



LNOB Social Mapping Report

Municipality of Kocani

Author

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Report on LNOB Social Mapping in Municipality of Kocani

Social Mapping Results Report: Social Mapping of Adults and Children with Disability

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Contents

Executive summary	5
1. Target group(s) of the Social Mapping.....	6
1.1. Explanation why the targeted population(s) is LNOB group.....	6
1.2. Summary of the consultations with the municipal officials and other stakeholders ...	8
1.3. Summary of the secondary data analysis	8
2. Brief information about Municipality of _____ and policies at local level	10
3. Objectives of the Social Mapping	12
4. Methodology.....	13
5. Social Mapping results	17
5.1. Analysis of geo-tagging of available socio-economic resources	17
5.2.1. Geo-tagging of critical points for children and adults with disabilities	19
5.3. LNOB group -	69
6. Focus group analysis -	99
7. Conclusions and Recommendations.....	103
Recommendations in line with SDGs.....	110

Executive summary

Social mapping as a method is used by the social workers and other professionals from various fields to monitor the distribution of socio-economic resources in the community and to collect important data that will be used to examine the needs of the target group. This presents an efficient way for authorities to access detailed and consistent data on specific groups of citizens who might be at risk or disadvantaged in the society. The obtained data from the social mapping is relevant source that should be used when developing or improving policies, especially in the area of social and health services.

Center for European Citizens Initiative, in December 2021 was engaged to conduct social mapping on the territory of the Municipality of Kocani on a previously developed methodology by GIZ GmbH and in coordination with representatives of NALAS and the Municipality. The main purpose of the social mapping was to identify and document the marginalized and vulnerable categories of citizens' needs for social and health services within their municipality.

The United Nations commitment and goals to transform the world contained in the 2030

Agenda for Sustainable Development were considered, applying the "leave no one behind"

principle (upgraded by GIZ GmbH in the SoRi II project). The gathered data will enable the

authorities and public institutions to identify and locate these groups, to detect their needs, to contribute to increasing their visibility within the community, to fully understand the risks they face which reflect on their well-being and overall quality of life. By making this information available, the authorities should act upon in overcoming the determined shortcomings and challenges that these citizens face on daily basis, especially for those of an emergency nature. The research activities carried out by Center for European Citizens Initiative were preceded by a series of consultative meetings and intensive communication with representatives from the Municipality, the Association of the local self-government units (ZELS), CRPM Consulting as well as representatives from the organizations that financially supported this activity, the German Society for International Cooperation (GIZ GmbH) and the Network of Associations of Local Authorities of South-East Europe (NALAS). The meetings served to set a roadmap for development and implementation of the envisioned activities. During the meetings, the most vulnerable and disadvantaged groups of citizens were identified and targeted.

1. Target group(s) of the Social Mapping

The target groups are adults and children with disability. Priority is given to the target group of persons with disabilities because:

- this group is the most numerous compared to other target groups;
- there are a large number of persons who are not in the data evidence of the Center for Social Work because they do not receive a disability allowance or other type of support as well as they are not in the database of the associations of persons with disabilities;
- this group has the biggest problems and are mostly excluded from education, labor market, access to goods and services and are at the greatest economic risk;
- people with intellectual disabilities are extremely excluded and need permanent and different types of services;
- persons with disabilities are most discriminated against compared to other groups;
- the problems of people with disabilities have an impact on the quality of life of all family members;
- the municipality has undertaken a large number of projects related to other target groups and not enough activities have been undertaken for persons with disabilities.

1.1. Explanation why the targeted population(s) is LNOB group

Initial assumptions and perceptions on each NLOB population

Municipalities in the Western Balkans, in this cycle of social mapping, had the opportunity to choose for which target group it is necessary to do social mapping. Below are arguments as to why priority is given to adults and children with disabilities and not to other target groups. *The elderly* in the municipality of Kocani need to be accommodated into a nursing home or services of home care. But a procedure for the construction of a nursing home has begun and the project for providing home care to the elderly will start the next year. The project Mobile Health and Social Services was implemented in Kocani municipality until February 2021, and through this service the elderly were helped by measuring sugar in the blood, measuring blood pressure and other health and social services.

Roma in the municipality of Kocani are one of the most vulnerable groups. They have problems with housing, poor infrastructure in the area where they live (Romska maalo), a high unemployment rate and a low percentage of children enrolled in secondary education. Their mother tongue is Turkish and the children have a problem to attend classes equally with the Macedonian children. Several projects are being implemented in Kocani aimed to supporting the Roma community in terms of housing, employment and support for free kindergarten care and scholarships for Roma students in secondary schools and scholarships for Roma students.

In North Macedonia, *people living in rural areas* can be identified as a vulnerable group. In the municipality of Kocani, according to the discussion with employees in the municipal administration, it is estimated that the largest percentage of people living in villages do not have a problem with existence because the land has with good quality and works in agricultural sector or a high percentage of them are employed and agriculture is extra work. An employee of the municipal administration gave an example that they can not find women from the villages who will be engaged in the project Socially Useful Work, because they are either employed in certain companies or work in the agricultural sector. A small percentage of the rural population lives in hilly and mountainous villages near Osogovo and these people have a problem with no road to the city, bad roads and no ambulance and shop. These villages are mostly inhabited by the elderly and they usually have difficult mobility and access to the city. However, according to the employees of the municipal administration, the municipality realized a project together with the Center for Social Work and when they visited these people they did not report certain problems and needs.

Victims of domestic violence, especially women who are economically dependent on men, are also a vulnerable group. There is a much higher percentage of victims than those who have reported violence. According to the local administration staff, social mapping can not record the true number and locate all cases and they believe that the municipality can not take enough actions to overcome the problem. They also emphasize that several projects have been implemented by non-governmental organizations.

Justification that targeted group is LNOB population

Geography- People with disabilities have the problem of inaccessible infrastructure due to the existence of physical barriers on the streets and sidewalks and insufficient lighting. Public areas and institutions are not accessible enough either. Buses from the city to the countryside are not "low-floor" and there is no place for a wheelchair. There are not enough vehicles that can transport people in wheelchairs to hospitals and other institutions. There are not enough parking places for the persons with disability.

Socio-economic status - high unemployment rate of persons with disabilities; a high percentage of those employed have a minimum income; economically dependent from other family members; people with intellectual disabilities need permanent care; parents of children with disabilities often leave work to care for their children.

Discrimination - disability is the most common ground of discrimination in the municipality, although there are a small number of complaints of discrimination on this ground to the Ombudsman and the Commission for Prevention and Protection against Discrimination. People with disabilities rarely recognize and report discrimination. Discrimination based on disability exists in all areas and all persons with disabilities are discriminated against, regardless of the type of disability. Access to the labor market, the workplace, access to institutions and transport, access to goods and services, education, healthcare and housing are just some of the areas in which there are many cases of unequal treatment of persons with disabilities.

Governance- People with disabilities are often not taken into account in creating of local policies in different areas under responsibility of local self-government units. They are often discriminated against by the public administration. People with intellectual disabilities are often denied the right to choose and to express their will and thoughts. This community is not represented in the municipal council. There is no person with disability in a managerial position in the municipal administration or in the local departments of the ministries and other administrative bodies. People with disabilities are excluded from political life because has no person with disability who is a member of a local body of a political party. People with disabilities do not have good access to polling stations.

Shocks- The majority of people with disabilities are with low incomes or unemployed, and they will be at high risk of rising electricity prices. The pandemic is also a big problem for people with disabilities because a high percentage of them were fired, their salaries were reduced and those with Covid-19 had trouble buying therapy and better food and vitamins.

1.2. Summary of the consultations with the municipal officials and other stakeholders

In order to determine the target group, the municipality had a previous discussion among the employees in the municipal administration to consider the needs of the different categories of vulnerable groups and to determine the current and future services they receive at the local level. Afterwards, the representatives of the municipality had discussion with the representatives of the Community of the Local Self-Government Units (ZELS). Criteria for selection and prioritization of the target group were set at a meeting between the Center for European Citizens Initiative, the municipality and ZELS.

1.3. Summary of the secondary data analysis

/source: interviews with representatives of the Municipality of Kocani/

Specific problems in the municipality of Kocani:

Persons with physical disabilities are in a better position than others with other types of disabilities. They have higher employment rate, they can live independently and only a small percentage of them need a personal assistant and care. The biggest problem for them is physical barriers; Citizens complain of dysfunctional access ramps of the public buildings and employees need to go outside to give them a service. The costs of mobility aids with good quality are not covered by the Health Insurance Fund. People in rural areas complain about not access to the city and not the opportunity to gain social and medical support. The municipality lacks special cars to transport persons with disabilities. The municipality hopes that vehicles that will be supplied through the nursing project can also be used for persons with physical disabilities. *The persons with mental disabilities and combined disabilities* have the

biggest problems and have need of permanent care. The Kocani Daily Centre has a capacity for only 12 people and that is not enough. Currently, 8 people are visitors/protected persons there, but they also need additional care at home and personal assistance. *Persons with sensory disabilities* have similar problems as those with physical disabilities, relate to the accessibility of facilities and services. The biggest problems of them have blind people.

General problems:

Access to public buildings and spaces in buildings

- Persons with physical disabilities (persons that use movement aids and persons using a wheelchair) have a problem to access some of the facilities (ambulances, hospitals, shops, markets, cultural institutions, departments of ministries and other government bodies, administrative facilities under the jurisdiction of the municipality, sports and recreational facilities, schools, etc.), as well inside of the buildings (lack of lift, existence of infrastructure barriers, lack of adapted toilet, etc.).

- Blind and visually impaired people have accessibility problems due to the not sufficiently visible marked the ends of the stairs and there are physical barriers. The space around the buildings and inside are not sufficiently illuminated.

Accessibility on the street and public areas

Some of the streets have narrow sidewalks; some parking spaces do not have parking place for persons with disabilities; no walking paths for blind persons and no sound traffic lights; Some streets and public areas are not enough illuminated.

Public transport connecting the city to villages or to other cities is not accessible to persons with physical disabilities.

A high percent of people with disabilities are discriminated against in access to the *labour market*. There is a limited type of jobs, the principle of reasonable accommodation is not applied, they do not have the opportunity for career development and their workers' rights are abused.

Children in schools are often discriminated against; there is no individual approach during their education; many children are not identified as a disabled persons at an early age; educational materials are not adapted to their needs; all children with disabilities are not covered by personal and educational assistants. Parents of children with disabilities are discriminated against in the community and many of them do not use support services; some children with disabilities are discriminated against in kindergartens.

Mobility: Some people with disabilities have a problem to access services due to the lack of personal assistants; some of those with physical disabilities do not have the opportunity to buy appropriate and quality aids for better mobility.

There is a lack of greater awareness of persons with disabilities about the *services and support* available to them by the state and the municipality; Some persons with disabilities are not categorized and not receive any support that is legally guaranteed to them.

Political and civil life: The municipal council has not member with disabilities; There is no member with disability of the local governing bodies of any political party; no respect the rule "nothing for us without us" and policies are often created without consulting persons with disabilities; local media do not have a sign language interpreter; a number of information materials are not available to the blind and simplified to persons with intellectual disabilities.

2. Brief information about Municipality of Kocani and policies at local level

The total number of residents of the municipality of Kocani is 31,602 inhabitants, according to the results of the 2021 census of population and households. Most of them are women, ie 15,977, while men are 15,625. According to the ethnic group, most of them declared themselves as Macedonians, 26,798 or 85%, followed by the Roma with 1892 inhabitants or 6%, and the rest are Vlachs, Turks, Serbs and others.

The municipality of Kocani is located in the Eastern region and is the second largest municipality in the East planning region, after the municipality of Stip. In the municipality of Kocani is the city of Kocani and the villages: Bezikovo, Beli, Vraninci, Gorni Podlog, Gorno Gradce, Glavovica, Grdovci, Dolni Podlog, Dolno Gradce, Jastrebnik, Kostin Dol, Leshki, Mojanci, Nebojani, Nivicani, Novo Selo, Orizari Pantelej, Pashadzikovo, Polaki, Preseka, Pribachevo, Pripor, Rajcani, Recani, Trkanje and Crvena Niva. Some of these villages are located in the lowland part of the municipality and have a larger number of inhabitants, and some are located in the hilly-mountainous part and have a significantly smaller number of inhabitants, inhabited mostly by elderly people.

According to the Law on Local Self-Government, the municipality is responsible for a number of areas, which it realizes independently or in cooperation with the central authorities. From the original competencies of the municipality, those competencies have been separated, which refer to the certain aspects of the social mapping.

Urban (urban and rural) planning: issuance of approval for construction of buildings of local importance determined by law, spatial planning and arrangement of construction land;

Communal activities: arranging and organizing the public local transport of passengers; construction, maintenance, reconstruction and protection of local roads, streets and other infrastructure facilities; regulation of the traffic regime; construction and maintenance of street traffic signals; construction and maintenance of public parking space; removal of illegally parked vehicles; maintenance and use of parks, greenery, park forests and recreational areas;

Sports and recreation: maintenance and construction of sports facilities; support for sports unions;

Social protection and child protection: kindergartens and nursing homes (ownership, financing, investment and maintenance); realization of social care for the disabled persons; children without parents and parental care; children with educational and social problems; children with special needs; children from single-parent families; street children; persons at social risk; persons affected by drug and alcohol abuse; raising the awareness of the population; housing for people at social risk; exercising the right and upbringing of preschool children. The performance of these competencies is in accordance with the National Program for Development of Social Protection;

Education: establishment, financing and administration of primary and secondary schools, in cooperation with the central government, in accordance with the law, organizing transportation and food for students and their accommodation in dormitories;

Health care: management of the network of public health organizations and facilities of primary health care which should include representation of the local self-government in all boards of all publicly owned health organizations, health education; health promotion; preventive activities; protection of workers' health and protection at work; environmental health monitoring; surveillance of infectious diseases; assistance to patients with special needs (for example, mental health, child abuse, etc.) and other areas to be determined by law;

Measures for achieving social, child and health protection of the Municipality of Kocani for 2022:

- Medication help
- Help with bus tickets for treatment outside the city of Kocani
- Assistance in a social package for a newborn from a socially endangered family
 - Assistance in hospital treatment
- Help for the treatment of the seriously ill
- Assistance in food packages and hygiene items
- Co-payment for care of children of single parents in JOUDG "Pavlina Veljanova"
- Assistance in providing school supplies packages to socially disadvantaged students
- Assistance in construction materials (socially endangered families and persons who found themselves at social risk due to a natural disaster)
- Exercising the right to a housing allowance

The Council of the Municipality of Kocani has not adopted program documents, which refer to the social and health protection and during the preparation of this Report is the preparation of the Social Plan for the Municipality of Kocani.

3. Objectives of the Social Mapping

Research question:

What are the level and form of vulnerability at local level, according to the LNOB principles, for each subgroup of persons with disabilities and what are their perceptions for improving the situation and what are the opportunities that the municipality and other stakeholders have at the local level to improve the situation?

Overall objective of Social Mapping is to create a database on the problems and needs of persons with disabilities and data on existing services and measures so that the municipality and other stakeholders can prepare evidence-based program documents and design measures.

Specific objectives:

- provide data on the selected group- persons with disabilities (adults and children)- which are not contained in the databases of the municipality, state institutions and NGOs;
- identification of persons with disabilities that are not in official registers (of the Center for Social Work and disability organizations);
- identification of their problems and needs;
- identification of their views on overcoming the problems and improving the services that they receive;
- structure the needs of the target group in different areas (education, transport, housing, social care, employment, political participation etc.);
- database of existing measures and services
- develop recommendations for policy-making and measures and
- the data can be further processed, depending on the needs of the municipality.

Outcomes:

- Collected data of persons with disabilities, distributed based on both LNOB principles and specifics of disability;
- Obtained database of the measures and resources of the various stakeholders at the municipal level;
- identified some persons with disabilities who are in the so-called gray zone, i.e. are not categorized as persons with disabilities, do not receive any services from the state and the municipality and are not in the database of the association of persons with disabilities;
- visually mapped facilities and infrastructure that are not accessible;
- determined the perceptions of the needs and proposals of the persons with disabilities and the parents of the children with disabilities as well as the perceptions of the persons working in the field of protection of disability rights and the service providers;
- prepared recommendations for improving the situation as base of the future local policy documents.

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Contribution to social policies:

The research will create data on the socio-economic status of different categories of persons with disabilities and needs of social services. The results will help to obtain an assessment of the quality and effectiveness of current social services and supports and will help the municipality, the Center for Social Work, the Employment Agency, the Health Fund, the Pension and Disability Insurance Fund and NGOs to take action and offer services based on the social mapping's recommendations.

Contribution to integration of Agenda 2030 and LNOB principles in local social protection programme

The research will help to strengthen the social programme of the municipality because the data will be collected in the area of several SDGs from Agenda 2030 and will be segregated based on the LNOB principles. The following principles will be incorporated in the research of issues covered by SDGs: SDG Education- geography and discrimination; SDG No poverty- geography, discrimination, socio-economic status and shocks; SDG Zero hunger- geography and socio- economic status; SDG Inclusive cities- geography and governance; SDG Education; geography, socio- economic status and discrimination; SDG Decent work- discrimination, socio- economic status and shocks; SDG Justice and participation- discrimination, governance and socio-economic status and SDG Equality- discrimination, geography, governance and socio-economic status.

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The research will be designed so that the LNOB principles can be included in the formulation of the questionnaires and in the preparation of the recommendations based on the results. The social protection program, which will be based on research data and recommendations, will indirectly incorporate the goals of Agenda 2030 and the LNOB principles.

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4. Methodology

The field research was conducted with questionnaire, which was prepared by CRPM Consulting and then adapted for the needs of this research by the Center for European Citizens Initiative and the Municipality of Kocani. The questionnaire is divided thematically, according to the five NLOB risk factors. Prior to the survey, it was planned to interview a total of 120 respondents, including adults with disabilities and parents / guardians of children with disabilities. The research sample is targeted, because it is a target group and the respondents are approached on the basis of previously obtained data about them. Only the structure of the respondents was made based on the type of disability, so that the sample could approximately reflect the percentage of different types of disability.

