



LNOB Social Mapping Report

Municipality of Resen

Liljana Tanevska Arsova for Ekogerila

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Social mapping of children and persons with disabilities and women in agriculture and diversified economic activities in Municipality Resen



Social Mapping Results Report: Social Mapping of the children with disabilities and persons with disabilities, and farmers -women in agriculture and diversified economic activities (including inclusive perceptions of rural population and women) in Municipality Resen

Municipality Resen, Ekogeriła
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LIST OF ABBREVIATIONS

ADEA	Agriculture and diversified activities
CSW	Center for Social Work
KoBo	Free and open-source suite of tools for field data collection
LNOB	Leave No One Behind
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit
GORMN	Government of Republic of North Macedonia
MAFWE	Ministry of Agriculture Forestry and Water Economy
NGO	Non-Governmental Organisation
SEDRA	"Regional Learning for Implementation of Agenda 2030 in the Western Balkans (with particular focus on North Macedonia and Kosovo)", and "Support to Economic Diversification of Rural Areas in Southeast Europe"

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Executive summary

LNOB sensitive social mapping was carried out for the first time in Municipality of Resen. The mapping process was carried out in the frame of Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ), projects "Regional Learning for Implementation of Agenda 2030 in the Western Balkans (with particular focus on North Macedonia and Kosovo)", and "Support to Economic Diversification of Rural Areas in Southeast Europe (SEDRA)", with purpose to identify the LNOB groups in rural area part of cross border region Prespa, and to map the potentials for involvement of LNOB groups in agriculture and diversification activities. Primary intention of the mapping process was to support evidence-based policy making in the framework of municipal social protection strategy with view of LNOB principle as well as identify priority SDGs relevant for Municipality of Resen in the context of Agenda 2030.

The social mapping process was carried out from April to July 2021 by the NGO Ekogerila from Resen and the engaged expert Liljana Tanevska Arsova, in close cooperation and communication with the Municipality of Resen, particularly the Department for Local Economic Development. The preparation process included series of initial consultations, preparation of action plan for quantitative and qualitative data gathering, approval of the action plan, preparation of materials including a survey/ sets of questions (using the SoRill library in Kobo, plus questions of particular interest for Municipality Resen and SEDRA project), translation of the additional questions and adjustments in the Kobo application, provision of trainings for surveyors for usage of Kobo application, implementation of pilot/ test survey on field, series of interviews for confirmation of the hot points related to the target groups.

Once questionnaires were finalised, the survey was carried out on the whole territory of Municipality of Resen. In addition, two focus groups with representatives from relevant institutions and organisations were organised in order to collect qualitative data.

The target groups of the social mapping process were identified through secondary data analyses and series of consultations about municipal and priorities set by the project. The initial target group - Children with disabilities, was identified by municipality and confirmed through initial analyses of vulnerable groups in line with the five LNOB factors. Further analyses of the secondary data confirmed children with disabilities as priority group for the social mapping process. Due to the fact that information and data about the persons with disabilities were also missing, the target group was expanded with the overall number of persons with disabilities giving priority to the children and dependants with disabilities.

Secondary analyses also confirmed that persons and children with disabilities need higher attention within policy making and planning, and limited participation in setting up municipal priorities within social plans. That matched the aim of municipality to identify situation of persons with disabilities, locate them and to assess their inclusion and participation.

Bearing in mind: the rural nature of the municipality where apple growing is dominant source of income for majority of the population, focus of SEDRA and SoRill projects, third target group was identified. It included farmers- both men and women who are involved in agriculture and diversified economic activities in rural areas, such as tourism. The focus for this third target group were women in agriculture and diversified economic activities.

The social mapping process trailed five objectives with different focus including: identification of situation of the three target groups, governance issues and provision of adequate municipal services for children and adult persons with disabilities, assessment of situation of women in agriculture and diversified activities, and possibilities for involvement of persons with disabilities in agriculture and diversification activities. More precisely the objectives of the social mapping process include: Identification and location of the children, dependants and

persons with disabilities on the territory of Municipality Resen; identification of situation of the children and persons with disabilities in regards to challenges they face in their everyday life which are responsibilities of the Municipality Resen like infrastructure, services etc; Identification of level of involvement from persons with disabilities in the agricultural and diversification activities in municipality of Resen. To identify potentials for employability and inclusion of persons with disabilities in the area of agriculture and diversified economic activities (ADEA) in rural areas related to rural development; mapping preparedness of the farmers/ women as potential rural employers to engage the persons with disabilities in family farms; What is the general situation with women in ADEA on municipal level.

The methodology of the social mapping process included: data collection, secondary data analyses, consultations, quantitative research and qualitative data gathering through interviews and focus groups. The identification of children and persons with disabilities included collection of data available on institutional level (centre for social work, health centre, humanitarian response lists), and identification through a snowball method through communities and word of mouth.

The findings from the mapping process indicated that a big portion of persons with disabilities were unreachable and did not want to take part in the survey. The parents and guardians of the children and dependents were more collaborative. The collection of data on the field in some cases required three visits to complete a questionnaire with parents/guardians or persons with disabilities. The collection of data from farmers and women in ADEA went faster, apart from cases where the women were interrupted during the interview by partners and husbands.

The findings from the social mapping compared to the five factors of the LNOB framework indicate that there are needs for improvement in all LNOB specific areas. The findings from the process describe the general situation and position of children and persons with disabilities which indicate that:

- persons with disabilities in municipality of Resen need stronger community recognition and therefore solid local investments that would contribute to satisfaction of their basic needs, such as education, employment and social life.
- there is lack of inclusive local strategy, or structured inclusive local policy which is specifically focused on social inclusion, which is main reason why persons and children with disabilities are left behind
- this social mapping project is first attempt for systematised detection of situation that persons and children with disabilities face in the municipality of Resen which is a first step to improve municipal performance

In addition, the vulnerability of groups identified as left behind (children, dependants and adults with disabilities) is limited opportunities or hardship for participation in education process, caused by several factors:

- Absence of continued care and assistance during the education process caused by donor and project-based care provision until the moment of survey and absence of educational assistance in high schools.
- Non-existence of basic conditions for equal and fair access and usage of education facilities, caused by unsolved architectural barriers in accessibility to schools and within the schools.
- Culture of acceptance, which require attention in terms of provision of public inclusive areas that would enable socialisation and joint activities where children with disabilities can equally participate in social life- such as inclusive playgrounds, inclusive public green areas, inclusive spots for cultural events etc.

Apart from the findings¹ directed to the target groups, the complexity of this social mapping process identified additional LNOB groups and issues that need attention not only on local but also on national level, such as: the status and position of parents of children with disabilities; women in agriculture and particularly women who are involved but not registered as employed in agriculture and diversification activities, benefits for women employed in agriculture.

Recommendations from findings are positioned to improve the situation of the three target groups. The recommendations are transferred into a plan which is transposed to fit the structure of the Local Development Strategy of Municipality Resen. The recommendations set as intervention to the Local Development Strategy will put the needs and priorities of children with disabilities, adult persons with disabilities and women in agriculture and diversified activities in the central planning and development document of Municipality of Resen. This will secure an inclusiveness of the major development document that would enable the Municipality to set activities and budget directly focused to needs of children, dependants and persons with disabilities, as well and for women in ADEA.

