, migration status, pregnancy and views on protection, support from the child's father, access to healthcare, contact with the authorities, experiences of violence, childbirth and possible separation from their child, housing conditions and humanitarian needs. A final open-ended question allowed participants to share any other relevant information. The full questionnaire is included in the annex.

The study involved 15 women in total. Each indicator is calculated using only responses that provide sufficient information about the participant's own experience. A missing response does not mean that a problem was absent and is not treated as a negative answer. General statements about other women are not attributed to a participant's own experience unless she reported that experience directly.

Voluntary Participation and Confidentiality

Women could skip any question. The common questionnaire did not ask for names, addresses, telephone numbers, document numbers or exact dates of birth. However, some original submissions contain personal details that participants volunteered.

The accounts were anonymised during preparation of the report. Names, contact details, exact addresses and dates of birth are not included; the source materials are not intended for publication. The use of detailed accounts requires the participant's consent and an assessment of the risk

that she could be identified, including through a combination of the circumstances described.

Study Limitations

Most participants were women who had approached Human Constanta for assistance. The sample is therefore not representative, and the findings cannot be generalised to all pregnant migrant women in Belarus. Incomplete responses, differences in the format of the accounts and occasional discrepancies between initial and supplementary submissions limit the comparability of the data.

Responses about the effect of pregnancy on access to protection and border crossing reflect women's perceptions but do not in themselves establish why they became pregnant or changed their migration plans. The question about the effect of pregnancy covered Belarus, the European Union and border crossing together. An affirmative answer does not necessarily indicate awareness of the specific exception in Polish law.

Medical records and individual legal decisions were not systematically verified. Descriptions of institutions' actions are based on women's testimonies and support work; they do not replace independent verification of the circumstances or a legal assessment of individual cases.

Profile of the Study Participants

Origin and Age

All 15 participants come from African countries. Age was recorded for 14 women, ranging from 21 to 30, with a median of 24. At the time of the interviews, 14 participants were pregnant; one had already given birth and was outside Belarus. Her account concerns her experience of pregnancy and childbirth in Belarus and subsequent events, and is considered with this distinction in mind. [Accounts № 1-15]

Indicator	Result
Study participants	15
Pregnant at the time of the interview	14
Had already given birth at the time of the interview	1
Age, based on responses from 14 participants	21-30 years; median 24 years
Knew they were pregnant before arrival	3
Reported discovering their pregnancy after arrival	11
No personal information on when the pregnancy was discovered	1
Had no insurance or their insurance had expired	9 of 13 respondents
Reported having insurance during the period described	4 of 13 respondents
No personal information on insurance	2

Insurance status reflects the woman's response about the period described, rather than verification of the policy's validity or terms.

Routes and Circumstances of Arrival

Some participants arrived in Belarus through Russia. In many accounts, study was the initial basis for entry and stay. For some, Belarus was intended to be a place to study and live; for others, it offered a chance to find safety after conditions deteriorated in Russia or their country of origin. [Accounts № 1, 3-15]

The women's experiences span different stages of their stay, from recent arrival to several years in the country. One participant described her first week in Belarus; others had lived there for three years. These differences matter for understanding the accumulation of difficulties, the loss of support and changes in migration plans. [Accounts № 4-5, 7]

Education and Migration Status

Human Constanta's casework in 2024-2025 shows that, for some international students, education is one of the few available ways to leave their country of origin. Educational plans may coincide with a search for safety and an intention to migrate further. However, expectations of moving on to the EU encountered a lack of safe and accessible pathways.

These experiences unfold against a policy of attracting foreign nationals to study in Belarus, reflected in the Concept of Migration Policy of Belarus for 2024-2028.

Participants included women with both regular and irregular migration status. Five explicitly reported having no valid permission to stay or having had their documents cancelled at the time of the events described. The remaining responses are too incomplete to establish whether other participants had irregular status. [Accounts № 4, 6-8, 11]

Participants who arrived through Russia had no legal basis for staying in Belarus from the moment they entered. This conclusion is based on the legislation in force and Human Constanta's casework. However, the information gathered through the interviews about their documents and circumstances of entry does not replace an individual legal assessment of each participant's status.

Changes in Border Policy and Access to International Protection

Restrictions at the Poland-Belarus Border

On 27 March 2025, Poland temporarily restricted the right to apply for international protection at its border with Belarus. The measure covers the entire stretch of the state border, including official crossing points and the "green border". While it is in force, the Border Guard does not accept applications except in the cases provided for by law.