The creation of the list of potential respondents was done by collecting data from the municipality of Kocani from the organizations of persons with disabilities, the Inter-Municipal Center for Social Affairs and from primary and secondary schools. The data contained the name and surname of the respondent, address and telephone number. In order to protect personal data, the answers of the respondents are processed,

without revealing the identity of the respondent, or, indirectly, by associating certain personal data.

In the field research was conducted by field researchers, some of whom were involved in visual mapping and as administrative support in the realization of focus groups. Field researchers are people who have theoretical knowledge in the field of human rights and have experience in conducting surveys and interviews and two of them are people who are part of organizations of people with disabilities and this has made it easier to reach respondents. During March 2022, the field researchers received online training from the research coordinator on the structure and content of the questionnaire, the purpose of the research, the characteristics of the sample, the way of selecting respondents, the way of approach to the respondents, the way of filling in on the questionnaires and filling a diary for conducting the research.

Before starting the field research, a pilot research was conducted with five respondents, which aimed to determine certain misunderstanding that respondents have about certain issues, the time required to complete the questionnaire and adjust the approach to respondents. After the pilot research, small adaptations were made to the content of the questions and answers in order to be clearer to the respondents. The field research was conducted during March 2022 in the homes of the respondents or in the office of the organization of persons with disabilities, if it was more appropriate for the respondents. Some of the respondents were interviewed by phone, because they were given such an opportunity, if they have a risk due to the situation with Covid-19 and for certain health reasons. The respondents answer directly, except for the persons with intellectual disability and the persons who are seriously ill and weak and their guardians, ie the persons who take care of them, answered on their behalf. People with hearing and speech impairments were interviewed by a person who knew sign language. Although it was planned to cover 120 respondents, a total of 105 were interviewed because some of the persons on the interview list had changed their place of residence, died in the meantime, were not at home after three visits by the interviewer or refused to be interviewed, and some of them had stopped interviewing and the half-completed questionnaires were not processed. The structure of respondents is presented in the Table 1.

Table 1	Nº of respondents	(%)
Adult	80	74,1
Parent / guardian	28	25,9
Total	108	100,0

After the field research, the Center for European Citizens Initiative conducted a random telephone search of 27 respondents to check whether the interviewer did the interview and again asked a few questions from the questionnaire to determine are all questions were covered and are filled in correctly, then a logical and technical control of the completed questionnaires was made. The questionnaires were first entered in an Excel and then transferred to the SPSS program. Through filtering, three SPSS documents were prepared: one for all respondents, which includes adults with disabilities and parents / guardians of children with disabilities, one for adults with

disabilities and one for parents / guardians of children with disabilities. This was necessary in order to obtain the frequencies, crosses and other statistics needed for the three clusters of respondents. Each row number in excel / SPSS programs corresponded to the numbering of the questionnaire and it was easy to identify a specific error in entering the data and compare it with the data entered in the questionnaire.

Although the number of respondents is quite sufficient when it comes to a target sample at the municipal level, in order to make a quantitative analysis, however, given that 25 respondents are parents / guardians of children with disabilities and for this sub-sample can not small percentages are interpreted, especially when crossing between an independent and a dependent variable. The analysis, in this case, is made on indications of absolute numbers. The same is the case for the questions that are reached by skipping certain questions and they should be answered by a smaller number of respondents. Then the total number of respondents is reduced and the possibility of interpretation after crosstabulation is on the base of absolute numbers. In order to obtain greater statistical validity, the questions that are valid for both sub-samples - adults with disabilities and parents / guardians of children with disabilities, are processed cumulatively and data are obtained that are equally valid for these two target groups.

Sample structure

Table 2: Type of disability in adult respondents

Table 2	Nº of respondents	(%)
persons with intellectual disabilities	1	1,3
No answer	1	1,3
persons with visual impairments and blindness	12	15,0
persons with hearing and deafness	14	17,5
persons with hearing and deafness and persons with physical disabilities	1	1,3
persons with physical disabilities	47	58,8
persons with combined disabilities	3	3,8
persons with mental health problems	1	1,3
Total	80	100,0

Table 3: Type of disability of children whose parents / guardians are respondents

Table 3	Nº of respondents	(%)
persons with intellectual disabilities	8	28,6
persons with visual impairments and blindness	3	10,7
persons with hearing and deafness	6	21,4

persons with physical disabilities	5	17,9
persons with combined disabilities	1	3,6
persons with mental health problems	4	14,3
Refuses to answer / does not know	1	3,6
Total	28	100,0

Table 4: Place of residence of all respondents (adults and parents/guardinas)

Table 4	Nº of respondents	(%)
City	85	78,7
village from 300 to 1000 inhabitants	10	9,3
village over 1000 inhabitants	13	12,0
Total	108	100,0

Table 5: Gender structure of all respondents (adults and parents/guardinas)

Table 5	Nº of respondents	(%)
Male	65	60,2
Female	43	39,8
Total	108	100,0

Table 6- Age of adults with disability

Table 6	Nº of respondents	(%)
From 18 to 30 years	2	2,5
From 31 to 40 years	16	20,0
From 41 to 50 years	16	20,0
From 51 to 60 years	19	23,8
Over 60 years	25	31,3
Refuses to answer / does not know	2	2,5
Total	80	100,0

Table 7: Age structure of children with disabilities, whose parents / guardians are respondents

Table 7	Nº of respondents	(%)
Up to 6	1	3,6
From 7 to 10	12	42,9
From 11 to 15	4	14,3
From 16 to 17	6	21,4
From 18 to 26	5	17,9
Total	28	100,0

Focus groups

During the research, two focus groups were realized, one with representatives of institutions, which are stakeholders at the local level and the other with adults with disabilities and parents / guardians of children with disabilities. Both focus groups were realized in a hall in the municipality of Kocani with logistical support in the organization and implementation of focus groups by the municipality of Kocani and were moderated by the research coordinator. The focus groups aimed to collect information about the issues of the research and to open new sub-questions, detect problems and make recommendations for overcoming them. The results of the discussions are listed in a separate section of this report, presented as short notes and key points.

5. Social Mapping results

5.1. Analysis of available socio-economic resources

Within the municipality of Kocani, a project of Socially useful work is being implemented, within which activities are realized, which are intended for the elderly and frail, and among them are persons with disabilities who are given home care and social support.

The municipality, through project activities, provides personal assistants, who provide support to people with disabilities. It also provides financial support to vulnerable categories of citizens, including persons with disabilities, through the Annual Program in the field of social, health and child protection.

There are several local actors in the municipality, which provide support to people with disabilities: the Center for Social Work, the Health Insurance Fund, the Pension and Disability Insurance Fund, the Day Care Center for Persons with Disabilities, five primary schools, two high schools, clones of kindergarten "Pavlina Veljanova", the Employment Center, the General Hospital, several private general and specialist ambulances, dental ambulances and a sensory room. Also, the associations of the physically disabled, deaf and hard of hearing, and the blind and visually impaired have their own offices, which have a regional character because they cover several municipalities. The next chapter gives the locations of some of the public buildings.

Beneficiaries of the right to compensation due to disability and the right of beneficiaries to a special allowance.

The data refer to the period until March 31, 2022 for the municipalities of Kocani, Cheshinovo Obleshevo and Zrnovci.

Beneficiaries of the special allowance up to 26 years are a total of 142 people

- Persons with cerebral palsy 6 users
- People with autism 2 users

- Persons with epilepsy 2 users
- Persons with visual impairments (blind person) 11 users
- Hearing impaired 11 users
- Persons with severe disabilities 1 user
- Persons with mild disabilities 1 user
- People with Down Syndrome 4 users
- People with diabetes 8 users
- People with asthma (chronic disease) 1 user
- Chronically ill persons 38 users
- Physically disabled person 30 users
- Persons with combined developmental disabilities 14 users
- Persons with moderate disability 10 users
- Persons with severe disabilities in mental development 1 user

Beneficiaries of disability are a total of 264 people

- Deafness 103 users
- Blindness 77 users
- Mobility 84 users

Out of 264 beneficiaries of the right to disability, completely deaf and completely blind are not divided into categories, and in mobility all belong to the group of people with the most severe physical disability.

- Cerebral palsy 14 users
- Muscular dystrophy 1 user
- Neuropathy hereditary sensory motor 1 user
- Locomotor dysfunction 3 users
- Sclerosis multiplex 1 user
- Paraplegia 9 users
- Quadriplegia and tetraplegia 2 users
- Lack of limb 7 user
- Alcoholic polyneurology 1 user
- Implant i2 users
- Lower limb fracture 1 user

- Congenital hip dislocation 1 user
- Spinal muscular atrophy 1 user
- Hemiparesis 1 user
- Quadriplegia 2 user
- Hemiplegia 7 user
- Cerebral infarction 1 user
- Polyarthrosis, rheumatoid arthritis 1 user
- Polyneuropathy motor 1 user
- Multiple sclerosis 10 user
- Muscular dystrophy 1 lprosno
- Stroke 1 user
- Brown syndrome (partial deprivation of both legs) 1 user
- Hereditary ataxia 1 user
- Paraplegia and tetraplegia 2 users
- Paralysis (combined disorders) 1 user
- Spastic paraplegia 2 user
- Paraplegia (plachida) 1 lprosno
- Atachia strongly cerebral 1 user
- Spastic tetraplegia 1 user
- Sequels from other unmarked cerebrovascular diseases 3 users
- Paralytic syndrome 2 user

5.2.1. Geo-tagging of critical points for children and adults with disabilities

(full version of the photos:

https://drive.google.com/drive/folders/1UyzcF_FzpZUYMagp6xQpRCNqkvjkl54s?usp=sharing
g)

Building of the Municipality of Kocani (location:

<https://goo.gl/maps/G8oLoP2wBRV28sbl8>) (Figure 1 and Figure 2)



Figure 1

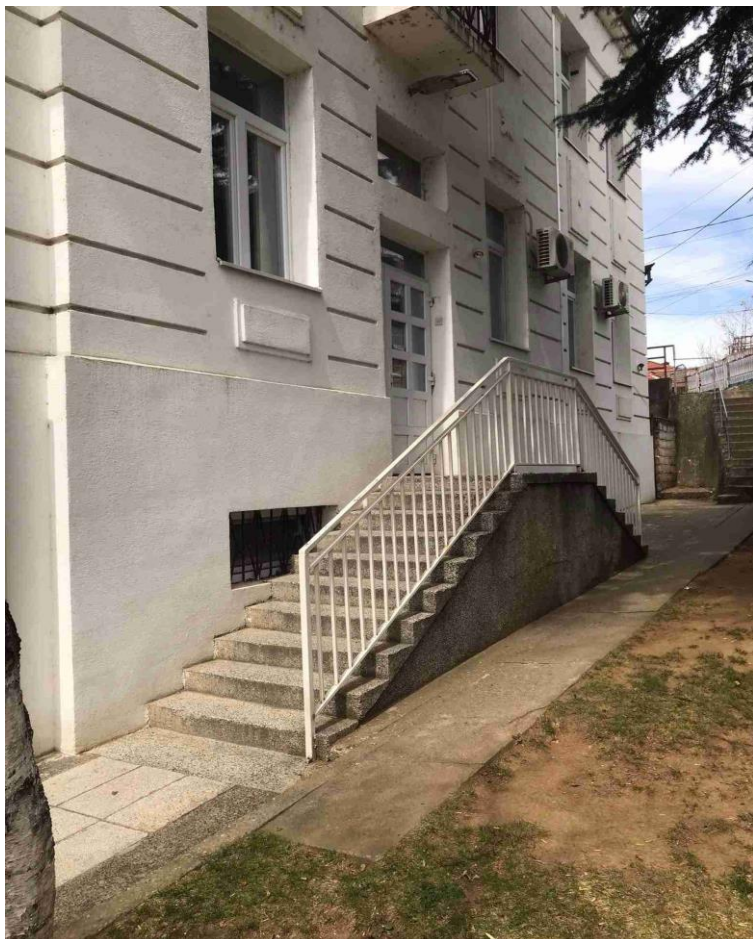


Figure 2

The building of the municipality of Kocani is inaccessible for people with disabilities, there are stairs to the entrance, next to the ramp for people with disabilities there is a tree that blocks the ramp, the ramp is not to the entrance of the municipality. With reliable information, there is a person who is responsible for helping people with disabilities to enter the municipality, but a person with a disability should be notified in advance when he or she will arrive to be assisted.

EVN – distribution(location: <https://goo.gl/maps/V8QdkeaLEbKWSKJN8>) (Figure 3)



Figure 3

EVN - electricity distribution is accessible for people with disabilities, there is a ramp to the entrance.

Vodovod - Utility company (location: <https://goo.gl/maps/n9B1NifnWhjm8Saa9>) (Figure 4)



Figure 4

Vodovod - Utility company, the entrance is accessible for people with disabilities has an access ramp to the entrance.

Post office building (location: <https://goo.gl/maps/E19yHyvcUdx8XUkf8>) (Figure 5)



Figure 5

The post office in the municipality of Kocani is inaccessible for people with disabilities, there is no access ramp to the entrance of the building, the sidewalk near the post office has an appropriate access slope.

Basic Court Kocani (figure 6)



Figure 6

The Basic Court in Kocani is accessible for persons with disabilities, at the entrances to the yard and the building there is an appropriate slope for the entry of a wheelchair.

Cultural Center Beli Mugri (location: <https://goo.gl/maps/JyYKiztFFAvN9aYQA>) (figures 7 and 8)



Figure 7

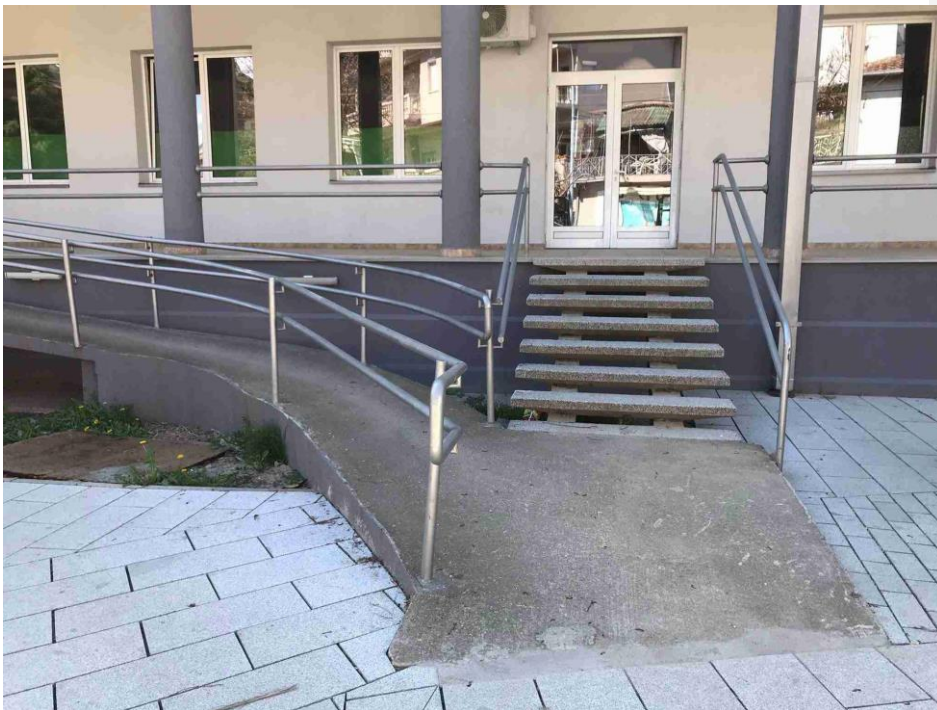


Figure 8

There are two enters. One with ramp.

Library Iskra (location: <https://goo.gl/maps/ms9ZEAsnCcwqyoeb9>) (figures 9 and 10)



Figure 9



Figure 10

The city library is accessible for people with disabilities, the library has two entrances, one of which is intended for people with disabilities.

Registry Office and Pension and Disability Insurance Fund (location: <https://goo.gl/maps/MQbFUbwv15DeD9n6>) (figures 11 and 12)



Figure 11



Figure 12

The Registry Office and the Pension and Disability Insurance Fund are fully accessible for persons with disabilities. In front of the building there is a parking place intended for persons with disabilities.

Employment Center (figure 13)

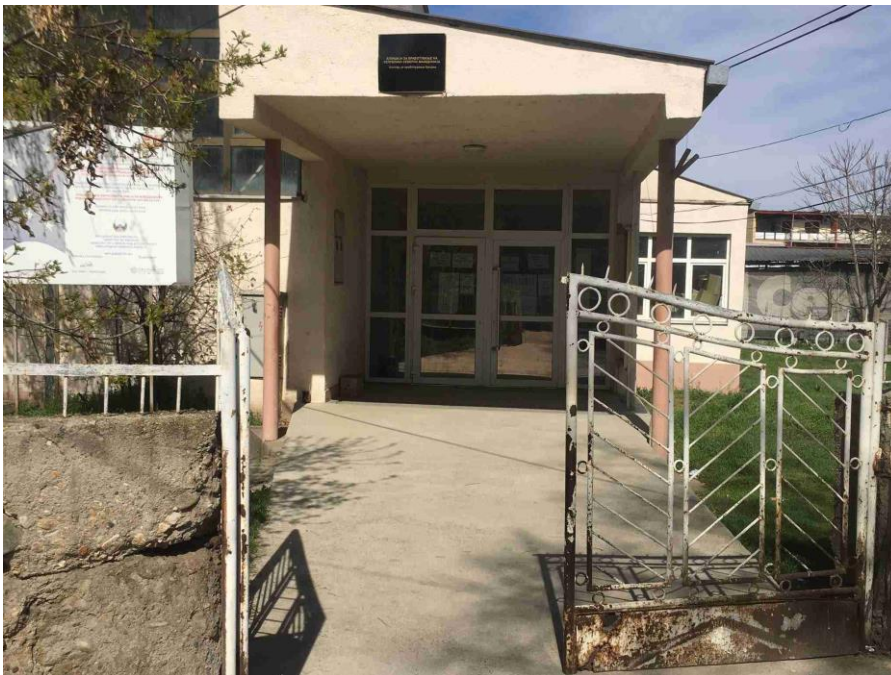


Figure 13

The employment office is partially accessible due to the high sidewalk in front of the entrance of the building, the sidewalk does not have a proper slope.

Central register (location: <https://goo.gl/maps/cGnjser68wwz9okL6>) (Figure 14)



Figure 14

The central register is available for people with disabilities, has a ramp for entering the building and has parking for people with disabilities.

