



LNOB Social Report

Municipality of Strumica

Author

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Report on LNOB Social Mapping in Municipality of Strumica

Social Mapping Results Report: Social Mapping of Adults and Children with Disability in the Municipality of Strumica



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Contents

Executive summary	5
1. Target group(s) of the Social Mapping	5
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 of available socio-economic resources.....	17
5.2.1. Geo-tagging of critical points for children and adults with disabilities	18
5.3. LNOB group - _____	62
6. Focus group analysis - _____	98
7. Conclusions and Recommendations	109
Recommendations in line with SDGs	116

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 Strumica 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 disabilities. 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 LNOB 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 Strumica are covered by several projects. The Open Hard Nursing Home in cooperation with the Red Cross implement a project supported by the UNDP for a daily care center for the elderly and home visits and care. In Strumica the main problem of the elderly is that their children live abroad and need additional care. In Strumica there are three nursing homes, but a large number of elderly people have need from home care.

Victims of domestic violence often do not report cases. This is also a vulnerable group, but projects and activities are being undertaken in the municipality to overcome the problems. There is a Shelter Center where victims receive socialization support, help finding work and a counseling center for victims of domestic violence will be open in near future.

Roma, as in all other municipalities, are one of the most vulnerable groups in Strumica. But what is specific about the Roma here- they have a so-called fluctuating identity - sometimes they declare themselves Turks and sometimes Roma. Here Roma children attend primary school in Turkish and have a problem with knowing the Macedonian language. The main problem is that they do not complete primary education or do not enroll in high school. There is an illegal Roma settlement on the transit road to Greece and the municipality will build a settlement with homes to relocate them. The NGO Hyatt provided street lighting in the part of town where they live.

People living in rural areas of the municipality do not have major problems. Only a small number of them can be treated as a vulnerable group because they have developed agriculture and people work either in the agricultural sector or agriculture is an additional activity. The main problem is the poor quality roads, they do not have frequent bus connections and some villages are not connected at all by bus or van to the city.

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

Specific problems and situation in the Municipality of Strumica

Based on data shared by associations of persons with disabilities to the municipality, this is the number of persons with disabilities, grouped by type of disability:

- 30 people with impaired vision
- 250 people with hearing impairment
- 330 persons with physical disabilities
- 80 intellectual disabilities
- 38 people with moderate disabilities
- 80 people with combined disabilities
- 2 obstacles in verbal communication (voice, speech and language)
- 25 extrem for of physical disability
- 20 Autistic persons
- 20 People with Down Syndrome

Specific problems for Strumica are that there are group homes of persons who previously lived in the Institute for Rehabilitation of Persons with Physical Disabilities Banja BANSKO. Through the process of deinstitutionalization, they live in groups in several apartments, but have a problem with the lack of permanent personal assistance and the inaccessibility of the infrastructure around their homes.

The problem is that only the blind and people in wheelchairs are provided with a personal assistant. In the municipality, people with other types of disabilities or parents of children with disabilities complain and ask for them to have personal assistants. For this purpose, the municipality will provide funds for personal assistants.

Parents of children with disabilities complain about the lack of educational assistants because in the meantime the law has been changed and the criteria for educational assistants have been strengthened and there is not a sufficient number of candidates.

These assistants are paid by the Ministry of Education and

Science. The municipality plans to provide a special fund to engage educational assistants.

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 in 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 disable 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 Strumica and policies at local level

Total population of the municipality of Strumica - 49 995

According to gender

Men -24 701

Women-25 294

By ethnicity

Macedonians -43 047

Albanians -22

Turks-3984

Roma-218

Vlachs-10

Serbs-104

Bosniaks-3

Other not mentioned-320

-14 did not declare themselves

Unknown-21

According to age

0-4 years - 2651

5-9 years- 3017

10-14 years-2783

15-19 years -2709

20-24 years-2644

25-29 years -2917

30-34 years-3137

35-39 years-3466

40-44 years-3465
45-49 years-3228
50-54 years-3267
55-59 years-3702
60-64 years-3863
65-69 years-3572
70-74 years-2547
75-79 years-1550
80-84 years-928
over 85 years-549

Local program documents that have been adopted by the Municipality of Strumica, in the domain of social protection are the Social Map of the Municipality of Strumica and the Social Plan of the Municipality of Strumica for the period 2021-2024.

According to the data of the Inter-Municipal Center for Social Affairs - Strumica, 3414 beneficiaries of social protection rights have been registered on the territory of the municipality, as follows:

- 1449 beneficiaries of guaranteed minimum assistance
- 1669 beneficiaries of assistance and care fee
- 686 beneficiaries of disability benefits
- 4 beneficiaries of compensation due to part-time work
- 1669 beneficiaries of permanent compensation of a parent of a child with a disability
- 295 users of a special supplement
- 163 One-time financial assistance
- 409 Social Security for the Elderly
- 936 Guaranteed child allowance
- 295 Special allowance
- 92 Right to health care
- 27 Right to reimbursement of accommodation costs and accommodation allowance
- 10 Civil disabled

According to the social plan, in the municipality of Strumica there are the following existing services:

- Home services
- Personal assistance
- Community services (day care services)

Human Recourses Capacity:

- Personal assistants
- Educational assistants
- Special educators / rehabilitators

NGO "IZBOR" is most involved in providing of social services in the municipality of Strumica. It is a non-governmental, non-profit and non-partisan organization, founded in 1997 as a result of the growing needs of the community to respond and help reduce the harmful consequences of drug use, such as prevention of the spread of HIV infection, Hepatitis B and C and other diseases that are characteristic of our target groups due to risky behaviour, while fighting against dangerous marginalizations and labeling and abuse of basic human rights, by creating new coalitions and partnerships.

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 grey 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.

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 follow 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.

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.

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 Civic Initiative and the Municipality of Strumica. 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 Strumica 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 three 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	Number of respondents	(%)
Adult	80	76.2
Parent / guardian	25	23.8
Total	105	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	N^o of respondents	(%)
persons with intellectual disabilities	1	1.3
persons with visual impairments and blindness	18	22.5
persons with hearing and deafness	11	13.8
persons with physical disabilities	36	45.0
persons with combined disabilities	8	10.0
persons with intellectual disabilities and hearing and deafness	1	1.3
persons with intellectual disabilities and physical disabilities	1	1.3
persons with intellectual disabilities and mental health problems	2	2.5

persons with intellectual disabilities and hearing and deafness and mental health problems.	1	1.3
persons with intellectual disabilities and hearing and deafness and physical disabilities and 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	4	16.0
persons with hearing and deafness	7	28.0
persons with physical disabilities	9	36.0
persons with combined disabilities	4	16.0
persons with intellectual disabilities and mental health problems	1	4.0
Total	25	100.0

Table 4: Place of residence

Table 4	Nº of respondents	(%)
city	22	88.0
village up to 300 inhabitants	1	4.0
village from 300 to 1000 inhabitants	1	4.0
village over 1000 inhabitants	1	4.0
Total	25	100.0

Table 5: Age structure of adults with disabilities

Table 5:	Nº of respondents	(%)
From 18 to 30 years	11	13.8
From 31 to 40 years	11	13.8
From 41 to 50 years	19	23.8
From 51 to 60 years	14	17.5
Over 60 years	23	28.8
Refuses to answer / does not know	2	2.5
Total	80	100.0

Table 6: Age structure of children with disabilities, whose parents / guardians are respondents

Table 6	№ of respondents	(%)
Up to 6	1	4.0
From 7 to 10	13	52.0
From 11 to 15	4	16.0
From 16 to 17	2	8.0
From 18 to 26	2	8.0
Refuses to answer / does not know	3	12.0
Total	25	100.0

Table 7: Gender structure of the respondents (adults with disabilities and parents / guardians of children with disabilities)

Table 7	№ of respondents	(%)
Male	18	72.0
Female	7	28.0
Total	25	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 Strumica with logistical support in the organization and implementation of focus groups by the municipality of Strumica 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

/Resource: Municipal Plan of Social Protection 2021- 2024/

Within the program *Personal Assistance to Persons with Disabilities* implemented by the Ministry of Labor and Social Policy and the Red Cross of the RSM in the Municipality of Strumica, a total of 18 assistants are engaged who provide personal assistance to 28 persons. This program aims to help people with disabilities under the age of 64 to achieve greater independence. Personal assistance is based on the fact that people with disabilities should have the same rights as everyone else and manage their personal lives independently.

Educational assistants for students with disabilities involved in the regular educational process: In 2016, through the OKR Program, the municipality started with the

realization of this social service and the first pilot Municipality to implement the project Personal Assistants for students with disabilities involved in the regular educational process. The project is implemented through the program Municipal - useful work in partnership between the Municipality of Strumica and the Employment Agency of the Republic of Macedonia and it is financially supported by UNDP. In the school year 2019/2020, the number of engaged persons was 22, 9 funded by UNDP with 20% co-financing from the Municipality of Strumica and 13 assistants fully funded by the Municipality of Strumica.

Daily center for people with intellectual disabilities is managed and financed by the MLSP through the Inter-Municipal Center for Social Work - Strumica. The Dailycenter is located in the former barracks of the Municipality of Strumica, according to its location contributes to the normal and proper functioning of the center. The users of the Daily Center are people with physical or intellectual disabilities. These are people with severe and the most severe disabilities in physical development and with combined disabilities. There are a total of 11 users, and they are aged from 7 to 20 years, in terms of gender 7 children are male and 5 children are female. The center provides its customers with accommodation, food and individual and group work. Regular meetings are held with the parents, and they are included in the activities of the Daily center. A total of three people are employed, namely a psychologist, a sociologist and a social worker, and they are financially supported by the Ministry of Labor and Social Policy.

Social club for people with intellectual disability - The Association PORAKA - Strumica has a total of 100 members, manage a social club for socialization. The association has a room for daily care, which is provided by the municipality.

Specialized fitness center for people with disabilities- The center was opened within the project "We exist too" through the Regional Program for Local Democracy in the Western Balkans funded by the EU, implemented by UNDP and supported by the Municipality of Strumica. This center is unique in the region, and it is implemented by the Association of Persons with Physical Disabilities "Mobility" from Strumica and the Association of Citizens for Assistance and Support of Persons with Down Syndrome "VERA" from Strumica. The working team consists of a fitness trainer and volunteers - assistants who help people with disabilities to perform the exercises. The number of users who use these services is about 30.

Class for children with autism is open 14 years ago. The organizer of the teaching is the primary school "SandoMasev" in Strumica. Today, the classes are attended by 8 children with autism, from Strumica divided into several groups in three classes, and for their need, a so-called "Sensory Room" was recently opened. This class is staffed by three special educators, and they are financially supported by the Ministry of Education.

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

Visual mapping of the public buildings in Strumica, with descriptions, photos and links from the locations on Google Maps.

1. High school "Dimitar Vlahov" – Strumica

(location: <https://goo.gl/maps/zdMFJAE1yyf1fb7i8>) (figure 1)

At the entrance of the school there is a ramp for people with disabilities, easily accessible, but from the pictures it can be seen that it is a ramp whose slope is slightly sharp.



Figure 1

2. PHI General Hospital – Strumica

(location: <https://goo.gl/maps/3GfGZFYChoQFNtN59>) (figure 2)

There is no ramp at the main entrance of the General Hospital in Strumica, visible from the pictures there is no need because it is a flat area. In the other wards within the hospital there is a ramp everywhere and it is easily accessible except at the transfusion medicine service where at the very entrance there is a sharp rise of about 10 cm (you can see in the picture below). The Covid 19 Day Hospital is also flat and easily accessible.









Figure 2

3. JOUDG "Detska Radost" - Strumica, Clone 3 (location: <https://goo.gl/maps/QaXqFfLWZ9MX7ZSk6>) (figure 3)

In the kindergarten "Detska Radost" - Strumica, which is also considered the main kindergarten in the city visible from the pictures, there is a ramp for people with disabilities, but there is no fence next to the ramp which would be an additional mitigating circumstance. Both entrances to the kindergarten are painted.

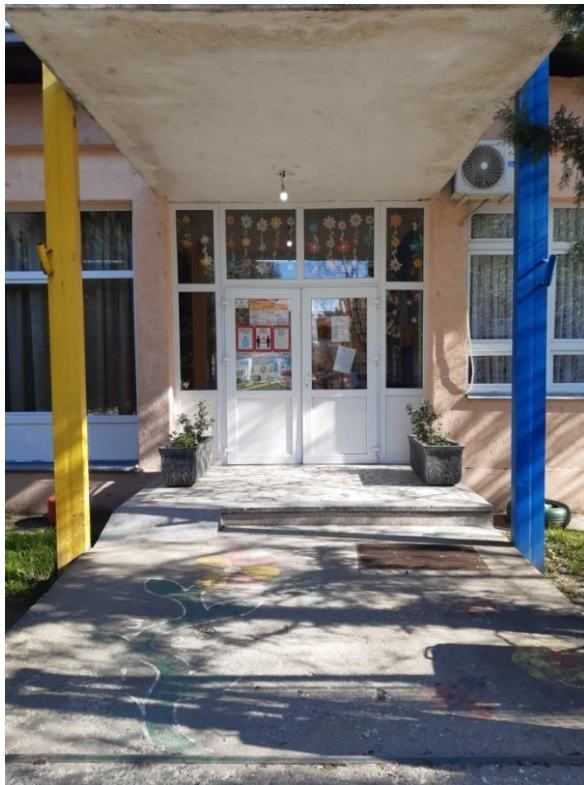


Figure 3



4. JOUDG "Detska Radost" - Strumica, Clone 4
(location; <https://goo.gl/maps/QaXqFfLWZ9MX7ZSk6>) (figure 4)

In the kindergarten "Detska Radost" - Strumica, Clone 4 there are ramps for people with disabilities, but there is no fence next to the ramp which would be an additional mitigating circumstance. In addition, the surface is not flat where the ramps are placed, which could lead to a safety.



Figure 4

5. Red Cross of the Republic of Northern Macedonia, Municipal Organization Strumica

(location: <https://goo.gl/maps/BAMhfyUm7t3jFMSQA>) (figure 5)

In the Red Cross there is a ramp for people with disability, whose slope is safe and not sharp. From the pictures it is visible that there is a fence on the ramp itself which facilitates the access to the entrance of the Red Cross.



Figure 5

6. PI Inter-Municipal Center for Social Affairs – Strumica (figure 6)

In the center for social work there is a ramp for people with disabilities, whose slope is gentle and completely safe to use visible from the pictures.



Figure 6

7. JOUDG "Detska Radost" - Strumica, Clone 2

(location; <https://goo.gl/maps/QaXqFfLWZ9MX7ZSk6>) (figure 7)

In the kindergarten "Detska Radost" - Strumica, Clone 2 there is a ramp for people with disabilities, with easy access.



Figure 7

8. House of the Army of the Republic of Northern Macedonia (ARSM)

(Location: <https://goo.gl/maps/AJvoofr3b8QqhbYa9>) (figure 8)

In the home of the Army of the Republic of Northern Macedonia, and at the same time in the same building is the registry office and the offices of the municipal Council and municipal administration, there are two ramps for people with disabilities, there are not fence that would correspond to additional protection for people with disabilities. The

slope of the two ramps is of the same and contains a sharpness that complicates the circumstances for free use, i.e., entering and exiting the building of the above institutions.



Figure 8

9. Primary school "Sando Masev" – Strumica

(Location: <https://goo.gl/maps/t2XiziLGkbSnFc297>) (figure 9)

At the very entrance of the school there is a ramp for the disabled, easily accessible, but from the pictures it can be seen that it is a ramp whose slope is slightly sharp.



Figure 9

10. High school "Jane Sandanski" – Strumica

(Location: <https://goo.gl/maps/WySudfCEkHdE6kkJ7>) (figure 10)

At the very entrance of the school there is a ramp for the disabled, easily accessible, but from the pictures it can be seen that it is a ramp whose slope is slightly sharp.

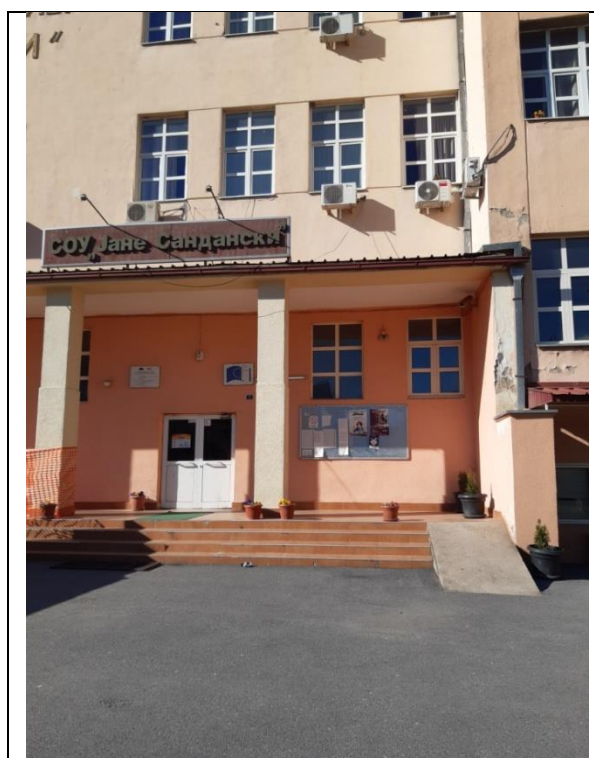


Figure 10

11. House of Culture "Anton Panov" – Strumica

(location: <https://goo.gl/maps/uzaV4FBF5rW6nyxXA>) (figure 11)

There are two ramps at the entrance of the institution, but the slope is slightly steep. There is no fence on the ramps themselves, which would mean an increase in the level of safety when using these ramps.



Figure 11

12. City Art Gallery – Strumica

(location: <https://goo.gl/maps/AHY4eGMjz6Q3rX5v7>) (figures 12 and 13).

Although it is a new building that has been renovated and put into use, it is not older than a year, visible from the pictures, there are numerous stairs without any ramps that would facilitate the access of people with disabilities.