¹ The detailed findings from the Social Mapping survey in Municipality Resen are annexed to this report.

Target group / LNOB group

The initial determination of the target groups persons with disabilities was a task undertaken by the Municipality of Resen. In order to precise the group in terms of type of disability, age, location, etc., the researcher and municipal staff performed analyses in line with the five LNOB factors (LNOB Framework) to determine the final target group of the social mapping process:

LNOB F1. Discrimination: target group has to include people who are not registered, or/and not involved in the social life and do not fully use social and /or municipal services. The identified group included children² and persons with disabilities.

LNOB F2. Geography: municipality of Resen is rural area³, and there are preconditions that define and determine inclusion. Major precondition are possibilities for physical mobility which determine usage of public space and services, socialisation, possibilities for access to public recreational areas. These preconditions are most important for persons and children with disabilities who are not using locally available social services, or those who spend the time (including the free time) predominantly at home.

LNOB F3. Vulnerability to environmental and economic shocks: Climate shocks including frost, droughts and hail, affected the major income providing sector -agriculture during the last years. Prespa Lake is decreasing throughout the years and its causing additional economic shocks to the tourism sector providers but also to the supporting industries. These shocks have made social changes in Resen and Prespa changing the socio-economic life, which produced daily migration to other municipalities where industrial capacities absorb local labour force. This leads to closure of micro enterprises on local level and decrease in agricultural activities in general. These changes do affect the most vulnerable groups including parents of children with disabilities, persons with disabilities and mostly farmers.

LNOB F4. Governance: usage of the existing infrastructure of social, educational and other municipal services⁴ on local level by persons with disabilities is qualified as low. In order to determine the factors that cause these issues, there is a need for substantial inclusion not only in usage but also in planning of the local development activities.

There is insufficient continuous presence and participation of the children and persons with disabilities in local social, cultural, sport and recreational events. This is additional burden to their inclusion process, because it makes them invisible. Every activity or attempt for inclusion of the children and persons with disabilities requires adequate transportation, or care. These services are provided mostly by parents and partially by municipality but only for municipal educational and day-care centre related activities.

LNOB F5. Socio – economic status including access to health services, available but not fully utilised system of social services and education, social support and employment, are consequence of the previously mentioned factors

Additional factor is the rural nature of Municipality Resen. The major income generation activity is apple growing and farming. Employability in this sector is family based, formal, but there is

² Convention on the Rights of the Child defines a "child" as a person below the age of 18, unless the relevant laws recognize an earlier age of majority. Child is every person to age of 18 years of life, including persons with physical and intellectual development up to age of 26 years of life. (art. 11) [Law on child protection](#).

³ The overall territory of Municipality of Resen is defined as [rural area](#) (art.43) [Law on agriculture and rural development](#)

⁴ Responsibilities of Local Self Governments as defined in (art 20-25) [Law on Local Self Government](#)

no information on how it affects the persons with disabilities and children with disabilities. The diversification activities include tourism and catering which are also sectors where the participation, possibilities for inclusion, and possible employment of the persons with disabilities is unknown. Local information indicated that farmers, in particular women farmers are employing persons with disabilities on farms and farming and diversification/ tourism related activities, but require additional capacity building in order to improve performance and knowledge. In order to investigate farmers approach to the possibilities for engagements of persons with disabilities in the agricultural activities additional survey with farmers was made. Women in Prespa are those who undertake the tourism other diversification activities on farms.

Therefore, the mapping process focused on women farmers in the definition of the target groups. Resen had the highest proportion of women employed in agriculture and women registered farmers (including ownership of land, highest proportion of approved IPARD I applications, and participation in the decision making and executive bodies of local and national farmer representation bodies, recorder leadership roles in community councils in villages). The last-mentioned factors do not allow us to pre-define them as LNOB group but as a target group of the research process. However, though this survey, screening of situation of women in agriculture and diversified economic activities (ADEA) in rural areas was made in order to examine if position of women in ADEA is really advanced and equal, or it is just on paper. This added to the complexity of the social-mapping project, as beside involving two potential LNOB groups children and persons with disabilities, there is a target group that basic analyses have not confirmed it as potential LNOB in Municipality Resen.

The conclusions **from the analyses for determination of target groups** defined that person with disabilities, in particular children with disabilities⁵ (both physical and intellectual) who live in rural areas such as municipality Resen, do face series of obstacles when it comes to social inclusion. Children with disabilities in Municipality of Resen (including the town of Resen and the villages) don't have many opportunities to live actively and to participate in everyday life. Apart from the obstacles related to basic accessibility and lack of inclusive infrastructure, they face a social and cultural stigma. The stigmatisation of the children/dependants leads to children's' overprotection by parents and to social life set only within the families. Community's acceptance is reportedly defined as good, but there are community reactions that require higher attention in the process of acceptance and inclusion of the children and persons with disabilities in the social and economic life of the municipality. The understanding of social inclusion in local community context (including teaching staff, cultural workers, sport workers, administration and community in general) needs attention and therefore development of local capacities' so they can progress in a more open and welcoming manner for persons and children with disabilities. This justifies them as LNOB target group.

The research/mapping process focused on determination of situation, challenges and perspectives of three target groups.

Target groups:

- Children with disabilities and persons with disabilities who have guardians
- Persons with disabilities- adults
- Women in agriculture and diversification activities.

⁵ Disabilities as described in UNICEF Report: [Inclusion of Children with Disabilities in Preschool education](#)

Summary of secondary data analysis

Secondary data analyses for children/dependants with disabilities were made upon municipal statistics for education. There are registered six pupils with disabilities in primary schools and one in the high school., out of seven. The education data from the previous years indicated that number of the students in primary education was higher than the present attendance of local high school. This indicated that the children with disabilities either choose to continue with high school education in other towns or they just do not continue the education.

The statistics in general documents was scarce and with some discrepancies among data provided on the statistical sites, data available at the agency for employment and data available from NGOs, Centre for social work: the collected and compared available data confirmed information about 67 persons with disabilities as registered in the social welfare system. The rest of the analysed data confirmed the status of 37% (only 25 persons) persons with disabilities including: seven (7) children who attend the primary and one (1) who attend secondary education in the municipality, nine (9) unemployed persons with disabilities registered at the Agency for employment, and nine (9) persons using services of the day care centre. Information about the 42 persons and their status was missing, apart from the fact that they were users of the available social welfare schemes. There was no available data if there are children who are out of the regular schooling system, who are not part of the day care centre activities, or even social welfare system. It was impossible to find information about persons with disabilities who are employed, not employable persons and the reasons why they are not registered in the agency for employment. Detailed information about 82% (55 persons) was missing including additional details about those 37% (25 persons) who were indicated in the available documents. Missing Qualitative information include: age structures, gender distribution, level of education, participation in education cycles, dropouts from schools if any, reasons for not registering in the system, reasons why municipal services are not utilised fully, employment and employability status, qualifications of the employed and unemployed persons, where are they employed, information about persons who are not registered in the social welfare system, health conditions, reasons behind poor employment of persons with disabilities in spite of the fact that the state provides benefits for businesses who employ persons with disabilities. The data in the municipal development documents confirmed that children's and persons with disabilities need higher attention within policy making and planning.