The restriction was initially introduced for 60 days. Subsequent extensions of up to 60 days require the consent of the Sejm. The measure was extended repeatedly in 2025 and 2026. As of 21 September 2026, the Regulation of the Polish Council of Ministers of 15 September 2026 provides for a further 60-day extension from 18 September 2026.

Repeated extensions prolong uncertainty for people intending to seek protection. With the general restriction in place, the exceptions determining who can still submit an application take on particular importance.

Exceptions and the Situation of Pregnant Women

Article 33b(2) provides for the acceptance of applications for international protection from the following categories of people:

- unaccompanied minors;
- pregnant women;
- people who may require special treatment, particularly because of their age or health;
- people whose circumstances, in the Border Guard's assessment, clearly indicate a real risk of serious harm in the country from which they have arrived directly;
- nationals of a state using the "instrumentalisation" of migration, arriving from its territory; in this context, nationals of Belarus.

Article 33b(3) provides that these exceptions do not apply where the following conditions are met together: the person crossed or attempted to cross the border using violence in conjunction with others, and it became necessary immediately afterwards to use coercive measures, weapons or other armaments against that person.

Pregnancy is one of the grounds for accepting an application under the statutory exception. It does not mean that international protection is granted automatically: the decision on whether to grant protection is made within the relevant procedure. Nor does pregnancy guarantee safe passage from Belarus to Poland.

According to replies from the Polish Border Guard held by the research team, applications for international protection were accepted from 47 pregnant women during the first year of the restrictions, and from 32 between late March and June 2026.¹ These figures refer to the number of applications accepted, not the number of cases in which protection was granted.

Seeking Protection at a Border Crossing Point

The ability to submit an application depends not only on the statutory exception but also on whether a woman can reach the Polish border authorities. According to information available to Human Constanta in September 2026, people must arrive by bus or car to approach the authorities at operating official border crossing points: pedestrian passage is not available. In the organisation's experience, however, bus operators have refused to board passengers without visas. For potential protection applicants without visas, travelling by car is therefore effectively the only way to reach a crossing point.

According to Human Constanta, Belarusian nationals who drove foreign nationals intending to seek protection in Poland were threatened by Polish

¹ Polish Border Guard. Response concerning the acceptance of applications for international protection from pregnant women during the first year of the restrictions and from late March to June 2026.

border guards with the cancellation of their visas; the organisation also holds reports of visas actually being cancelled. In these circumstances, assistance from Polish nationals willing to drive women to the crossing point has become an option available in practice. The ability to seek protection thus depends on finding someone with a car who is able and willing to help with the journey.

At the border, pregnancy is checked as the basis for applying the exception. Human Constanta has observed that women in the early stages of pregnancy are given a pregnancy test, which they must take in the presence of a female border guard. The result is used to confirm their eligibility to access the international protection procedure.

Previously, according to the organisation, border guards required medical documents from Belarusian clinics and took women to a Polish hospital to confirm their pregnancy. In the cases currently being observed, verification takes place at the crossing point itself using a pregnancy test. This makes confirmation of pregnancy easier but does not remove the difficulties of reaching the crossing point.

The procedure described reflects practice as of September 2026 and may change.

Barriers to Accessing Protection in Belarus

Human Constanta's casework shows that people who arrived in Belarus on student visas or through Russia encounter refusals to accept their applications for international protection. When seeking protection, they may face the risk of detention and forced return to their countries of origin. These observations are based on support provided to a broader group of people and are not limited to the participants in this study.

For women who fear returning to their home country because of domestic or gender-based violence, the lack of access to an international protection

procedure means that threats to their safety may never receive an individual assessment by the Belarusian authorities. Human Constanta has dealt with cases in which women with children spent long periods seeking help to apply for protection but were offered mainly assistance with voluntary return. The lack of access to protection in Belarus may strengthen their desire to seek safety in another country.

Changes in Requests for Advice on International Protection

In 2025, the pattern of requests to Human Constanta's Free Legal Office changed markedly: enquiries about obtaining international protection in Belarus declined, while enquiries about the Polish procedure rose sharply.

International Protection Enquiries	2024	2025
Obtaining protection in Belarus	50	11
Obtaining protection in Poland	24	262

The decline in enquiries about the Belarusian procedure does not in itself explain the reasons for this trend. At the same time, people seeking assistance continued to report refusals to accept applications and long waits for an initial appointment. For those with insecure legal status, these difficulties heightened uncertainty about the possibility of obtaining protection in Belarus.

The rise in enquiries about Poland coincided with the introduction of new restrictions at the Poland-Belarus border. A substantial proportion came from international students struggling to pay tuition fees, facing the risk of losing their migration status and lacking accessible options for onward movement.