Center for Social Affairs (location: <https://goo.gl/maps/CbaoA94zZ53b1NB67>) (figures 15, 16 and 17)



Figure 15



Figure 16



Figure 17

The Center for Social Affairs is inaccessible for people with disabilities without a ramp, in addition to the problem of not having a ramp, the stairs are also too damaged and people with disabilities who use crutches can not reach the entrance of the building.

Center for Public Health (location: <https://goo.gl/maps/bFyhP4ZsDA98zTSr5>) (figure 18)



Figure 18

The Public Health Center is not accessible for people with disabilities who use a wheelchair due to the stairs at the entrance to the building, there is no ramp.

General Hospital Kocani (location: <https://goo.gl/maps/F5Gfc7nnUaxLMKPX6>)
(figures 19- 23)



Figure 19



Figure 20



Figure 21

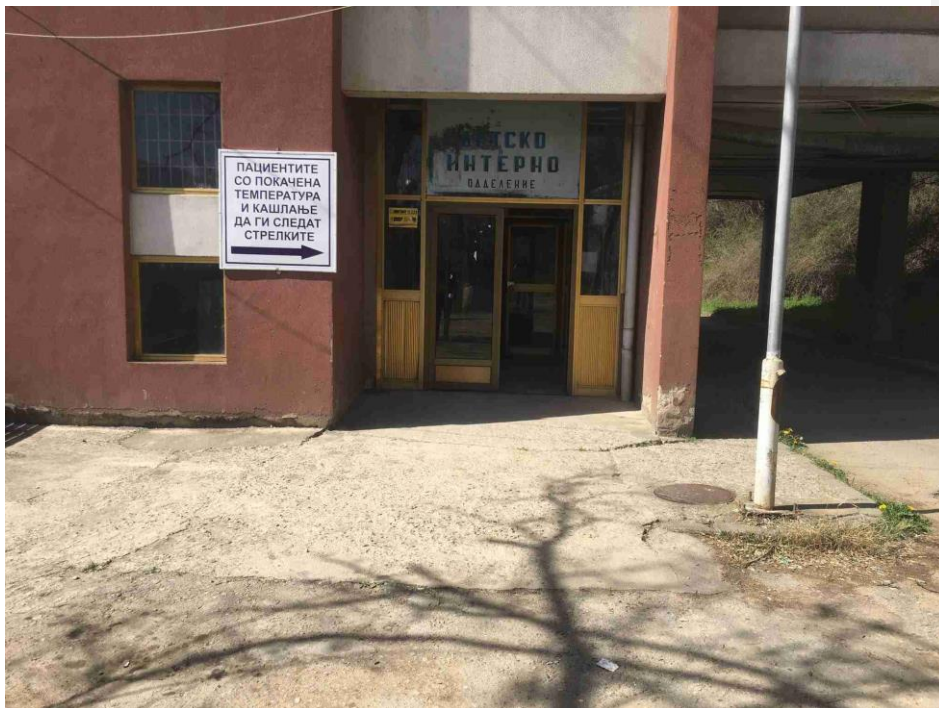


Figure 22



Figure 23

The General hospital and the vaccination facility are fully accessible for people with disabilities. There is a ramp at the entrances to the facility, only the vaccination facility is too steep.

Eye ambulance (location: <https://goo.gl/maps/F5Gfc7nnUaxLMKPX6>) (figure 24)



Figure 24

The eye ambulance is not accessible for people with disabilities and there is no ramp to the entrance of the facility. We can access it from two entrances but neither of them has a ramp.

Banks



Figure 25

TTK Bank (figure 25) is partially accessible for people with disabilities, the problem is that there is a high threshold at the entrance and an ATM next to the bank is not accessible for people in wheelchairs.



Figure 26

Sparkasse Bank (figure 26) is accessible for people with disabilities can only be a problem entry threshold which is quite low. (location: <https://goo.gl/maps/GMynHRg2z81n62rz6>)

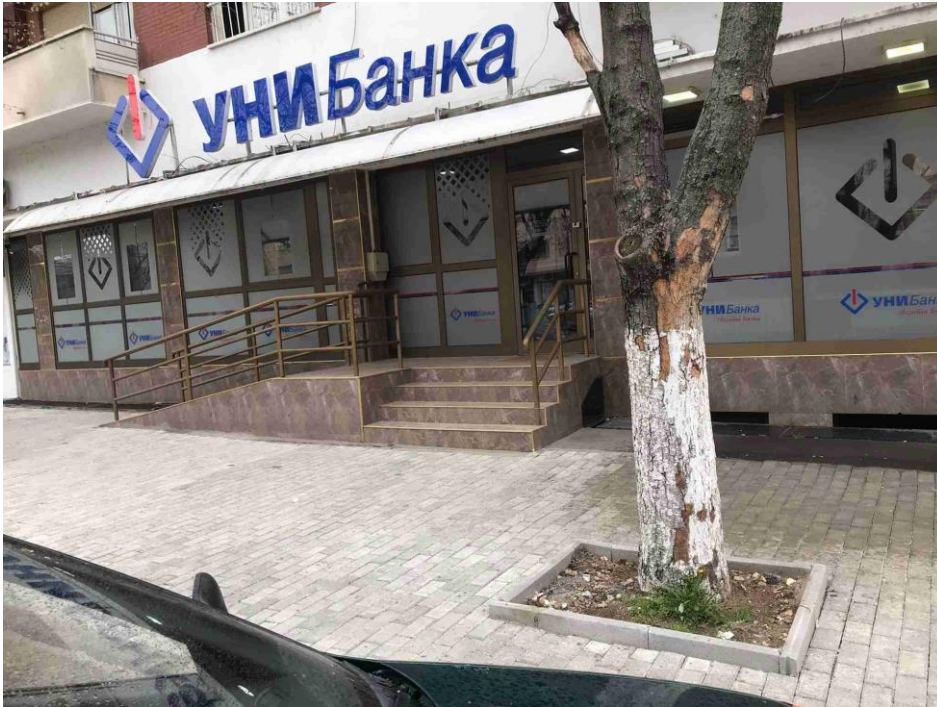


Figure 27

Uni Bank (figure 27) is accessible for people with disabilities at the very entrance of the building has a ramp. (location: <https://goo.gl/maps/m66oXnSGJzejsz2s8>)

The ramps and entrances to Stopanska Banka and Komercijalna Banka are similarly designed as Uni Bank

Kindergarden Pavlina
<https://goo.gl/maps/3U8FBMQEMmxEtuSZ8>

Veljanova

(location:



Figure 28

The kindergarten Pavlina Veljanova (figure 28) clone 1 entrance is fully accessible for people with disabilities in a wheelchair, but in front of the kindergarten there is a sidewalk that has no slope and is a small problem.



Figure 29

Kindergarten Pavlina Veljanova (figure 29) clone 2 is fully accessible for people with disabilities, have 2 entrances, one of which is accessible for people with disabilities.

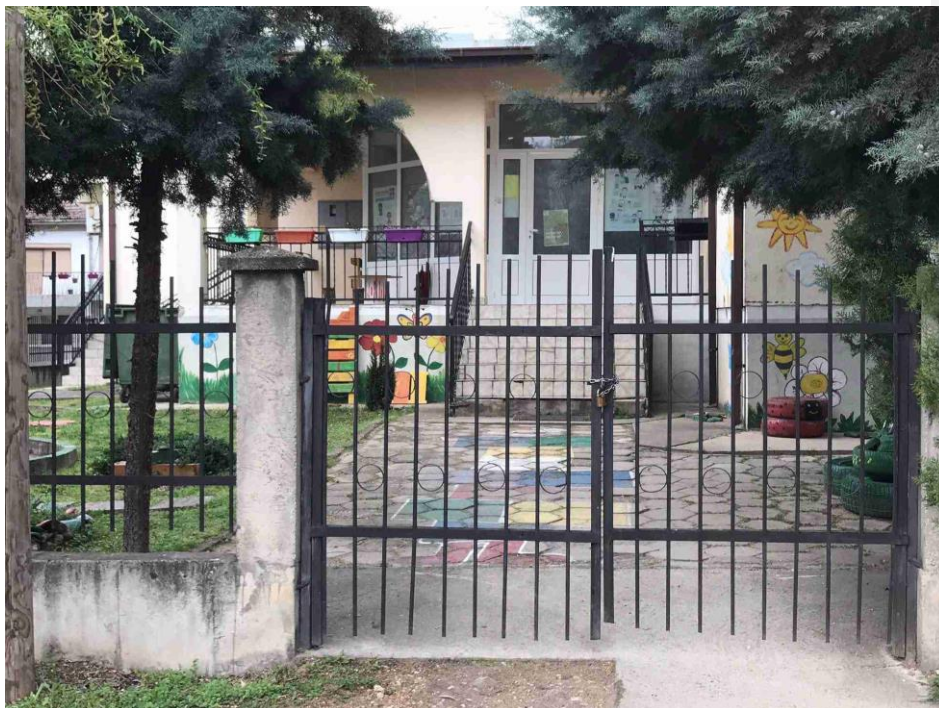


Figure 30

The kindergarden Pavlina Veljanova (figure 30) clone 4 is not accessible for people with disabilities, because there is no ramp and there are stairs.

Primary schools



Figure 31

Rade Kratovce Primary School (figure 31) is inaccessible for people in a wheelchair, because there are stairs in front of the entrance and there is no a ramp for passing those stairs. (location: <https://goo.gl/maps/wx31xu17Zbs2BHYL8>)

Nikola Karev Primary School is partially accessible for people in wheelchairs, because there is a high threshold at the entrance to the school yard and the entrance to the school building. (location: <https://goo.gl/maps/wx31xu17Zbs2BHYL8>)



Figure 32

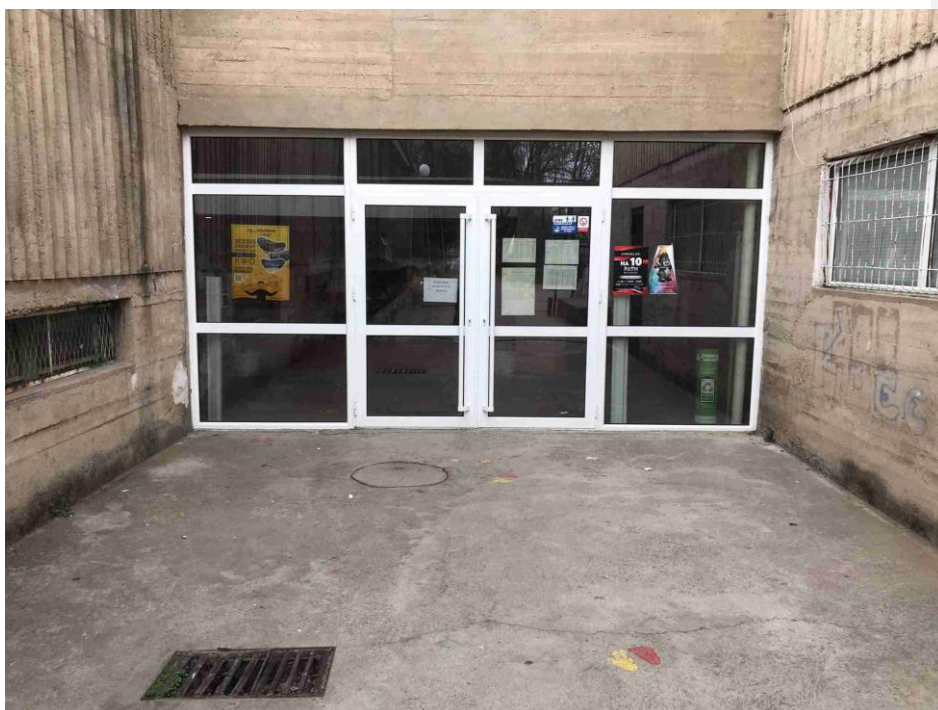


Figure 33

The primary school Cyril and Methodius (figures 32 and 33)is inaccessible for people with disabilities who are in a wheelchair, because at the very entrance to the yard there are stairs that and there is no ramp to these stairs. (location: <https://goo.gl/maps/LdvHR5kTsoFPRxuCA>)

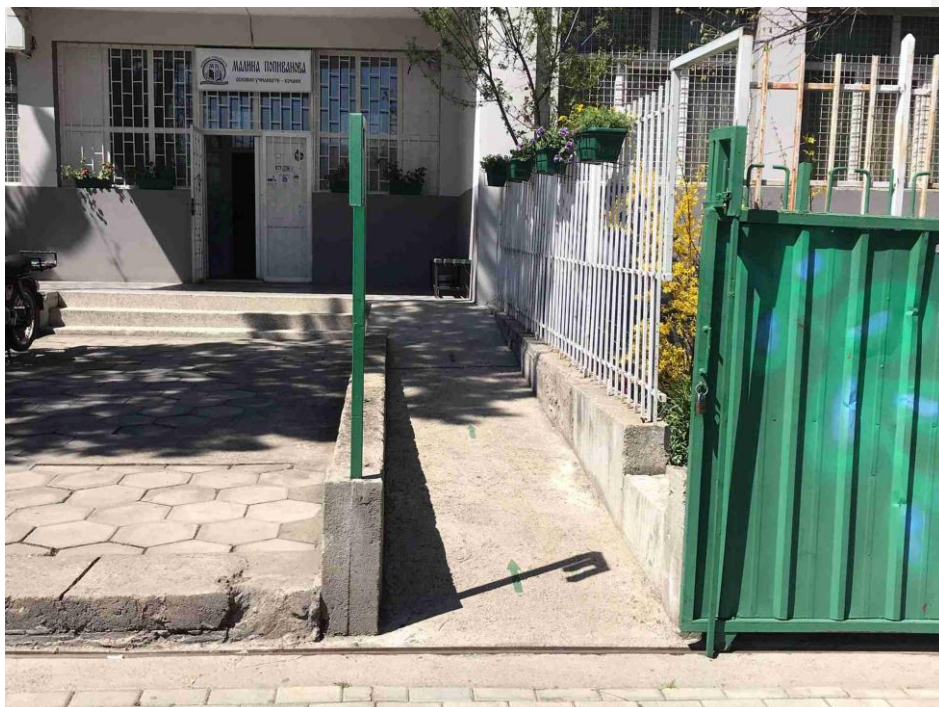


Figure 34

The elementary school Malina Pop Ivanova (figure)34 is completely accessible for people with disabilities from the very entrance to the school yard, nex to the entrance of the building there is a ramp intended for people with disabilities in a wheelchair. (location; <https://goo.gl/maps/UcSQ72agDoMSsh2B7>).

High schools



Figure 35

Ljupco Santov High School (figure 35) is fully accessible for people with disabilities. There is a ramp at the entrance. (location: <https://goo.gl/maps/NLKXcq3wRVBfWyje7>)



Figure 36



Figure 37

The high school Goso Vikentiev (figures 36 and 37) is accessible for people with disabilities at the entrance there is a ramp. (location: <https://goo.gl/maps/HfGB1ZG9UuA4r9d46>)

Park



Figure 38

The city park (figure 38) is accessible for the people with disability.

Parking places (figures 39- 47)



Figure 39

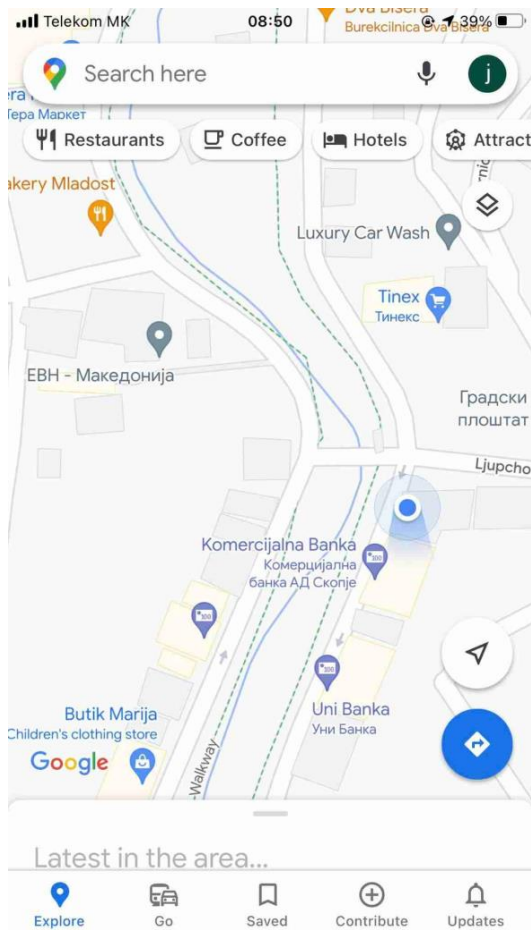


Figure 40

This parking lot does not have a marked parking space for people with disabilities.



Figure 41

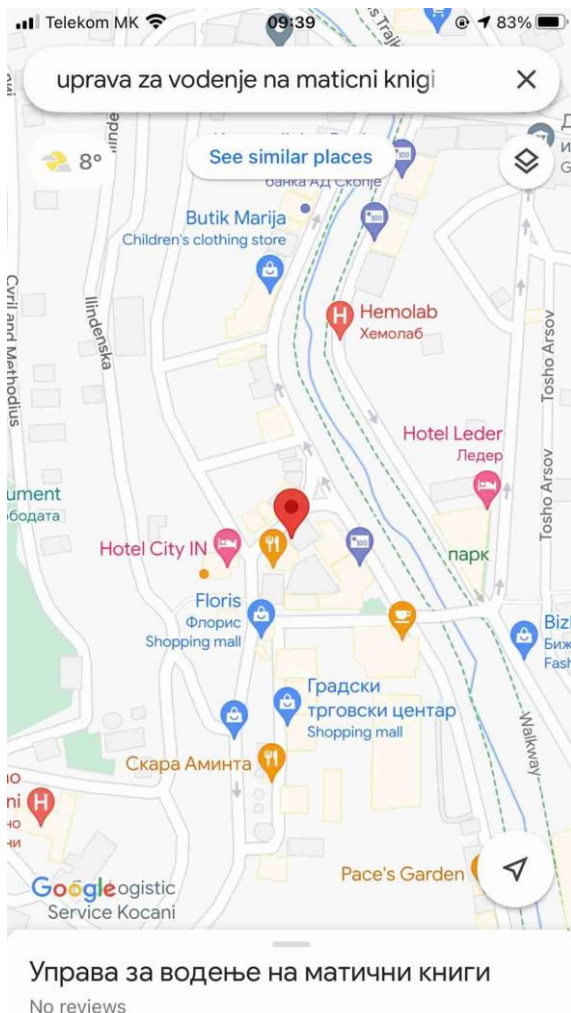


Figure 42

This parking lot has a marked place for parking of persons with disabilities.