Figure 12

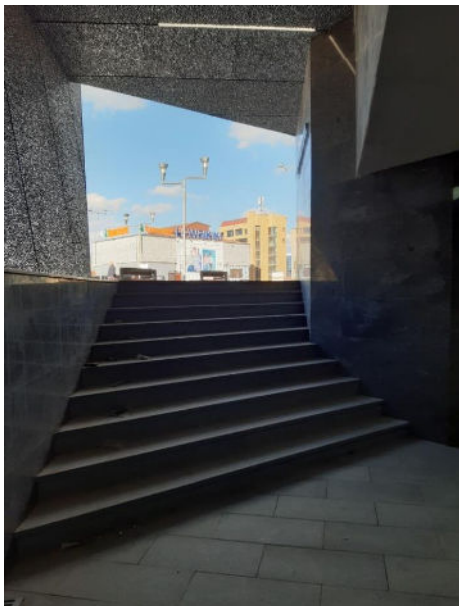


Figure 13

13. City Library Blagoj Jankov Mucheto – Strumica (figure 14)
(location: <https://goo.gl/maps/2ZspGeD661dH5uPZ7>) Although it is a new building that has



Figure 13

14. Central Register of the Republic of Northern Macedonia RRK Strumica
(location: <https://goo.gl/maps/QpBosfA4KbZJrSgU7>) (figure 15)

There is no ramp for people with disability in the Central register of the Republic of Northern Macedonia in Strumica. In addition, visible from the pictures, there are more than a dozen stairs to access the institution itself.



Figure 14

15. Ministry of Agriculture, Forestry and Water Economy (in the same building together with the Basic Public Prosecutor's Office - Strumica)

16. Forest Police Station - Strumica (in the same building together with the Basic Public Prosecutor's Office - Strumica) (figure 16)

At the very entrance of the two institutions located in the same building there is a flat area and there is no need for a ramp for people with disabilities, visible from the pictures.



Figure 15

17. Basic Public Prosecutor's Office – Strumica

(location; <https://goo.gl/maps/TDKrxDDyfEANJ9d5A>) (figure 17)

In the building of the Basic Public Prosecutor's Office in Strumica there is a ramp for people with disability whose slope is quite gentle and easily accessible. There is a fence on the ramp itself.



Figure 16

18. Ministry of Health

19. Health Insurance Fund, regional office Strumica

20. Pension and Disability Insurance Fund of Macedonia, Strumica branch (figure 18)

At the entrance of the building where the Ministry of Health, Health Insurance Fund, Pension and Disability Insurance Fund of Macedonia are located, there is no ramp for people with special needs, visible from the pictures.



Figure 17

21. Municipality of Strumica, Sector for Urbanism and Communal Affairs

(Location; <https://goo.gl/maps/aCQCHfjQ9aPSLMnW8>) (figure 19)

There is a staircase at the very entrance of the building of the Department of Urbanism and Communal Affairs and there is no ramp for people with disability.



Figure 18

22. Basic Court Strumica

(location <https://goo.gl/maps/36UEBDhLMevZEYX18>) (figure 20)

At the main entrance of the Basic Court in Strumica there is no ramp for people with disability, but the ramp is located on the other side of the Court building and has a fence. It has a sharp slope. The ramp can be seen in the third picture below.





Figure 19

23. Youth Center Europe House – Strumica (figure 21)

(location; <https://g.page/europe-house--strumica?share>)

At the very entrance to Europe House - Strumica there is an electric ramp for people with disability that works by pressing a button. It can be lowered at any time by pressing the button.

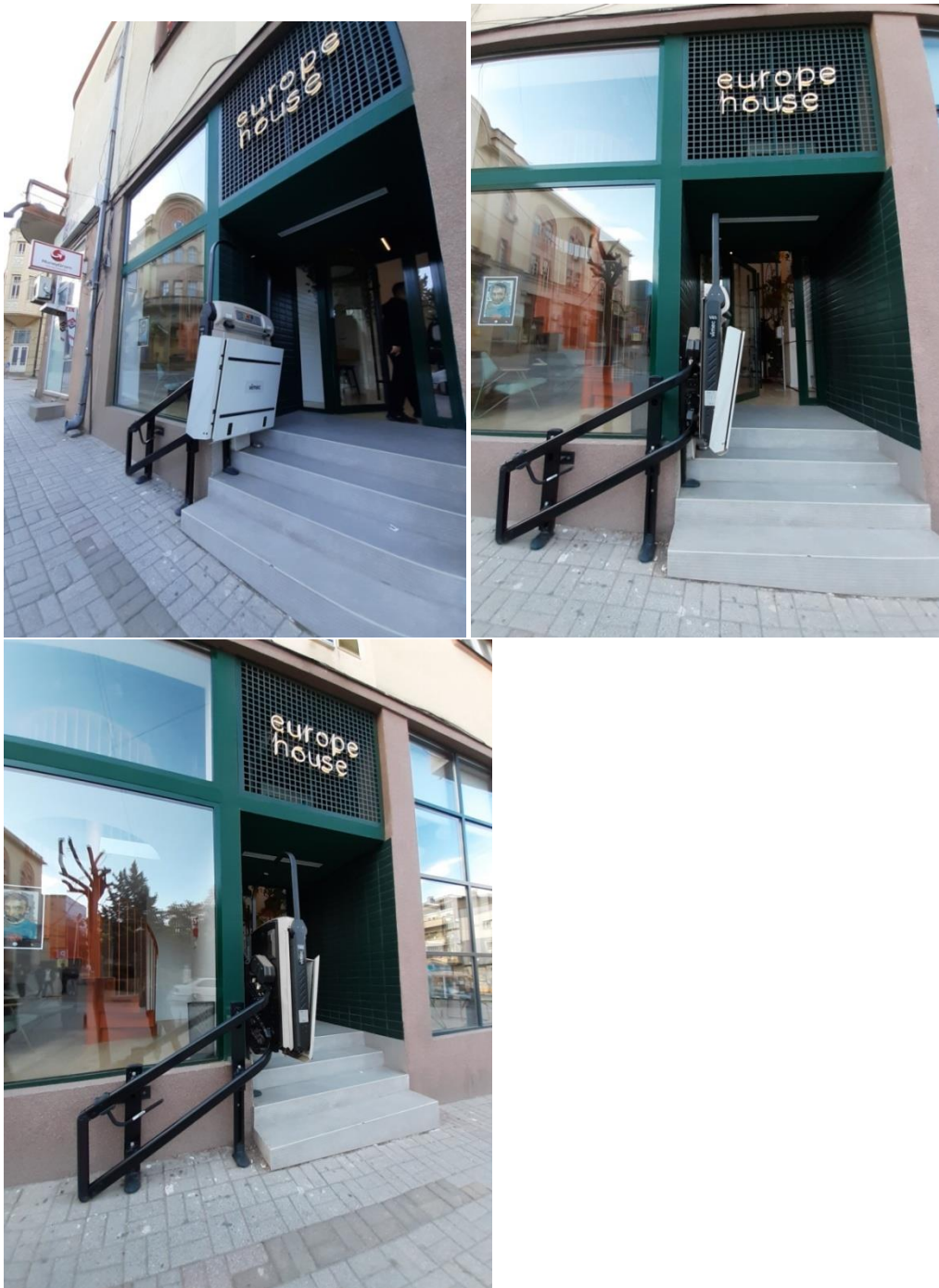


Figure 20

24. Municipality of Strumica (location: <https://goo.gl/maps/aCQCHfjQ9aPSLMnW8>) (figure 22)

From the building of the municipality, it is visible from the pictures that there is no ramp for people with special needs, but on the sidewalk in front of the building there is ramp..



Figure 21

25. State Election Commission, Strumica Branch (figure 23)

There is no ramp on the embroidey from the SEC except for a few stairs, visible from the pictures shown.

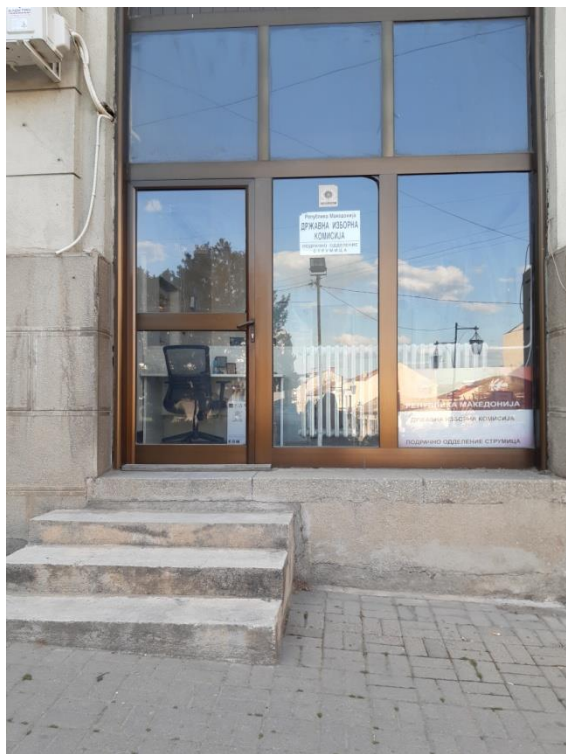


Figure 22

26. Construction inspection, Municipality of Strumica

At the entrance of the Office of Construction Inspection next to the building Municipality of Strumica there is no ramp for people with disabilities.

27. Tax Department, Municipality of Strumica (next to the building of the Municipality of Strumica) (figure 24)

At the entrance of the office of the Tax Department, which is next to the building of the Municipality of Strumica, there is no ramp for people with disability..



Figure 23

28. Department for Citizen Services and Local Self-Government, Municipality of Strumica (next to the building of the Municipality of Strumica) (figure 25)

At the entrance of the office of the Department for Citizens' Services and Local Self-Government, which is next to the building of the Municipality of Strumica, there is no ramp for people with disabilities. The entrance itself is not flat and there is an obstacle for free access to it.



Figure 24

29. Association of Disabled Pensioners "Hrabrost" – Strumica (figure 26)

In front of the building of the association of disabled pensioners "Hrabrost" in Strumica there is no ramp for people with disability, nor on the sidewalk itself which further complicates the circumstances for access to the association.



Figure 25

30. Public Revenue Office of the Republic of Northern Macedonia, Strumica branch (location: <https://goo.gl/maps/24RPGQHgivC1mXM76>) (figure 27)

There is no ramp at the main entrance of the PRO, but on the other side of the building there is a ramp intended for people with special needs whose slope is not sharp and has a fence.



Figure 26

31. Department for Real Estate Cadastre - Strumica (within the building of the Public Revenue Office)

32. Ministry of Finance, Office for Property and Legal Affairs, Regional Department for First Instance Administrative Procedure - Strumica (within the building of the Public Revenue Office)

33. Ministry of Finance, Treasury Office - Strumica (within the building of the Public Revenue Office) At the very entrance of the above institutions that are part of the PRO building there is a ramp intended for people with disabilities whose slope is not sharp. (figure 28)



Figure 27



34. Old Hospital- Strumica (figure 29)

There is no ramp for persons with disability.

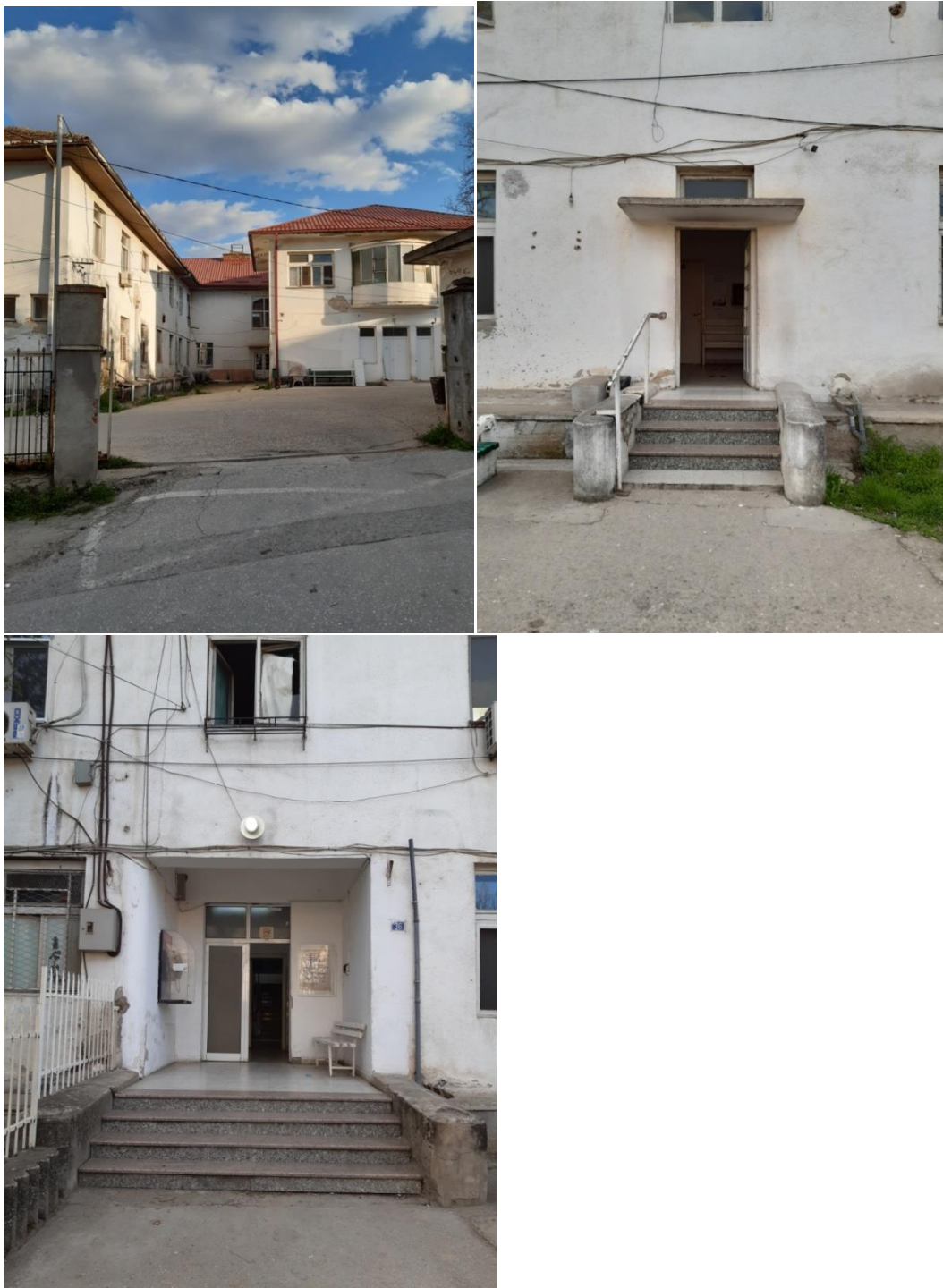


Figure 28

35. Primary school "Vidoe Podgorec" – Strumica

(location: <https://goo.gl/maps/h7EY7PtMaDoVN9Qp9>) (figure 30)

There are no ramps for the disabled at the main entrance of the school and the gym (Figure 3). The ramp is at the rear entrance of the school, without a fence, the slope of which is of high intensity, which visibly jeopardizes the possibility of safe use of the ramp itself.



Figure 29

36. Employment Center – Strumica (figure 31)

In front of the building of the employment center in Strumica there is a flat area that does not require a ramp for people with special needs.



Figure 30

37. Joint Stock Company and Management of Housing and Business Premises of Importance for the Republic – Strumica (figure 32)

At the very entrance of the institution there is an upgraded ramp for people with disabilities whose slope is slightly steep. It has no fence.



Figure 31

38. Macedonian Post - regional unit Strumica (location: <https://goo.gl/maps/iLoZug2YStyUcTiB6>) (figure 33)

In front of the entrance of the post office there is a ramp intended for people with special needs whose slope is slightly sharp.



Figure 32

39. TP Fire Unit – Strumica (лоцатион <https://goo.gl/maps/3TgCbYtxApyUUJQS8>) (figure 34)

The entrance of the fire unit in Strumica has several stairs, without a ramp for people with disability.



Figure 33

40. High school "Nikola Karev" – Strumica

(location; <https://goo.gl/maps/YMvMhmLUdte8n3gN8>) (figure 35)

At the very entrance of the school there are two ramps for people with disabilities, easily accessible, but from the pictures it can be seen that these are ramps whose slope is slightly steep. Recently, a path with a ramp for the disabled was built (see Figure 3.) for easier access to the sports hall that is part of the school, but there is no ramp in front of the entrance to the hall, except for numerous stairs (see Figures 4. and 6).

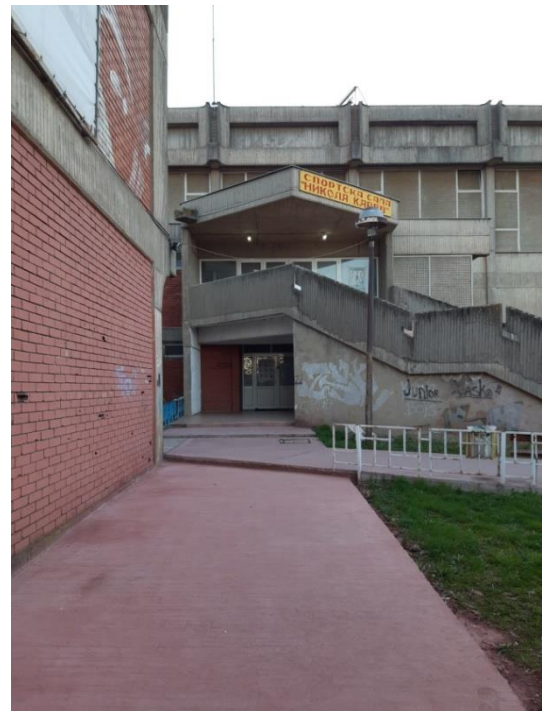
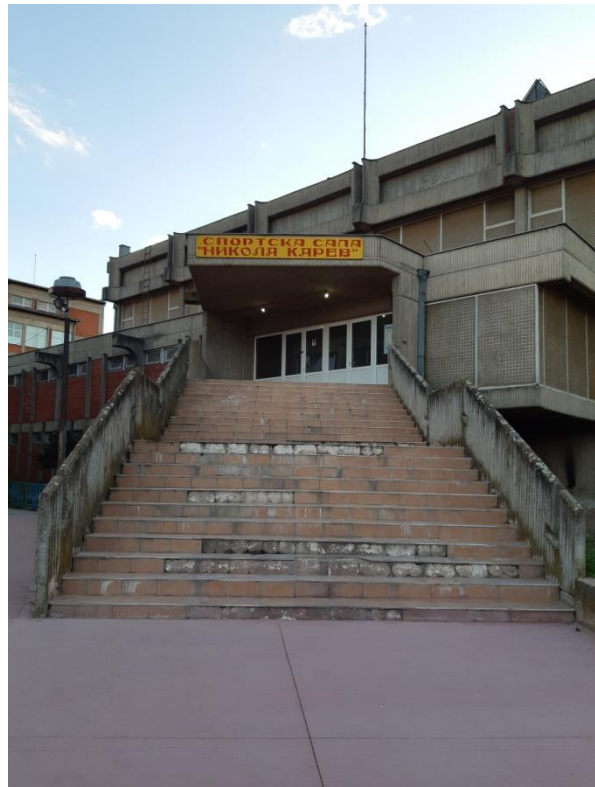


Figure 34



41. Primary school "Nikola Vapcarov" – Strumica

(location <https://goo.gl/maps/akRs44e3QfYxFe6P9>) (figure 36)

There is no ramp at the main entrance of the school, but there is a second entrance where a ramp for the disabled is built with a fence which is an additional mitigating circumstance when using the ramp itself. The ramp has a slight slope.