The consultation statistics show which issues people sought help with more or less frequently. However, these data cannot establish the extent to which changes in legislation, the availability of advice or the circulation of information influenced the number of enquiries and migration decisions. The

question of how the opportunity to apply for protection in Poland during pregnancy affects women's expectations and plans is discussed in the section "The Role of Pregnancy in Migration Decisions".

Key Problems and Barriers to Accessing Assistance

The materials show that medical, housing, financial and legal difficulties arise simultaneously. Human Constanta's casework helps trace the connections between these problems, while personal accounts reveal their consequences for individual women.

Healthcare and Costs During Pregnancy

From the first appointment to regular care. The interviews describe confirmation of pregnancy, individual examinations and treatment received. The main difficulty often arises at the next stage: a woman cannot afford ongoing care, buy prescribed medicines or return for a follow-up appointment.

After an ultrasound scan, one woman was advised to register for antenatal care at a healthcare facility but could not afford further monitoring. Her previous medical insurance had expired, she had moved out of a student residence to stay with a friend, and she was requesting urgent assistance. In this case, referral to a healthcare facility did not lead to the sustained care she needed. [Account Nº 9]

Another woman reported having insurance and attending a medical consultation but had not bought the prescribed medicines because she had no money. She was staying with acquaintances; the child's father provided emotional support but was also unable to help financially. The consultation left her treatment and follow-up needs unresolved. [Account Nº 10]

Another participant described leaving hospital after being asked to pay, because she had no money. [Account Nº 14]

These cases show that attending a healthcare facility does not in itself mean receiving all the necessary care. Human Constanta's casework also shows that problems with documents can obstruct access to healthcare. The

organisation is aware of a case in which a pregnant woman experiencing bleeding was refused hospital admission, reportedly because her Russian visa had expired. This case is not included in the quantitative interview findings. It illustrates the importance of establishing not only the terms of insurance coverage but also whether the necessary care can actually be obtained, including when there is an urgent medical need.

Fear of contact with the authorities. Some women explained that they avoided public hospitals because they feared document checks, detention and deportation. Some sought private services, which they perceived as safer. However, the cost of private healthcare can further limit access. [Accounts № 4, 6, 8, 12-13, 15]

The research team observed that accounts of mothers being separated from their children also heightened women's fear of giving birth in Belarus. What matters here is not only how institutions actually operate, but also how circulating accounts affect women's willingness to seek help. Fear of document checks or separation from a child can become a barrier to seeking healthcare even where no such cases have been recorded at a particular institution.

Limits of insurance coverage. Of the 13 women who answered the insurance question, nine reported having no insurance or an expired policy, and four reported having insurance during the period described. Even insured women faced costs they could not afford. One participant explicitly stated that her first visit to a healthcare facility was covered by insurance, while she had to pay for the next one. [Accounts № 1, 3-13, 15]

Compulsory medical insurance for foreign nationals in Belarus covers only emergency care for sudden illness or an accident. In response to an enquiry, Belgosstrakh confirmed that routine care related to pregnancy is not covered

under such a policy.² Registration for antenatal care, routine consultations, ultrasound scans and tests therefore require other sources of funding.

Pregnancy is not, however, excluded from insurance coverage altogether. The list approved by Council of Ministers Resolution № 1462 includes genital tract bleeding, acute obstetric and gynaecological conditions requiring emergency intervention, and childbirth care. The relevant care is paid for subject to the terms of the insurance.

Belgosstrakh also confirmed that a policy can be taken out and renewed without providing documents confirming lawful stay in Belarus.³ Insurance therefore remains available to people with irregular status, but a policy does not regularise their migration status or cover routine antenatal care.

Costs after emergency care and childbirth. Under paragraph 186 of the Regulations on Compulsory Insurance, once the threat to the foreign national's life or to the health of others has been eliminated and the person can be transported, further non-emergency care must be paid for by the foreign national or the host. Coverage of the emergency phase does not guarantee payment for all subsequent treatment.

Payment for a newborn's treatment requires separate clarification, particularly where a premature birth is followed by prolonged hospitalisation. The mother's policy does not cover the child's treatment costs.

Financial barriers persist at several stages: before the first attempt to seek care, when following prescribed treatment, and after emergency treatment, when further care and monitoring are needed. A statement by the United Nations Network on Migration, published by the World Health Organization, identifies access to continuous care for mothers and newborns regardless of

2 Belgosstrakh. Response № 01.01-20/346-K to an enquiry dated 3 August 2026. Clarifications on insurance for foreign nationals and coverage of pregnancy-related healthcare.