Summary of consultations with the municipal officials

The consultation process with Municipal officials was mostly related over definition of target groups and precision of action plan for the social mapping process, which was precisely defined and elaborated.

The consultations were undertaken during the organisation of the focus groups in terms on provision of contacts and information about active civic sector in the municipality, sport clubs and central institutions.

The development of the social plan that would be structured as part of Local Development strategy action plan was defined and determined with the staff from the sector of Local Development which was the constant active partner and support during the process.

Background and Objectives

Municipality of Resen is based in the south- west part of Republic of North Macedonia. It is part of the cross-border region Prespa and the local and common name for the territory of the municipality is Prespa. The area of the municipality covers 739 km², out of which 176.3km²⁶ are water surface of Prespa Lake, which at the same time is the centre of the borders with Greece and Albania.

Population wise, the latest census (2002) data show population of 16825 citizens in Municipality Resen. However, due to lack of recent data on the population, State statistical office (SSO) provide the public with annual estimates based on births and deaths of the population, and it's not including the data related to the migration factors. Municipality Resen is known for migration abroad and number of people from Prespa in diaspora is increasing on monthly basis.

Municipality of Resen is organised local self-government which implements all decentralised responsibilities, and everything is arranged according to the existing legal framework.

Major economic activity in the municipality of Resen is apple growing and farming. There are 3460 registered farmers, in the moment, out of which it is estimated that 37-40 % are women. In spite of the big proportion of registered farmers, only 135 women are registered as self-employed in agriculture, and the rest are only owners of the agricultural land.⁷

Diversification activities in municipality Resen include, farming activities for tourists practiced on one (1) farm, catering services on two (2) farms, renting rooms in six (6) villages, and preparation of processed food products, including jams, syrups, herbs, traditional food delicacies etc., in many farming families. There are 20 categorised rural based tourism premises in the municipality with 127 beds in 55 rooms. The premises are based in villages: Brajcino (4), Dolno Dupeni (2), Ljubojno (1) Pretor (6). Stenje (5), Konjsko (1).

The activities are individual or led by association Rural Women of Prespa (Ruralni zeni Prespa).

Primary and secondary and VET education in agriculture is organised by municipality. There are five primary schools and one high school which includes gymnasium and VET in agriculture. There were in 776 pupils attending primary school and 318 students attending the high school in Resen during the school year 2020-2021.

Social services include one kindergarten which provide care for 138 children, aged from 9 months to 6 years, based in Resen. There is also one day care centre which provides care for 9 persons- both children and adults. It premises have one room shared by children (aged 7 and up) and adults (aged up to 40) located in town of Resen.

The premises of day care are situated in the same building with the municipal kindergarten.

The ongoing project for Community work programme in cooperation with UNDP provides services to elderly and persons with disabilities. The services include educational assistants, care providers to persons with intellectual disabilities, physiotherapists, sociologists and other staff necessary for socialisation of the persons with disabilities. There are 4 children registered as users of the services provided by the project which include daily activities in timeframe of 2-4 hours at premises, supported by the staff of the project. Common health services are provided at home where possible. Participation in these projects is on voluntary basis.

In spite of the provided support services and possibilities for persons with disabilities the turnout of persons with disabilities in utilisation of the services is low. There are some

⁶ The information of the area covered with Lake Prespa is not fully accurate due to the constant variations of the water levels and decreasing of the lake size. However, it's still the official area covered by the Lake.

⁷ Information obtained at meeting with the local office of Ministry for Agriculture, Forestry and Water Economy. June 2021.

assumptions about the reasons which include barriers like: low level of awareness, social stigma and disbelief in the assistant's roles.

Objectives

The initial objective of Municipality Resen in the social mapping process was to detect the situation of the children with disabilities, details about the number including gender, age and education distribution, the socio- economic conditions they live in, education status, and what are their needs, which can be met within the local government responsibilities. The aim was to obtain accurate data about the children, investigate their participation, mobility, conditions associated to their wellbeing including recreational and sport activities. In addition, the social mapping process was aimed to provide as much as possible information about the needs of the children with disabilities, general conditions and specific conditions related to the public space and public services related to mobility and recreation. After analyses of secondary data and consultation process the team structured the following.

Objectives of the survey:

1. To identify and locate the children and persons with disabilities on the territory of Municipality Resen (geography)
2. To identify the position of the children and persons with disabilities in regard to challenges they face in their everyday life which are responsibilities of the Municipality Resen like infrastructure, services etc (governance)
3. To identify the involvement of persons with disabilities in the agriculture and diversification of economic activities in municipality of Resen (socioeconomic)
4. To identify potentials for employability and inclusion of persons with disabilities in the area of agriculture and diversified economic activities related to rural development (socioeconomic)
5. To identify preparedness of the farmers/ women as potential rural employers to engage the persons with disabilities in family farms

As a crosscutting topic is to also to see and to analyse gender issues related to the above-mentioned objectives in regard to situation of women, women who are having disability, female children's girls with disabilities. In addition, the survey attempt is to utilise the exercise and to check the situation of women involved in agriculture and rural development, as addition to their position and their view for involvement of persons with disabilities on farms.

The findings of the survey should provide answers to these questions:

- What is the number, age distribution, gender distribution, location and overall socioeconomic situation of the children and persons with disabilities?
- What is the governance system providing for them and how it's used- type of municipal services, usage, reasons if not and ways to be improved, in order to be inclusive?
- What is the level of involvement of the persons with disabilities in the agriculture and diversified economic activities in Municipality Resen?
- What are the potentials and willingness for involvement of the persons with disabilities in the agriculture and diversified economic activities by persons themselves but also by farmers and particularly by women in agriculture and diversified economic activities?
- What is the general situation with women in agriculture and diversified economic activities?

Methodology

The survey was conducted in the period May- June 2021. Preparations were done in the period April- May, and reporting was performed during late June early July 2021.

Target population / participants of the survey included all identified parents and guardians of children with disabilities, persons with disabilities, and farmers with particular accent on women in ADEA. Qualitative part of the research was carried out with additional meetings and two focus groups with relevant representatives from Institutions, Organisations, NGOs and Sport clubs registered on the territory of Municipality of Resen. The participation was voluntary. The initial identification through official channels (Municipality, CSW, Health center) during the desk research identified a synthesised number of 67 persons with disabilities including children. Later through the snowball method communicating with the participants additional 24 persons were identified.

In terms of survey's **spatial resolution**, the mapping process covered the whole territory of the Municipality Resen. Due to the fact that one of the Municipal intentions was to identify and confirm the location the survey was undertaken in the town and villages with intention to identify if any persons are present but not identified or recognised as such officially. Additional identification of target group members was done during interviews with active members of community. Farmers significantly contributed in identification of persons and children with disabilities.