Figure 35



42. Museum of the city of Strumica

(location: <https://goo.gl/maps/AHY4eGMjz6Q3rX5v7>) (figure 37)

There is no ramp for people with disability in front of the entrance of the museum of the city of Strumica. The institution itself is located higher in the city in terms of infrastructure, which means that the street where the museum is located is sharp.



Figure 36

43. Historical archive – Strumica

(location; <https://goo.gl/maps/3wpC4QyNSuCm2mn56>) (figure 38)

The historical archive in Strumica is located on the same street as the Museum. There is no ramp for people with disability in front of the entrance.



Figure 37

44. JOUDG "Detska Radost" - Strumica, Clone 1

(location: <https://goo.gl/maps/aAG3h9dPmfPQ34fP7>) (figure 39)

Kindergarten "Detska Radost" - Strumica, Clone 1 or the former Jewish school is located one street below the Museum and the Historical Archive. It is a building that is protected by law and there are no ramps for people with disabilities. Visible from the pictures, the object is difficult to access because it abounds with numerous stairs.

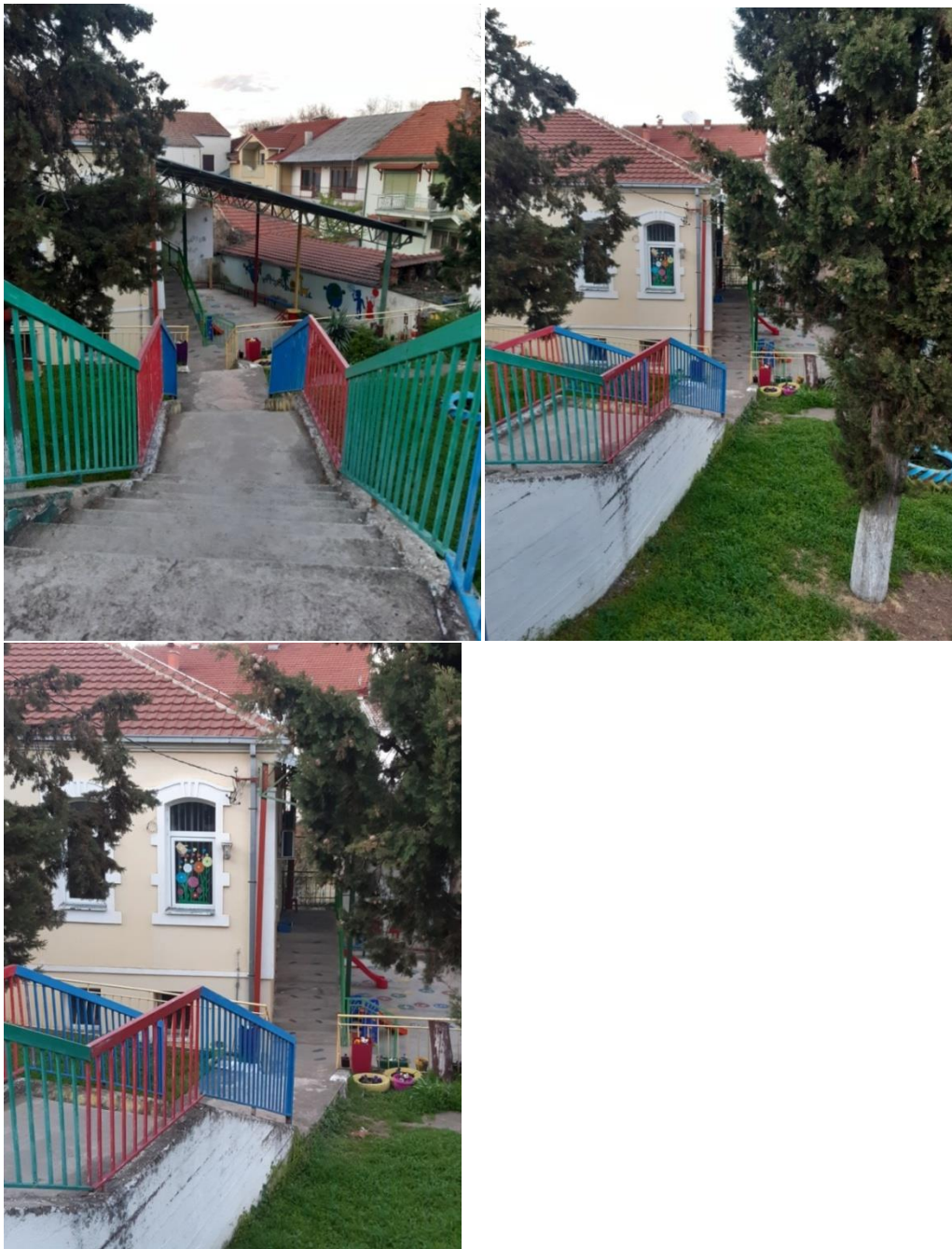


Figure 38

45. Ministry of Interior, Sector for Internal Affairs - Strumica (Police) (location: <https://goo.gl/maps/aAG3h9dPmfPQ34fP7>) (figure 40)

There is a ramp for the disabled at the entrance of the Police building with a fence. The slope of the ramp is sharply inclined.



Figure 39

46. JPKD "Komunalec" - Strumica, Center for Customers and Collection

(location: <https://goo.gl/maps/vnEFj2pnhQexBd3UA>) (figure 41)

The entrance of JPKD "Komunalec" has a flat surface and in this case there is no need for a ramp for people with disability.



Figure 40

47. Directorate for Protection and Rescue, Regional Department for Protection and Rescue - Strumica

48. Regional Crisis Management Center Strumica

49. Ministry of Defense, Department of Defense - Strumica

(figure 42)

At the very entrance of the building of the above institutions there are several stairs without a ramp for people with disabilities.



Figure 41

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 (105 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

Half of the adults with disabilities are not married, including those who have never been married, the divorced and the widower. Given that support can be expected from a partner, these individuals are at greater social risk. If we know that the structure of the respondents are older people, this risk is even greater. 68% of parents of children with disabilities stated that they are alone. This is an indication that more than $\frac{3}{4}$ of the respondents face bigger financial problems, because they are single-parent families, on the one hand, and a bigger problem in terms of child care, on the other hand. In conversations with parents, it was stated that frequent divorces initiated by men occur primarily because they do not want to have responsibilities with a child with a disability.

More than $\frac{1}{3}$ of adults with disabilities have only primary education or no education at all and only 2.5% have higher education. This has an impact on employment opportunities and income levels. During the focus group discussions, it was emphasized that people with disabilities were oriented to complete secondary vocational education and be able to find work rather than prepare for college.

About $\frac{1}{4}$ of adults with disabilities are present on the labor market and the percentage of unemployed people dominates, including those receiving social assistance. The research shows that the percentage of those employed in the private sector as persons without disabilities is higher, which may be an indicator of ignorance of the status of "employed as a person with disabilities", given that the largest percentage of people with disabilities are employed using benefits. which employers have for the employment of persons with disabilities (Table 8).

Table 8	No of respondents	(%)
Employed in the public sector	5	6.3
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	6	7.5
Self-employed	1	1.3
Employee in a protection company (company that has employed several disabled persons)	2	2.5
Retirement /--> income	27	33.8
Student income	1	1.3
--Unemployed	18	22.5
Beneficiary of social assistance	4	5.0
Other	2	2.5
refuses to answer	3	3.8
Total	79	98.8
Missing	System	1
Total		80

The research concludes gender balance in the field of employment status

Only one third of those who are unemployed are looking for work, which is a low percentage, but given that 45% of respondents are over 50 years old, then it can be concluded that there is interest in employment among younger respondents. There are no deaf people among the unemployed.

The research shows that 75% of the adults with disabilities stated that they do not have any problems in the workplace. During the focus group discussion, adults with disabilities said that a large number of people with disabilities have problems advancing in the workplace, most of them receive lower salary than average, there are frequent cases where the employer asks the employee not to come to work and to stay at home and receive 5000 denars (in agreement with the employer, the employee receives the minimum salary and gives 2/3 of that salary to the employer) and it is very common cases when the employer will hire a person with a disability, will receive the necessary benefits for that person and after three years will dismiss that person.

45% of the parents of children with disabilities are unemployed and only 20% of them are looking for work, which is a serious indicator that the parents of children with disabilities are excluded from the labor market and do not have enough alternatives to take care of the child and look for work. During the focus group discussion, the parents pointed out the problem that in the largest percentage one of the parents, and that is usually the mother, is unemployed to be able to take care of the child and emphasize the need for greater openness of kindergartens for children with disabilities. and providing day care centers where children can stay after school.

Income

Approximately 40% of the total number of respondents - adults with disabilities and parents of children with disabilities, stated that they did not earn any income in the last month. If we take into account the percentage of people living alone, especially the percentage of single parents, it can be concluded that the percentage of people who are at social risk due to lack of personal income is high. From the adults with disabilities, 32% stated that they had no income last month and percentage of parents of children with disabilities is 38

Last month Income

Only 35% of all respondents- adults with disability and parents/guardians, stated that the basis for their income is work and the same percentage stated that the basis of income is the pension. Exactly 1/3 of the respondents have incomes less than 12,000 denars, approximately the same part of the respondents have incomes between 12,000 and 20,000 denars and only 1% of the respondents have monthly incomes, which are equal to the average salary in Northern Macedonia. The rest refuse to answer. These results show that a high percentage of adults with disabilities and parents with disabilities have significantly lower incomes than the average income structure of other citizens and this is an important indicator of social risk among these categories of citizens.

About 1/4 adults with disabilities live alone, which can be an additional condition for social risk. Out of the total number of respondents, a high 47.6% can not meet the basic needs and the percentage of those who can meet only the basic needs is similar

(Table 9). This is an extremely serious indicator of the high social risk of the families of adults and children with disabilities.

Table 9	Nº of respondents	(%)
Satisfies basic needs	45	42.9
Does not meet basic needs	50	47.6
I manage to save some	5	4.8
I do not save, but I live a comfortable life	5	4.8
Total	105	100.0

Living conditions

The research shows that about 13% of the respondents have a problem with access to drinking water, which is a high percentage of exclusion from the elementary resource for life (Table 10).

Table 10	Nº of respondents	(%)
Yes	14	13.3
No	86	81.9
Refuses to answer / does not know	5	4.8
Total	105	100.0

About 10% of respondents live in extreme poverty because during the last month they have once and more than once had trouble affording a meal. Specifically, 2% of respondents had a problem once a month, 5% several times (two or three) and 3% more than three times. This is indicator for hunger of 10% of the households. The Figure 43 shows that combined disabilities, ie, there more cases of people with combined disabilities who several times had a problem to afford a meal in the last month.

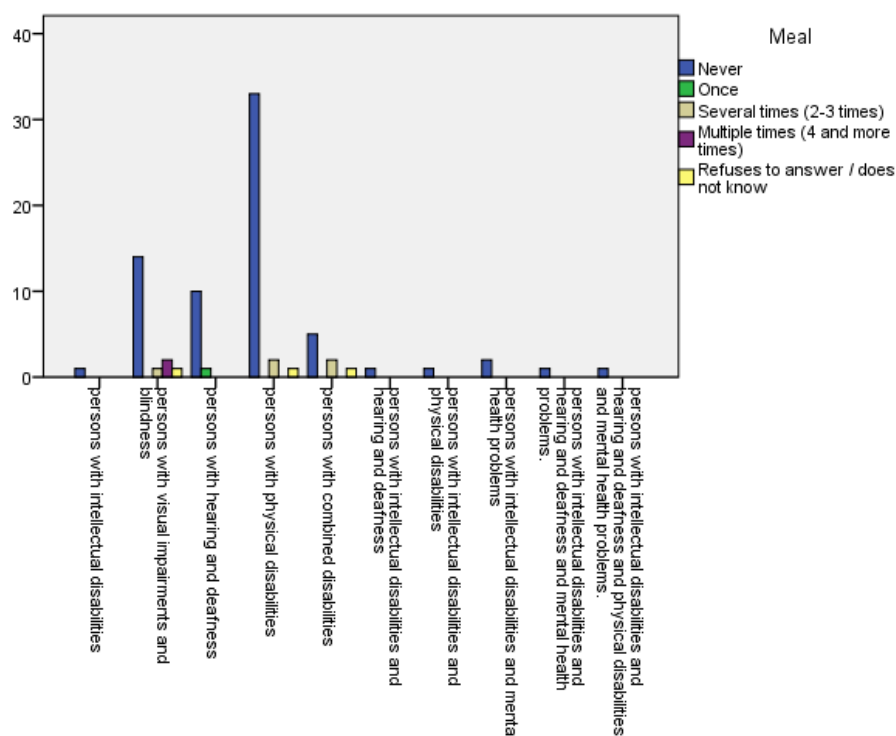


Figure 42

About 40% of households do not have a computer and about 25% do not have internet. However, regarding internet access, it should be borne in mind that internet access is also included via mobile phone. Only 2% of the respondents do not have a TV set and about 90% are satisfied with the quality of the TV set and the channels they have. But, unlike this, about 20% of the respondents have a problem with their households providing enough heat. This especially becomes a risk factor in a period of rising prices for all energy and is a serious indicator of extreme poverty, given that the heat in the home is one of the basic conditions for existence.

22% of respondents can afford a week away from home; 25% of respondents cannot afford meat or a proper vegetarian substitute; 27.6% of respondents can afford to call a person who will take care of them / their child; 20% of respondents can afford to pay unexpected costs in the amount of 300 to 500 euros; 25% of respondents cannot afford to buy medicine for themselves or a family member and 20% of respondents are unable to pay for utilities. Based on these indicators it can be concluded that about 1/4 of the respondents live in extreme poverty

Conclusions:

- More than half of adults with disabilities do not have a spouse or partner and this reduces the possibility of care;
- Less than 1/4 of the parents / guardians of children with disabilities are unmarried and this increases the parent's burden of caring for the child;
- There is a poor educational structure among people with disabilities, low employment rates and low job seekers. Less than half of parents / guardians are employed and only 20% of the unemployed are looking for work;
- 40% of the respondents earned income last month, 1/3 based on salary and 1/3 less than 12,000 denars. From the adults with disabilities 1/4 live alone and

half of the adults with disabilities and parents / guardians cannot cover the costs of basic subsistence needs;

- 13% have sometime problems with access to drinking water, 10% in the last month at least once were hungry and could not afford a meal, and about 1/4 of the respondents cannot buy meat, pay for utilities and buy medicine. These indicators are the basis for concluding that about 25% of people with disabilities live in extreme poverty.

The research showed that the most excluded from the aspect of the risk factor socio-economic status are the single parents / guardians of a child with disability.

Recommendations:

- The local stakeholders and the state to take measures that should provide support to single-parent families of children with disabilities;
- Greater openness of universities for people with disabilities, in order to increase the percentage of highly educated people;
- To find opportunities for providing scholarships for high school students and university students with disabilities;
- The Employment Agency to develop training programs, which will contribute to additional training and retraining of persons with disabilities;
- The Employment Agency to develop measures to encourage the employment of persons with disabilities;
- The State Labor Inspectorate to have more intensive activities in the control of the abuse of persons with disabilities by employers;
- The Ministry of Labor and Social Policy to develop measures for greater coverage of persons with disabilities in the public sector;
- The municipality to provide greater opportunities for care of children with disabilities in kindergartens and to create opportunities for opportunities for child care after school, so that conditions can be provided for a higher percentage of employment of parents / guardians of children with disability;
- The municipality and the Ministry of Labor and Social Policy to undertake activities for registration of persons with disabilities living in extreme poverty and to create measures for elimination of periodic hunger and deprivation of the possibility of heat in the home;
- The local stakeholders should develop a program to support people with disabilities living in poverty, so that they can buy medicines that are not covered by the Health Insurance Fund.

Geography - risk factor

About 25% of the respondents- adults and parents/guardians, said that the entrances and rooms in their homes are completely or partially inaccessible to them as people with disabilities, ie to their children. If we take into account that physical accessibility is most important for people with physical disabilities and blind people, then this percentage is higher because this question was asked to respondents with all types of disabilities.

Respondents, who stated that their homes were partially or completely inaccessible, were also asked about the type of inaccessibility, but had the opportunity to choose more than one answer. The table 11 below shows the results but is dominated by approximately 16% lack of elevator and the same percentage of inaccessibility of stairs.

Table 11	No of respondents	(%)
No elevator (if living in a residential building)	1	4,0
No elevator and The front door has a sill and / or is not wide enough	1	4,0
No elevator and Has high and / or dilapidated stairs	2	8,0
The front door has a sill and / or is not wide enough	1	4,0
The front door has a sill and / or is not wide enough and There is no adapted toilet	2	8,0
Has high and / or dilapidated stairs	4	16,0
Has high and / or dilapidated stairs and There is no adapted toilet	1	4,0
There are narrow and inaccessible doors inside the building	3	12,0
It is fully accessible	3	12,0
No answer / does not know	2	8,0
No elevator and There is an access ramp and There is no adapted toilet	1	4,0
No elevator and The front door has a sill and Has high and / or dilapidated stairs	1	4,0
No elevator and The front door has a sill and / or is not wide enough and There is no adapted toilet	1	4,0
There is an access ramp and There is not enough light and There are narrow and inaccessible doors	1	4,0
The front door has a sill and There is not enough light and There are narrow and inaccessible doors	1	4,0
Total	25	100,0

8% of the respondents lack a sewer connection and 5% lack a toilet in the home. This can be interpreted as the existence of a septic tank and that the toilet is outside the home, but for people with disabilities, this situation is an aggravating circumstance. Based on the place of residence - town / village, a positive correlation was determined between the missing of home conditions in the home and living in a rural settlement – Figure 44.