3 Belgosstrakh. Response № 01.01-20/346-K to an enquiry dated 3 August 2026. Clarifications on insurance for foreign nationals and coverage of pregnancy-related healthcare.

status as a key principle. The women's testimonies reveal a gap between this goal and their actual ability to continue receiving medical care.

Housing and Income

Insecure and unsafe accommodation. Women describe sleeping on the streets, at railway stations and in waiting rooms, being unable to pay rent and staying temporarily with acquaintances. [Accounts № 1, 5, 8, 12-13] In the cases supported by the organisation, it was not possible to arrange safe accommodation for pregnant women who had become homeless. In 2025, Human Constanta received similar requests from people following unsuccessful attempts to cross the EU border or the loss of their legal basis for staying in Belarus.

Support from acquaintances helps women through a crisis but depends on the hosts' resources and concerns. In one case, accommodation ended after a visit by the migration authorities. In another, the host restricted the woman's movements outside the home for fear of an inspection. Having an address therefore does not always mean having stable and safe living conditions. [Accounts № 1, 12]

One participant was staying with a female acquaintance and reported an attempted sexual assault by a man in the household. She said she had nowhere else to live and tried to stay out until her acquaintance returned home. At the same time, she lacked food and reported working without pay. Her dependence on those sheltering her limited her ability to leave unsafe accommodation. [Account № 7]

Limits of personal resources and support from family and partners. In the interviews, women describe unemployment, unpaid wages and difficulties combining study and/or work with pregnancy. Support from those close to them is also limited: even where contact continues, the child's father may be able to offer only emotional support because he has no income himself. A

lack of money for food, transport and medicines compounds medical and housing problems. [Accounts № 1, 5-7, 10-12]

Limited support and access to temporary housing. Human Constanta's experience indicates that migrant women's opportunities to receive humanitarian assistance largely depend on approaching the Belarus Red Cross and UNICEF. Such support is subject to the organisations' available resources, is provided intermittently and does not meet all needs. Many women interviewed said they did not know where to seek temporary housing or other assistance. [Accounts № 4, 6, 9-10]

The shortage of support is linked to the dismantling of independent assistance in Belarus after 2020. The dissolution of civil society organisations, including Human Constanta, and the persecution of human rights defenders have sharply reduced the capacity to provide assistance. Organisations working with survivors of human trafficking, gender-based violence and domestic violence were also closed. As a result, migrant women face greater difficulty obtaining legal and humanitarian support, help accessing healthcare, and support following violence. These restrictions also affect people seeking international protection.

Options for temporary accommodation are particularly limited. According to Human Constanta, Belarus has two centres for foreign nationals seeking international protection, with a combined capacity of no more than 56 places. Accommodation depends on vacancies and access to the protection procedure. Women who have been unable to submit an application or secure a place at a centre therefore remain without a solution to their housing needs.

Services for people experiencing homelessness may also be unavailable. In a reply dated 24 September 2026, the Minsk Temporary Accommodation Centre for Persons of No Fixed Abode at 42 Vaupshasa Street stated that it

does not provide social services to foreign nationals.⁴ A foreign woman who becomes homeless cannot rely on accommodation at this centre. In such circumstances, pregnant migrant women must find private arrangements: staying with acquaintances, relying on help from individuals or paying for housing themselves. Human Constanta's casework shows that it is not always possible to find a safe and stable place to live.

One-off humanitarian assistance does not resolve this problem. Women remain dependent on other people's ability and willingness to shelter them, while the lack of stable housing makes it harder to access food and healthcare during pregnancy and after childbirth.

Education and the Risk of Losing the Legal Basis for Stay

The link between education, housing and migration status. In 2025, a substantial proportion of requests to Human Constanta concerning protection in Poland came from international students in Belarus; the overwhelming majority were from African countries. Against a policy of attracting international students, migration for education was often accompanied by financial and administrative instability.

The withdrawal of family support, and the resulting inability to pay for tuition and housing, creates a risk of simultaneously losing a place at an educational institution, student accommodation and the legal basis for staying in the country. Enquiries to the Free Legal Office concerned the consequences of expulsion from an educational institution, the cancellation of residence permits and limited options for regularising migration status.

Obligations of educational institutions. By inviting foreign nationals to study, an educational institution assumes a role in ensuring the lawfulness of their stay. Paragraph 27 of the Rules of Stay, approved by Council of

⁴ State Institution "Minsk Temporary Accommodation Centre for Persons of No Fixed Abode". Response dated 24 September 2026 concerning the availability of social services for foreign nationals. Copy of the letter provided.