The **survey mode** included face to face interviews with the parents/ guardians of the children/dependants, persons with disabilities and farmers. Fourteen surveys were made online, for those who asked for it or to a person who knew someone who was not feeling comfortable to respond to the face-to-face interview. During the survey, all Covid 19 protocols were maintained. Respondents were suspicious about usage of smart phones as possibility to be taped or photographed. In order to make them comfortable some of the surveyors used printed versions of the questionnaire. In order to collect qualitative data two focus groups were held with the representatives from the institutions which are working closely with persons with disabilities. In addition, for those unable to join the focus groups, separate individual interviews were made. The social mapping included 11 individual interviews and two focus group meetings. The interviews were handled with one medical doctor active in improvement and inclusion of persons with disabilities for almost ten years, Health centre Resen, representatives from NGO for persons with disabilities Humana Prespa (one parent of a girl with physical disability and a person with physical disability), representative from Association of farmers Blagoj Kotlarovski Resen, representative from Association of Rural Women, representative from Association of women Zenska solidarnost, Director of local branch of Agency for employment, school defectologist, young women- leaders in rural development in Prespa, one activist. The focus groups included: representatives from Health centre, CSW, day care centre, NGO for cultural development of children in art Zar Prespa, Local Action Group Resen, Ekogerila Resen, Football sport club., Zdruzena Akcija, NGO representing interest of Egyptians in Resen Izida.

The **sampling** was done through desk research and communication with the relevant institutions on local level⁸. The probability sampling included methods of multiplicity/ network sampling for definition of sample for children with disabilities. The referral sampling was also utilised to identify children and persons with disabilities. The initial sample/ total number of 67 identified persons was though the data provided by the Municipality through the CSW. A list of 24 persons who were identified from the Health Center was provided, and 14 from that list were already identified by the center of social work, and 10 were added to the initial list. The

⁸ Health Center, Center for Social Work, Municipality Resen

chain sample method identified additional 11 children with disabilities. In total 88 persons and children with disabilities were outcome of the final work of the interviews and work on the field. However, in spite of the initial assumption of estimated ~100 persons 88 were identified. There is yet estimated presence of around 20 up to 25 persons with disabilities and parents who were not willing to take part in the survey. The total sample of the contacted persons and parents or guardians of children and persons with disabilities was 88.

Source	Number of identified contacts
Municipality of Resen and CSW	67
Health Centre	10
Chain sampling	11
Total	88

In addition, to respond to the targets of the research in identification of current or possible involvement of the persons with disabilities in the agriculture and diversified economic activities, to appropriately relate to the number of identified children/persons with disabilities and the number of employed women in agriculture in Prespa (135), the initial list of included contacts of 160 registered farmers. By using the probability sampling, and Stratified Random Sample method to secure appropriate representation of women farmers comparing to the overall number of employed 135, final sample of 85 farmers was selected. The final list in regards to the gender distribution (of persons as employed farmers, or registered farmers, or being members of family farms) included 60 (71%) women and 25 (29%) men.

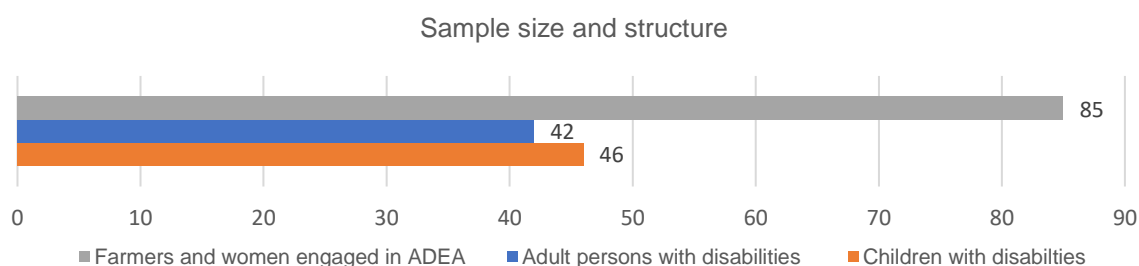


Figure 1 Structure and size of the sample

The number of registered persons with disabilities in CSW including children was 67. Additional 31 persons were additionally identified. The sample of the farmers included 85 farmers. The survey included 85 farmers and 88 children and adult persons with disabilities. The total sample size (including all three target groups) included 173 persons.

Questionnaire development took place in during first half of May with selection and proposal of set of questions, communication of the selected questions from the modules and the questions designed specifically for the purpose of this mapping project. Initial set of questions were selected, and consultation process was made with municipality representatives, relevant institutions on local level and the project donor representatives. The additional questions were added and questionnaire was re-structured according to the needs of municipality, and projects' interests.

The pilot study /pre-test of the survey was undertaken with the 5% of the total sample size and the process included face to face and online collection of data. The pre- test identified series of software issues that required additional transition and setting as well and need for additional trainings for the surveyors in the field. **Response rate** was highest among famers and women involved in ADEA (88%). parents and guardians also had high response rate of 85% from the total sample participated in the survey. The lowest response rate was among the persons with disabilities where only half (50%) participated in the survey.

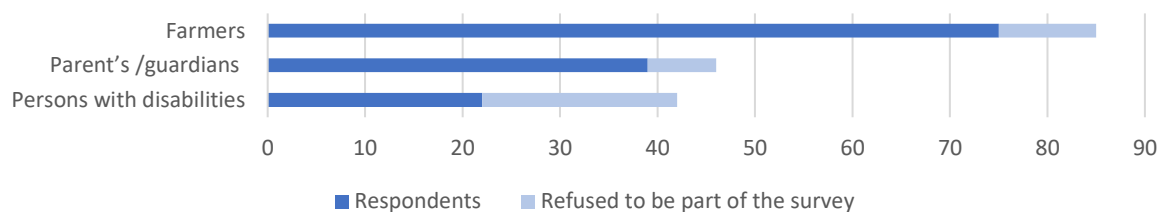


Figure 2: Response rates

The **process of data cleansing and preparation** started during the structuring of the questionnaires, with standardisation of the questions to be applicable to the three categories of respondents in order to obtain data, respond on the questions of the survey, make indicators work and make comparison analyses to identify the major steps in the social plan. Data cleansing was made both manually and using kobo application in the beginning. The manual cleansing included: renaming of the questions in general meanings, observation of data inputs, transferring data in suitable forms, structuring combinations of responses into sets applicable for analyses. Kobo toolbox provided certain extent of possibility for analyses and intervention in the piloting phase so the non-responded questions or mistakes were brought to minimum during the data preparation and later analyses. Usage of recommended tableau public required cleansed data. The data extracted from KoBo in excel was additionally cleaned in tableau for combination of various indicators.

Methodology of data analyses included cluster analyses for each of the three groups. The cluster analyses included analyses of separate cluster/ target group and relations in the subgroups (i.e. age, gender, occupation, education social welfare, etc). Due to limitations of tableau public (data linkage to cities), the localisation analyses were performed with google maps. The analyses were performed in majority of cases with usage of excel and help in visualisation provided by kobo and tableau. The analyses of the responses received in the focus groups were also clustered and led to conclusions which have confirmed the results obtained in the survey.

During the process of social mapping the **limitations** were present in identification of the LNOB group members. The number of identified persons was 12% smaller than the initially estimated number of children and persons with disabilities. Another limitation that affected the survey was the unwillingness of the parents/guardians and specifically persons with disabilities to contribute to the survey. Out of the total sample of identified persons 23.6% rejected to contribute to survey. To fill the gaps, it was impossible to add participants to the survey due to the specifics of the target population. In spite of the approximations which indicated that total number of children/ persons with disabilities is higher for additional 15 % and distributed in the south -eastern part of the Municipality, it came out that the estimation is not confirmed and there is a portion of target population that lives only temporary on the territory of the municipality.