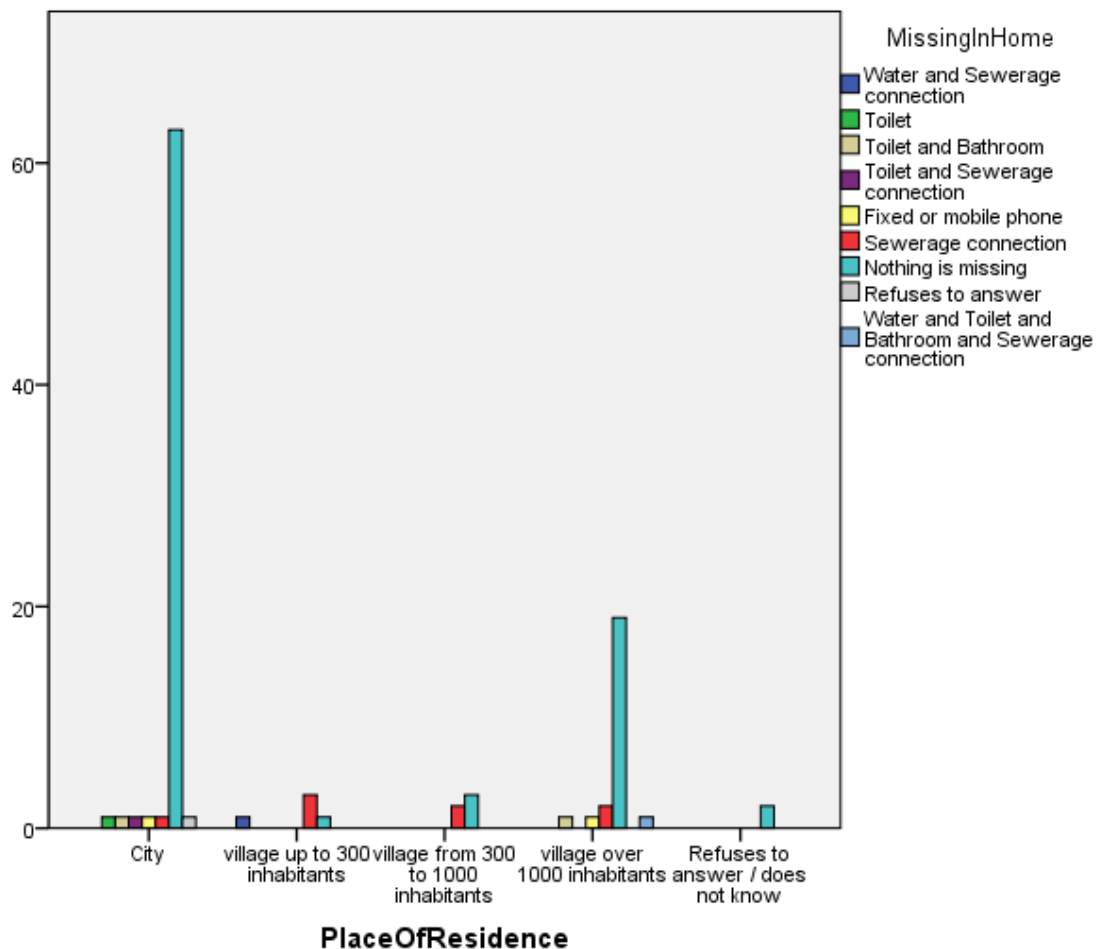


Figure 43

41.3% of adults with disabilities stated that they are owners of the living facility and 16.3% stated that they are part of collective living. The percentage in terms of ownership is satisfactory and in relation to the collective living this percentage is obtained because there were persons among the respondents who are users of the Institute for Protection and Rehabilitation Banja Banskó. An analysis was made whether there is a gender difference in terms of ownership and it is concluded that there is a gender balance on this issue- Figure 45.

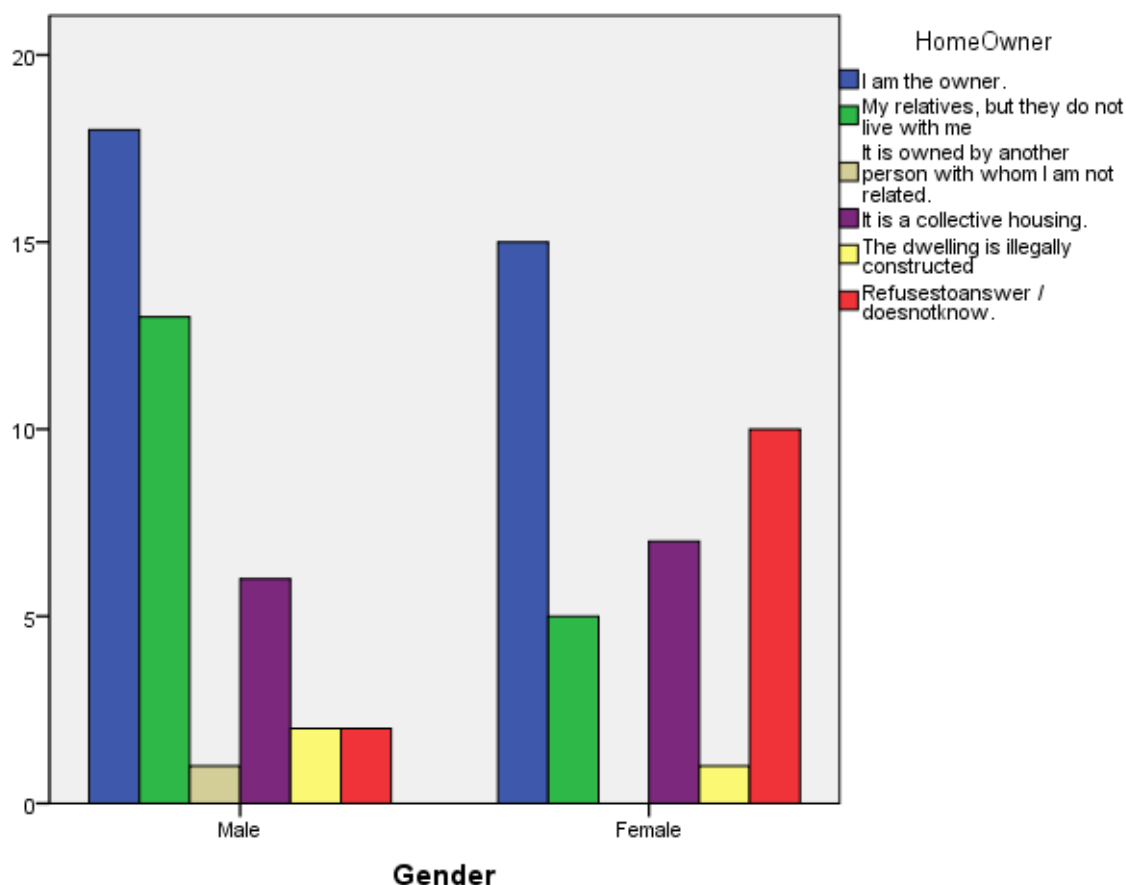


Figure 44

About 1/3 of the total number of respondents live in one or two rooms and the same is the number of respondents who live in a building up to 60 square meters. Only 3.8% of respondents live in an apartment up to 30 square meters. From the aspect of living conditions, it can be concluded that people with disabilities are not at high risk.

During the focus group discussion, an example was shared of how a person with a disability received a social apartment on a higher floor and could not to use because his disability was not taken into account.

Conclusions:

- About 40% of respondents have problems with the accessibility of their homes;
- About 40% of people with disabilities are owners of their homes and there is no gender difference;
- In general, people with disabilities do not have problems with living conditions.

Research has shown that people in wheelchairs and people with severe disabilities are most excluded in terms of risk factor geography.

Recommendations:

- The municipality to provide measures for financial support for the installation of an elevator in the buildings for collective housing, where a person in a wheelchair lives;

- The municipality to provide measures for financial support for the adaptation of the facilities for individual and residential housing, in which a person with physical disability lives;
- The municipality to provide measures for providing affordable housing for persons with disabilities, who have exercised the right to social housing.

Social services needs assessment

Needs for health services

The table 12 provides results for the condition of persons with disabilities, which is related to the type of disability. This includes adults and children with disabilities. Some people have multiple types of disabilities and therefore the sum of the percentages in the table is not 100.

Table 12	
1.	The person is completely paralyzed, but can use a wheelchair 11,4%
2.	The person is partially paralyzed (uses an aid and moves) 21,8%
3.	Limited use of hands or fingers. 32,4%
4.	Limited use of the feet or legs. 42,9%
5.	Difficulty of using household items. 36,2%
6.	There are blackouts, seizures and loss of consciousness 13,3%
7.	The person has partially impaired vision. 41,9%
8.	The person has an autistic spectrum 9,5%
9.	The person is blind 6,7%
10.	He/she has completely impaired hearing 14,3%
11.	He/she has partially impaired hearing 14%
12.	The person has speech problems 34,3%
13.	He feels chronic pain and has difficulty moving even with an aid 32,4%
14.	Intellectual disability (forms of retardation) 17,1%
15.	The person is completely paralyzed 4,8%
16.	He/she has a mental disorder (mental illness) 9,5%
17.	Lack of arm 6,7%
18.	Lack of arms 3,8%
19.	Lack of leg 9,5%
20.	Lack of legs 4,8%
21.	Lack of leg and arm. 1,9%
22.	Disorder and deformation of the body 37%

About 20% of adults with disabilities answered that their health condition is bad or very bad and 1/3 answered that it is decent. This is a response to either a subjective perception or a medical opinion, yet 20% of adults with disability have a worrying health condition. It should be noted here that the medical model should not be used in the interpretation of the answers (that disability is a disease per se) but that disability is a condition (social model). If this is how the data is interpreted, it is a worrying picture from a health point of view.

Unlike the health condition of adults with disabilities, understandably, the health condition of children is better and 4% of parents answered that the health condition is bad and 28% decent (Table 13).

Table 13	Nº of respondents	(%)
Very good	4	16,0
Good	13	52,0
Decent	7	28,0
Bad	1	4,0
Total	25	100,0

27% of all respondents- adults and parents/guardians answered that their disability / child's disability is due to illness and 56% that they have it from birth. As part of the field research, respondents were asked several questions, which aim to assess perceptions of community relations. Respondents were asked the following question: "On a scale of 1 to 5 where 1 is the lowest and 5 the highest score, how satisfied are you or how do you feel about:", and various sub-questions were asked:

Personal relationships with other people, 2/3 of the respondents rate with 4 and 5 and from this it can be concluded that people with disabilities and parents / guardians of children with disabilities do not feel excluded in communicating with people- Table 14.

Table 14	Nº of respondents	(%)
1	2	1,9
2	7	6,7
3	26	24,8
4	23	21,9
5	42	40,0
Refuse to answer/does not know	5	4,8
Total	105	100,0

To the question *Do you feel safe?* Approximately 60% gave a grade of 4 or 5, which is also a good indicator of their personal safety in the community, even though they are persons with disabilities, ie their children, and may be at higher risk- Table 15.

Table 15	Nº of respondents	(%)
1	7	6,7
2	7	6,7
3	13	12,4
4	18	17,1
5	55	52,4
Refuse to answer/does not know	5	4,8
Total	105	100,0

To the question *How satisfied are you with your life as a whole?* Approximately half of the respondents give a grade of 4 or 5. This question is also related to the happiness index and it can be concluded that, although people with disabilities are exposed to different types of risks, still disability does not affect their satisfaction with life as a whole. differs in relation to those persons who do not have a disability- Table 16.

Table 16	No of respondents	(%)
1	5	4,8
2	8	7,6
3	34	32,4
4	22	21,0
5	30	28,6
Refuse to answer/does not know	6	5,7
Total	105	100,0

To the question *Do you feel forgotten by the community?*, approximately half answer with 1 or 2, which is a high level of feeling of exclusion from the community. The first question from this block of questions was about the relationship with other people and it can be concluded that the respondents do not have any problem in relation to people, especially those who are close to them. However, the community - perceived as an environment in which all citizens live at the local level and which has formal and informal opportunities for support, is assessed as a place where they feel excluded- Table 17.

Table 17	No of respondents	(%)
1	38	36,2
2	12	11,4
3	21	20,0
4	7	6,7
5	22	21,0
Refuse to answer/does not know	5	4,8
Total	105	100,0

To the question *Do they treat you well when you receive health care and services?* About 2/3 of the respondents gave a grade of 4 and 5, which is a high percentage of satisfaction from the health staff.

Table 18	No of respondents	(%)
1	8	7,6
2	5	4,8
3	19	18,1
4	23	21,9
5	47	44,8
Refuse to answer/does not know	3	2,9
Total	105	100,0

77.5% of adults with disabilities answered that in the last year they needed a general medical examination and received it and this answer is logically related to the high grade of the health staff.

However, in relation to the specialist examinations, the situation is different and the adults with disabilities are 17.5% more difficult to receive these services, unlike the general medical examination, which they usually have with their family doctor or emergency medical care.

Parents / guardians of children with disabilities give similar answers as adults. 4% of them answered that once in the last 12 months their child needed a general examination and did not receive it and 4% once and 8% several times needed a specialist examination but did not receive it.

A correlation test was performed for obtaining health services based on urban and rural place of residence. This correlation was determined based on the cumulative sample - adults and parents / guardians and it was found that there is no deviation in terms of receiving general health services. However, in terms of receiving specialist health services, it was found that people living in rural areas have greater problems in obtaining specialist examinations (Figure 46).

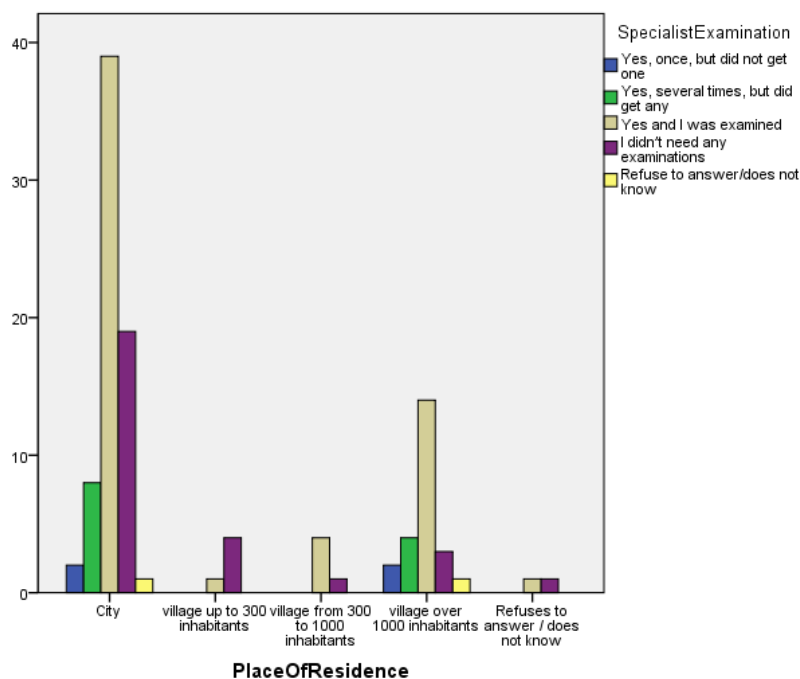


Figure 45

Of those respondents who reported that they had a problem obtaining a general or specialist examination, most of them cite the price and the problem that their place of residence does not offer this type of service.

Only 25% of adults with disabilities do not have movement problems and as many as 62% of respondents have movement problems and need help.

	Nº of respondents	(%)
Yes, I move less and I need help	49	61,3
Yes, I move less, but I do not need help	9	11,3
I have no movement problems	20	25,0
Refusestoanswer / doesnotknow	2	2,5
Total	80	100,0

44% of parents / guardians of children with disabilities answered that their children have difficulty moving and need help and the same percentage of them answered that their children do not have movement problems (Figure 47).

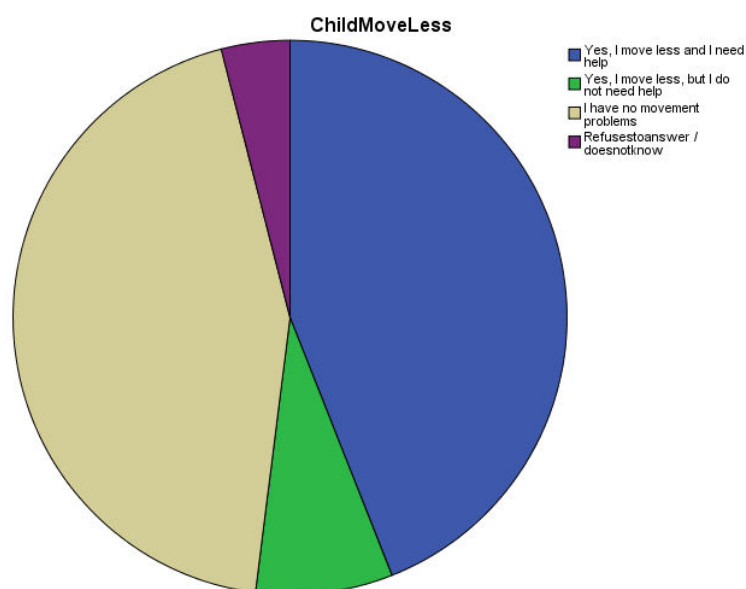


Figure 46

About 33% of adults with disability have an ambulance nearby and have no problem getting to it, the same percentage of respondents answered that they have a problem to get even though the ambulance is nearby and 22% answered that they do not have an ambulance nearby and have a problem to reach ambulance. We can conclude that more than half of the respondents have a problem to go to the ambulance. To this should be added the data from this research that 25% of adults with disabilities needed to go to the doctor three times in the once per month in the last year.

24% of the parents / guardians answered that the ambulance is nearby, but they have problems to get to it and 4% answered that it is far from them, and they have problems to get to it. That is, approximately 28% of parents have a problem getting to the ambulance. The survey showed that 16% of children needed medical control once a month and 36% of them answered that they needed to up to three times a year.

Crosstabulate the independent variable "place of residence" with the dependent variable "access to an ambulance" concluded that there is a positive correlation, ie

that people living in the village (both adults and parents / guardians) have more difficult access to the ambulance.

People who are poorly mobile often need patronage medical care. Most adults with disabilities say they do not have this type of need, but about 20% of them need this kind of service. About 9% received such a service and about 13% either did not know it existed or requested it but were rejected (Table 19).