Ministers Resolution Nº 275 of 1 June 2026, requires authorised officials of the inviting organisation to take measures to ensure that a foreign national is registered in time, obtains a temporary residence permit and leaves when the authorised period of stay expires.

Where an international student has obtained a temporary residence permit on the basis of study, the institution must notify the citizenship and migration unit responsible for the student's place of temporary residence if the student is expelled. Notification must be sent electronically or delivered by hand within five working days of the expulsion decision. Failure to notify within the prescribed period is punishable under Article 24.35(8) of the Code of Administrative Offences by a fine of up to twenty base units for the authorised official. Providing this information is a statutory obligation, not merely the practice of individual educational institutions.

The inviting organisation may also incur financial liability. Under Article 21.4 of the Procedural and Enforcement Code of Administrative Offences, deportation costs are paid by the foreign national or by the legal entity or individual who requested their entry, stay or residence. If an educational institution acted in that capacity, the costs may therefore be charged to it.

Assistance to students with the formalities of their stay thus goes hand in hand with the institution's obligations towards the migration authorities. When financial difficulties lead to an expulsion decision, the expelled student's migration status becomes an issue beyond the educational relationship: information about the expulsion is passed to the authority responsible for deciding on their continued stay. For female students, this increases their dependence on the institution's administration and makes access to clear information about the consequences of expulsion and to independent legal assistance particularly important.

The administrations of educational institutions and student residences often act as intermediaries in dealings with migration authorities. Some people seeking assistance reported that exit documents had been arranged without

their requesting them and that they could not obtain the necessary information in time. Such dependence makes it harder to assert their rights independently and plan their next steps.

Pregnancy can further complicate the situation of female students. Women reported that, after the administration of their educational institution learned of their pregnancy, they were threatened with eviction from student accommodation, had their visas cancelled or were expelled from the institution. These accounts do not establish conclusively whether the decisions were related to pregnancy, unpaid fees or other factors. However, the nature of these requests for assistance points to the need for further investigation into whether the women experienced pregnancy-related discrimination. [Accounts № 6-7, 14]

Intermediaries and unmet expectations. One participant arrived through a student migration route, already aware that she was pregnant. In her country of origin, she had been married off to an older man who abused her. She said the person who arranged the journey had promised that she would be able to give birth safely in Belarus. After arrival, the actual conditions proved different, and she felt she had been deceived. [Account № 15]

Another participant described a discrepancy between the promised and actual costs of studying in Russia, from where she later travelled to Belarus. She expected the arrangement she had paid for to include tuition, accommodation and insurance, but after arrival she faced demands for additional payments and the subsequent termination of her contract with the university. [Account № 12]

These accounts illustrate the vulnerability of women whose circumstances depend on intermediaries, educational administrations and external financial support. When money runs out or becomes unavailable, several foundations of a stable stay are jeopardised at once: education, housing and migration status. The available materials do not establish a general legal link between

pregnancy and the loss of migration status, but they show how pregnancy intensifies the consequences of existing difficulties.

Violence and Barriers to Seeking Protection

Women's testimonies show how experiences of violence, fear of seeking protection and a lack of available support can reinforce one another.

Violence occurred within family relationships in the country of origin, along the migration route and in Belarus, including in circumstances arising from a lack of safe housing. [Accounts № 7, 11-12, 14-15] Human Constanta's casework in 2025 also includes requests from people who experienced physical and sexual violence and exploitation at these stages.

Unsafe routes and dependence on others for housing. One participant reported violence involving dog attacks by Latvian border guards during an attempt to cross the border. Another described being raped after returning to Belarus from the Latvian border; the attackers' affiliation has not been established. A further participant described being raped while sleeping on a staircase after losing her accommodation. The latter two participants linked their pregnancies to these assaults. These testimonies point to the risks arising from the absence of safe options for crossing the border and finding accommodation in Belarus; the circumstances of the assaults were not independently verified. [Accounts № 11-12, 14]

Fear of approaching law enforcement. The research team clarified that the women interviewed who reported crimes committed against them had not contacted law enforcement because they feared the consequences of contact with the authorities. This fear related to document checks, detention and possible removal.

As no complaints were submitted, the study materials do not allow an assessment of how law enforcement would have responded. They do not establish that officials refused to register complaints or open criminal

investigations in these cases. The documented barrier arises earlier, when women decide whether to seek help.