LNOB results

Presentations of the results per target group are divided in modules as the survey was structured. Detailed results structured by survey modules including data visualisation by each question are part of Appendix 4 and may serve as a source of deeper information on modules and target groups. The results reflect major findings per target groups, including LNOB diagnosis made in relation to applicable risk factors. The findings are presented in text boxes at the end of each section, including the explanations on groups who are left behind or further behind major causes and related risk factors.


1. Location and ethnicity of target groups⁹

The geographical coverage of the survey included the whole territory of Municipality Resen. Geographical distribution of **children with disabilities and dependants with disabilities** is on the whole territory of the Municipality of Resen. In spite of the fact that they live all over the municipal territory, the highest density of those who were willing to respond to the survey is in town of Resen. Parents/ guardians and adult persons with disabilities from villages Carev Dvor, Jankovec Asamati, Rajca, Dolna Bela Crkva, took part in the survey. Parents/ guardians of children and dependants with disabilities were most open as 85% participated in the survey. Those 15% who refused who refused to participate are coming from villages Krani, Pretor, Carev Dvor, Sopotsko and town of Resen. The reasons for refusal were not presented but indicated stigma in the villages, general closeness and fear to expose the children and persons with disabilities to avoid any social related consequences.

There are 74% of persons who refused to respond to the survey are **adult persons with disabilities**. Reasons why they do not participate in the survey were hard to be obtained. The general response was that they simply don't want to participate in this activity. The true reasons that might prevent them might be assumed. Field team indicated closeness of adult persons with disabilities including comments over governance, stigma, disbelief, dissatisfaction or simple lack of understanding of benefits from the survey in spite of the fact that they were elaborated to them by surveyors. **Men and women in ADEA** were more willing to participate in the survey, 88% of the identified participants took part in spite of the 12% who refused. Since Municipality of Resen is an interethnic municipality, the survey included representatives of all **ethnic groups** according the specifics of the survey, and the representation of the ethnicity in each target group.

The fact that majority of village-based parents and guardians refused to participate in the survey indicates urgent need for securing conditions for socialisation of the children within the communities with other community representatives in order to increase the awareness and acceptance. Geography is a risk factor that affect children and dependants from villages and contribute to their exclusion.

Adults with disabilities who excluded themselves from the survey indicate issues related to confidence and trust and pints out the governance as major risk factor that affect their exclusion.

⁹ The details on the location are available here (double click: )

2. Analyses of survey results for children and dependants with disabilities

2.1 General information about children and dependants with disabilities

The major interest of the mapping process for Municipality of Resen among other issues was to define the real number of **children with disabilities** as they are defined within the Law, by age and type of disability. The survey confirmed presence of **39 children/ dependants** with disabilities in Municipality Resen. There are 24 female and 15 male children/dependents.

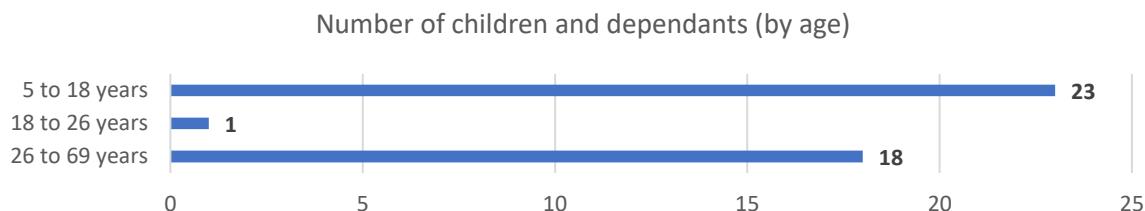


Figure 3 Number of children and dependents by age groups as defined in the Law

These first analyses that identify the number of children with disabilities that belong to different **age groups, show** that most of them 41% have combined disabilities, and 15% intellectual disabilities.

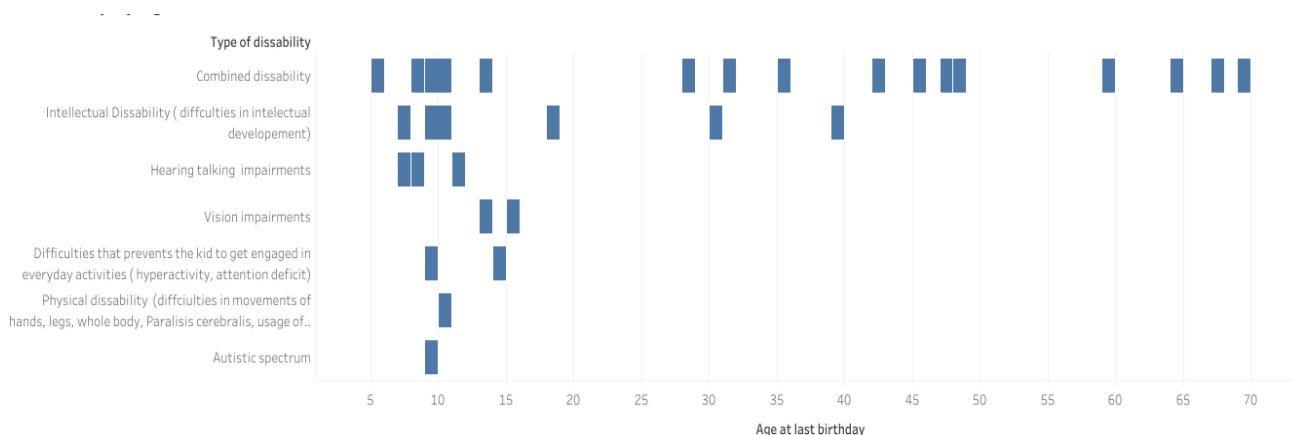


Figure 4: Overview of the structure of children by age and disability

There 77% of children’s/dependants’ live-in households of parents while the rest are taken care of by grandparents; by siblings. There are few a\who are taken care of by official state designated guardians, stepparents, partner and non -relative. Two dependants lost guardians due to death.

Children and dependants who are losing guardians and continue to live alone in spite of the fact that they are not capable to take care of themselves are to become more excluded in the future. The risks that influence this trend are socioeconomic status and governance.

2.2 Education and usage of care facilities of children and persons with disabilities who have guardians

Children (aged 5 to 18 years) **attend education** and care facilities based in Municipality Resen. There are four (4) children who are attending specialised schools based in Municipality Bitola. Only two (2) children (aged 5 and 16) from villages that do not attend any education or care facilities.

In relation to the age group of dependants over 18 years of age, 21% are **users of the day care centre**. There is not available information why 79% do not use day care centre activities. **Level of education** among dependants is very low, 17% completed vocational high school, but 61% have uncompleted education due to health reasons and 33% of dependants who do not have any education

The analyses of the involvement in education and care provision services, indicate that the geography, discrimination and socioeconomic risk factors additionally contribute to vulnerability of: Children from villages who do not attend education, Children who attend specialized education facilities in other municipalities; Dependants without education and dependants who do not attend day care centre.