Table 19	Nº of respondents	(%)
Yes, I received it once	2	2,5
Yes, I have received it many times	4	5,0
Yes, I get it regularly	1	1,3
I need such a service, but I did not know it existed	4	5,0
I do not need such a service	55	68,8
I did not receive, I tried to receive but failed	6	7,5
Refuses to answer / does not know	8	10,0
Total	80	100,0

Through testing the dependence between the type of disability and the use of patronage services, it was determined that people with physical disabilities have the greatest need for it and have used it (Figure 48).

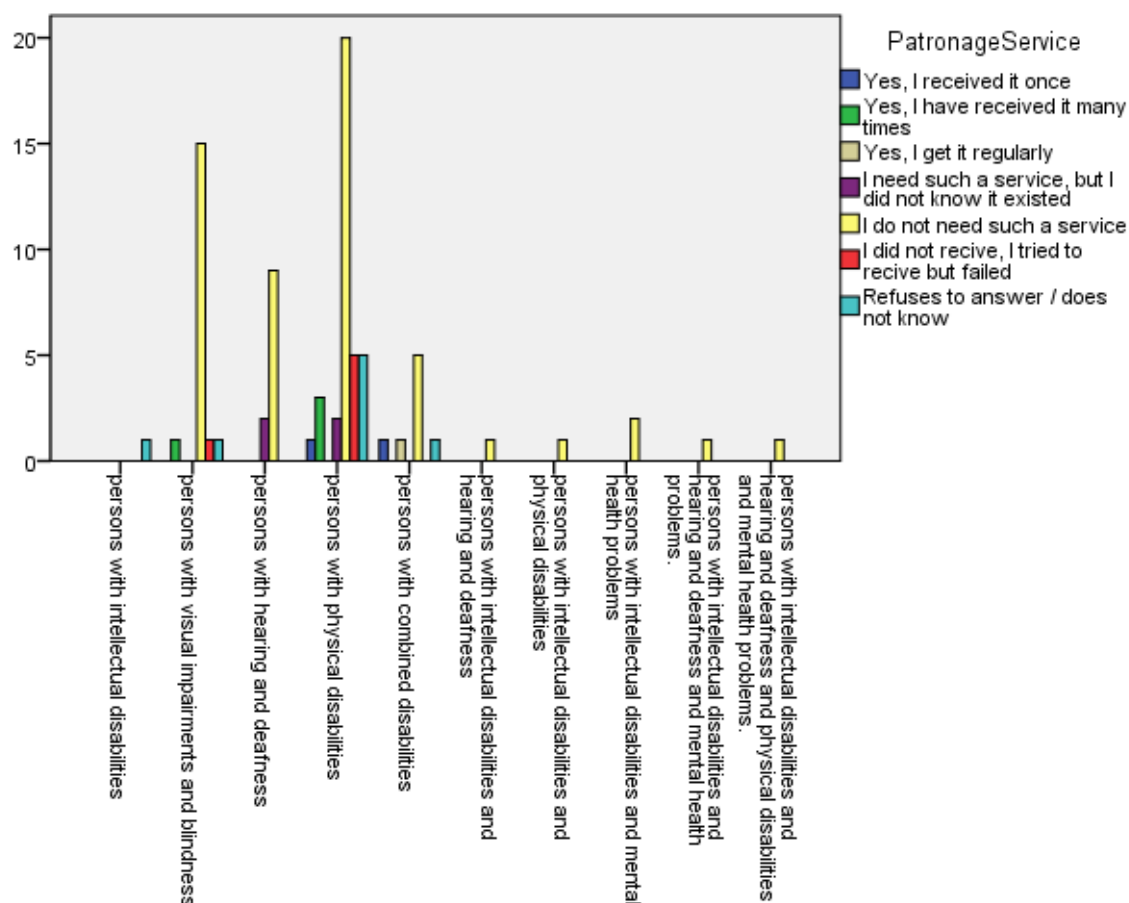


Figure 47

Approximately 70% of the parents / guardians of children with disabilities answered that they do not need a patronage service, 4% used it once, and 8% are those who answered that they used it several times, that they did not know that such a service exists and need it and those who have been denied such service (Figure 7). Specifically, 28% of parents need this type of service for their children and only 12% received it. Here, too, there is a dependence on the need for patronage service of the type of disability, i.e.. children with physical disabilities need it the most (figure 49).

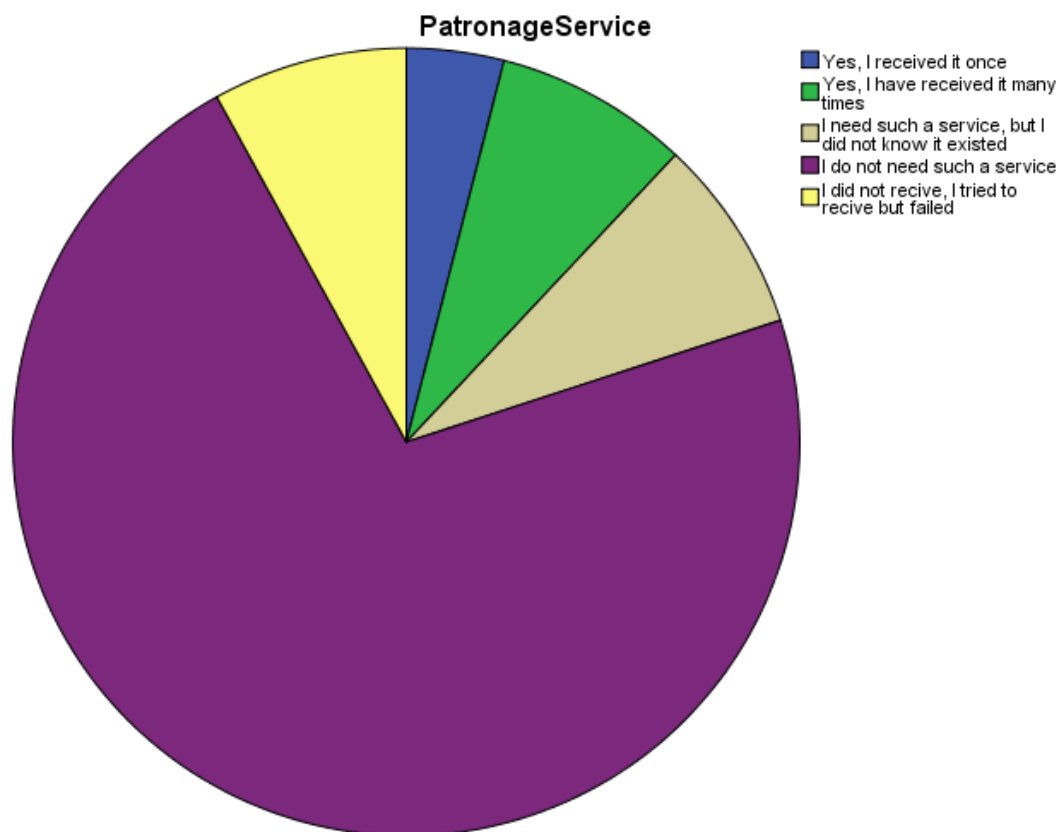


Figure 48

The following picture creates a high degree of concern, i.e. only 10% of adults with disabilities answered that they received the necessary health services (figure 50).

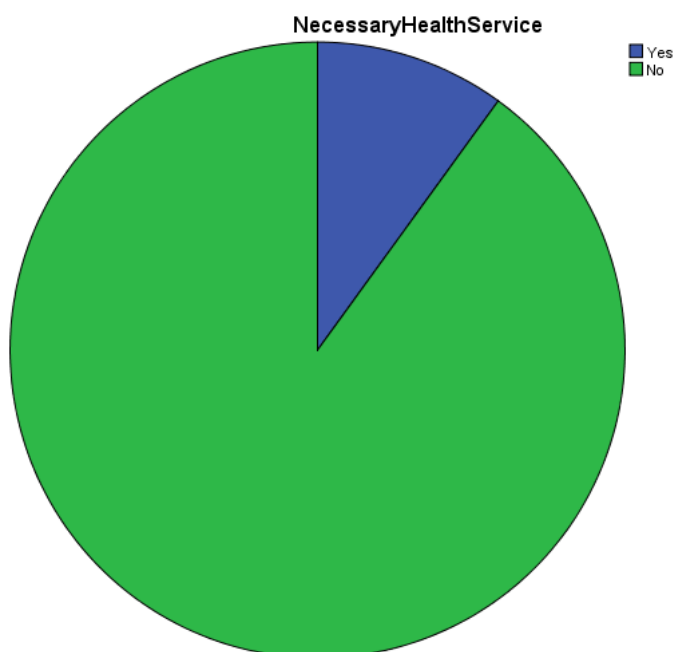


Figure 49

The situation with the health services to children is better. 44% of the parents / guardians of children with disabilities answered that their children have received the necessary services.

The Figure 51 shows that people living in the countryside have drastically more problems getting the necessary health services. This determination of dependence on the place of residence is made from the complete sample, ie, adults with disabilities and parents / guardians of the children with disabilities.

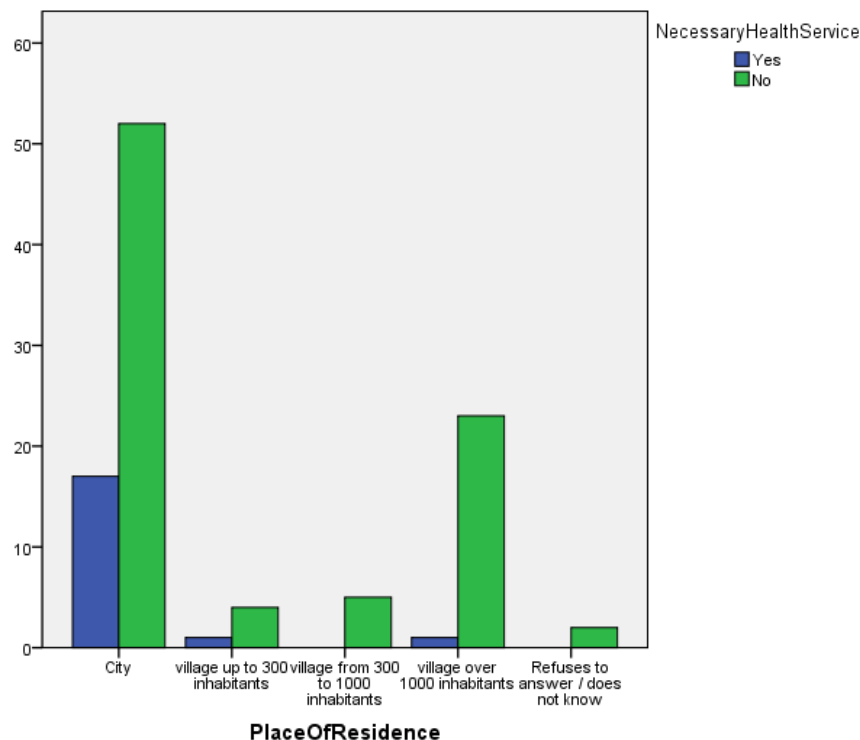


Figure 50

Respondents, who did not receive all health services, were asked what types of health services they lack and were able to choose more than one answer. Approximately 75% of adults answered that they lack patronage service.

From the parents / guardians of children with disabilities, who answered that they do not receive all the necessary health services, 57% said that they lack a patronage service for their children.

Respondents- adults with disability and parents/guardians were asked what devices and aids they need and should be provided to make their lives easier. They were offered to choose from more than one response. The table 20 shows the answers of adults with disabilities and it is obvious that some devices are repeated in combination with other devices, but this is because the respondents had the opportunity to choose several devices that they need. It is obvious that dominates the need for a device for memory tasks as well as a smart brace for measuring blood pressure.

Table 20	No of respondents	(%)
Tasks storage devices	9	11,3
Tasks storage devices and Time orientation products	4	5,0
Smart blood pressure monitor, pulse, medication alarm	16	20,0
Smart blood pressure monitor, pulse, medication alarm and Portable frames	2	2,5
Time orientation products	1	1,3
Portable frames (bases) for passing from one level to another with a wheelchair	1	1,3
Portable frames and Wheelchair with adaptation for the toilet.	1	1,3
Portable frames and Waterproof chair	2	2,5
Wheelchair with adaptation for the toilet and Waterproof chair	2	2,5
Easily portable toilet bowl and Other	1	1,3
Waterproof chair / shower seat	3	3,8
Other	16	20,0
Refuses to answer / does not know	7	8,8
Tasks storage devices and Portable frames and Waterproof chair	1	1,3
Smart blood pressure monitor and Wheelchair with adaptation for the toilet and Easily portable toilet bowl	1	1,3
Portable frames and Wheelchair with adaptation for the toilet and Waterproof chair	1	1,3
Portable frames and Easily portable toilet bowl and Waterproof chair	2	2,5
Smart blood pressure monitor and Time orientation products and Wheelchair with adaptation and Portable toilet bowl	1	1,3
Smart blood pressure monitor and Portable frames and Wheelchair with adaptation for the toilet and Waterproof chair	1	1,3
Smart blood pressure monitor and Portable frames and Waterproof chair and Other	1	1,3
Portable frames and Wheelchair and Wheelchair with adaptation for the toilet and Easily portable toilet bowl	1	1,3
Portable frames and Wheelchair and Wheelchair with adaptation for the toilet and Waterproof chair	1	1,3

Portable frames and Easily portable toilet bowl and Waterproof chair and Other	1	1,3
Por.frames and Wheelchair with orwithwheels and Wheelchairadaptation and Easily portable and Waterproof chair and other	4	5,0
Total	80	100,0

During the focus group discussion, participants complained that the Health Insurance Fund only covered the costs of the devices. They also pointed out as a problem the lack of sufficient terms of the Disability Assessment Commission and that there are disabilities that are permanent, but need to go every 6 months of assessment to be entitled to a disability allowance. Additionally, they pointed out that a person over 65 can not receive a disability allowance.

Conclusions:

- 1/3 of people with disabilities are completely or partially paralyzed and they are the people who have the greatest need for social support;
- More than 20% of adults with disabilities have poor or very poor health and 27% have their disability from birth.
- Most of the respondents feel safe, have good relations with their loved ones, are satisfied with the attitude of the health workers, but do not have the support from the community;
- Some of the respondents have a problem to get specialist examinations, especially those who live in the village, mostly because of the price of the service or because that service is not available in their municipality;
- 64% of adults with disabilities need mobility assistance. More than half of the adults have a problem to go to the ambulance;
- Only about 10% of adults have received all health services and they miss the patronage service the most. About half of the parents also answered that they did not receive all the health services.
- The majority of adults need a smart blood pressure monitor and task reminder and memory devices.

Recommendations:

- The local stakeholders should provide transport to health facilities to people with disabilities who have problems with the movement , with special attention to the inhabitants of rural area;
- The Health Insurance Fund to facilitate the procedures for categorization of persons with disabilities, obtaining certain rights and providing more appropriate free aids;
- The local stakeholders to provide a fund to subsidize certain specialist examinations for people with disabilities who have problems paying the co-payment.

Home services

Adults with disabilities were asked "Who cares about you" and could give more answers. The table 21 shows that the care of loved ones, ie children and parents, dominates. It is also noticeable that about 20% of the respondents have hired people who take care of them. Only 13.8% of respondents answered that no one cares about them.

Table 21	Nº of respondents	(%)
Nobody helps me	11	13.8
The parent / parents	13	16.3
The child / children	11	13.8
Relatives / friends	8	10.0
Engaged person	15	18.8
Neighbors	1	1.3
Red Cross persons	4	5.0
Other	4	5.0
Refuses to answer / does not know	6	7.5
Parents and children	1	1.3
Parents and relatives/friends	3	3.8
The parents and engaged person	1	1.3
The children and engaged person	1	1.3
Parents and children and relatives/friends	1	1.3
Total	80	100.0

Parents / guardians of children with disabilities in approximately $\frac{3}{4}$ of the total number of respondents answered that they as parents take care of their child and in a certain percentage of family members. No engagement of a person for child care has been recorded (table 22).

Table 22	Nº of respondents	(%)
The parent / parents	18	72.0
The child / children	1	4.0
Relatives / friends	3	12.0
Refuses to answer / does not know	1	4.0
Parents and relatives/friends	1	4.0
Parents and person through a project of the municipality	1	4.0
Total	25	100.0

Only 32% of parents / guardians answered that caring for their child did not affect their professional life. Approximately 45% of them answered that either they or their spouse remained unemployed or had to leave work to take care of their child. During the focus group discussion, the parents complained about the problems they have to be employee due to the care of the child with disabilities and a small percentage of them use the legal opportunity to work part-time and half of the working hours can to be paid by the Pension and Disability Insurance Fund as persons caring for a child with disability. The table 23 shows the answers to a question that should assess the type

and intensity of home support needs. Data on the sample -responses of adults with disabilities and parents / children with disabilities- are displayed here. The table shows that 40% to 50% of respondents, depending on the type of service, need help. For daily help, they mostly need to shopping in supermarket, house cleaning and walks and meetings with relatives or friends. With a similar percentage of respondents answered that they need this type of service once a week, but here the need for laundry dominates. Most of the respondents answered that they need help to go to the doctor and buy medicine once a month.

Table 23

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	21.9	25.7	3.8	40.0	8.6
2.	Home cleaning	21.0	28.6	4.8	38.1	7.6
3.	Buying drugs	5.7	11.4	24.8	50.5	7.6
4.	Going to the bank	4.8	7.6	1.4	41.9	14.3
5.	Washing clothes	11.4	31.4	2.9	39.0	15.2
6.	Going to the doctor	5.7	4.8	31.4	39.0	19.0
7.	Going out of the house (walk)	21.9	22.9	3.8	48.6	2.9
8.	Meetings with friends / relatives	17.1	20.0	6.7	51.4	4.8

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 ?*, the respondents can choose more than one answer and from the table24, below, it can be concluded that the largest percentage of respondents will turn to the family members they live with or their children, although not live with them.

Table 24	№ of respondents	(%)
The members of my family who live with me	32	40.0
The members of my family who live with me and to my children, even though they do not live with me	1	1.3
To my parent / parents	7	8.8
To my children, even though they do not live with me	9	11.3
To relatives	1	1.3
To neighbors and friends	1	1.3
The person who receives compensation for providing assistance in the household.	4	5.0
To the person from the Center for Social Work	1	1.3
To the person of the Red Cross	1	1.3
To the person of the NGO	1	1.3
I have no one	2	2.5
No answer.	9	11.3

The members of my family who live with me and to neighbors and friends	2	2.5
The members of my family who live with me and the person who receives compensation for providing assistance	1	1.3
To my children, even though they do not live with me and to my relatives.	1	1.3
To my children, even though they do not live with me and person who receives compensation for providing assistance	2	2.5
To neighbors and friends and to the person from the Center for Social Work	1	1.3
The members of my family and to my parents and to my children, even though they do not live with me.	2	2.5
The members of my family who live with me and my parent / parents and to neighbors and friends.	1	1.3
To my parents and relatives and compensation for providing assistance in the household	1	1.3
Total	80	100.0

Half of the total number of respondents - adults with disabilities and parents / guardians of children with disabilities - answered that they need to talk to a professional about their problems. This is a good indicator that people need psycho-social support.