Figure 43

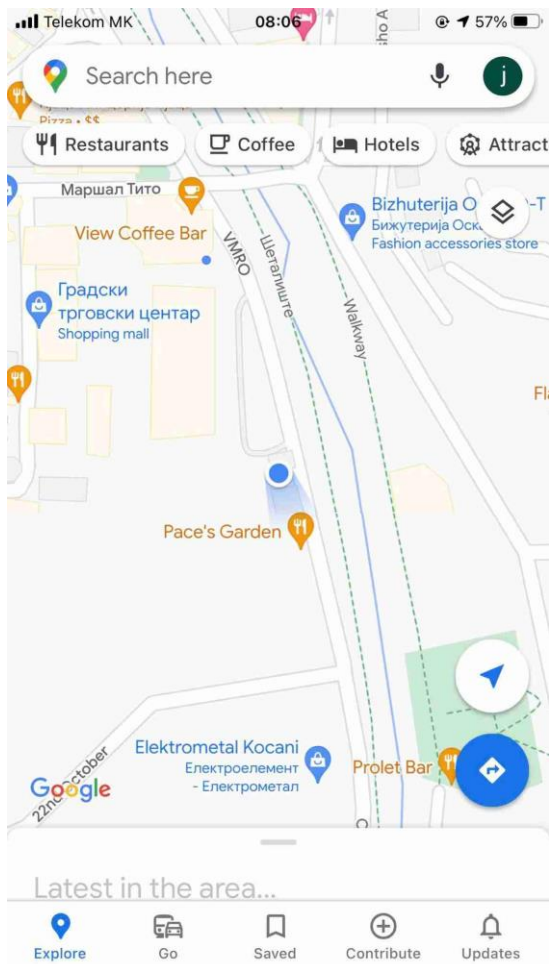


Figure 44

This parking lot has a marked parking space for a person with a disability.



Figure 45

This parking lot has a marked place for people with disabilities..

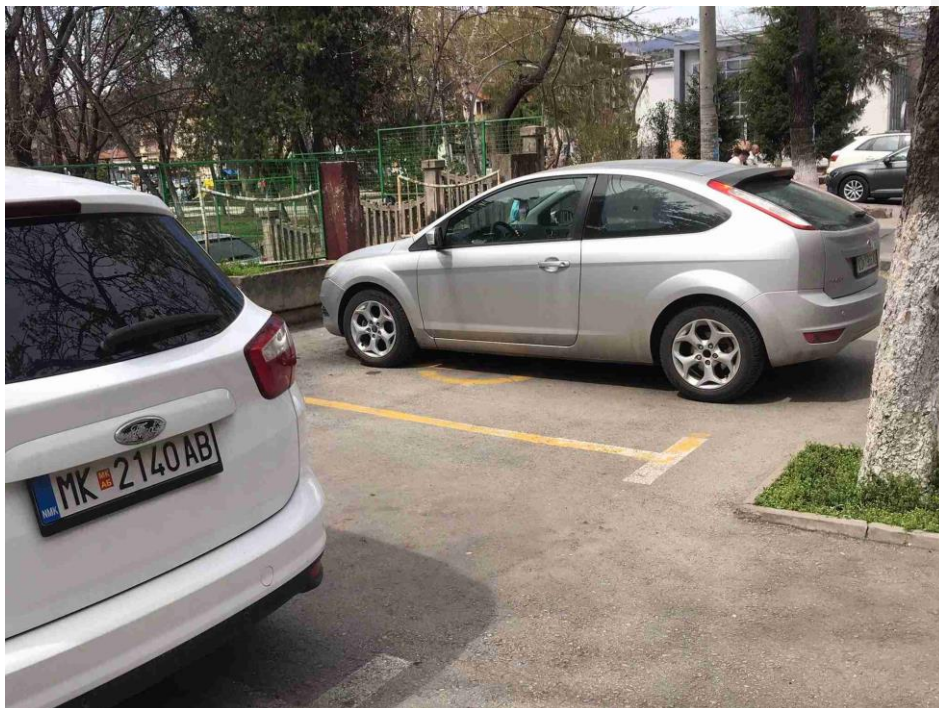


Figure 46

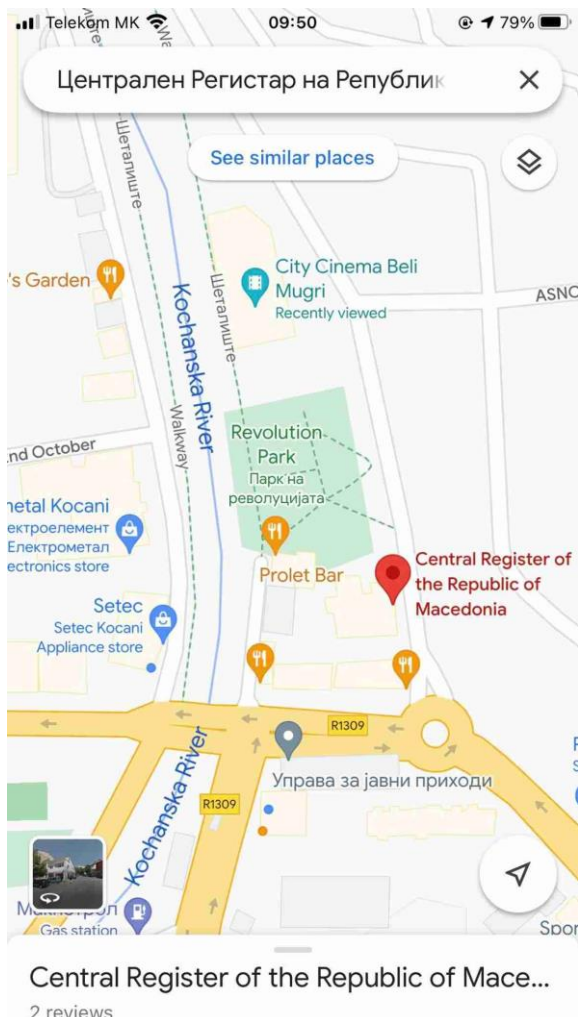


Figure 47

This parking lot is located near the Central Register and has a marked parking place for disabled people.

Note

In the city of Kocani there are few marked parking spaces for people with disabilities.

Sidewalks (figures 48- 55)

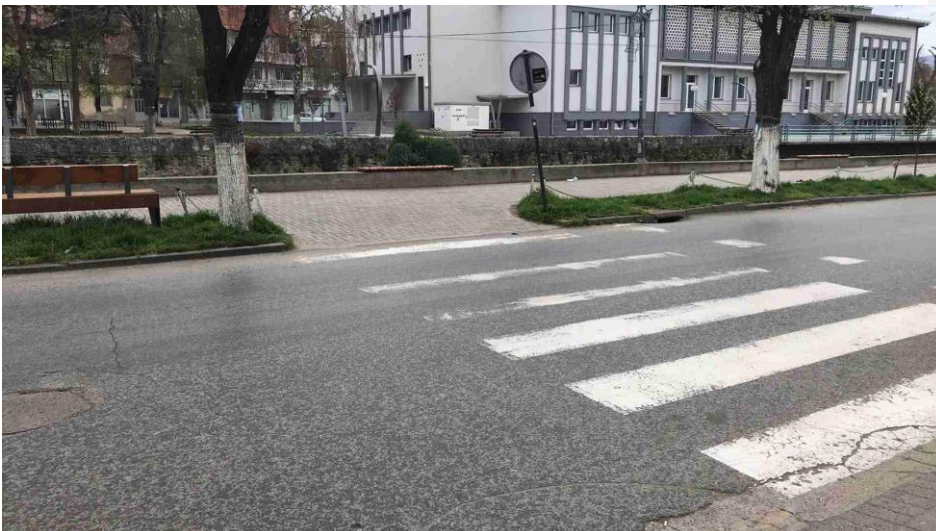


Figure 48

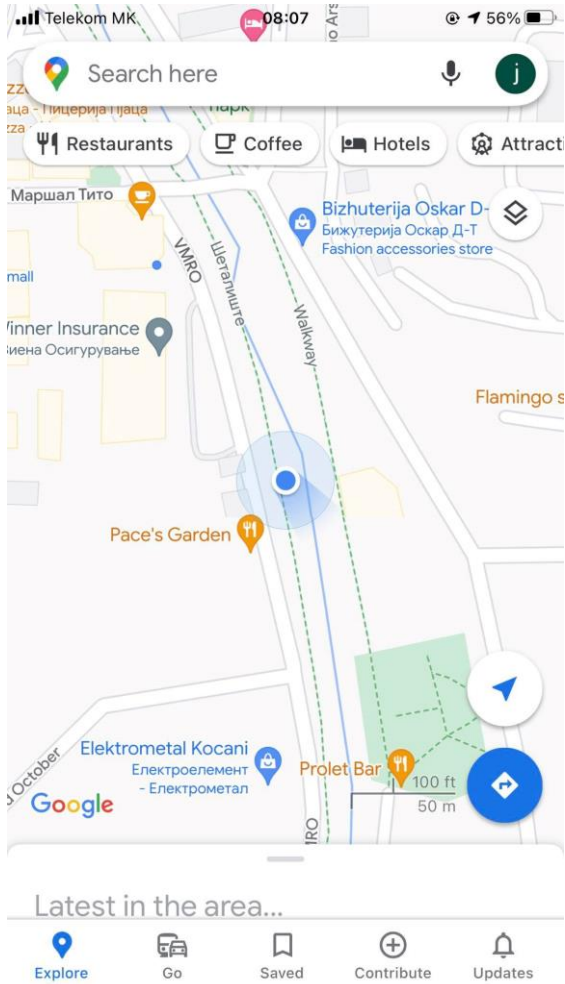


Figure 49

These sidewalks are accessible for people with disabilities in a wheelchair and have a suitable access slope.



Figure 50

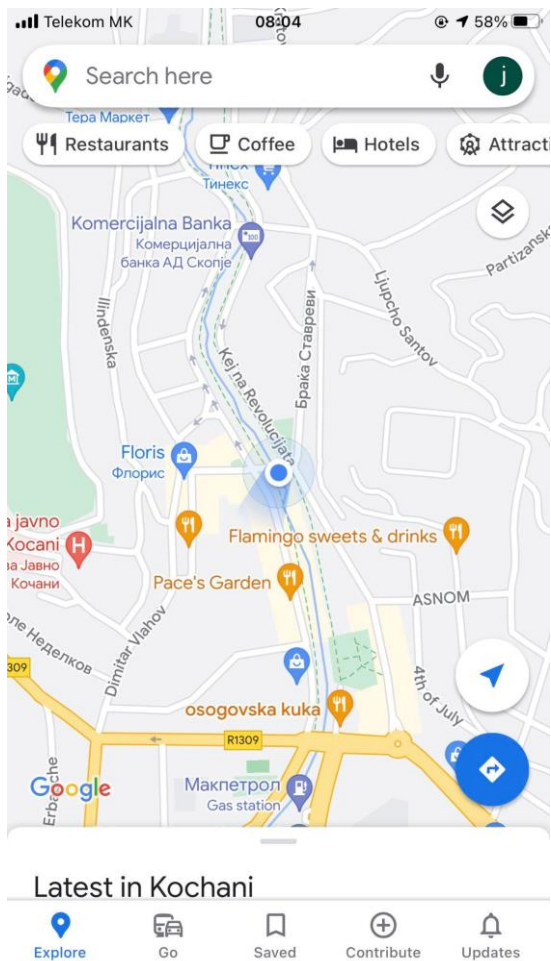


Figure 51

These two sidewalks are accessible for people with wheelchairs because they have a suitable access slope.

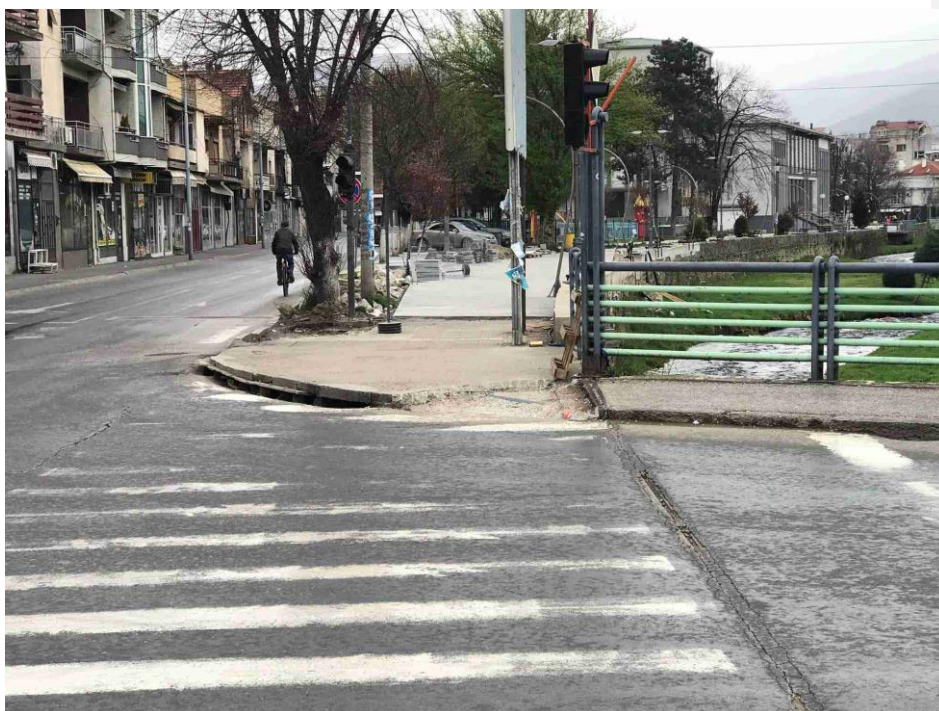


Figure 52

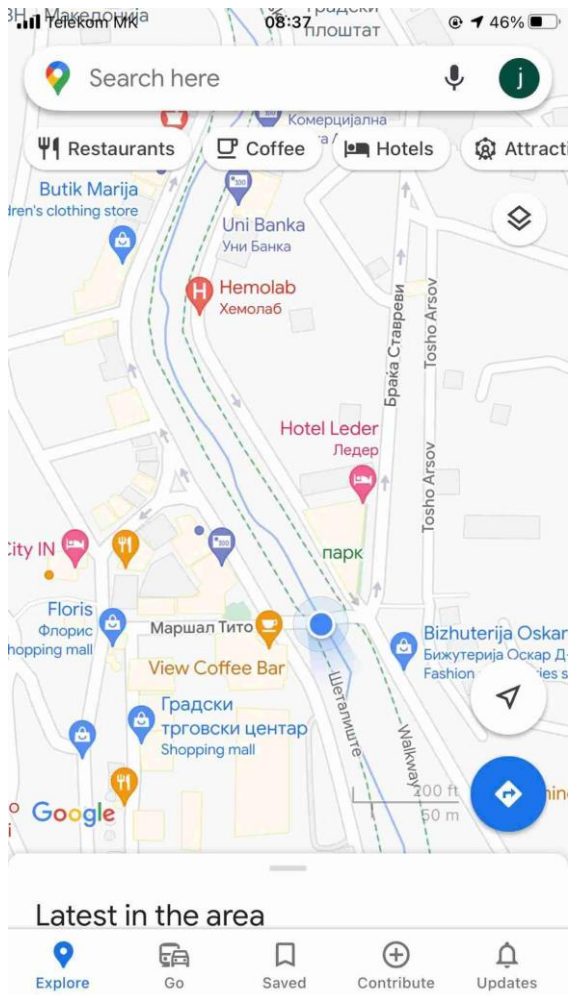


Figure 53

These two sidewalks at this location are inaccessible to people with wheelchairs without adequate access slope.



Figure 54

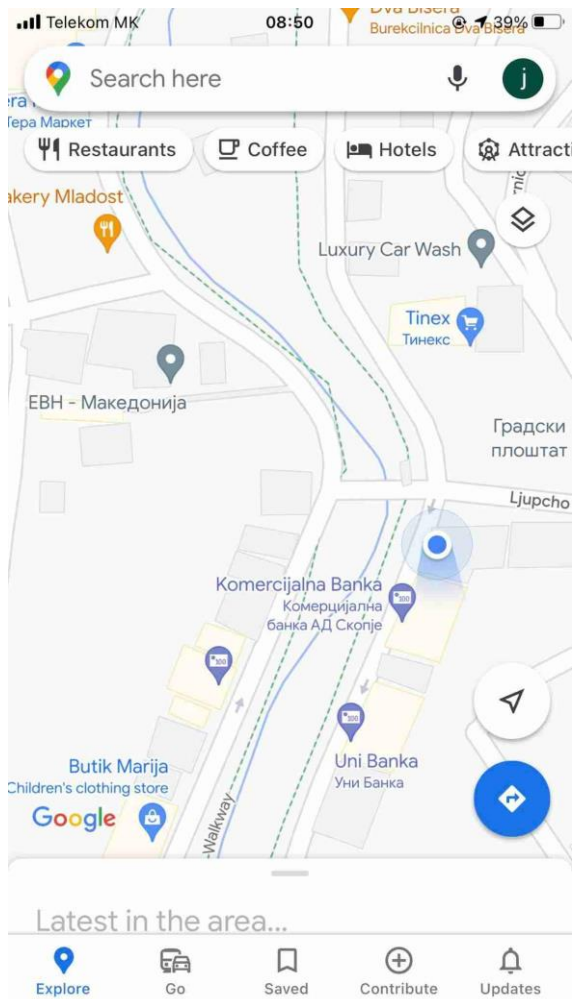


Figure 55

These two sidewalks are inaccessible to people with wheelchairs because there is not a suitable access slope.