This indicates that the municipality need to put effort along with the centre for social work to enable their education. The support is also required for children who need to attend the specialised schools in the other municipality as they are put in uneven position in relation to other children who have free school transportation. These two groups of children are left behind due to the following risk factors: geography as those who do not attend education are from villages, and those whose education is higher financial burden to the families due to day travel to other municipality affect families and their socioeconomic status, as additional risk factor.

Additionally, there is assumption that a group which will be left further behind in the future are dependants without education and dependants who do not attend the day care centre, both due to socioeconomic status as risk factor.

2.3 Socioeconomic status of children and dependants

Employment status analyses are made just for dependants who are aged over 18 years, who might be employed and secure their incomes in some way. The activities that occupy the most of their time cannot be defined as occupation in all cases. The dependants are either students, unemployed, too old to work, or retired. In general, the employment status of dependants that belong to the age group over 26 years of age, can be characterised as bad. When it comes to **employability** there are 11% of dependants who are officially **assessed** as employable but are not employed. There are 11% who didn't have employability assessment **but** are declared as employable. To cope with unemployment and find jobs through the system, 16% report to public agency for employment.

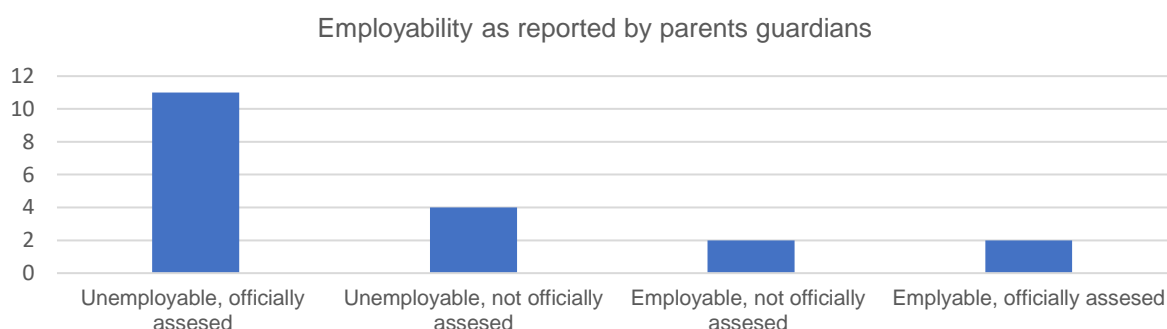


Figure 5: Employability of dependants over 18 years of age

99% of parents and guardians refused to respond to the initial question if the family is involved in any additional income generating activities. Nevertheless, the later responses on the questions about **agricultural activities**, 31% of the families reported that the family is involved in agriculture: as fruit growers (21%), 8% as livestock breeders, 3% as bee keepers and 3% as crop producers.

There are 18% that don't know or refuse to respond to the question about **health insurance**. The child of a family that deals with agriculture falls into this category. There are 5% children and dependants who clearly indicated that don't have health insurance. This group includes children and dependants whose parents and guardians are unemployed and the only stable income in the family is grandmother's pension.

Formal disability assessments have not been carried out for 5% of children that include two boys aged 9 and 16. Majority of the children and dependants do **use social benefits**. There are 96% of families who receive **support for care**. **Unemployment benefits** are received by only one person. The other three are not receiving any unemployment benefits in spite of the fact that two of them are reported in the employment agency. The two recipients of **pensions** are receiving family and age pension.

Children and dependants with disabilities are affected by the risk factor of socioeconomic status due to theirs or parents' unemployment, their health conditions and lack or unknown status of health insurance. Within this category most affected are children who live in families where grandparents' pensions are the only stable income in the family, and unemployed dependants who are unemployed, but employable. The group includes dependants who are officially assessed as employable but unemployed.

2.4 Living standard of children and dependants with disabilities

Housing situation of children and dependants with disabilities is relatively good as most of them 86% live in dwellings that secure relatively good living conditions characterised by sufficient space. There are only 14% of families whose housing is below the average good life index.

In relation to the risk factor vulnerability to shocks, **food deficiency** is reported by 33% of the families during the last month. These families include those of unemployed parents or guardians and the family which have agriculture as primary source of income. Families of children aged 8-13 years make 38% of those who reported food deficiency during the last month, and are 13 % of the total number of families. **Protein deficiency** is another issue related to the vulnerability to shocks which is present since 74% of the parents/ guardians do report that they can't afford to provide meat, chicken or fish every second day (or their vegetarian equivalent). Their poverty is seen through inability among 40% of parents/ guardians to provide necessary medical supplies and inability for 56% of parents and guardians to provide heating to children and dependants. The children are additionally vulnerable to shocks since 95% of their parents/guardians can't afford to pay unexpected costs.

The **required monthly income** to cover all costs for a family is 500 Euro. In terms to what is the minimum amount for which they would work is the amount of 250 Euro.

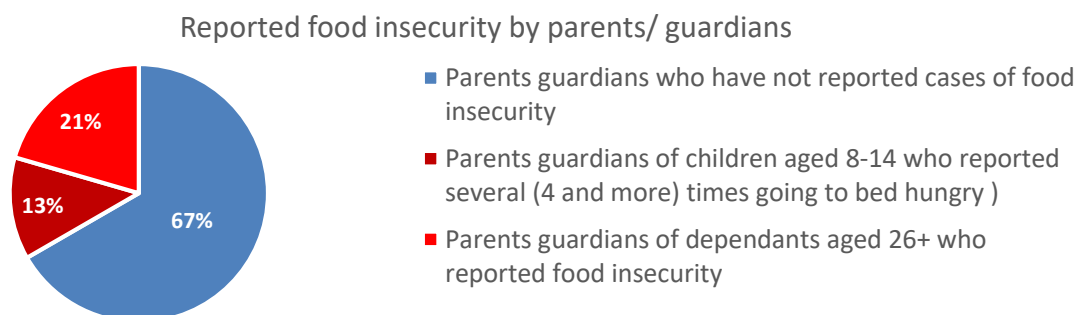


Figure 6 Food insecurity among children and dependents in Municipality of Resen

Economic safety is also an issue in the families where children and persons with disabilities who have guardians are living. **There are 77% families declared as economically unsafe.** These families include families of children aged 5-18, There is not a single family who feel economically safe.

Education of the children and dependants with disabilities is affected by the **limited access to home computers** as 21% of parents/ guardian of children aged 7-18, report that they do not have computers or tablets. The reasons why they don't have is that they can't afford one. There are 38% in the same age group that do have IT equipment at home.

The way the children and persons with disabilities **access and use the services** indicates that the most used services are those of the primary health centre which is accessed by walking in most of the cases. The second most used service are the primary schools accessed through a bus stop or public transport-meaning taxi service.

Pollution is a problem for 59% of the families while they consider (95%) the area where they live as **safe** in regards to violence, crime and vandalism.

Children and dependants with disabilities are vulnerable to shocks due to the reported food insecurity in 33% of the cases. Most affected are children aged 8-13 years which constitute 13% of those facing food insecurity. Protein deficiency is present in 74% of the cases and 40% of the parents/guardians cannot provide medicines for their families. Economic safety is indication of exposure to risks due to poor socioeconomic status reported in 77% of the families. Discrimination is also a risk factor for the children who cannot attend education due to inability to use personal computers and absence of internet at home, again related to the socioeconomic status as major risk. Children and dependents are also exposed to another risk factor (geography) since they report usage of public transport -taxi to access health services and pollution in the areas where they live. Shortages of water (30%) makes them additionally vulnerable to shocks.