Adults with disabilities living alone were asked, *Given your health and age, do you need an "alarm" security system through which you could call services if you are not feeling well?* Approximately 1/3 of the respondents answered that they need such a device.

23% of the respondents answered that they use the service of a personal assistant and 13% have never heard of this type of service. Of those respondents who used the personal assistance service, from a score of 1- dissatisfied to 5- very satisfied, approximately 80% rated this service with 4, ie that they are very satisfied and about 20% with a score of 3, ie that they are moderately satisfied. This is a good indicator that the personal assistance service is necessary and of good quality.

During the focus group discussion, people with disabilities stressed the need to increase the coverage of people with disabilities with the personal assistance service, so that people with a high rate of disability and people with intellectual disabilities can be included.

Conclusions:

- Only about 15% of adults do not have care from anyone and $\frac{3}{4}$ parents take care of their child on their own and in more than half of the parents, child care was the reason for being unemployed;

- More than half need help with certain household activities and their loved ones help them the most;
- A small percentage used a personal assistant but almost everyone is satisfied with that service, and some of the respondents had never heard of this service.

Recommendations:

- The municipality to create mechanisms for childcare after school for children of school age and once again reiterates the recommendation to take measures for greater coverage of children in kindergartens;
- Ministry of labor and Social Policy to hire special educators in kindergartens for early detection of disability and more efficient inclusion of preschool children;
- The local stakeholders to create measures for help in the home for adults with disabilities for whom this service is most needed, especially people completely or partially paralyzed, people with intellectual disabilities and blind people.
- The local stakeholders to create measures for hiring a large number of personal assistants, who will help people who do not have the right to use this service in accordance with the law, and have a real need.
- The Ministry of Labor and Social Policy to initiate amendments to the Law on Social Protection and to extend the personal assistance service to persons with intellectual disabilities and persons with a high percentage of disability and to expand the range of persons who will be able to use the right of the disabled, including the visually impaired who have less than 98% visual impairment and persons with intellectual disabilities.

Local community social services

There is a Daily Center for Persons with Disabilities in the municipality and it is under the jurisdiction of the Inter-Municipal Center for Social Affairs. The respondents were asked Is there a Day Care Center for people with disabilities in their municipality and they use it. About 24% of adults with disabilities answered that it exists, but do not use it because they do not have such type and degree of disability, only 5% use it, about 6% do not know it exists, but would use it and about 22% are not informed that there is such a center.

With the consent of the parent or guardian, the Daily Center for Persons with Disabilities can be used by children with disabilities. Therefore, the parents were asked the same question as the adults and it can be concluded that 8% of the respondents use a Day Care Center for their children and there is a high percentage of information about this Center, but there is not much interest in using it.

The correlation between this question and the place of residence of the respondent was tested, but it is concluded that there is a balance in relation to the place of residence, ie there is no deviation in the answers depending on whether the respondent lives in a city or a village.

Respondents were asked **Are there any social clubs / associations / associations of people with disabilities in the municipality that provide socializing, entertainment and recreation for you / your child in your free time?** From the

answers of adults with disabilities, shown in the table 25m, it can be concluded that about 1/3 use the social club and that another 12% would use it, but did not know that there is such a club in the municipality (table 25). From this it can be concluded that there is a need for a social club in the municipality, and in addition to this are the discussions of people with disabilities during the focus groups, when they stressed the need to open new clubs, designed for specific categories of people with disability.

Table 25	No of respondents	(%)
Yes, there is, but it is intended for people with other types of disabilities	11	13.8
Yes, there is and I use it and I am very satisfied	22	27.5
Yes, there is and I use it, I am isatisfied	3	3.8
Yes, I use it and I am not satisfied at all	2	2.5
I am not informed, and I would like to use it	10	12.5
I am not informed, but I do not need to use it	6	7.5
None	20	25.0
Refuses to answer / does not know	6	7.5
Total	80	100.0

20% of the parents / guardians of children with disabilities answered that the child attends a social club and 8% were not informed about the existence of a social club, but that they need it. A crosstabulation was made between the independent variable "type of disability" and the dependent variable "visit to a social club" and dependence was determined, ie it can be concluded that most people who attend a social club are people with hearing impairment and deaf people and people with physical disabilities (figure 52).

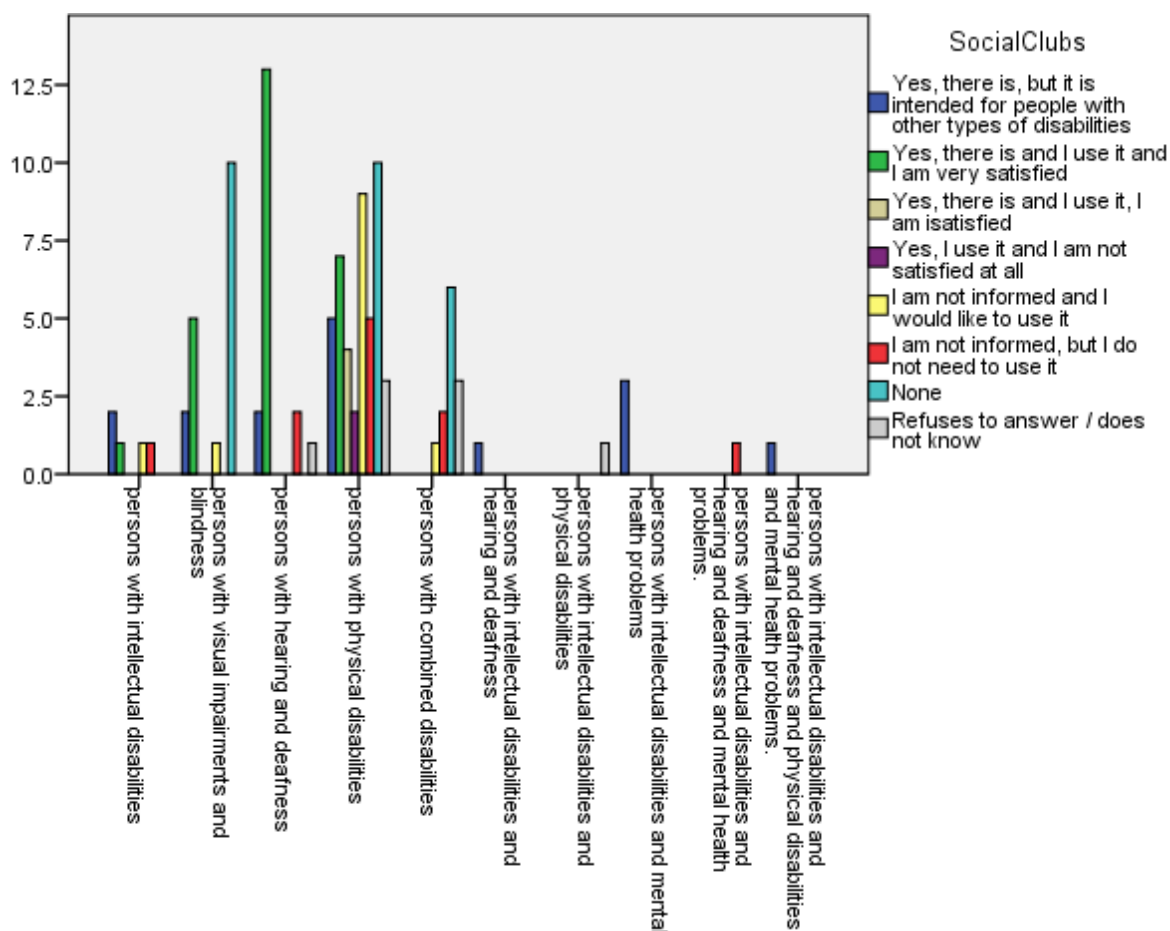


Figure 51

There is soup kitchen in the municipality of Strumica and 12.5% of the respondents are interested in this type of service. Over 80% of the respondents answered that they do not need this type of service in the municipality.

1/3 of the parents / guardians of children with disabilities answered that they need organized transportation for their children. 46% of adults with disabilities answered that they need organized transport to the places they visit most often (figure 53).

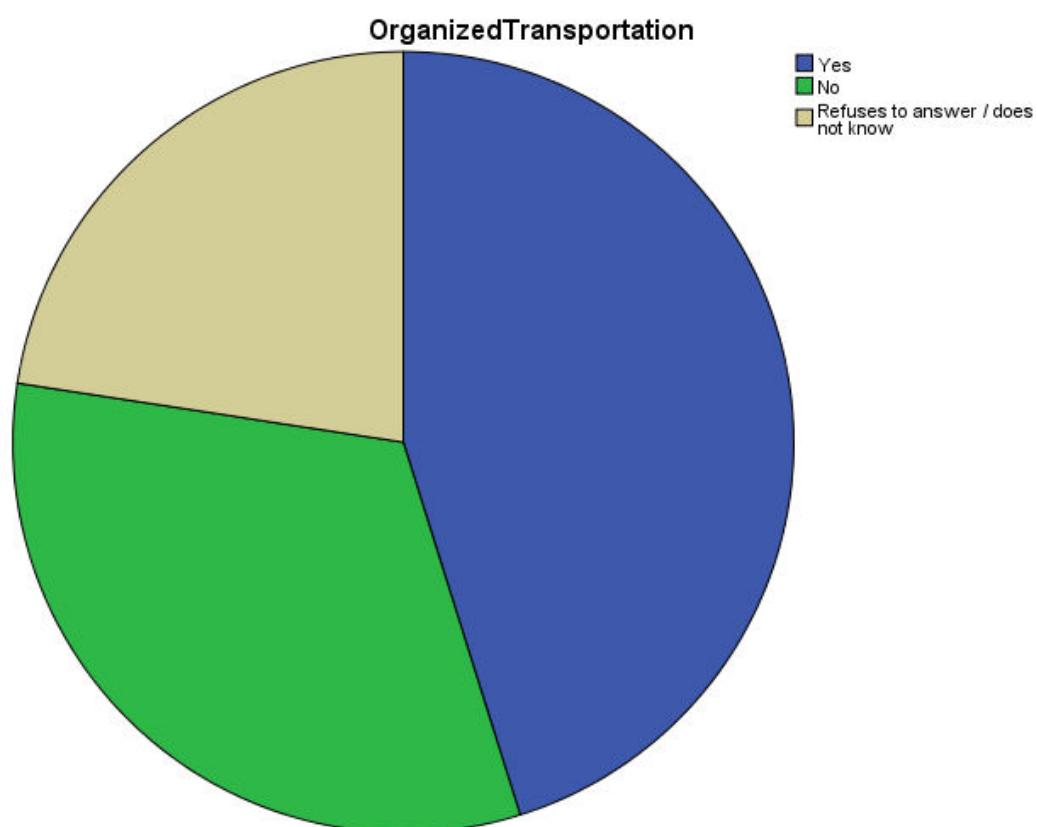


Figure 52

From the diagram below, it can be concluded that the need for organized transportation is greater among people living in the village (figure 54).

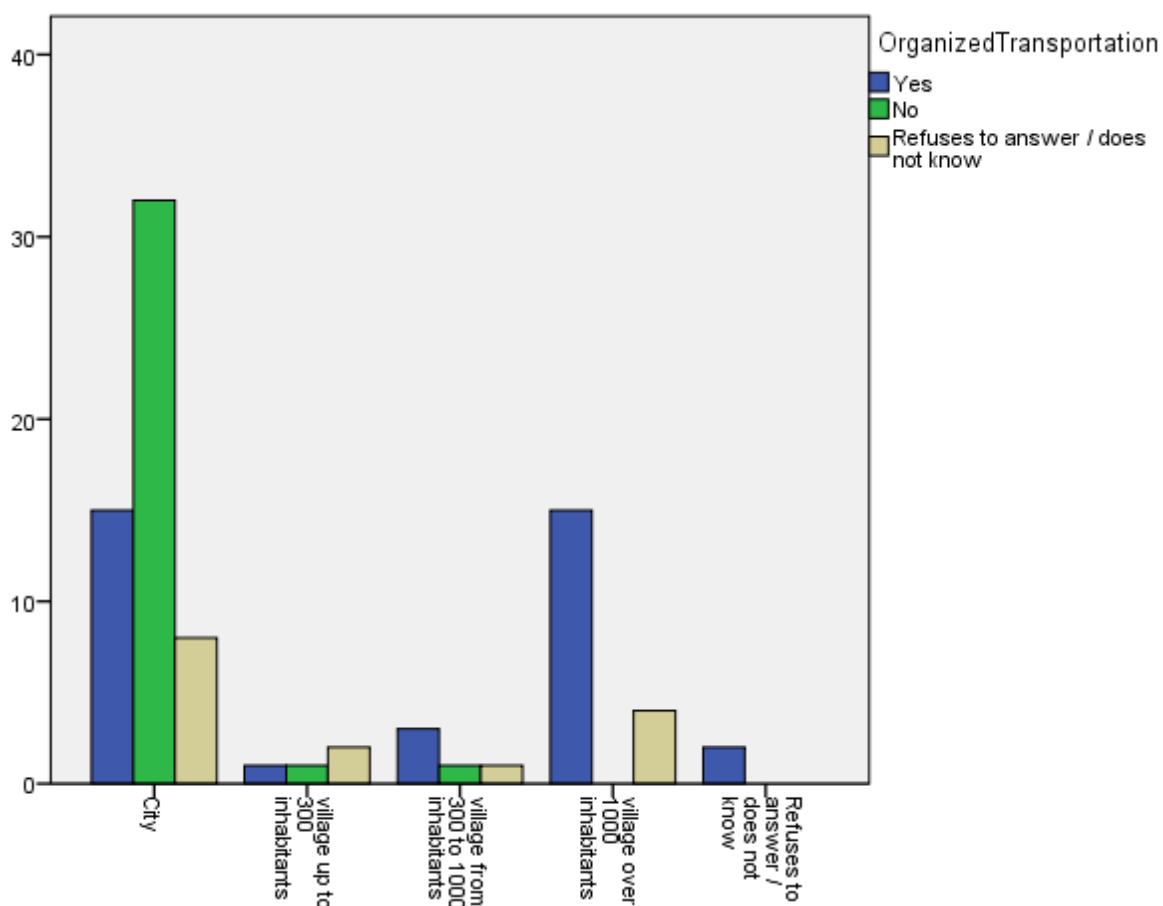


Figure 53

Adults with disabilities in the largest percentage need food packages and financial support to buy drugs. In the table 26 has a positive answer regarding the need for accommodation in an institution with 13.8%. This is a result of the fact that this research also included persons who are beneficiaries of the Institute for Protection and Rehabilitation Banja Banskó (table 26).

Table 26. Do you have need from the following services (presented positive answers)

1. Accommodation in an institution that provides care for people with disabilities 13,8%
2. Group home (to share an apartment or house with several people with the same or similar disability as yours) 3,8%
3. Day care center 7,5%
4. Visit from a social worker so that you can inform the municipality about your problems 36,2%
5. Retraining program so you can get a job or find a better job 32%
6. Wash clothes once a week 12,8
7. Help with food packages 48,4%
8. Financial assistance for medicines 54,6%

From the table 27 it can be concluded that the needs of the parents / guardians of persons with disabilities are similar to those of adults.

TABLE 27 DO YOU HAVE NEED FROM THE FOLLOWING SERVICES (PRESENTED POSITIVE ANSWERS)

1.	Accommodation in an institution that provides care for people with disabilities	0%
2.	Group home (to share an apartment or house with several people with the same or similar disability as yours)	0%
3.	Day care center	16%
4.	Visit from a social worker so that you can inform the municipality about your problems	47,1%
5.	Retraining program so you can get a job or find a better job	12%
6.	Wash clothes once a week	34,7%
7.	Help with food packages	42,6%
8.	Financial assistance for medicines	37,9%

Adults with disabilities and parents / guardians of children with disabilities were asked about the degree of accessibility of significant facilities and areas in the city, in terms of their disability, ie the disability of their child. There are no major deviations in the answers regarding the facilities, ie the Center for Social Affairs, the municipal bracket, a number of regional departments of ministries and other administrative bodies, the hospital, the Cultural Center, schools / kindergartens are evaluated as inaccessible by persons with physical disabilities and the blind and visually impaired. The park and market are assessed as only partially accessible. Within this research there is a special section that provides a visual overview of the accessibility of all public buildings in the municipality.

16% of parents / guardians of children with disabilities answered that their child attends a sensory room and all of them answered that they are very satisfied with this service. During the focus group discussion with local stakeholders, it was emphasized that there is a need to open a new sensory room in the municipality and that teachers need to receive training on how to use the visual aids in the sensory room. They emphasized that the trainings are very expensive and if the teaching staff does not know how to use them, the room can be turned into an ordinary room with toys. During the discussion, the parents pointed out that they need to have a place where they will take their child after school, but that place should be in the form of a sensory room.

68 % of parents / guardians of children with disabilities answered that their children attend regular school and 20% that their child does not attend school. 4% that their child is in a rehabilitation center and attends school there.

More than 1/3 of the parents / guardians of children with disabilities answered that their child has an educational assistant and are very satisfied with it, 12% that they are partially satisfied, 16% that they do not need an educational assistant and even 36% answered that they need , but were not informed about this type of service.

86% of parents / guardians answered that for the child need to adjust the curriculum and only one parent answered that they need to increase the font size in the books to be able to read better. The fact that the parents / guardians do not have enough knowledge about the models for appropriate adjustment in the educational process is worrying, although they were given several answers, such as:

1. To set up an accessible frame in the school

2. To individualize the teaching, ie to adapt the subject programs to his/her needs
3. Copy books in larger format
4. Use a reading magnifier
5. Using a large computer screen
6. Audio books

Conclusions:

- A small percentage use the Day Care Center and a large percentage are unaware that such a center exists. 1/3 are used by social clubs and are mostly used by deaf people and people with physical disabilities;
- More than half need organized transportation;
- Most of the public facilities are assessed as inaccessible and only a part as partially accessible for people with physical disabilities and the blind;
- Most of the children are included in the regular education and half of them have an educational assistant and about 30% of the parents are not aware of this service;
- About 90% of the respondents answered that from the models of adaptation in the educational process, they mostly need individualization of the subject programs.