5.3. LNOB group – adults and children with disability

This chapter includes the results of the answers to all the questions that were asked to the respondents. The answers are grouped according to the structure of the questionnaire and is divided into parts, which correspond to the risk factors: socio-economic status, geography, discrimination, government and shocks. It also covers questions related to the assessment of the needs for services in the field of health, social services at home and social services in the community. Some of the questions intersect with the questions contained in the demographics section, namely: type of disability, place of residence and gender, as independent variables in interpreting the data. The results are also presented based on the type of sample, ie some answers are presented at the level of the whole sample (10 respondents - adults with disabilities and parents / guardians of children with disabilities) and some shown at the level of the sub-sample - adults with disabilities and sub-sample - parents / guardians of children with disabilities.

Socio-economic status- risk factor

About 45% of adults with disabilities are not married or in a partnership, which is a potential problem for accessing economic and personal support. Among parents / guardians of children with disabilities it is 7% and the risk of not having potential support in child care is not very high. About 44% of adults with disabilities have primary education or no primary education and this educational structure is a risk factor for finding a job or income level. The correlation between the independent variable "type of disability" was tested with the dependent variable "degree of education" and it was concluded that there is no dependence.

About 40% of adults with disability are employed and about 20% are unemployed. From the table 8, it can be concluded that the percentage of people employed in the private sector as people with disabilities dominates. The survey found that only 21% of those who are unemployed are looking for work. The correlation between "gender" and "employment" was tested and it was concluded that there is a gender balance. None of the parents / guardians who are unemployed are looking for a job.

Table 8	Ne of respondents	(%)
Employed in the public sector	4	5,0
Employed in the public sector categorized as disabled	3	3,8
Employed in the private sector	7	8,8
Employed in the private sector as disabled	14	17,5
Self-employed	1	1,3
Self-employed as disabled	1	1,3
Employee in a protection company (company that has employed several disabled persons)	1	1,3
Retirement /--> income	30	37,5

Unemployed	14	17,5
Beneficiary of social assistance	2	2,5
Other	2	2,5
refuses to answer	1	1,3
Total	80	100,0

Of those adults with disabilities who are employed, about 40% reported for problems at work, and most of them answered that they were not treated equally by the employer. About 92% of adults with disabilities and 82% of parents / guardians earned income last month. Most of the income came from salary, pension, and 12% from social assistance.

About 32% of all respondents had an income below 12,000 denars and this is a worrying indicator of the poor economic situation of adults and children with disabilities. Less than 1% of the respondents have incomes above the average salary and most, ie 44% have incomes from 12,000 to 20,000 denars. 9% of adults live alone and this is an additional problem in covering current expenses.

The research showed that 70% of the respondents can not meet the basic needs and this is a worrying indicator of the existence of a high level of poverty (figure 56).

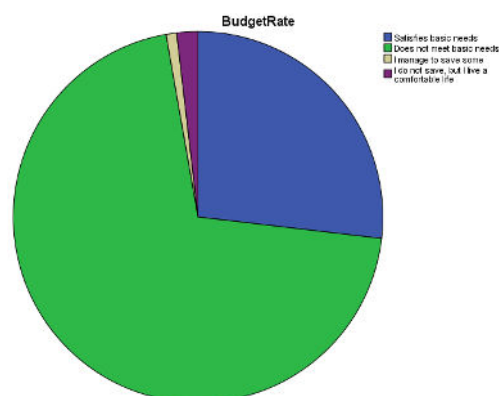


Figure 56

About 16% of the respondents' households in the last month had periods when there was not enough drinking water. This is a serious indicator of poor living conditions for people with disabilities, given that the periodic lack of water for them is an additional effort for alternative supply (figure 57).

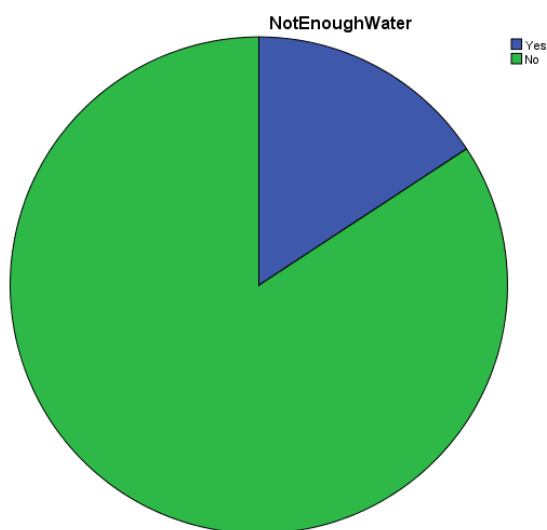


Figure 57

About 18% of respondents in the last month had situations when they could not afford a meal several times or more (table 9). This is a serious indicator of the existence of extreme poverty. The dependence of this issue on gender, place of residence and type of disability was tested and it was concluded that there is no dependence.

Table 9	Nº of respondents	(%)
Never	86	79,6
Several times (2-3 times)	16	14,8
Multiple times (4 and more times)	3	2,8
Refuses to answer / does not know	3	2,8
Total	108	100,0

Half of the respondents have a computer, about 80% have internet (including a mobile phone) and about 90% are satisfied with TV channels they have.

About 80% of the respondents can not afford heating so that their home can be warm (figure 58). This is another indicator of extreme poverty. When answering this question, it is assumed that the respondents also took into account whether all rooms in the home can be heated, given that there is no central heating in the municipality and this is an additional cost for citizens. But, regardless of the narrower or broader understanding, it is still a lack of means to provide one of the minimum necessary living conditions.

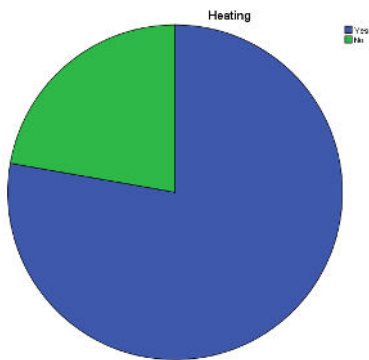


Figure 58

About 18.5% can afford to pay for a week away from home, about 34% can not afford to eat meat or their vegetarian substitute (figure 59) . This is another indicator of the existence of extreme poverty among people with disabilities.

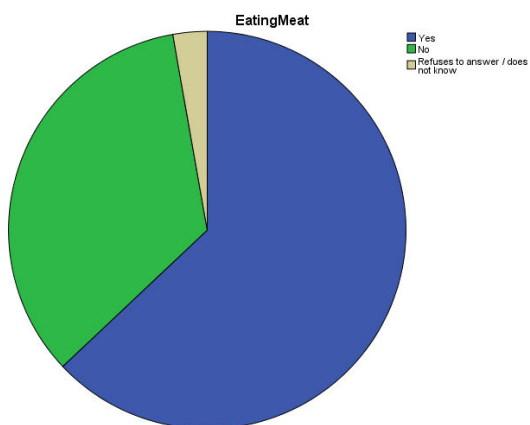


Figure 59

Only 12% can afford to pay for a person who can take care of a person with a disability, only 7% can pay unexpected expenses of 300 to 500 euros, 28% have problems buying medicines for themselves or another family member and 20% can not afford to pay utility bills at home.

Conclusions:

- Many adults with disabilities have no primary education or only primary education and this is a major reason for their inability to compete in the labor market in order to be employed or get a better paid job;
- About 20% stated that they are unemployed and of these, only 20% are looking for work, which is an indicator that they are either not able to work or are not interested in starting an employment relationship;

- About 1/3 last month earned less than 12,000 denars, and 70% can not meet basic needs during the month, which is a serious indicator of poverty;
- Indicators of extreme poverty are 16% of respondents in the last month had problems with drinking water, 18% at least once a month were hungry, 80% had problems to heat the house, 34% to buy meat or its substitute and 28% to buy drugs.
- *The most excluded groups can be considered persons who are not employed and those who have a monthly income below the minimum wage.*

Recommendations:

- The municipality and the Employment Center to take measures for additional training of the unemployed adults with disabilities in order to be able to find a job more easily;
- PCE "Vodovod" to take measures to eliminate the problems with the water supply of the households inhabited by persons with disabilities because the occasional lack of water creates additional risks for these families;
- The municipality to take measures in cooperation with other local stakeholders, to ensure periodic delivery of basic food products to people with disabilities living in extreme poverty;
- The Center for Social Affairs to make detailed records of persons with disabilities who are at social risk so that they can be assisted with the services covered by the Law on Social Protection;
- The local stakeholders to continue the good practice for subsidizing drugs and to popularize this measure among people with disabilities;
- The municipality, together with the Center for Social Affairs and local organizations of persons with disabilities to create a complete database of persons with disabilities, with information on their social status so that it can use it in planning measures and preparing potential grant projects. to support this vulnerable category of citizens.

Geography - risk factor

About 36% of adults and children with disabilities live in completely or partially inaccessible homes. Specifically, 27.4% of the respondents answered that their homes are partially accessible and 7.4% that they are completely inaccessible (figure 60). This is a major risk factor for the exclusion of adults and children with disabilities. However, if we take into account that this question was asked to all respondents, regardless of the type of their disability and the disability of their child, an even higher percentage of inaccessibility will be found. Namely, the biggest problems with accessibility are among people with physical disabilities, combined disabilities and impaired vision. Of those who answered that they have inaccessible, about 40% answered that they do not have access stairs, about 20% do not have inappropriate door openings and about 15% do not have an elevator.

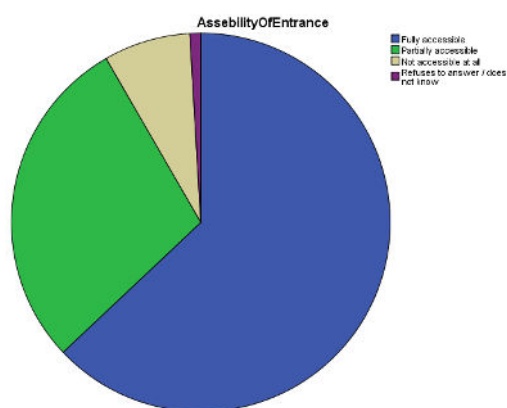


Figure 60

From the table 10, it is obvious that the homes of people with disabilities do not have a problem with connection to the water supply, sewerage and electricity network.

Table 10	Nº of respondents	(%)
Water	2	1,9
Fixed or mobile phone	1	,9
Bathroom	3	2,8
Sewerage connection	3	2,8
Nothing is missing	96	88,9
Refuses to answer	3	2,8
Total	108	100,0

About 60% of adults with disabilities are homeowners and this is an indication that people with disabilities are not excluded from the right to own a home. However, there is a gender disbalance regarding this right, ie the research showed that only 25% of women with disabilities own a home (figure 61).

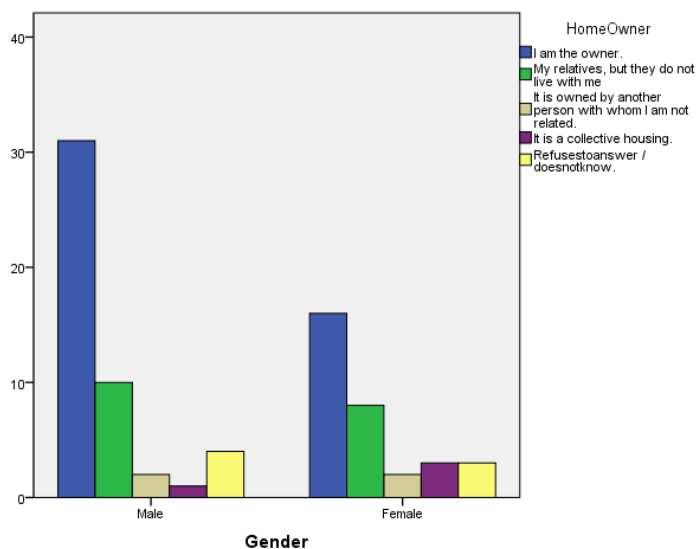


Figure 61

From the tables below table 11- number of rooms and table 12- square metres, it is evident that adults and children with disabilities have a relatively low problem with spatial conditions in the home. When assessing the spatial conditions, only the bedrooms and living rooms are considered. The kitchen, bathroom and hallway are not treated as rooms. About 40% live in one or two rooms and 13% live in a home with an area of up to 40 m².

Table 11	Nº of respondents	(5)
One	4	3,7
Two	39	36,1
Three	35	32,4
Four	25	23,1
Five	2	1,9
More than five	2	1,9
Refuses to answer / does not know	1	,9
Total	108	100,0

Table 12	Nº of respondents	(%)
Up to 30	7	6,5
From 31 to 40	7	6,5
From 41 to 60	27	25,0
From 60 to 80	28	25,9
From 80 to 100	26	24,1

Over 100	6	5,6
Refuses to answer / does not know	7	6,5
Total	108	100,0

Conclusions:

- More than 1/3 of adults and children with disabilities live in inaccessible homes, which include inaccessibility to the entrance, inaccessible entrance and inaccessible rooms inside the home;
- Adults and children with disabilities do not have significant problems with spatial living conditions and connection to the water, electricity and sewerage network;
- Relatively high percentage of women with disabilities do not own a home.
- *The most excluded groups can be considered adults and children with severe physical disabilities that cause movement problems and those who have blindness.*

Recommendations:

- The municipality to undertake activities for ensuring accessibility to the entrances of the homes of persons with disabilities and to provide subsidies for adjusting the homes of adults and children with disabilities;
- The municipality, together with the organizations of persons with disabilities and the organizations for protection of women's rights to undertake awareness raising activities to increase the percentage of women with disabilities who own a home.

Social service needs for people with disabilities

Health services

The data below (current condition of adults/children with disability) describes the health status of adults and children with disabilities. Respondents can choose more than one answer, because one person can have more than one problem. The data is based on a personal assessment of the condition and some of the self-assessments, for example for partially impaired vision or hearing, do not imply that the person has a sensory disability but have certain problems that are corrective (e.g., farsightedness). The answers show that about 16% of adults and children with disabilities are either completely immobile or can use a wheelchair and represent a very high percentage of people at risk.

The current condition of an adult with disability / child with disability is:

1. The person is completely paralyzed, but can use a wheelchair. 12%
2. The person is partially paralyzed (uses an aid and moves). 23%
3. Limited use of hands or fingers. 27%
4. Limited use of feet or legs. 39%

5. Difficulty picking up and using household items. 35%
6. There are blackouts, seizures and loss of consciousness. 17.6%
7. The person has partially impaired vision. 34%
8. The person has an autistic spectrum of 2%
9. No sight (blindness) .6.5%
10. The person as completely impaired hearing. 8.3%
11. The person partially impaired hearing. 22%
12. The person has speech problems. 27%
13. Feels chronic pain and has difficulty moving even with an aid. 32.4%
14. Intellectual disability (forms of retardation) 14.8%
15. The person is completely paralyzed in a supine position. 3.7%
16. The person has a severe mental disorder (mental illness). 11%
17. Lack of upper limb (arm) .3%
18. Lack of upper limbs (both hands). 0%
19. Lack of lower limb (leg). 11%
20. Lack of lower limbs (both legs). 1%
21. Lack of upper and lower extremities (arm and leg) .1%
22. Disorder and deformation of the body 33%

20% of adults with disabilities assess their health condition as bad and 40% as decent. 32% of parents rate the health condition of their child with a disability as bad and 14% as decent. The health condition of children with disabilities is worrying here, but it must be borne in mind that it is a subjective assessment of the parent and often disability as a condition is assessed as a health condition.

43% of adults and children with disabilities have disability from birth, 22% acquired them as a result of illness and the rest as a result of injury, car accident or injury at home.

Respondents were asked *On a scale of 1 to 5 where 1 is the lowest and 5 is the highest grade, how satisfied are you or how do you feel about:*

- Personal relationships with other people
- Do you feel safe?
- How satisfied are you with your life as a whole?
- Do you feel forgotten by the community?
- Do they treat you well when you receive health care and services

Of the respondents, with 4 or 5, 53% assess the relations with other people as good, 52% that they feel safe, 30% that they have the satisfaction of their own life, 31% that they are forgotten by the community and 45% that they treat well with them when receiving health care and care. From these results it will be concluded that the respondents have the biggest problem with the negligence shown by the community towards them.

6% of adults with disabilities in the last 12 months were in a situation not to receive a general health examination at the family doctor once or several times, and 10% more than once did not receive a specialist examination. 11% of children with disabilities did not receive a general health examination from the family doctor once or several times and 14% did not receive a specialist examination several times. The data show a relatively weak system of primary and secondary health care for adults and children with disabilities. There is a proportionality in the answers depending on the place of residence of the respondent, ie, it does not matter if the person lives in a city or in a village. 10% of parents / guardians answered that their child did not receive a specialist examination due to the high cost of the examination.

About 76% of adults with disabilities have movement problems, ie 58.8% have movement problems and need help and 17.5% have movement problems but do not need help. This is a significant indicator of the exclusion of adults with disabilities and support needs. 28% of children with disabilities have movement problems and need help and 18% have movement problems, do not need help. Children with disabilities will also find a serious need for support to overcome this problem. 21% of adults with disabilities live up to 2 km from the ambulance, but have difficulty getting there, and 27% live more than 2 km from the ambulance. Given that some of those living further away have a problem, it can be concluded that accessibility of health services is a risk factor for many adults with disabilities.

10% of children with disabilities live up to 2 km away from the ambulance, but have trouble reaching it, and 37% live more than 2 km away. In this case it can be concluded that some of the children with disabilities have problems with access to health care. This problem is significantly among people with disabilities living in rural areas, if we take into account that the total number of respondents living in the countryside and they live more than 2 km from the ambulance, ie live up to 2 kilometers, but have trouble reaching the ambulance.

The problem with the distance to the ambulance is increasing, considering that 31% of adults with disabilities in the last 12 months needed to visit a doctor once a month and 7% of children with disabilities needed to visit a doctor once a week and 29% once monthly.

35% of adults with disabilities need a patronage service from a medical professional, more precisely, about 18% have received it once or several times, 4% need it but do not know about this service and 14% were refused to receive such a service. The table below shows the needs of children with disabilities from the patronage service and it can be concluded that there is a high percentage of parents who do not know about this service.