There is clear indication that the municipality needs to invest in improvement of inclusive public transport services adjusted to the needs of persons with disabilities.

2.5 Childcare provision for children and dependants with disabilities

The **usage of the care facilities** where children and dependants can socialize are indicators of the risk factors governance and discrimination. The usage is low since 62% of the parents and guardians who did not respond on the question about usage of public care services. Only 38% of the children and dependants with disabilities use the facilities for care which include those who attend day care centre and an afterschool centre¹⁰ There is only one child user of the kindergarten.

Care provision outside the care services is provided by parents in 23% of the cases and primarily is handed over to grandparents, siblings and other relatives.

Doctors are major **consultant about child's development** for 69% of parents/ guardians and social worker/community health worker for 13%. There are 11% of parents/ guardians who do not consult official persons but get information from family members, books or media.

The **costs for the care of the children** are different. The parents whose children attend specialised schools in neighbouring municipalities face monthly transportation cost of 54 Euro that other parents don't. The other costs reported by all parents/ guardians include 8 Euros monthly cost for school materials and average of 30 Euros monthly cost for food. The food is a burden for 20% of the parents of children aged 5-18 who are enrolled in primary schools.

¹⁰ The afterschool center is part of the UNDP municipal project

The children/ dependants who do not use care services are part of the group that lack socialisation and therefore is affected by the risk factor discrimination. Children who attend education facilities in neighbouring municipalities are also affected by the risk factor discrimination since the parents do pay the school transport which is not case for other children.

Children whose parents feel the school food as burden are most affected in regards to the risk factors of discrimination and socioeconomic status of the parents who have to contribute financially to support the education of the children.

3. Survey analyses about adult persons with disabilities

3.1 General information about adult persons with disabilities

The survey included 22 persons, 15 male and 7 female. Adult persons with disabilities 73% who participated in the survey are in **age range** between 20-69 years of age and have physical disability. The number of persons with intellectual, combined and disabilities related to autistic spectrum is 27%. Therefore, the reflection of the findings about this group predominantly reflects the needs of persons with physical disability.

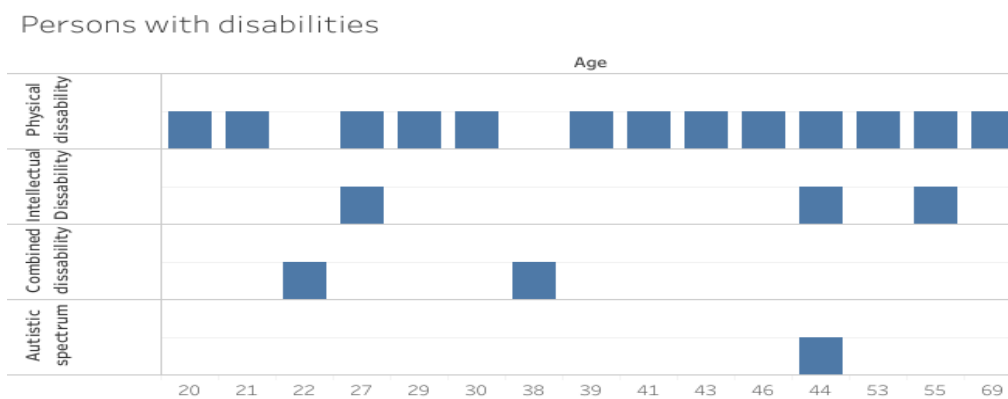


Figure 7: Age distribution by type of disability and adult persons with disabilities

In regards to the **martial status** the analyses show that women if they are married, identify themselves only as related to the head of household, while married man identify themselves as heads of households or as sons to the head of household. This indicates a specific socioeconomic situation of persons with disabilities related to their roles in the families where they live.

In regards to the **occupation of adult persons with disabilities** who are part of the survey 27% are unemployed, 18% are full time employed, and 12 % are working part time jobs 9% are retired.

3.2. Education and care facilities usage among adult persons with disabilities

There is only one person that use the **services of the day care centre**.

In terms of education 36% do not attend education at the moment as 18% completed education and the rest 18% have not completed the education cycle due to illness or because they think it's useless. The **Level of education** among adult persons with disabilities who finished education cycle is: 32% completed secondary education (including vocational education) and one person (5%) holds master degree. The rest did not provided response on the question

Adult persons with disabilities without education fall in the category of the LNOB due to the socioeconomic status as major risk factor which is reflected in their employment status and living conditions.

3.3. Socioeconomic status of adult persons with disabilities¹¹

Initial aim in this mapping process (for adults with disabilities) was to determine their **employment and employability status** in relation to their employability assessments¹². To respond to the initial aims, and to provide sufficient analyses the employability status is cross checked with occupation of the persons with disabilities. Almost half (47%) of the persons with disabilities who took part in the survey declared that do not work. There are 37% persons who declare employment full time or part time. Homemakers, persons who live with inherited pensions or do jobs like recycling iron are 16%.

Official employability assessment is performed for 68% of the adult persons with disabilities. There are 45% who are assessed as employable and 18% who are not assessed but declared as employable. From those who are assessed as employable, 23% are employed and 22% are unemployed. The data analyses showed that those who have not undergone employability assessment do not report paid jobs in spite of the fact that they include themselves in the sectors in later questions.

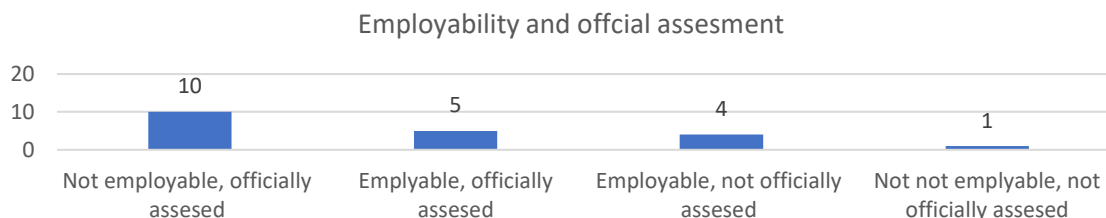


Figure 8 Employability assessment of adult persons with disabilities

Employment is permanent for 14%, while 9% have temporary employment agreements. Part (5%) of those who are officially assessed as unemployable are doing jobs in the non-formal sector. **Average working hours** of persons with disabilities is 34 hours per week.

The survey results indicate that **private sector employs** 10% of **persons with disabilities** and provide them with contracts and benefits, 5% work in public institutions. By economic sector, food processing industry employ 5% of employed persons with disabilities. There is no evidenced employment of the persons in ADEA. One person (5%) is declared as a freelancer, but is not officially employed. **Unemployed persons** do not look for jobs and receive support for care. Reasons behind not registering in state employment agency are their inability to work, and beliefs that there aren't jobs available. There are only 4 persons who are **registered at state employment agency**.