Recommendations:

- The Ministry of Labor and Social Policy to increase the number of employees in the Day Care Center for Persons with Disabilities and to be able to create groups according to the type of disability;
- The local stakeholders to open a social club, which will include people who will stop using the services of the Day Care Center for Persons with Disabilities and to have a function for daily care and socialization of people with disabilities;
- The local stakeholders to open a social club for recreation and socializing with people with disabilities;
- The local stakeholders to provide conditions for an appropriate vehicle for transport of persons in wheelchairs to the most visited places by them;
- The Ministry of Education and Science to assist in the process of preparing more effective individual programs for children with disabilities;
- The Ministry of Education and Science to take measures to increase the number of educational assistants.

Discrimination - risk factor

Respondents were asked *Do the law and the state protect you from discrimination?* Only 36% of them answered positively (figure 55). This is a worrying fact, given that disability is one of the protected grounds of discrimination in the Law on Prevention and Protection against Discrimination. Additionally, since this question was asked to both adults with disabilities and parents / children with disabilities and was processed

at the level of a complete sample (adults with disability and parents / guardians), this data is additionally worrying. The Law on Prevention and Protection against Discrimination also prohibits the form of discrimination by association, ie, a person close to the person who is related to the grounds of discrimination is discriminated against. In this case, the parents are discriminated against in the form of association because their child has a disability.

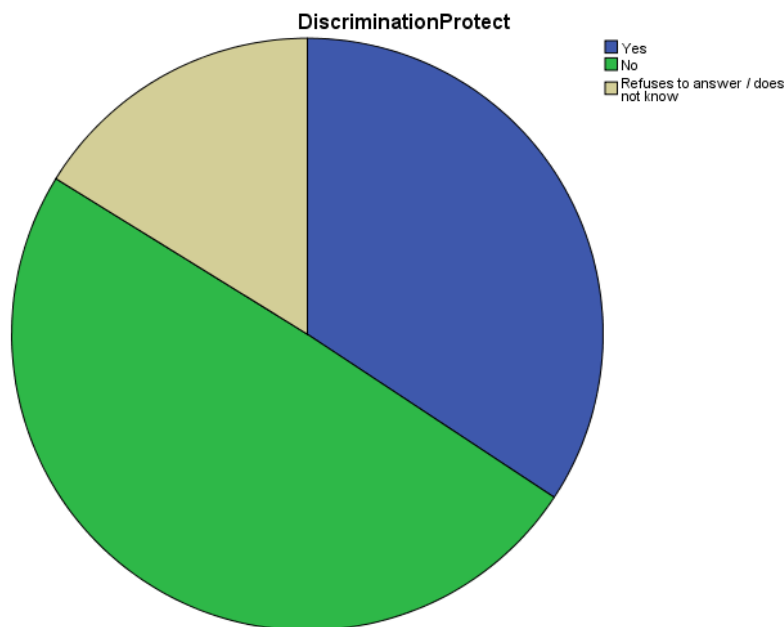


Figure 54

Only 28% of the respondents answered that the rights of persons with disabilities are respected in the country. This is another indicator of the feeling of exclusion from the enjoyment of human rights and the use of the benefits of the rule of law.

Approximately half of the respondents (48%) answered that they had felt discriminated against in the last 12 months. No gender difference was found in relation to the answers to this question.

From the data below in table 28, it can be concluded that about 1/3 of the respondents were discriminated against in certain areas, where public services are provided and it can be concluded that there are no large percentage differences in terms of the type of service. They were least discriminated against in a bank, shop and cultural center.

Table 28 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	4.8	26.7	36.2	2.4
2.	When applying for a job	5.7	15.2	45.7	33.3
3.	In the ambulance / hospita	4.8	29.5	59.0	6.7
4.	In a store or bank	3.8	23.8	66.7	5.7
5.	In the center of culture	2.9	11.4	66.7	19.0
6.	At school / faculty	3.8	23.8	48.6	23.8
7.	In public transport	6.7	22.9	58.1	12.4
8.	By employees in the municipal or state administration	6.7	22.9	58.1	12.4

Conclusions:

- Over 70% of the respondents do not believe in the mechanisms for protection against discrimination, and such a percentage think that the rights of persons with disabilities are not respected;
- More than half felt discriminated against, and the least were discriminated against in a store and a bank.

The most excluded are persons with disabilities in receiving health services

Recommendations:

- the Commission for Prevention and Protection against Discrimination to raise awareness at the local level about the need to report cases of discrimination;
- The municipality to intensify the work of the local body for protection against discrimination in order to raise the awareness about discrimination;
- The State Labor Inspectorate to carry out more intensive controls to determine discrimination against persons with disabilities in the workplace.

Governance- risk factor

Awareness of political developments and interest in the decision-making process is an indicator that there is potential among citizens to participate in the decision-making process and show some proactivity. All respondents were asked for following a daily policy and a result was obtained, which shows that 1/3 follow daily, 1/3 do not follow at all and 1/3 follow occasionally.

All respondents were asked *At the local level, have any policies been adopted at the local level in the last 3 years that are of interest to person with disabilities?* , and this question was answered positively by about half of the respondents and 20% answered negatively

Respondents were asked "Have you taken any action to protect your interests?", Having the opportunity to choose more than one answer if they have taken more than one activity. Below is a table 29 with distribution of single and combined answers and it can be concluded that 1/3 of the citizens undertook some activity, 1/4 the citizens undertook more than one activity and the meeting with the mayor dominates the most as an activity.

Table 29	No	of	(%)
	respondents		
I met with the Member of Parliament from my city	1		1.0
I met with the members of the municipal council	1		1.0
I met with the mayor	5		4.8
I signed a petition.	3		2.9
I did not take anything.	36		34.3
Refuses to answer / does not know.	34		32.4
I met with the members of the municipal council and met with the mayor	9		8.6
I met with the mayor and participated in protest	4		3.8
I wrote a letter to the municipality and participated in a protest.	3		2.9

I signed a petition and I did not take anything.	1	1.0
I met with the Member of Parliament from my city and members of the municipal council and president of the Council	1	1.0
I met with the members of the municipal council and met with the mayor and wrote a letter to the municipality.	1	1.0
I met with the members of the municipal council and met with the mayor and participated in protest	1	1.0
I met with the president of the Council of the municipality and with the mayor and participated in a protest	1	1.0
I met with the Member of Parliament and the members of the mun. council and the president of the Council and the mayor	1	1.0
I met with the Member of Parliament from my city and mayor and wrote letter and signed a petition	2	1.9
Everything except participation in a protest	1	1.0
Total	105	100.0

The respondents were asked a question that also refers to the capacity of the civil society, ie they were asked *Whether the organizations of persons with disabilities (unions of persons with disabilities) protect the interests of persons with disabilities in your municipality?*, while 75% answered that they have confidence in the work of the organizations.

Adults with disabilities were asked Which rights were most violated? , and the answers are dominated by the right to employment, the right to additional training and the right to health care. More than half of the parents / guardians of children with disabilities answered that the children rights were violated in the educational process. Most of the children have a problem with the inadequate adaptation to the conditions in the school and the inability of the child to choose the type of his/her education, ie professional guidance.

The table 30 shows the results of the question *Which social protection rights do you use or have you used?* This question was answered by adults with disabilities and they had the opportunity to choose more than one answer and it can be concluded that the service is dominated by social financial assistance and compensation for assistance and care from another person, as the most used service.

Table 30	No of respondents	(%)
social financial assistance	1	1.3
social financial assistance and compensation for assistance and care from another person	2	2.5
permanent financial assistance	1	1.3
compensation for assistance and care from another person	25	31.3
one-time financial assistance and assistance in kind	2	2.5
Compensation for part-time salary due to care of a child with physical or mental disabilities	1	1.3

deafness compensation	7	8.8
organized living with support	3	3.8
one-time financial assistance and assistance in kind, deafness compensation	3	3.8
Refuse to answer	24	30.0
one-time financial assistance and assistance in kind, organized living with support	3	3.8
financial assistance for social housing, accommodation in a small group home	1	1.3
social financial assistance, compensation for assistance and care from another person, organized living with support	1	1.3
social financial assistance, one-time financial assistance, organized living with support	2	2.5
permanent financial ass., compensation for ass. and care from another person, assistance for the blind and mobility	3	3.8
Assistance and care from another person, one-time financial ass., ass. for the blind and mobility, organized living	1	1.3
Total	80	100.0

The mayor has regular meetings at least once a month with representatives of organizations of persons with disabilities and users of group homes and persons with disabilities are regularly invited to community forums. The adults with disability, participants at the focus group, they pointed out as a big problem the lack of interest of the political parties to place the persons with disabilities in one of the higher places on the candidate list so that they can become part of the municipal council.

Conclusions:

- People with disabilities and parents / guardians of children with disabilities are well informed about the policy. Half of them estimate that local authorities create positive policies for them;
- More than 1/3 took some activity to protect their interest and most of all they did it through a meeting with the mayor;
- There is great trust in organizations for the rights of persons with disabilities in the protection of their rights;
- Adults point out that the right to employment and retraining is most endangered, and children the right to access schools;
- No person with a disability was a councilor in the municipal council and was not a member of the governing body of a local organization of a political party in the municipality.

The biggest exclusion is the disrespect of the employment rights of adults with disabilities

Recommendations:

- The municipality to improve the process of informing about the activities it undertakes for people with disabilities and about the opportunities available to them in the field of social protection, employment, housing, education, health care and transportation;
- The Ministry of Labor and Social Policy to provide an integrated database of information on the rights and services of persons with disabilities in all areas. This information should be accessible and easily understood by all categories of persons with disabilities;
- The Ministry of Justice to consider the possibilities for amendments to the Electoral Code so that there can be a quota model for representation of persons with disabilities on the lists of candidates for councilors, similar to the gender concept, so that there can be greater representation of persons with disabilities in The municipal council;
- The municipality, together with other local stakeholders, to prepare a database for persons with disabilities so that the necessary services can be directed in a timely and appropriate manner and local measures can be created.

Shocks from Covid- 19- risk factor

In the period before the preparation of the questionnaire and during the realization of this research, the problem with the pandemic had a significant impact on everyday life. People with physical disabilities and low vision, even in normal conditions, have limited movement and reduced opportunities for communication. People with intellectual disabilities often do not have opportunities for socializing and regular socialization. Children with disabilities also usually have opportunities for contact with their peers. During the pandemic, these categories were much more affected in terms of reduced communication with others. In addition, they are at significantly higher economic risk than other categories of citizens and therefore felt much more the consequences of the pandemic. In support of this statement are the answers expressed in percentages that they agree with the offered answer.

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

1. I do not look out of the house like before 79%
2. As a risk category, I isolated myself in my home. 70%
3. The pandemic did not have a strong effect on me and my mental health. 53%
4. I lost contact with all close relatives and friends. 50%
5. I miss my loved ones. 61%
6. I need disinfection help to protect myself. 36.2%
7. I spend a lot more (for gel, gloves and masks). 46.7%
8. The virus has worn me out financially. 57%
9. The pension / salary is not enough in a pandemic. 75%
10. I need help from the municipality to procure means of protection (masks, gel, visor, etc.). 34%

Only about 20% of respondents said they received some financial support during the pandemic, which is a very low percentage, given that this category of citizens are at increased risk (figure 56).

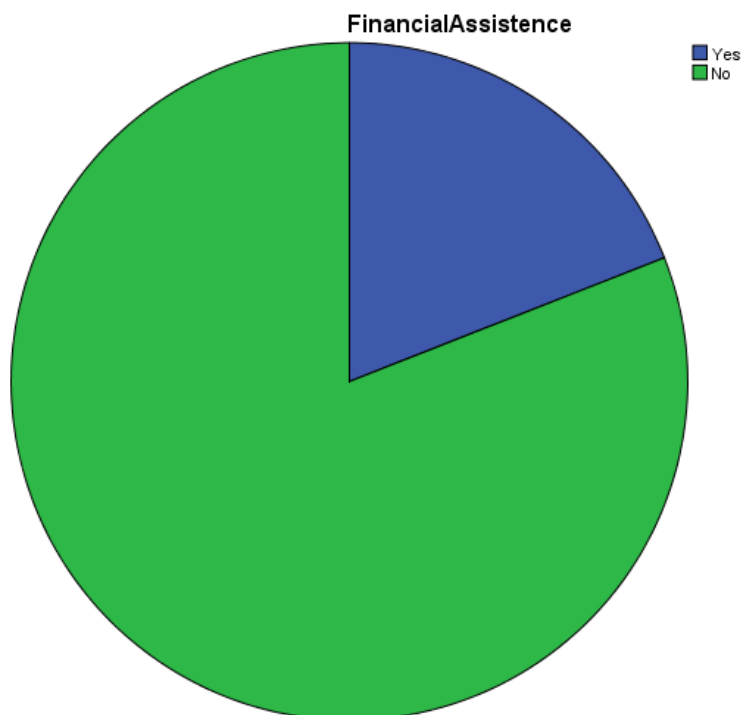


Figure 55

Of those who received assistance, the largest percentage received from the state, through measures, which were provided to support certain categories of citizens. The offered answers to this question were: the State, the Municipality, the Association of Pensioners / Association of Persons with Disabilities, the Center for Social Work, the Red Cross, the Church (or other religious organization) and the NGO. From the table below, it can be concluded that there is a lack of greater involvement of the municipality, religious communities and civil society in providing support.

The state	55.0%
The Center for Social Work.	40.0%
The Red Cross.	5.0%
Total	100.0

As the pandemic forced more intensive use of new technologies, respondents were asked if they needed to use devices and certain communication tools. About 15% need training to use mobile phone, Facebook, Viber, Internet and tablet and 10% use computer. Given that the age structure of the respondents are middle-aged people, it can be concluded that a large percentage of those who need this type of support.

Conclusions:

- Many people with disabilities have reduced contact with loved ones and this affects the reduced opportunity for support from loved ones;

- Closing jobs and increasing costs to prevent or treat the effects of the virus have reduced the standard of living for people with disabilities;
- A small percentage of people have received financial and material support and that support is in the largest percentage of the state budget;
- • About 15% of respondents need training in the use of IT technology to facilitate communication with other people.

The most excluded group are the unemployed and low-income people and those living alone

Recommendations:

-
- The local stakeholders to create measures to raise funds from donors and other sources of funding to create a fund to support the most vulnerable category of people with disabilities in conditions of shocks;
- Civil society over communities to have greater social engagement and to be involved in providing social support to people with disabilities in times of shock;
- The local stakeholders to create measures for training of certain categories of persons with disabilities for the use of IT technologies for more efficient integration and good communication.

15. Focus group analysis - _____

Focus group with representatives of institutions: Problems and needs of persons with disabilities according to representatives of institutions

Present: representatives from the Employment Center, the Center for Social Affairs, the Municipality of Strumica, the Daily Center for Persons with Disabilities and special educators from the schools.

Employment

- Active measures are implemented by the institutions for support of persons with disabilities. The institutions cooperate with the employers, mediate with the companies and from the disability of the person it is determined whether he / she is able to work for a specific job;
- People with mental disabilities have the biggest problems finding a job;
- The person goes to training with other employees in order to be trained and adjusted for the job. The referral determines the work tasks that the person with a disability can perform and so far the institutions have not noticed any abuse, ie to be given to the persons with a disability and some other work tasks that they could not perform. The Employment Agency has a program for additional training and retraining, there is training, but there are no specialized programs for people with disabilities;
- Institutions conduct regular monitoring and have not noticed abuses in the workplaces of persons with disabilities. So far, there are no reports of non-compliance with the employment rights of persons with disabilities;

- Parents of children with disabilities can work up to 20 hours per week;
- There are good links between the agency and people with disabilities looking for work. People with disabilities are not only employed in protection companies.

Social protection

- The Center for Social Affairs is not accessible for people with disabilities. The counter is accessible, but it is not intimate for the client to be able to express his/her problems. The offices are also not accessible, they are small, and there is no intimacy because there are more people in them. Special offices are needed;
- The allowance for people with disabilities is very low;
- In Strumica there is a Commission that decides on help and care from another person, but rarely can determine a permanent finding for a person with a disability, and there are people who have a physical or other disability that is immutable and incurable, and the commission gives 6 months or 1 year validity of care/help. The same is true for the disability allowance, and the Commission is in Skopje, and thus the persons with disabilities and their relatives are mistreated. The law stipulates that the allowance is up to 65 years and constitutes discrimination on the basis of age. There are people who refuse them compensation because the degree of disability is not enough and they usually give them control for about 6 months;
- There are also problems with personal assistants (the person must have the most severe disability and the age limit has been lowered), most children with severe disabilities reject them because they must have the most severe disability;

Case: a 20-year-old person with a disability is not categorized, but has autism, because his parent died and he lost his parents, in order to be categorized and receive an allowance, his legal ability must be taken away and he must have it guardianship The Center for Social Affairs, and the person is fully legally capable, because the law says that it is paid to the parent or guardian, and the child is left without parents and is 20 years old.

- Because up to 26 years of age the disability benefit is paid to their parent or guardian, there are situations where the person with the disability is married and the benefit is taken by the parent, even though it is intended for the child's needs;
- The most common disabilities are physical and intellectual. Other people's care does not follow the deaf and they are in a way disenfranchised;
- The personal assistant can be used as a service only by the blind and the persons with the most severe and severe disability; There are no criteria by which it can be determined whether it is a severe or the most severe disability (there are two findings with the same diagnosis, one enters severe and the other the most severe). The municipality finances personal assistants for this school year. There is a long wait for the ICF to assess categorization findings. It can be estimated at about 3-4 people per day; In the premises of the school Sando Masev there is a Regional body for ICF assessment - Strumica. The personal assistants have organized training by the Red Cross which is more general, but the emphasis is on blindness and the most severe physical

disability, the training is 80 hours per month, where 1 hour is 260 denars. Regarding the acquisition of the right to personal assistance, people with intellectual disabilities are quite discriminated against here, and they find it most difficult to function independently. People with autism and pervasive disorders are not involved in anything, do not enjoy any benefits;

- The most marginalized are those persons with disabilities who receive compensation for social risk, guaranteed social assistance, other care, receive one-time assistance for medication, treatment, examinations in Skopje, for operations, etc. People from the villages have problems because they are at social risk and can hardly exercise their rights. There is a person who has been deprived of legal capacity and lives alone, the guardian takes care of him but is at social risk;
- Until now, there have been no problems regarding the exercise of parental rights and marriage with persons with disabilities;
- There are cases where children with disabilities are abandoned by their parents due to their disability;
- The Day Center is used by 13 people, there is no age limit, there is no defined who and how can use the Day Center, now all of them have intellectual disabilities. People stay in the Center from 8 am to 2 pm. The Center needs a larger number of employees, it needs more space and different categories of users;
- Staffing of the Day Care Center for Persons with Disabilities is required.