Table 13	Nº of respondents	(%)
I need such a service, but I did not know it existed	4	14,3
I do not need such a service	16	57,1
I did not receive, I tried to receive but failed	5	17,9
Refuses to answer / does not know	3	10,7
Total	28	100,0

34% of adults with disabilities and 43% of children with disabilities did not receive the necessary health services. Adults with disabilities, who answered that they did not receive the necessary health services, mostly lack the patronage service and transportation to the health institution.

Table 14	Nº of respondents	(%)
Patronage service	14	51,9
Delivery of necessary medicines	3	11,1
Transportation for persons with disabilities to a health institution	7	25,9
Other	3	11,1
Total	27	100,0

Children with disabilities have problem with the lack of patronage service and transportation to a health facility.

Table 15	Nº of respondents	7(%)
Patronage service	8	66,7
Patronage service and Transportation for persons with disabilities to a health institution	1	8,3
Transportation for persons with disabilities to a health institution	2	16,7
Other	1	8,3
Total	12	100,0

Adults with disability were offered several answers to the question **Which of the following devices and aids do you think will make your life easier and should be provided to you?** and most adults with disabilities answered that they needed a smart blood pressure tool and a movable pad that could be used from one level to another for a wheelchair.

Conclusions:

- About 16% of adults and children with disabilities are completely immobile or use a wheelchair and represent a large proportion of respondents who are at high risk. 20% of adults with disabilities and 32% of children with disabilities are in poor health;

About ¾ of adults and about half of children with disabilities have mobility problems. A significant part of adults and children with disabilities have a problem to get to the ambulance, and especially this problem has people living in the countryside. The problem is bigger for those people who need health care more often, and about 1/3 of the respondents stated that they need this type of service once a month;

- Some adults and children with disabilities have a problem getting a specialist examination, usually due to the high cost of the examination;
- About 1/3 of adults and children with disabilities need patronage medical service;
- Respondents are most in need of a smart blood pressure tool and a movable wheelchair ramp.

Recommendations:

- The local stakeholders to undertake activities to support adults and children with disabilities who are immobile or in a wheelchair and those who are in poor health. It is recommended that the activities of the Care Center and the activities for socially useful work be extended to adults and children with disabilities;
- The local stakeholders to provide measures for transport support of the disabled adults with disabilities to the health institutions in the municipality;
- The municipality to increase the coverage of persons who will be able to receive one-time support in medical treatment;
- The municipality, NGOs, the Found of Health Insurance and the Center for Social Affairs to popularize the services, which are available to people with disabilities, and which can be financial support in the treatment.

Home services

About 1/3 of the adults with disabilities do not have help at home, and most of them are helped by their children or parents, depending on the age of the person. There is a very small number of adults with disabilities who receive help at home from people outside the family (table 16).

Table 16	№ of respondents	(%)
Nobody helps me	27	33,8
The parent / parents	16	20,0
Parents and relatives/friends	1	1,3
The child / children	16	20,0
Relatives / friends	18	22,5
Engaged person	1	1,3
Person through a project of the municipality	1	1,3
Total	80	100,0

Caring for a child with disability contributes to a large number of parents not establishing or terminating their employment or reducing the possibility of additional activity. Such is the case in the municipality of Kocani, where about 32% have not been employed at all or have stopped working due to child care, and taking into account that Kocani is also an agricultural municipality, the engagement around the child prevents them from having agricultural activities (table 17). During the focus group discussion, the need for full-time teaching for children with disabilities or the existence of a day care center for after-school activities was emphasized.

Table 17	Nº of respondents	(%)
me / my husband / my wife to remain unemployed	7	25,0
me / my husband / wife to quit job	2	7,1
I work / work husband / wife part-time	3	10,7
can not do additional activities (field work, etc.)	2	7,1
Do not affect	13	46,4
Refuses to answer / does not know	1	3,6
Total	28	100,0

On average, about 40% of adults with disabilities and parents / guardians of children with disabilities, need help daily, once a week or once a month, in the realization of certain activities. Every day, most of them need help in shopping in supermarket and moving out of the home, once a week most of all for shopping in supermarket and washing clothes and once a month, most in need of help when going to the doctor and to the bank. If the results are analyzed, they are most in need of buying groceries and cleaning at home (Table 18).

Table 18 Do you need help with the following daily activities and how many times?		I need help every day /%	I need help at least once a week /%	I need help at least once a month /%	I do not need help /%	Refuses to answer / does not know /%
1.	Shopping in supermarket	23,1	22,2	2,8	46,3	5,6
2.	Home cleaning	19,4	17,6	9,3	48,1	5,6
3.	Buying drugs	13,9	13,0	14,8	52,8	5,6
4.	Going to the bank	8,3	4,6	24,1	56,5	6,5
5.	Laundry washing	11,1	25,9	0,9	54,6	7,4
6.	Одење на лекар	6,5	12,0	22,2	52,8	6,5
7.	Moving out of the house (walk)	22,2	16,7	2,8	53,7	4,6
8.	Meetings with friends / relatives	19,4	11,1	9,3	53,7	6,5

Adults with disabilities were asked **If your health is seriously deteriorating or you are in poor health and can not leave your home to do daily activities such as shopping or getting basic medicines and paying your monthly bills, do you have anyone to turn to for help and support?** From the table 19, it can be concluded that

most of the respondents will turn to the family members they live with and the children who do not live with them. There is a very small percentage of people with disabilities who would seek support from relatives, friends and stakeholders in the local community. These answers correspond to the respondents' perception that many of them feel forgotten by the community.

Tanle 19	Nº of respondents	(%)
The members of my family who live with me	53	49,1
The members of my family who live with me and to my parent / parents	1	,9
To my parent / parents	12	11,1
To my children, even though they do not live with me	4	3,7
To relatives	1	,9
To neighbors and friends	3	2,8
To the person from the Center for Social Work	2	1,9
To the person of the NGO	1	,9
I have no one	2	1,9
No answer.	29	26,9
Total	108	100,0

43% of adults with disabilities need to talk with professional about their problems (figure 62).

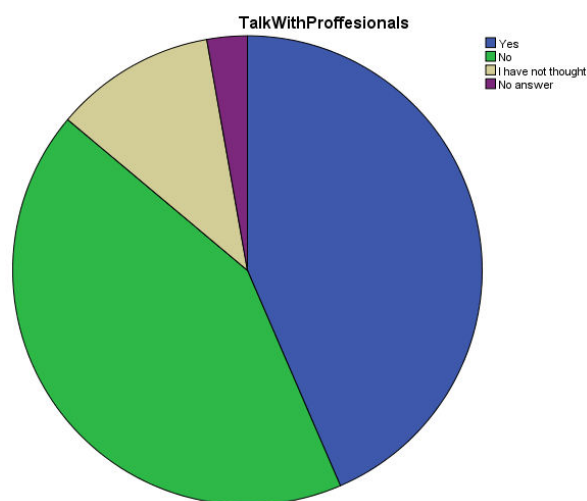


Figure 62

About 14% of adults with disabilities need an alarm system to be able to call a health care provider if they do not feel well. About 8% of the respondents answered that they,

ie their children, used a personal assistant and about 6 % answered that they needed it, but were not informed. 90% of those who have used this service are satisfied with it. The municipality implements a project of socially useful work and through it hires personal assistants, but their number is small and the supplement for the activities is small and acts as a disincentive for hiring a larger number of personal assistants.

Conclusions:

- About 1/3 of the adults have help from the closest family members and about 1/3 of the parents are unemployed so that they can take care of the child with a disability;
- Approximately 40% of adults with disabilities and parents / guardians of children with disabilities need assistance in carrying out personal and domestic activities. Most of them need help in maintaining home hygiene and shopping for groceries;
- Many adults with disabilities and parents / guardians need to talk to a social worker, as a representative of the municipality, to be able to express their concerns;
- There is a great need for a personal assistant and some of the respondents are not familiar with this service.

Recommendations:

- The local stakeholders to provide measures for support in the domestic and personal activities of adults with disabilities and in the care of children with disabilities;
- The local stakeholders to create measures to increase the coverage of children with disabilities in kindergartens;
- The local stakeholders to provide measures for care of children with disabilities, who are of school age;
- The Ministry of Labor and Social Policy to increase the capacity of kindergartens by hiring a special educator.
- Establishment of cooperation between the municipality and the MLSP in order to increase the capacities of the Day Care Center for Persons with Disabilities (spatial and human resources);
- Establishment of cooperation between the municipality and the MLSP in order to increase the capacity of kindergartens (spatial and human resources) in order to increase the inclusion of children with disabilities;

Local community services

In the municipality of Kocani there is a Daily Center for people with disabilities and about 5% of respondents use it and about 25% would use it, but do not know that there is this type of service. 3.5% of parents / guardians of children with disabilities answered that their child uses the Day Care Center and 32% answered that if they knew that such a Center exists, they would use it. The results show that people with intellectual disabilities and people with physical disabilities used the Day Center the most and would use it the most if they were informed that it exists (figure 63).

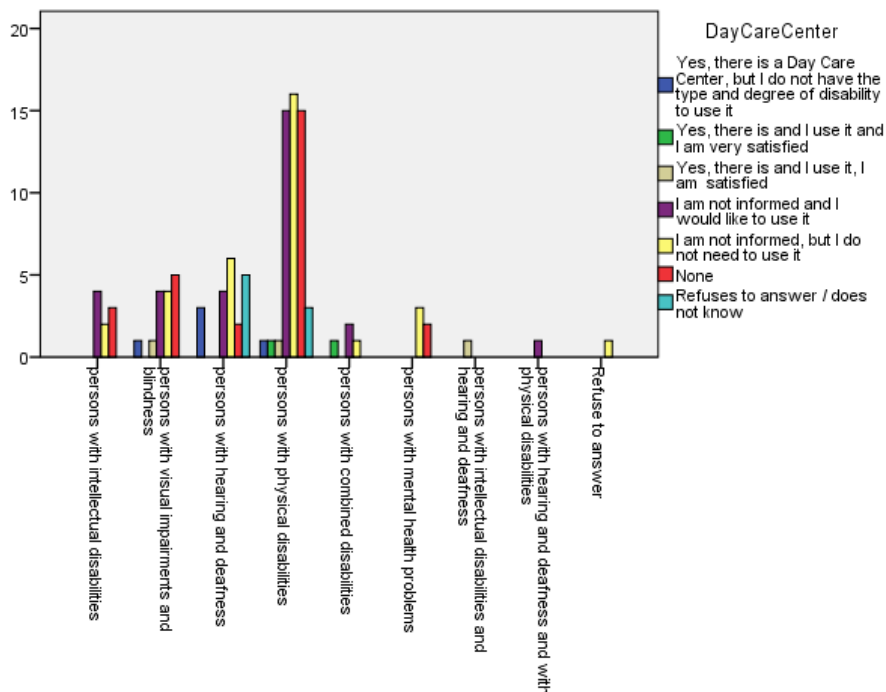


Figure 63

About 24% of adults with disabilities expressed satisfaction with using a social club, and 30% answered that they do not know that such a club exists, but would like to use it.

The results showed that the place of residence affects the information about the existence of a social club .(figure 64)

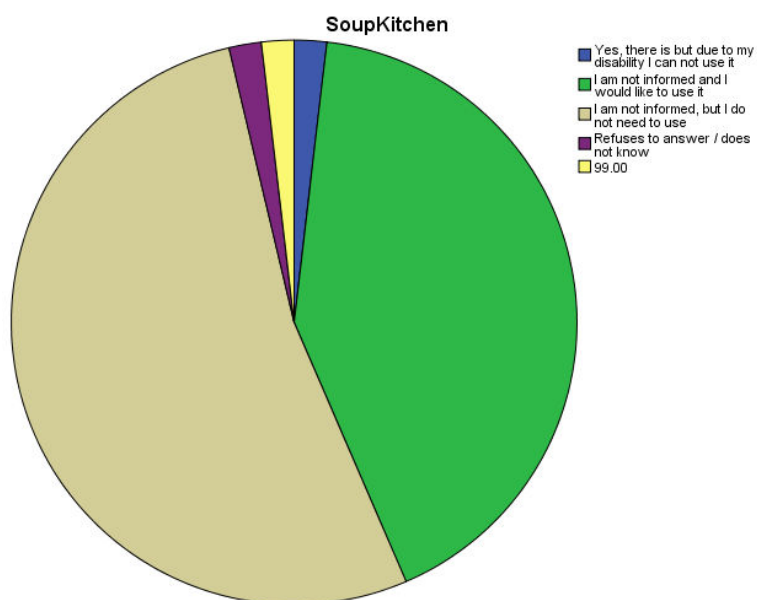


Figure 65

Most of the respondents want to use the services of the soup kitchen by bringing food several times a month at home (table 20).

Table 20	No of respondents	1(%)
I can not move enough / I have responsibilities at home, I would like to get food at home several times a month.	24	51.1
I would like to go to the soup kitchen	15	31.9
I have not thought.	8	17.0
Total	47	100.0

1/3 of the adults with disabilities need organized transportation to the most visited places (figure 66).

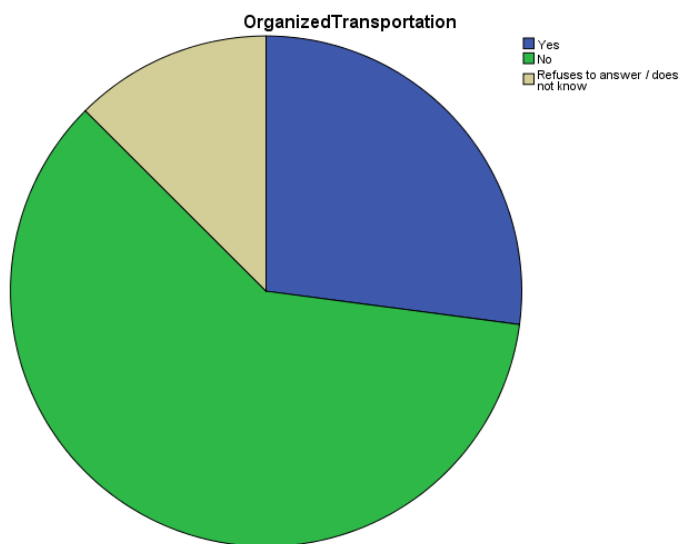


Figure 66

45% of children with disabilities need organized transportation to the most visited places figure 67).

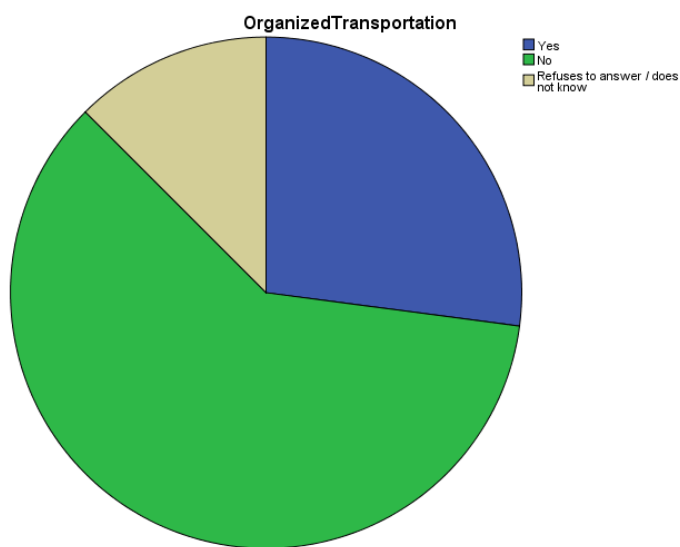


Figure 67

The Municipality of Kocani and the state are taking measures to reduce the social risk of certain vulnerable groups. The data below show the answers of adults with disabilities and parents / guardians of children with disabilities, which refer to certain types of services that may be offered by the municipality and the central government. A small part of the adults with disabilities need accommodation in an institution or group home, and the needs for this type of services are several times higher among parents / guardians, but the municipality of Kocani does not have such forms of accommodation. Daily stay as a form of occasional day care is required for both categories of respondents, but for parents / guardians it is three times longer and understandable, because they need someone to take care of their child while at work or have other responsibilities. Both categories of respondents need a greater connection with the municipality and about half emphasize the need for a visit from a social worker to be able to inform the municipality about their problems. The need for additional training and retraining is more pronounced among adults with disabilities, which indicates the fact that they have insufficient or inadequate education to be more competitive. They also have a more pronounced need for assistance in washing clothes once a week. Adults with disabilities and parents / guardians of children with disabilities also have the greatest need for food packages and financial assistance for the purchase of medicines. This is another indicator of the existence of a high level of poverty among people with disabilities.

Do you need the following services – results presented in %

(answers of adults with disabilities)

1. Accommodation in an institution that provides care for persons with disabilities 5
2. Group home (to share an apartment or house with several people with the same or similar disability to yours) 2.5
3. Day stay, where they will take care of you / him while your / his loved ones are at work 17.5
4. A visit from a social worker so that you can inform the municipality about your problems 48
5. Retraining or retraining program so you can get a job or find a better job 25
6. Take laundry once a week 27
7. Assistance with food packages 46
8. Financial assistance for medicines 61.2

Is there a need for the following type of services- the results presented in %

(answers from parents / guardians)

1. Accommodation in an institution that provides care for persons with disabilities 14.3
2. Group home (to share an apartment or house with several people with the same or similar disability as his) 17.9

3. Day care, where they will take care of you / him while your / his loved ones are at work 51

4. A visit from a social worker so that you can inform the municipality about your problems 34

5. Retraining or retraining program so you can get a job or find a better job 12

6. Take laundry once a week 17

7. Assistance with food packages 43

8. Financial assistance for medicines 52

The table 21 presents the answers of adults with disabilities and parents / children with disabilities regarding the degree of accessibility of certain public buildings in the municipality. Given that this is a question that was asked to everyone, and some people with disabilities (such as people with hearing impairment and intellectual disability) do not have a problem with physical accessibility, the problem with accessibility is even greater in reality.

Table 21 How accessible are the following facilities and locations for you / your child?		Full /%	Partly %	No/ %	I do not know/ %
1.	The municipal building	4	6	47	237
2.	Facility / s of the general hospital	5,5	4,5	72	18
3.	Bus station	23	27	20	30
4.	Post office	3	13	70	14
5.	Banks	17	26	20	37
6.	Facilities of ministries / administrative bodies	3	12	67	18
7.	Park	25	34	21	19
8.	Parking places	3	11	60	26
9.	Religious building (church / mosque)	7	17	50	26
10.	Library	15	17	30	38
11.	market	3	19	48	30
12.	Schools/kindergardens	7	6	63	24
13.	Center for Social Work	2	12	62	24

About 24% of the parents / guardians answered that their child had visited the sensory room and that they were satisfied and 3% that their child had visited it, but that they were not satisfied. 36% of parents / guardians answered that their children are in kindergarten, 17% 'in regular school, 21% in special class, and 3% in special school. About 1/3 of the children are not included in kindergartens or schools.