Lack of support and a continuing crisis. Human Constanta observed that, in the cases described, women had no access to civil society support that could have provided emotional and legal assistance when approaching law enforcement. At the same time, they continued to lack safe housing and money for healthcare and everyday needs.

These accounts reveal a sequence: unsafe conditions and violence, followed by a decision not to seek help because of fear, and then a continuing crisis with limited support. Not seeking help does not mean that protection is not needed: the violence remains outside the official response, while its consequences deepen women's vulnerability in relation to health, housing and finances.

Human Constanta's casework shows that seeking assistance as a victim of human trafficking can carry risks related to migration status. In its reply, the Ministry of Internal Affairs' Department of Citizenship and Migration confirmed that support is available to victims of trafficking, including people with irregular migration status, but also noted liability for breaches of the rules of stay. A formal entitlement to assistance therefore does not eliminate the fear of detention or removal. These observations concern potential victims of trafficking; they do not mean that every instance of violence described by interview participants falls within this category.

Detention and Forced Return

Participants' fear of detention is rooted both in their own experiences and in accounts they have heard. One woman reported being detained and fined following an inspection of her accommodation. The participant who had already given birth at the time of the interview described being held in custody before her forced departure, while her child remained in Belarus.

She said she had not yet recovered from surgery and felt unwell while detained. [Accounts Nº 3, 6]

Human Constanta has documented cases of migrant women being held for prolonged periods in pre-trial detention centres and temporary detention facilities. The organisation notes insufficient access to outdoor exercise and hygiene, inadequate living conditions and food that does not take individual needs into account. Women also face difficulties obtaining interpretation, information about their rights and assistance when reporting health problems. These observations are based on the organisation's work with a broader group of women and do not describe the experience of every interview participant.

Human Constanta's casework includes reports of people being forcibly returned without an adequate assessment of risks to their safety, as well as informal expulsions to Russia, including people being abandoned in wooded areas near the border. This information helps explain the fear of approaching the authorities and shows why independent legal assistance is needed before a decision is taken to return a foreign woman to her country of origin. The available data do not establish how often pregnant women encounter such practices.

Childbirth and the Risk of Separation from the Child

One participant described giving birth, subsequently being separated from her child and being forcibly removed from Belarus. She linked her newborn's placement in an infant care institution to unpaid medical expenses and was seeking to reunite with the child. At the time of the interview, the woman was outside Belarus, while her child remained in the country. [Account Nº 3]

Records of the support provided in this case also document difficulties obtaining the child's papers. The absence of a diplomatic mission of the mother's country of origin in Belarus and difficulties in cooperation between the authorities of the two countries obstructed the issuing of documents

needed for family reunification. While supporting the woman, the organisation also received information about threats to take her child away as a means of pressuring her to leave Belarus independently.

This case shows that childbirth does not bring the crisis to an end. The child's treatment costs, the process of obtaining documents and decisions by migration authorities can make it difficult to keep a family together or reunite it. To assist in such situations, it is important to establish whether the birth has been registered, which documents have already been issued, what is preventing the remaining documents from being obtained and what steps are needed for the mother and child to be together.

The Convention on the Rights of the Child requires consideration of the child's best interests. Separation of a child against the parents' will requires a decision by the competent authorities in accordance with the law, with the necessity of separation subject to judicial review. The Convention provides for the participation of interested parties and for contact between parents and children to be maintained unless this is contrary to the child's best interests. These provisions offer a framework for assessing such situations but do not in themselves determine the legal assessment of an individual case.

The research team observed that accounts of separation known to other women became an additional source of fear about giving birth in Belarus. The experience described is therefore significant both as an individual case of family crisis and as a factor shaping women's expectations and willingness to seek assistance.

Why One-Off Assistance Is Not Enough

Human Constanta's casework shows that the capacity of state institutions, international organisations and civil society organisations is often constrained by their mandates, resources and eligibility criteria. Providing

food, clothing and essential items offers relief but does not address the need for longer-term accommodation, examinations, treatment and medicines.

Assistance therefore needs to last as long as the crisis. A single support plan can bring together housing, food, transport, medical care and legal support. Follow-up contact is needed to establish whether the service was received, whether accommodation remains available and whether the woman can safely stay there or move elsewhere.

The Role of Pregnancy in Migration Decisions

Changing Needs and Opportunities

For participants, pregnancy brought additional needs for medical monitoring, food and safe housing. At the same time, it became harder to work, pay tuition fees and cover everyday expenses independently. Having documents, a partner or temporary accommodation did not always provide the necessary support. [Accounts № 5-7, 9-12, 14-15]

These changes could increase the need for international protection and influence plans for onward movement to the European Union. Decisions to leave Belarus were shaped by a combination of factors, including living conditions, the availability of assistance and expectations about the safety of the mother and child. Pregnancy is thus part of a broader situation of limited choice.