Education

- There are not enough educational and personal assistants and there are a large number of children with disabilities. Personal assistants receive a lower salary because they receive a salary from the municipality as a contractual activity and they fill the lack of educational assistants;
- Some street schools do not have a special educator and rehabilitator. There is not enough speech therapists, there is only one in Strumica.
- Educational assistance services are usually provided to those more difficult cases where the need is clearly visible, although the number of children with disabilities, especially those with learning difficulties is very large, but there is not enough staff;
- Also a large number of children are with disability but never reach the ICF;
- The educational assistant is a member of the student inclusive team, attends regular education, teaching and extracurricular activities;
- In Strumica there are no full-time classes for the child to be able to stay in school for a longer period of time, nor are there any activities planned for the children after school. During the pandemic period, full-time classes were closed, but will be re-activate from September this year;
- Resource centers need to be closer, here the resource center is Kliment Ohridski in Novo Selo. For any treatment, speech therapist, special educator, etc., parents should travel to Novo Selo. privately;

- Greater communication is needed between kindergartens, primary and secondary schools for early detection of children with disabilities. Some parents are aware that the child has a certain disability but do not accept it. Some parents have unrealistic expectations of children with disabilities;
- Some children do not have a disability, they are neglected as they grow up, so it may happen that they seem to have a certain disability;

Case: The child in grade 1 was considered to have an autistic spectrum, but it was found that the child was neglected in all areas, and thanks to the school team the child in grade 3 was functioning normally like all children his age;

- There is a problem with accessibility to schools (no elevators, many stairs, narrow corridors). The school pays for organized transportation of children with disabilities from a special account (about 2000-3000 euros are allocated for that per year), although this is required by law and they need to be covered from the state budget. Greater financial support is needed for schools. There is no adequate space for work (cabinets in which work is cramped, not accessible to children, not adapted);
- Appropriate training is required to work in the Sensory Room. The training is very expensive, it needs to be free. A room without staff training is like taking your child to a playroom. The equipment in the Sensory Room was obtained through the Step by Step Foundation;
- There are no appropriate conditions for independence and employment of persons with disabilities.

Focus group with adults with disabilities and parents of children with disabilities: Problems and needs of people with disabilities according to the persons with disabilities themselves and parents of children with disabilities

- There are no complete statistics on all persons with disabilities. At the census, the questionnaire included a question about people with disabilities, but was not asked by the enumerators;
- There is a problem with scheduling appointments for review of mobility assessment findings, deadlines are delayed, the procedure is very long, the service itself is spontaneous, they have no fear of the law;
- There are parking lots for the disabled, but the citizens do not respect that, nor do the services take any action in this regard.
- Problem with mobility assessment finding - if you submit 65 years ago, you can use it for life, but after 65 years if you submit you can not (some changes with MLSP). There are not enough terms to assess mobility;

Problems and needs in relation to labor market

- There is a proposal to amend the Law on Employment of Persons with Disabilities (to abolish all subsidies for employers who employ persons with disabilities). If these changes occur, the employment rate of persons with disabilities will decrease;

- The law stipulates that persons with disabilities who are employed by an employer have the right to a length of service, and persons with disabilities who are self-employed because they do not have an employer cannot exercise this right. Employers do not pay beneficial length of service;
- The state is late with the refund of the funds for exemption of contributions for pension and disability insurance, personal tax, health insurance;
- Buildings need to be built in ways that are accessible to people with disabilities. Adapted toilets are required;
- RH Center had a project through the Swiss Embassy related to the Employment Agency, conducting individual and professional assessment of persons with disabilities, which to some extent enables them to work. People with disabilities are always on the minimum wage. They are rarely employed in the public sector. Do not have the opportunity for career advancement;
- There are cases of fictitious employment, ie the person is employed as a disabled person sitting at home and keeps part of the minimum wage and gives part to the employer. After the expiration of 3 years from the establishment of the employment, the employer has the right to dismiss the person with a disability, and in the next 5 years he/she can not use the benefits from the state in employment, so no one will hire him;
- Unions have more benefits than civic associations. In 2024 the state plans to abolish alliances (that would be good in more developed societies but not here, we are not prepared as a society), if the alliances are left without state subsidies they will have no finances;

Education

- There are no individual programs for the children, the Personal Assistant, who is paid by the municipality, can not be inside the classroom and is out of class, and the child needs an educational assistant. It is necessary for the teaching staff to have greater cooperation with children with disabilities;
- The parent cannot work due to child care. A personal assistant is needed for the home. Kangaroo system required (family care leave);
- Education can go a long way in finding a better job. There are opposing views regarding the need for special classes, some believe that there is a need, part that there is not because children should be included. We have not developed an awareness of inclusion;
- About 10% of the population are people with disabilities, and none of them is placed in some positions such as doctor, politician, professor and the like. It is necessary to discover their talents and advance in those areas. There are examples in the world of a person with a complete disability driving a truck. The state should be more involved in the education and progress of children with disabilities;
- In the past, people with disabilities were more excluded from the community, but there is still a phenomenon that is particularly pronounced in the villages;

- A person with a disability must go somewhere by taxi, where for example a person without a disability could go without a vehicle and therefore people with a disability have additional costs. In the past, to get an electric wheelchair, you only needed to be employed, and now you have to be either up to 18 years old (if you are a student up to 26 years old) or over 64 years old. For those disabilities that are not changeable and permanent, it is necessary to issue a Permanent Finding in order to be able to exercise social rights.

Health

- The members of the Commission for Care and Disability should be elected in accordance with the disability itself, a gynecologist and not an orthopedist can appear as a member during the examination of a person with a physical disability;
- There is only one orthopedic house, and they do not have modern orthopedic devices. The fund covers only older devices, and to cover a modern device, such as a silicone foot prosthesis, the doctor needs to determine that the person is very active and here we have relativization which is a very active person;
- Women with disabilities do not have access to a gynecologist everywhere;
- Certain categories of disability go through rehabilitation through the Fund, and some do not, and some of them need it;
- There is no waiting chair in front of the orthopedic clinic, which is a problem especially for people with physical disabilities.

Transport

- There are no suitable buses for people with disabilities;
- Electric strollers are needed;

Politics

- On the parliamentary lists, when there is a person with a disability, they usually become at the end of the list where it is impossible to be elected;
- There is no person with a disability in the leadership of the parties at the local level;













16. Conclusions and Recommendations

Socio- economic status- risk factor

Conclusions:

- More than half of adults with disabilities do not have a spouse or partner and this reduces the possibility of care;
Less than ¼ of the parents / guardians of children with disabilities are unmarried and this increases the parent's burden of caring for the child;
- There is a poor educational structure among people with disabilities, low employment rates and low job seekers. Less than half of parents / guardians are employed and only 20% of the unemployed are looking for work;
- 40% of the respondents earned income last month, 1/3 based on salary and 1/3 less than 12,000 denars. From the adults with disabilities ¼ live alone and half of the adults with disabilities and parents / guardians can not cover the costs of basic subsistence needs;
- 13% have sometime problems with access to drinking water, 10% in the last month at least once were hungry and could not afford a meal, and about ¼ of the respondents can not buy meat, pay for utilities and buy medicine. These

indicators are the basis for concluding that about 25% of people with disabilities live in extreme poverty.

The research showed that the most excluded from the aspect of the risk factor socio-economic status are the single parents / guardians of a child with disability.

Recommendations:

- The local stakeholders and the state to take measures that should provide support to single-parent families of children with disabilities;
- Greater openness of universities for people with disabilities, in order to increase the percentage of highly educated people;
- The to find opportunities for providing scholarships for high school students and university students with disabilities;
- The Employment Agency to develop training programs, which will contribute to additional training and retraining of persons with disabilities;
- The Employment Agency to develop measures to encourage the employment of persons with disabilities;
- The State Labor Inspectorate to have more intensive activities in the control of the abuse of persons with disabilities by employers;
- The Ministry of Labor and Social Policy to develop measures for greater coverage of persons with disabilities in the public sector;
- The municipality to provide greater opportunities for care of children with disabilities in kindergartens and to create opportunities for opportunities for child care after school, so that conditions can be provided for a higher percentage of employment of parents / guardians of children with disability;
- The municipality and the Ministry of Labor and Social Policy to undertake activities for registration of persons with disabilities living in extreme poverty and to create measures for elimination of periodic hunger and deprivation of the possibility of heat in the home;
- The local stakeholders should develop a program to support people with disabilities living in poverty, so that they can buy medicines that are not covered by the Health Insurance Fund.

Geography- risk factor

Conclusions:

- About 40% of respondents have problems with the accessibility of their homes;
- About 40% of people with disabilities are owners of their homes and there is no gender difference;
- In general, people with disabilities do not have problems with living conditions.

Research has shown that people in wheelchairs and people with severe disabilities are most excluded in terms of risk factor geography.

Recommendations:

- The municipality to provide measures for financial support for the installation of an elevator in the buildings for collective housing, where a person in a wheelchair lives;
- The municipality to provide measures for financial support for the adaptation of the facilities for individual and residential housing, in which a person with physical disability lives;
- The municipality to provide measures for providing affordable housing for persons with disabilities, who have exercised the right to social housing.

Health services

Conclusions:

- 1/3 of people with disabilities are completely or partially paralyzed and they are the people who have the greatest need for social support;
- More than 20% of adults with disabilities have poor or very poor health and 27% have their disability from birth.
- Most of the respondents feel safe, have good relations with their loved ones, are satisfied with the attitude of the health workers, but do not have the support from the community;
- Some of the respondents have a problem to get specialist examinations, especially those who live in the village, mostly because of the price of the service or because that service is not available in their municipality;
- 64% of adults with disabilities need mobility assistance. More than half of the adults have a problem to go to the ambulance;
- Only about 10% of adults have received all health services and they miss the patronage service the most. About half of the parents also answered that they did not receive all the health services.
- The majority of adults need a smart blood pressure monitor and task reminder and memory devices.

Recommendations:

- The local stakeholders should provide transport to health facilities to people with disabilities who have problems with the movement, with special attention to the inhabitants of rural area;
- The Health Insurance Fund to facilitate the procedures for categorization of persons with disabilities, obtaining certain rights and providing more appropriate free aids;
- The local stakeholders to provide a fund to subsidize certain specialist examinations for people with disabilities who have problems paying the co-payment.

Home services

Conclusions:

- Only about 15% of adults do not have care from anyone and $\frac{3}{4}$ parents take care of their child on their own and in more than half of the parents, child care was the reason for being unemployed;
- More than half need help with certain household activities and their loved ones help them the most;
- A small percentage used a personal assistant but almost everyone is satisfied with that service, and some of the respondents had never heard of this service.

Recommendations:

- The local stakeholders to create mechanisms for child care after school for children of school age and once again reiterates the recommendation to take measures for greater coverage of children in kindergartens;
- It is recommended to Ministry of labor and Social Policy to hire special educators in kindergartens for early detection of disability and more efficient inclusion of preschool children;
- The local stakeholders to create measures for help in the home for adults with disabilities for whom this service is most needed, especially people completely or partially paralyzed, people with intellectual disabilities and blind people.
- The municipality to create measures for hiring a large number of personal assistants, who will help people who do not have the right to use this service in accordance with the law, and have a real need.
- The Ministry of Labor and Social Policy to initiate amendments to the Law on Social Protection and to extend the personal assistance service to persons with intellectual disabilities and persons with a high percentage of disability and to expand the range of persons who will be able to use the right of the disabled, including the visually impaired who have less than 98% visual impairment and persons with intellectual disa

Local community services

Conclusions:

- A small percentage use the Day Care Center and a large percentage are unaware that such a center exists. 1/3 are used by social clubs and are mostly used by deaf people and people with physical disabilities;
- More than half need organized transportation;
- Most of the public facilities are assessed as inaccessible and only a part as partially accessible for people with physical disabilities and the blind;
- Most of the children are included in the regular education and half of them have an educational assistant and about 30% of the parents are not aware of this service;
- About 90% of the respondents answered that from the models of adaptation in the educational process, they mostly need individualization of the subject programs.

Recommendations:

- The Ministry of Labor and Social Policy to increase the number of employees in the Day Care Center for Persons with Disabilities and to be able to create groups according to the type of disability;
- The local stakeholders to open a social club, which will include people who will stop using the services of the Day Care Center for Persons with Disabilities and to have a function for daily care and socialization of people with disabilities;
- The local stakeholders to open a social club for recreation and socializing with people with disabilities;
- The local stakeholders to provide conditions for an appropriate vehicle for transport of persons in wheelchairs to the most visited places by them;
- The Ministry of Education and Science to assist in the process of preparing more effective individual programs for children with disabilities;
- The Ministry of Education and Science to take measures to increase the number of educational assistants.

Recommendation for partnerships:

- 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 capacities of the kindergartens (spatial and human resources) in order to increase the inclusion of children with disabilities;
- Establishing 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;
- Establishing partnerships between the municipality / NGO / institutions / private sector in order to establish sensory rooms in schools and especially to provide training for sensory educators;
- Identification of potential local NGOs (associations of persons with disabilities) that may emerge as future providers of other services at the local level.
- Representatives of citizens' associations representing persons with disabilities to be involved in local crisis headquarters.

Discrimination- risk factor

Conclusions:

- Over 70% of the respondents do not believe in the mechanisms for protection against discrimination, and such a percentage think that the rights of persons with disabilities are not respected;
- More than half felt discriminated against, and the least were discriminated against in a store and a bank.

The most excluded are persons with disabilities in receiving health services

Recommendations:

- the Commission for Prevention and Protection against Discrimination to raise awareness at the local level about the need to report cases of discrimination;
- The municipality to intensify the work of the local body for protection against discrimination in order to raise the awareness about discrimination;
- The State Labor Inspectorate to carry out more intensive controls to determine discrimination against persons with disabilities in the workplace.

Governance- risk factor

Conclusions:

- People with disabilities and parents / guardians of children with disabilities are well informed about the policy. Half of them estimate that local authorities create positive policies for them;
- More than 1/3 took some activity to protect their interest and most of all they did it through a meeting with the mayor;
- There is great trust in organizations for the rights of persons with disabilities in the protection of their rights;
- Adults point out that the right to employment and retraining is most endangered, and children the right to access schools;
- No person with a disability was a councilor in the municipal council and was not a member of the governing body of a local organization of a political party in the municipality.

The biggest exclusion is the disrespect of the employment rights of adults with disabilities

Recommendations:

- The municipality to improve the process of informing about the activities it undertakes for people with disabilities and about the opportunities available to them in the field of social protection, employment, housing, education, health care and transportation;
- The Ministry of Labor and Social Policy to provide an integrated database of information on the rights and services of persons with disabilities in all areas. This information should be accessible and easily understood by all categories of persons with disabilities;
- The Ministry of Justice to consider the possibilities for amendments to the Electoral Code so that there can be a quota model for representation of persons with disabilities on the lists of candidates for councilors, similar to the gender concept, so that there can be greater representation of persons with disabilities in The municipal council;
- The municipality, together with other local stakeholders, to prepare a database for persons with disabilities so that the necessary services can be directed in a timely and appropriate manner and local measures can be created.

Covid 19- risk factor

Conclusions:

- Many people with disabilities have reduced contact with loved ones and this affects the reduced opportunity for support from loved ones;
- Closing jobs and increasing costs to prevent or treat the effects of the virus have reduced the standard of living for people with disabilities;
- A small percentage of people have received financial and material support and that support is in the largest percentage of the state budget;
- • About 15% of respondents need training in the use of IT technology to facilitate communication with other people.

The most excluded group are the unemployed and low-income people and those living alone

Recommendations:

- The local stakeholders to create measures to raise funds from donors and other sources of funding to create a fund to support the most vulnerable category of people with disabilities in conditions of shocks;
- Civil society /ver communities to have greater social engagement and to be involved in providing social support to people with disabilities in times of shock;
- The local stakeholders to create measures for training of certain categories of persons with disabilities for the use of IT technologies for more efficient integration and good communication.

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>				
13% have problems with access to drinking water, 10% in the past month at least once were hungry and could not afford a meal, and about ¼ of the respondents can not buy meat and pay for utilities. These indicators are the basis to conclude that about 25% of people with disabilities live in extreme poverty.	Recommendation 1 Take action to record people with disabilities living in extreme poverty and prepare measures in the annual special programs that will help reduce poverty.	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</i>	1.4.1 Proportion of population living in households with access to basic services	Municipality of Strumica

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>technology and financial services, including microfinance</i>		
About 25% of adults with disabilities and parents / guardians of children with disabilities do not have enough funds to buy medicines, for which the Health Insurance Fund does not participate.	<p>Recommendation 2</p> <p>The municipality should develop a program to support people with disabilities living in poverty, so that they can buy medicines that are not covered by the Health Insurance Fund.</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 Strumica
	<p>SDG 4: Quality education: Ensure inclusive and equitable quality education</p>				

	<i>and promote lifelong learning opportunities for all</i>				
Primary and secondary schools are not accessible enough for children with physical and sensory disabilities.	Recommendation 1 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.	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 Strumica
The lack of full-time teaching results in the lack of opportunities for childcare after school, additional work with a special educator and reduced employment of parents / guardians	Recommendation 2 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.	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 Strumica
	SDG 11: Sustainable cities and communities: Make				

	<i>cities and human settlements</i>				
Many adults and children with disabilities do not have access to adequate transportation to the places they need to visit, especially those living in rural areas.	<p>Recommendation 1</p> <p>Providing transportation for adults and children with physical disabilities, combined disabilities, the blind and people with intellectual disabilities, which will help them reach places where they are in urgent need.</p>	High	<p>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</p>	<p>11.2.1 Proportion of population that has convenient access to public transport, by sex, age and persons with disabilities</p>	Municipality of Strumica
Many public areas, including parks, sidewalks and parking are not accessible enough for adults and children with physical disabilities and / or visually impaired people.	<p>Recommendation 2</p> <p>Adaptation of the infrastructure and urban equipment in the municipality</p>	Medium	<p>11.7: By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older</p>	<p>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</p>	Municipality of Strumica

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