20% of the parents / guardians of children with disabilities answered that their child has an educational assistant and are satisfied or partially satisfied and even 54% are not informed about this type of educational service.

Appropriate adjustment is extremely necessary in order to ensure equality of children with disabilities in education and to ensure effective and comprehensive inclusion. Most of the parents / guardians answered that their children have the greatest need for individualization of the subject programs and adjustment to the needs of the child.

Conclusions:

- About 1/3 of the respondents are not familiar with the existence of a Day Care Center for people with disabilities and a social club;
- About half of the respondents need to use a social club;
- Many of the respondents are not familiar with the existence of the soup kitchen and about 40% need to use this service;
- Many adults and children with disabilities need organized transportation to the most visited places;
- Many respondents need food packages and funds to buy medicines;
- Some parents / guardians need group homes for their children;
- Many public buildings and areas are completely or partially inaccessible to people with physical disabilities and visual impairments;
- More than half of the parents / guardians are not informed about the educational assistants and their number is not enough to meet the needs;
- The biggest problem in education is the lack of individualized subject programs for children with disabilities and inaccessible educational infrastructure.

Recommendations:

- The local stakeholders to take measures to popularize the work of the soup kitchen among the persons with disabilities and to increase the number of beneficiaries so that the poorest persons with disabilities can be beneficiaries;
- The municipality and the organizations of persons with disabilities to take measures for opening social clubs;
- The local stakeholders to take measures to organize transportation of persons with the most severe form of physical disability, so that they can reach the most visited places;

- The local stakeholders to undertake activities for opening a group home for cohabitation of persons with similar disabilities;
- The municipality, the Center for Social Affairs and the organizations of persons with disabilities to prepare complete records of persons with disabilities at social risk and to assist them with the distribution of food packages;
- The municipality to continue with the measures for providing funds for the purchase of medicines and to increase the coverage of persons with disabilities in social risk;
- The municipality to take measures for intensified control of the accessibility of buildings and public areas and to improve the accessibility of the institutions and infrastructure, which are in its competence;
- The Ministry of Education and Science to increase the number of educational assistants in the municipality of Kocani;
- Schools to take measures to adapt the curricula to the needs of children with disabilities and to make schools accessible.
- Make legal changes to introduce educational assistants in special classes;
- Install sound traffic lights and mark the ends of the quay, pedestrian crossings and curves with fluorescent paint so that visually impaired people have greater accessibility.
- Establishment of partnerships between the municipality / NGO / institutions / private sector in order to provide increased financial assistance to children / persons with disabilities to provide IT equipment, internet, aids, assistive technology, adaptation of facilities, medicine, food, heating;
- Establishment of partnerships between the municipality / NGO / institutions / private sector in order to establish sensory rooms in schools and especially to provide training for sensory educators;

Discrimination - risk factor

About 2/3 of the respondents answered that the state and the law do not protect them from discrimination based on disability. There are several mechanisms for protection against discrimination in the country: the Commission for Prevention and Protection against Discrimination, the Ombudsman and the Judicial protection and there is a Law on Prevention and Protection against Discrimination, but also several other laws and ratified international agreements that provide protection against discrimination. Also, disability is one of the protected grounds for discrimination in the mentioned law and in other national and international legal acts and there is a legal and institutional mechanism for protection. However, the respondents are either not familiar with this protection system or they know that it exists, but they consider it ineffective (figure 68)..

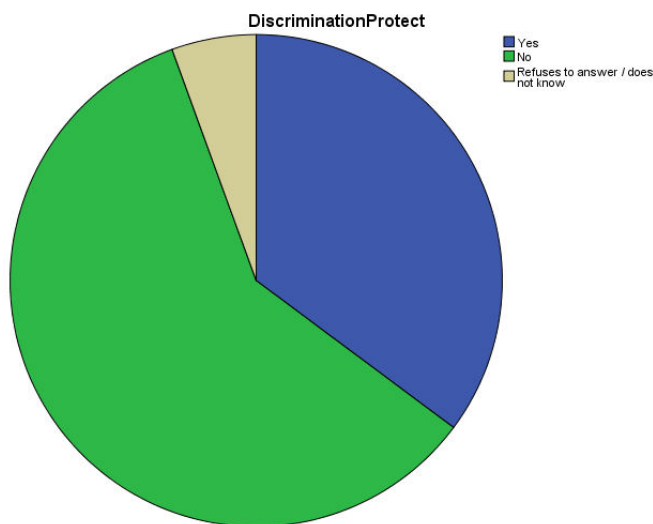


Figure 68

70% of the respondents answered that the rights of people with disabilities are not respected. Adults with disabilities may be discriminated against on the basis of their disability, but there may be situations where a person may be a victim of multiple or intersectional discrimination, ie be discriminated against because he or she is, for example, a Roma and a person with a disability or which is an adult and a person with a disability. Parents / guardians of children with disabilities can be discriminated against in the form of discrimination by association, ie they are victims of discrimination because their child has a certain disability. Adults with disabilities and parents / guardians of children with disabilities about half responded that they had been discriminated against in the last 12 months (figure 69).

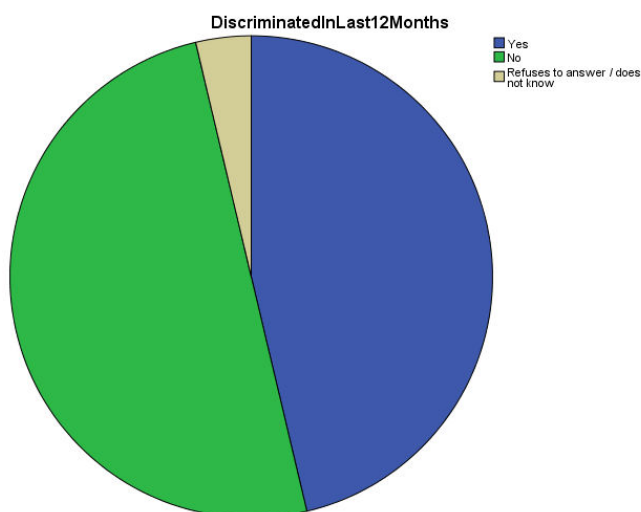


Figure 69

The table 22 lists the areas in which discrimination occurs. The largest percentage of the respondents stated that they are constantly discriminated in the field of labor relations sometimes they are most discriminated in the bank and the shop, in the ambulance, administration and on public transport.

Table 22 Have you ever felt discriminated against in your life for the following everyday situations?		Yes, constantly /%	Sometimes /%	It never happened to me /%	Refuses to answer / does not know /%
1.	At work (or when you worked)	14,8	13,9	49,1	22,2
2.	When applying for a job	12,0	13,9	50,9	23,1
3.	Ambulance	8,3	25,9	56,5	9,3
4.	In shop or bank	2,8	30,6	59,3	7,4
5.	In the Center of Culture Beli Mugri	5,6	16,7	65,7	12,0
6.	School/faculty	7,4	18,5	55,6	18,5
7.	Public transport	7,4	25,9	56,5	10,2
8.	In municipal or public administration	11,1	24,1	54,6	10,2

It is worrying that half of the respondents did not want to report discrimination, although there are protection mechanisms (figure 70).

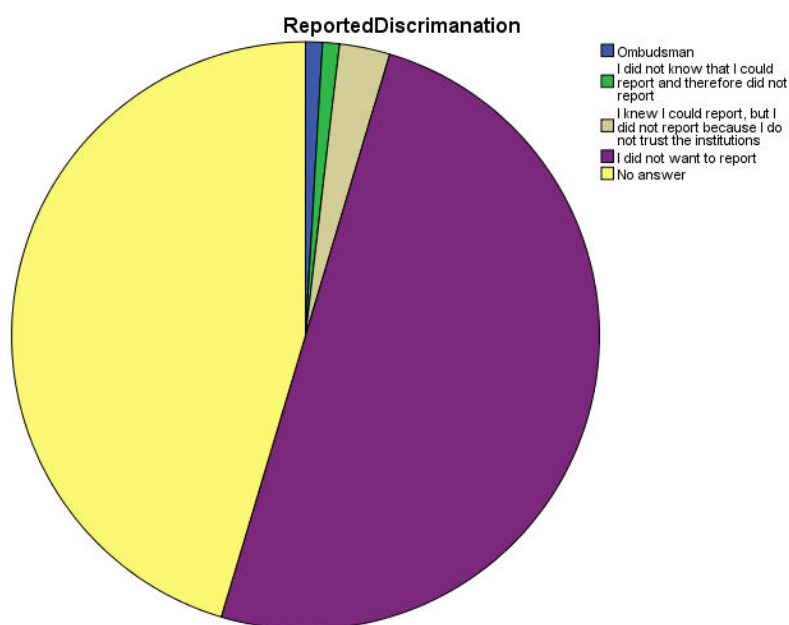


Figure 70

Conclusions:

- A high percentage of respondents believe that there is no effective protection against discrimination;
- A high percentage of respondents were discriminated against, considering that the rights of persons with disabilities are not respected;
- More than half did not report discrimination because they did not believe in protection against discrimination.
- *The most excluded are adults with disabilities and parents / guardians of children with disabilities in receiving health, transport and administrative services.*

Recommendations:

- The Commission for Prevention and Protection against Discrimination, in cooperation with the municipality, to take measures to promote the system for protection against discrimination;
- Organizations of persons with disabilities to strengthen their role in recognizing and reporting discrimination based on disability.

Governance- risk factor

From the table 23, it can be concluded that adults with disabilities and parents / guardians of children with disabilities are relatively well versed in daily politics.

Table 23	No of respondents	(%)
Daily	21	19,4
Often (several times a week)	14	13,0
Rarely (several times a month)	44	40,7
Never	28	25,9
Refuses to answer / does not know	1	,9
Total	108	100,0

The question was asked **Have policies been adopted at the local level in the last 3 years that are of interest to you / your child as a person with a disability?** to which 84.3% answered negatively. This answer can be interpreted as a result of the lack of information of the citizens and as dissatisfaction with the policies for improving the situation of people with disabilities (figure 71).

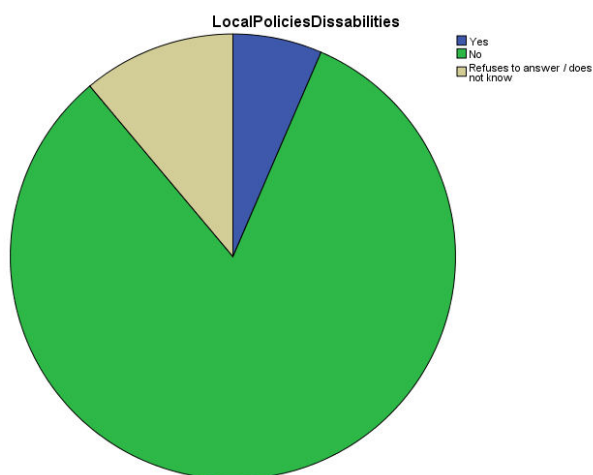


Figure 71

Respondents have a relatively high level of trust in the organizations of persons with disabilities and about 45% believe that they protect the rights of persons with disabilities. However, 31.5% believe that these organizations do not protect the rights of people with disabilities at all. If it is known that these are organizations that have only one target group and most of them are unions, which have a stable funding model, this percentage is an indicator of insufficiently active civil sector in the municipality of Kocani, which will protect disability rights.

Adults with disabilities were asked which rights were violated, offering a list of answers with several types of rights, which belong to the basic, civil, political, economic, social and cultural rights, and most of them answered that their right to employment was violated, employment rights and the right to equal treatment. The majority of parents / guardians answered that the child has the right to express their wishes and interests.

Adults with disabilities were asked which social protection rights they exercised and had the opportunity to choose more than one answer if they exercised more than one right. The table 24 provides the answers, but it can be concluded that the most commonly used rights are permanent financial assistance and financial assistance for care from another person.

Table 24	No of respondents	(%)
social financial assistance	4	5,0
social financial assistance and assistance for the blind and mobility	2	2,5
social financial assistance and permanent financial assistance	1	1,3
social financial assistance and compensation for assistance and care from another person	1	1,3
permanent financial assistance	12	15,0
compensation for assistance and care from another person	18	22,5
compensation for assistance and care from another person and assistance for the blind and mobility	6	7,5
Compensation for part-time salary due to care of a child with physical or mental disabilities	1	1,3
deafness compensation	10	12,5
assistance for the blind and mobility (disability add)	3	3,8
assistance for the blind and mobility (1	1,3
Other	1	1,3
Refuse to answer	20	25,0
Total	80	100,0

Conclusions:

- A high percentage of respondents believe that in the last three years no policies have been created at the local level, in the interest of adults and children with disabilities;
- 1/3 of the respondents think that the organizations / associations of persons with disabilities do not protect the rights of persons with disabilities;
- Adults with disabilities are mostly denied employment rights and the right to equal treatment;
- Most adults with disabilities from the large number of social protection rights use the right to permanent financial assistance and cash allowance for care from another person.

- *The most excluded are the employees with disabilities and those persons with disabilities who are looking for work because the rights in the field of labor relations have been violated the most.*

Recommendations:

- The local stakeholders to prioritize the needs of adults and children with disabilities and to take more measures to improve their situation as well as greater information about the activities it undertakes;
- Organizations / unions of persons with disabilities to strengthen their capacities in the protection of the rights of persons with disabilities;
- The municipality, the Center for Social Affairs and the organizations of persons with disabilities to take measures for adequate comprehensive information of adults with disabilities and parents / guardians of children with disabilities about the rights arising from the national and local social protection system;
- The State Labor Inspectorate to undertake several activities in determining the violation of the employment rights of persons with disabilities.

Covid pandemic shock - 19 - risk factor

In the period of preparation of the concept for this research and the preparation of the questionnaire, but also in the period of implementation of the field research, the consequences of the pandemic were great on the health, social life and economic situation of the people. This is significant among people with disabilities, as such a risk factor further complicates their lives and makes them even more vulnerable and excluded. Many of them have poor health, low incomes and have reduced contact with loved ones, and the pandemic has significantly increased these problems. This is evident from the answers given by the respondents below, which included adults with disabilities and parents / guardians.

Did the appearance of the new virus affect your daily activities and how? Please answer if you agree with the following statements:

/% of respondents who answered "I agree" /

1. I do not look out of the house like before 68.5
2. As a risk category, I isolated myself in my home. 46.3
3. The pandemic did not have a strong effect on me and my mental health. 53.7
4. I lost contact with all my close relatives and friends. 46
5. I miss my loved ones. 48
6. I need disinfection help to protect myself. 34
7. I spend a lot more (for gel, gloves and masks). 63
8. The virus has worn me out financially. 57
9. The pension / salary is not enough during a pandemic. 68.5

10. I need help from the municipality to procure means of protection (masks, gel, visor, etc.).

Only 7.4% of respondents received financial assistance to deal with the corona virus. This is an extremely poor indicator of the model for dealing with the consequences of certain shocks in a vulnerable group (figure 72).

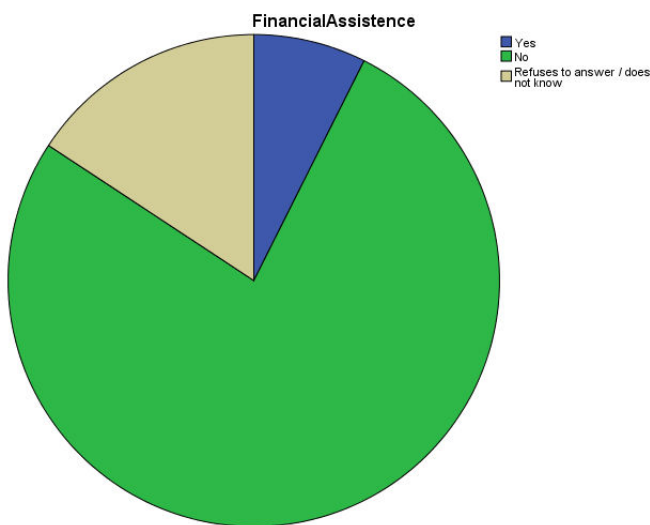


Figure 72

The eight respondents, who received financial assistance, all received it only from the state. This is another indication that the municipality, civil society, the business sector and religious communities do not have a well-developed emergency assistance system.

Isolation during the pandemic created a need for greater use of new information technologies and new social media. Given that some of the people with disabilities are adults and people who for financial reasons or because of the disability were not able to have a smartphone and be able to use modern applications, they were asked about the need for training in the use of these new technologies. . From the answers it was concluded that there is a relatively large number of respondents who need this type of training. 25% need training to use a smartphone, 18% Facebook, 13% Viber, 11% PC, 9% tablet and 14% internet.

Conclusions:

- For many respondents, the pandemic had a major impact on economic status, socialization and contacts with loved ones;
- A very small percentage received financial support from the state only;
- A certain percentage of respondents need to use smartphones, computers and telephone applications.

- *the most excluded are adults with disabilities who have low incomes or are unemployed and those who live alone*

Recommendations:

- The municipality to take measures to provide a special fund intended for persons at risk in crisis and emergency situations;
- Organizations of persons with disabilities to realize trainings for persons with disabilities for the use of new information technologies.

6. Focus group analysis

Focus group discussion with local stakeholders

Participants: school pedagogue in the primary school "Rade Kratovce" -Kocani, special educator and rehabilitator in the high school "Goso Vikentiev" -Kocani, social worker, employed in the Center for Social Work - Kocani, psychologist in the Center for Social Work and Day Care Center for children with disability, employed in the municipality of Kocani, in charge of social, child and health care, employed in the Employment Center

Education:

The teaching staff itself has no professional training in terms of how to approach students with disability, methods and techniques they need to apply to access them and meet their educational needs. Teacher training is required to be able to work with this category of students. Three years ago they had one such training from BDE, but now they learn on their own through manuals and communications with special educators.