The Exception at the Polish Border and Expectations of Access to Protection

Human Constanta's observations link the increase in requests from pregnant women to the introduction of exceptions at the Poland-Belarus border. Women seeking assistance learned about them through informal migrant networks and intermediaries offering services to facilitate onward movement to the EU. According to the organisation, Polish partners also noted an increase in requests from pregnant women after the legal changes.

The interviews reflect a range of expectations. Some participants explicitly linked pregnancy to the possibility of obtaining protection in the EU or crossing the border. Others spoke of needing protection and a safe place to give birth without identifying a specific legal provision. Several women said they did not know how pregnancy affected the options available to them. The responses therefore do not establish that most participants knew

specifically about the Polish exception or changed their plans because it was introduced. [Accounts № 1, 3-13, 15]

For women who associated onward movement with the possibility of obtaining protection, pregnancy brought both new needs and expenses and hope of escaping a situation they perceived as unsafe. [Accounts № 4, 10-13] However, the statutory exception concerns access to the procedure; it does not remove the risks of the journey or guarantee that protection will be granted.

These observations reflect the experiences of women who sought assistance; they cannot measure changes in the composition of the overall migration flow or determine how much of the increase in requests was attributable specifically to the new provision.

Limited Alternatives

For some participants, remaining in Belarus meant a continuing housing and healthcare crisis, dependence on acquaintances and fear of contact with the authorities. Returning to their country of origin was not seen as a return to safety either: women described having no family, rejection of their pregnancy by those close to them, threats and experiences of violence. [Accounts № 5, 8-9, 11, 14-15]

Continuing to the EU could be seen as an opportunity to give birth safely and obtain protection. Yet expectations of moving on encountered a lack of accessible and safe routes. An intention to seek protection, a decision to leave and an actual attempt to cross the border are distinct circumstances; some participants explicitly denied making such attempts. [Accounts № 3-4, 9-10]

Comparing these options shows that decisions were made with limited access to support and information. Fear of return requires individual assessment and is not in itself grounds for recognition as a refugee.

What the Study Can Tell Us About Pregnancy and Migration Plans

Of the 15 participants, 14 provided information about when they discovered their pregnancy or became pregnant: three knew before arriving in Belarus, while 11 learned after arrival or described the pregnancy as having begun after they arrived. The time a pregnancy is discovered does not necessarily coincide with the time of conception and does not establish the reasons for it. [Accounts № 1, 3-15]

The interviews provided no basis for asserting that participants deliberately planned their pregnancies to gain access to the protection procedure in Poland. One woman explicitly described her pregnancy as unplanned; in some accounts, participants linked their pregnancies to sexual violence. At the same time, the study cannot reliably establish all the reasons behind reproductive decisions. [Accounts № 7, 11, 14]

Awareness of the exception in Polish rules and a decision to use it do not in themselves indicate that a woman planned her pregnancy in advance for that purpose. Narrowly defined exceptions can influence how people whose other options are severely restricted assess the choices available to them. The role of pregnancy in migration decisions should therefore be examined alongside the conditions of women's stay in Belarus, access to assistance and safe alternatives.

In the women's accounts, the search for protection is linked to a combination of financial hardship, unsafe housing, medical needs, family circumstances and restrictions on mobility. Focusing solely on an individual woman's choice leaves out the constraints within which that choice is made.

Recommendations

For Humanitarian and Human Rights Organisations

- Establish a clear channel of communication in the women's languages, primarily French and English. Combine legal advice with an assessment of medical and humanitarian needs, giving women the opportunity to discuss their situation independently of intermediaries. Assistance should remain available regardless of plans for onward movement.
- Provide support with food, transport, medical services and medicines throughout pregnancy and after childbirth, including the child's needs. Establish a mechanism for providing temporary housing to women who have nowhere to live, taking account of safety, the required length of stay and the possibility of moving. Involve existing civil society organisations in providing assistance.
- Offer independent legal advice when women face eviction or expulsion from an educational institution, cannot pay tuition fees, have expiring insurance or lose family support, before the situation develops into an acute crisis.
- Check the policy's validity period, obtain written clarification of coverage for specific services and seek funding for costs outside that coverage. Establish separately the basis and sources of payment for care for the mother and newborn.
- Offer safe accommodation and medical, psychological and legal assistance. Explain the possible consequences of approaching law enforcement and provide support with the woman's consent, without making other assistance conditional on her filing a complaint. Where there are indications of human trafficking, arrange referral to specialists without allowing migration status checks to replace an assessment of protection needs.
- With the woman's consent, follow up on whether she was able to obtain the service and follow the prescribed treatment, whether additional expenses arose and whether safe housing remains available. Adjust the support plan if barriers arise.

For Healthcare Institutions and Professionals

- Explain the conditions for receiving care, service costs, insurance coverage and arrangements for further care. Provide interpretation, explain prescribed treatment in a language the patient understands and take account of her ability to follow it.
- Explain data-sharing rules accurately, without making promises that cannot be kept. When providing care following sexual violence, take account of the woman's consent and readiness to disclose what she has experienced.

For Educational Institutions

- Create opportunities for students to continue their education and remain in safe accommodation during temporary financial and medical difficulties.
- Provide written expulsion decisions promptly, together with information about their consequences for education, accommodation and migration status, and about appeal procedures.
- Offer payment deferrals or instalment plans to international students facing temporary financial difficulties to prevent expulsion, loss of housing and loss of the legal basis for stay.

For the Competent State Authorities

- Ensure individual assessment of medical and family circumstances and access to a representative. Where separation occurs, provide the mother with information about the child's situation, ensure safe contact and consider possibilities for reunification.
- Belarusian authorities should use alternatives to immigration detention, especially for pregnant women and families with children. Before return, individually assess the risks of violence, human trafficking and family separation; ensure access to interpretation, independent legal assistance

and appeals. End informal transfers across borders without documents or procedural safeguards.

- Establish a clear procedure for birth registration and assistance in obtaining the necessary documents, regardless of the mother's migration status. Explain the steps and interaction with the competent authorities required, taking account of international protection needs. Do not use the threat of separation from a child to compel departure.
- Separate the identification and protection of victims of human trafficking from migration control measures so that seeking assistance does not become an obstacle to obtaining protection.
- Belarusian authorities should ensure that people can seek protection regardless of their route of arrival or migration status, with individual consideration of risks, including those related to gender-based and domestic violence. Polish authorities should accept applications in the cases provided for by law and consider applicants' circumstances individually. Organisations providing support should explain the applicable rules, document reports of refusals and help challenge them.

For International Organisations and Donors

- Increase the resources of accessible humanitarian assistance providers and support the involvement of other civil society organisations. Provide flexible funding for sustained individual support and temporary accommodation, including in cases involving several countries.
- International organisations, donors and the Humanitarian Observatories network should support verification of materials with the women's consent and the exchange of practices in healthcare, accommodation and support following violence. Disseminate anonymised findings, a brief summary and thematic materials through professional networks, without the original questionnaires or identifying information.

Annex

Common Questionnaire

1. Which region did you come to Belarus from? You may name a country or region.

Europe / Caucasus / Central Asia / Middle East and North Africa / Sub-Saharan Africa / other.

2. Did you come to Belarus through Russia?

Yes / No / don't know.

3. How old are you?

4. Are you travelling alone? If not, who are you travelling with?

5. How long were you in Belarus?

6. How would you describe your status?

I have a Belarusian visa or temporary residence permit / I have a Russian visa or temporary residence permit / I arrived under a visa-free arrangement (date of arrival?) / I am awaiting a decision on international protection / I do not have permission to stay in Belarus / I don't know.

7. When did you find out you were pregnant - before or after arriving in Belarus?

8. Do you think pregnancy affects your chances of obtaining protection in Belarus or the European Union, or of crossing the border? If so, how?

9. Are you in contact with the child's father? Do you receive support from him (financial or otherwise)?

10. Do you have medical insurance?

11. Have you tried to obtain pregnancy-related healthcare in Belarus? What happened? Did you receive care or not? Did you pay for it, or was it free?

12. If you did not seek medical care, what was the main reason?

13. Have you had any contact with the police or migration authorities during your pregnancy? If so, what happened and how did it affect you?

14. Have you experienced any form of violence, exploitation or coercion in Belarus or while crossing the EU border, before or during your pregnancy?

15. If you have already given birth, were there any difficulties with childbirth, postnatal healthcare or documents for your child, or any risk of separation?

16. Have you received humanitarian assistance in Belarus? If so, from whom?

17. Where did you live while in Belarus (with acquaintances, in a rented flat, in student accommodation, on the streets)?

18. Have you approached any state/non-state organisations to request temporary accommodation? If so, which ones?

19. What assistance do you need most at the moment?

20. Is there anything we have not asked about that is important for you to share / for us to know?