The educational assistant is necessary and he/she is present during the teaching and is not rejected, ie. is accepted by the other students in the class. He/she communicates well with the children and even the other students want to help him/her and their classmate. He/she takes the child from the schoolyard and accompanies the child throughout the school day.

Regarding transport, it should be legally provided by the municipality, and it is not provided yet and the parents or guardians bring their children to school on their own at their own expense. Students are not able to use the classrooms in certain subjects, because they are on the ground floor and it is difficult to adapt the subject programs to the needs of the child.

The special educator himself expresses great dissatisfaction due to the lack of information and unpreparedness regarding the innovations that are introduced in the educational process of students with disabilities. The special educator is satisfied with the assistant, their cooperation, as well as the fact that he was accepted by the child and it all worked. He also points out that the children are very emotionally attached to the personal assistant and there have been situations when the assistant resigns and a new assistant comes and the student finds it difficult to accept.

There are no appropriate teaching aids and customized program, no transportation, specialized vehicles, social activities and no special educators.

Employment

All capable people are employed, there are rarely some who are unemployed and this is due to their refusal to work.

From the aspect of employment, as disadvantages appear: irregularity of work, inconsistency, no retraining and additional training, employers train the employees themselves, and there are no special persons for that, and there is training and it is for a maximum of 5 people. No data on employees disabled people in the public sector.

According to the records of the Employment Center, there are a total of 38 unemployed people with disabilities, as follows:

- 3 war invalids
- With visual impairments 5 people
- 2 people with hearing impairments
- 1 person with speech impediments
- 9 people with physical disabilities
- 12 people with disabilities in psycho-physical development
- With combined disability 1 person

Other categories 2 people

- Uncategorized 3 people

Social protection

There are 26 people taking disability allowance, but there is a need for more coverage

Regarding the parents, they may not speak clearly about the degree of disability of their child and this may be the reason for not receiving social protection.

In terms of social work, people with disabilities point to the following types of problems, namely: low financial assistance, poor cooperation with other institutions, waiting a long time for appointments for a disability assessment commission. Up to 26 years old are entitled to a special allowance, but not later, and there are situations where the money of these people is used by their parents or guardians.

Regarding the people over 65, they do not have the opportunity to use the adds, because it does not follow them, they belong to the group of the most endangered, because there are people with cerebral palsy and quite a large number.

In relation to the people who live in the villages, they have less access to some things which makes their way of life even more difficult, but on the other hand they have some mitigating circumstances because there is less congestion, proximity to the places to be visited and so on. Older people are at greater social risk given their age and need more institutional protection.

Personal assistance is a new service that is not well known to everyone, but most are familiar and have applied.

There is a need for social clubs, because they leave them in the day center even after 26 years, because there is no place to hang out and have fun.

At the local level, there is a lot of improvement in the work between the institutions, and in terms of the requirements indicated by the persons themselves, the priority of early intervention and detection at an early age, in kindergarten.

There is a speech therapist in the kindergartens and he serves 4 clones, he should pay more attention to each child individually, but due to the large number of children assigned to him, this is not possible.

People are not sufficiently informed specifically about the activities to be performed by the personal assistant, as well as what his task and obligation is, and problems occur with children from the Roma community because most of them do not know the Macedonian language and are educationally neglected and this may give the impression that they are children with disabilities.



Focus group discussion with adults with disabilities and parents of children with disabilities

Blind and visually impaired:

In terms of problems they face are:

- There is no access to the ramps, more stairs, not enough lighting, and somewhere not at all,
- No access to institutions and sound traffic lights
- In terms of accessibility, there should be captions with larger letters and higher contrast

Physical disability:

Accessibility in relation to the institutions that are one of the most visited and most necessary in terms of the life of persons with physical disabilities. The banks, "Kiril i Metodij" primary school, where there is a ramp for the disabled. Then, the streets and sidewalks are not fully accessible, which is due primarily to other road users, but with the recent reconstructions they believe that the situation with parking and sidewalks is improving. In terms of public transport - it is not fully accessible and people who are difficult to move and are in a wheelchair need organized transport.

Problems of children with disabilities:

Regarding these people, most of them have a personal assistant, but there is a lack of a special educator. They express slight dissatisfaction with the educational assistants. Most of the children are taken care of by their parents, especially the mothers, which is the reason why they are not employed. Many of the parents of these people need a center where they will leave their children after school in order for them to socialize, but they also need transportation that should be provided by the municipality.

The social club is a place that can provide them with socialization, socializing, going out, meeting and visiting.

Social support:

In terms of this type of support, the most excluded are people over 65, primarily because most of them are physically disabled, and also have additional diseases, as well as the fact that they can not move much and thus increases the number of diseases in them. Regarding the support that these persons receive from the state, there is discrimination on the basis of age, because persons up to 65 years of age have financial assistance from the state in the form of a disability allowance.

People with physical disabilities need to react in a timely manner and renew the necessary aids that are covered by the fund (eg the wheelchair changes every 3 years, but in reality this is not the case).

Employment:

In relation to this issue, all persons who are able to work in any way are employed, they receive the minimum wage regardless of where they are employed, and as an exception are those disabled persons who have completed higher education, some of

them work in the public and another part in the private sector do not receive a minimum wage.



7. Conclusions and Recommendations

Socio- economic status- risk factor

Conclusions:

- Many adults with disabilities have no primary education or only primary education and this is a major reason for their inability to compete in the labor market in order to be employed or get a better paid job;
- About 20% stated that they are unemployed and of these, only 20% are looking for work, which is an indicator that they are either not able to work or are not interested in starting an employment relationship;

- About 1/3 last month earned less than 12,000 denars, and 70% can not meet basic needs during the month, which is a serious indicator of poverty;
- Indicators of extreme poverty are 16% of respondents in the last month had problems with drinking water, 18% at least once a month were hungry, 80% had problems to heat the house, 34% to buy meat or its substitute and 28% to buy drugs.
- *The most excluded groups can be considered persons who are not employed and those who have a monthly income below the minimum wage.*

Recommendations:

- The municipality and the Employment Center to take measures for additional training of the unemployed adults with disabilities in order to be able to find a job more easily;
- PCE "Vodovod" to take measures to eliminate the problems with the water supply of the households inhabited by persons with disabilities because the occasional lack of water creates additional risks for these families;
- The municipality to take measures in cooperation with other local stakeholders, to ensure periodic delivery of basic food products to people with disabilities living in extreme poverty;
- The Center for Social Affairs to make detailed records of persons with disabilities who are at social risk so that they can be assisted with the services covered by the Law on Social Protection;
- The local stakeholders to continue the good practice for subsidizing drugs and to popularize this measure among people with disabilities;
- The municipality, together with the Center for Social Affairs and local organizations of persons with disabilities to create a complete database of persons with disabilities, with information on their social status so that it can use it in planning measures and preparing potential grant projects. to support this vulnerable category of citizens.

Geography- risk factor

Conclusions:

- More than 1/3 of adults and children with disabilities live in inaccessible homes, which include inaccessibility to the entrance, inaccessible entrance and inaccessible rooms inside the home;
- Adults and children with disabilities do not have significant problems with spatial living conditions and connection to the water, electricity and sewerage network;
- Relatively high percentage of women with disabilities do not own a home.
- *The most excluded groups can be considered adults and children with severe physical disabilities that cause movement problems and those who have blindness.*

Recommendations:

- The municipality to undertake activities for ensuring accessibility to the entrances of the homes of persons with disabilities and to

provide subsidies for adjusting the homes of adults and children with disabilities;

- The municipality, together with the organizations of persons with disabilities and the organizations for protection of women's rights to undertake awareness raising activities to increase the percentage of women with disabilities who own a home.

Health services

Conclusions:

- About 16% of adults and children with disabilities are completely immobile or use a wheelchair and represent a large proportion of respondents who are at high risk. 20% of adults with disabilities and 32% of children with disabilities are in poor health;

About ¾ of adults and about half of children with disabilities have mobility problems. A significant part of adults and children with disabilities have a problem to get to the ambulance, and especially this problem has people living in the countryside. The problem is bigger for those people who need health care more often, and about 1/3 of the respondents stated that they need this type of service once a month;

- Some adults and children with disabilities have a problem getting a specialist examination, usually due to the high cost of the examination;

- About 1/3 of adults and children with disabilities need patronage medical service;

- Respondents are most in need of a smart blood pressure tool and a movable wheelchair ramp.

Recommendations:

- The local stakeholders to undertake activities to support adults and children with disabilities who are immobile or in a wheelchair and those who are in poor health. It is recommended that the activities of the Care Center and the activities for socially useful work be extended to adults and children with disabilities;

- The local stakeholders to provide measures for transport support of the disabled adults with disabilities to the health institutions in the municipality;

- The municipality to increase the coverage of persons who will be able to receive one-time support in medical treatment;

- The municipality, NGOs, the Fund of Health Insurance and the Center for Social Affairs to popularize the services, which are available to people with disabilities, and which can be financial support in the treatment.

Hume services

Conclusions:

- About 1/3 of the adults have help from the closest family members and about 1/3 of the parents are unemployed so that they can take care of the child with a disability;

- Approximately 40% of adults with disabilities and parents / guardians of children with disabilities need assistance in carrying out personal and domestic activities. Most of them need help in maintaining home hygiene and shopping for groceries;
- Many adults with disabilities and parents / guardians need to talk to a social worker, as a representative of the municipality, to be able to express their concerns;
- There is a great need for a personal assistant and some of the respondents are not familiar with this service.

Recommendations:

- The local stakeholders to provide measures for support in the domestic and personal activities of adults with disabilities and in the care of children with disabilities;
- The local stakeholders to create measures to increase the coverage of children with disabilities in kindergartens;
- The local stakeholders to provide measures for care of children with disabilities, who are of school age;
- The Ministry of Labor and Social Policy to increase the capacity of kindergartens by hiring a special educator.
- Establishment of cooperation between the municipality and the MLSP in order to increase the capacities of the Day Care Center for Persons with Disabilities (spatial and human resources);
- Establishment of cooperation between the municipality and the MLSP in order to increase the capacity of kindergartens (spatial and human resources) in order to increase the inclusion of children with disabilities;

Services in the local community

Conclusions:

- About 1/3 of the respondents are not familiar with the existence of a Day Care Center for people with disabilities and a social club;
- About half of the respondents need to use a social club;
- Many of the respondents are not familiar with the existence of the soup kitchen and about 40% need to use this service;
- Many adults and children with disabilities need organized transportation to the most visited places;
- Many respondents need food packages and funds to buy medicines;
- Some parents / guardians need group homes for their children;
- Many public buildings and areas are completely or partially inaccessible to people with physical disabilities and visual impairments;

- More than half of the parents / guardians are not informed about the educational assistants and their number is not enough to meet the needs;
- The biggest problem in education is the lack of individualized subject programs for children with disabilities and inaccessible educational infrastructure.

Recommendations:

- The local stakeholders to take measures to popularize the work of the soup kitchen among the persons with disabilities and to increase the number of beneficiaries so that the poorest persons with disabilities can be beneficiaries;
- The municipality and the organizations of persons with disabilities to take measures for opening social clubs;
- The local stakeholders to take measures to organize transportation of persons with the most severe form of physical disability, so that they can reach the most visited places;
- The local stakeholders to undertake activities for opening a group home for cohabitation of persons with similar disabilities;
- The municipality, the Center for Social Affairs and the organizations of persons with disabilities to prepare complete records of persons with disabilities at social risk and to assist them with the distribution of food packages;
- The municipality to continue with the measures for providing funds for the purchase of medicines and to increase the coverage of persons with disabilities in social risk;
- The municipality to take measures for intensified control of the accessibility of buildings and public areas and to improve the accessibility of the institutions and infrastructure, which are in its competence;
- The Ministry of Education and Science to increase the number of educational assistants in the municipality of Kocani;
- Schools to take measures to adapt the curricula to the needs of children with disabilities and to make schools accessible.
- Make legal changes to introduce educational assistants in special classes;
- Install sound traffic lights and mark the ends of the quay, pedestrian crossings and curves with fluorescent paint so that visually impaired people have greater accessibility.

Discrimination- risk factor

Conclusions:

- A high percentage of respondents believe that there is no effective protection against discrimination;

- A high percentage of respondents were discriminated against, considering that the rights of persons with disabilities are not respected;
- More than half did not report discrimination because they did not believe in protection against discrimination.
- *The most excluded are adults with disabilities and parents / guardians of children with disabilities in receiving health, transport and administrative services.*

Recommendations:

- The Commission for Prevention and Protection against Discrimination, in cooperation with the municipality, to take measures to promote the system for protection against discrimination;
- Organizations of persons with disabilities to strengthen their role in recognizing and reporting discrimination based on disability.

Governance- risk factor

Conclusions:

- A high percentage of respondents believe that in the last three years no policies have been created at the local level, in the interest of adults and children with disabilities;
- 1/3 of the respondents think that the organizations / associations of persons with disabilities do not protect the rights of persons with disabilities;
- Adults with disabilities are mostly denied employment rights and the right to equal treatment;
- Most adults with disabilities from the large number of social protection rights use the right to permanent financial assistance and cash allowance for care from another person.
- *The most excluded are the employees with disabilities and those persons with disabilities who are looking for work because the rights in the field of labor relations have been violated the most.*

Recommendations:

- The local stakeholders to prioritize the needs of adults and children with disabilities and to take more measures to improve their situation as well as greater information about the activities it undertakes;
- Organizations / unions of persons with disabilities to strengthen their capacities in the protection of the rights of persons with disabilities;
- The municipality, the Center for Social Affairs and the organizations of persons with disabilities to take measures for adequate comprehensive information of adults with disabilities and parents / guardians of children with disabilities about the rights arising from the national and local social protection system;

- The State Labor Inspectorate to undertake several activities in determining the violation of the employment rights of persons with disabilities.

Covid 19- risk factor

Conclusions:

- For many respondents, the pandemic had a major impact on economic status, socialization and contacts with loved ones;
- A very small percentage received financial support from the state only;
- A certain percentage of respondents need to use smartphones, computers and telephone applications.
- *The most excluded are adults with disabilities who have low incomes or are unemployed and those who live alone*

Recommendations:

- The municipality to take measures to provide a special fund intended for persons at risk in crisis and emergency situations;
- Organizations of persons with disabilities to realize trainings for persons with disabilities for the use of new information technologies.

Recommendations in line with SDGs

Problem identification	SDG ¹	Effect (Medium; Low; High)	Target	Indicator	Key institutions
	SDG 1: <i>No poverty: End poverty in all its forms everywhere</i>				
About 1/3 last month earned less than 12,000 denars, and 70% can not meet basic needs during the month, which is a serious indicator of poverty; Indicators of extreme poverty are 16% of respondents in the last month had problems with drinking water, 18% at least once a month were hungry, 80% had problems to heat the house, 34% to buy meat or its substitute and 28% to buy drugs. About 40% need to use the services of the public kitchen.	Recommendation 1 Take action to record people with disabilities living in extreme poverty and prepare measures in annual programs with special items that will help reduce poverty among adults and children with disabilities. With the annual program to increase the number of users of the soup kitchen, who are people with disabilities and are at social risk.	High	<i>Target 1.4: By 2030, ensure that all men and women, in particular the poor and the vulnerable, have equal rights to economic resources, as well as access to basic services, ownership and control over land and other forms of property, inheritance, natural resources, appropriate new technology and financial services,</i>	1.4.1 Proportion of population living in households with access to basic services	Municipality of Kocani

¹Here please specify which SDG is priority. Include 3 to 5 priority SDGs which point out to the respective policy areas where recommendations are provided and as per LNOB group.

			<i>including microfinance</i>		
Approximately 40% of adults with disabilities and parents / guardians of children with disabilities need assistance in carrying out personal and domestic activities. Most of them need help in maintaining home hygiene and grocery shopping.	<p>Recommendation 2</p> <p>The municipality to take measures to provide support in the home for adults and children with disabilities.</p>	High	<p><i>Target 1.4: By 2030, ensure that all men and women, in particular the poor and the vulnerable, have equal rights to economic resources, as well as access to basic services, ownership and control over land and other forms of property, inheritance, natural resources, appropriate new technology and financial services, including microfinance</i></p>	1.4.1 Proportion of population living in households with access to basic services	Municipality of Kocani
	<p>SDG 4: <i>Quality education: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all</i></p>				

Primary and secondary schools are not accessible enough for children with physical and sensory disabilities.	<p>Recommendation 1</p> <p>The municipality should build access frames to the schools, improve the existing access ramps, build access areas around the school entrances and make adjustments to the toilets and school premises, respecting the rules of universal design for people with disabilities..</p>	Medium	<i>4.a: Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all</i>	4.a.1 Proportion of schools offering basic services, by type of service	Municipality of Kocani
The lack of full-time classes and / or day care center for children with disabilities, who are not beneficiaries of the Day Care Center for Persons with Disabilities, results in lack of opportunities for child care after school, additional work with a special educator and reduced employment of parents. / guardians	<p>Recommendation 2</p> <p>Creating a class for full-time teaching in one of the primary schools, which will include children with disabilities and will work with a special educator and / or establishing a care center for school-age children in the period before or after school visit.</p>	High	<i>4.a: Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all</i>	4.a.1 Proportion of schools offering basic services, by type of service	Municipality of Kocani
<p>SDG 11: Sustainable cities and communities: Make cities and human settlements</p>					

About 15% of adults and children with disabilities are completely immobile or can use a wheelchair, over 70% have mobility problems and many of them need transportation to the most visited places.	Recommendation 1 The municipality should provide a special vehicle for persons with physical disabilities and organize transportation of adults and children with disabilities to the necessary locations in the municipality.	High	<i>11.2: By 2030, provide access to safe, affordable, accessible and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, women, children, persons with disabilities and older persons</i>	11.2.1 Proportion of population that has convenient access to public transport, by sex, age and persons with disabilities	Municipality of Kocani
Many municipal and public buildings, including parks, sidewalks and car parks, are not accessible enough for adults and children with physical disabilities and / or visually impaired people.	Recommendation 2 Adaptation of facilities, infrastructure and urban equipment in the municipality to be accessible to persons with disabilities.	Medium	<i>11.7: By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities</i>	11.7.1 Average share of the built-up area of cities that is open space for public use for all, by sex, age and persons with disabilities	Municipality of Kocani