Employed persons and the freelancer do declare their **monthly income**, which is below the average net national income¹³. The support for care is used by all, including persons who are unemployed and one of the employed persons. Resale of purchased good, farming and freelance work **are declared as additional income** by 19% of respondents. The rest (73%) refuse to respond to this question, and 8% have not provided any responses to this question.

¹¹ The analyses of this group conditions do not fully reflect the situation of the overall number of adult persons with disabilities since the proportion of those who refused to participate in the survey is 50%.

¹² Official employability assessment is crucial for registration at the agency for employment, and benefits usages for those who are assessed as unemployable.

¹³ 28 721MKD, Source: <https://www.stat.gov.mk/PrikaziSoopstenie.aspx?id=40&rbr=13708>

In the cross-check question about the involvement in ADEA, number of persons who reported additional activities increased from 19% to 37%.

Reported income from additional activities for 13% who haven't reported additional income generating activity, but later reported income from additional activities is in the frame from 100 to 500 euros per month. Out of those 37% who reported additional income generating activities, only 9% reported generated income gained from additional activities between <100-300 Euros per month, during the last year. The surveyors confirmed that the reasons behind not reporting income and additional income generating activities is the fear of losing the financial support for care (which is less than 60 Euros per month).

Majority or 82% of adult persons with disabilities are covered with **health insurance**. There are 9% who are not covered is because they are out of job, do not register at employment agency or do not have anyone officially employed in the family. There are 9% who refused to respond/ don't know about the health insurance. This affects the **access to health services** as there are 13% have not received dental and medical service due to lack of health insurance.

Health conditions (mental health, difficulties to move, dexterity and stamina) prevent 27% of persons with disabilities to work. These are the same persons who are already assessed as unemployable. Almost one third of the persons 23% do not receive any retirement benefits and pensions. There are only 9% who receive both family pensions and benefits for care.

Due to the socioeconomic status as risk factor, unemployed persons with disabilities are left behind. They are dependent on care benefits and do informal jobs which they don't report. They lack health insurance and therefore are excluded from medical services which add to their bad health condition. There is a need for formal employability assessments of these persons, their registration in the employment agency and integration in the social care system as unemployable if they are assessed as such. ADEA is additional income generating activity and it should be considered as possibility for their employment and registration where applicable. There is one person who holds master degree, is assessed as employable but is unemployed.

3.4 Living standard of adult persons with disabilities

Adult persons with disabilities live in dwellings property of family members or in a relative's houses. There are only 5 persons who own the dwelling, and none of them is female. **Housing** conditions are in the frame of average good life index. In terms of vulnerability to shocks the analyses indicate **protein deficiency** which is reported by 68% of the persons, food insecurity is reported by 15 % of the persons, inability to save and secure savings for incidental costs in 82% of the cases. More than half of them, 54% feel economically unsafe, including 36% who qualify their households as totally economically unsafe.

Services for persons with disabilities are available in time range of 30 min. The most used services are those of the health centre which are accessed by car, walking or public transport - taxi services. The Bank/ ATM and post office are the second most used service and the usage of cars and taxis is reduced due to the fact that those services are in the city centre and they are better accessible.

Adult persons with disabilities face protein deficiency and do not have economic safety. Their vulnerability is due to the socioeconomic status they have as predominant number are unemployed and not because of their official employability assessment as majority are assessed as employable. The vulnerability to shocks such as water scarcity affects 30 % of persons with disabilities.

3.5 Child care provision by persons with disabilities for their children

Care system services are used by 13% of persons with disabilities for their children during the week. The predominant care for children of persons with disabilities is in hands of grandparents and siblings of the children.

Majority (73 %) of persons with disabilities consult the doctors in regards to their child development. Only 5% get the information and consult the books or media.

The reported costs for children's education include monthly cost of 8 Euros for school materials, 17 Euro for transportation and 9 Euro for food.

4. Survey analyses about men and women in agriculture and diversified economic activities

4.1. General information about men and women in agriculture and diversification activities

The survey included 75 respondents engaged in agricultural and diversified economic activities, out of which **51 are women and 24 are men**. The **age distribution** of these persons is within range between 21 and 75 years.

The **marital status among women** in ADEA who are in age range between 21-37 years is never married. Women between 38-66 are married, and the women over 66 are widowed. This indicates that the women involved in farming and diversification in Municipality Resen are not subject to child or early age marriages.

The question about what is the **current major activity** of the women provided responses which indicate that they do not recognise their input in agriculture and diversification as major activity, rather they identify their activity as self-employed, and full-time workers or even unemployed. Only four women, identify their major activities in agriculture: one identifies major activity as paid job, 3 as unpaid workers on family farms. Later while reporting the employment status, when they had to determine the employment sector and work type. Total number of women who indicated any engagement in the agriculture sector or agriculture came to 26 women (51%). The situation of those who have not mentioned agriculture 39% as primary employment, but declared their involvement in agriculture activities reflect their engagement as full time employed in public, food processing and other sectors. Three (6%) are engaged in ADEA /tourism industry: one works unpaid job in the family tourism business, one is self-employed in her own tourism business. one is retired and still works in family business.

These numbers indicate relation between women who have registered land on their own name and their major occupation, vs. those who are engaged in agriculture and are owners of land and employed in the sector. This indicates that the women in ADEA not always identify themselves primarily in ADEA in spite of the fact that they are owners of the land.

In determination of **type of relation with the head of the household**, majority (49) of respondents identified themselves as wife/partners to the heads of households. Only 3 women identified themselves as head of households out of which two are widowed and one is retired and is 67 years old. There are three women who identify themselves as daughters in law which indicate that the stepfathers gave the land to the stepdaughters: one works on the family farm and have additional income as freelancer, one work in another private company, and one is unemployed in spite of being owner of land. This indicates that in spite of the notable number of women who are either employed or registered farmers (own the land), they do not identify themselves as heads of households. This also indicate that they either do not carry the major provisions for the family or even if they do traditionally, they put the heads' role into men hands.

4.2. Education among men and women in agriculture and diversified economic activities

The educational structure among the farmers is relatively good. There are 58 who already finished education, 5 women attend university, 2 women attend non formal education, 1 man attends high school, 2 women attend VET school and 1 is attending some other education. 7 persons do not attend,

Level of education among women who are registered owners of the agricultural land or are part of family farms or registered farmers in Municipality Resen is relatively high. Forty percent (40%) have secondary and 40% higher education, 18% have finished primary, or some kind of non- formal education. Only 2 % are left without education and these 2 % belong to women over 65 years of age.

In regards to the obtained training in ADEA, three (3) women finished high school/ VET for agriculture. The other obtained agriculture skills on LBD principle.

Women in ADEA whose level of education is left on primary education (18%) are excluded due to the socioeconomic risk factor. In spite of the fact that education is linked to the discrimination factor is not possible to confirm it as it's not clear what were the reasons why they have not obtained higher education.

4.3. Socioeconomic status of men and women in ADEA (employment and employability, social benefits, pensions and health)

This section presents the findings for analyses related to the risk factors of the socioeconomic status, geography, discrimination in relation to the status of women involved in agriculture and diversified economic activities. All (51) of the women who took part in this survey, confirmed their engagement in fruit growing activities. Only two of them additionally identified themselves as beekeepers. Agriculture is primary source of income for families of 29% women. And additional source of income for families of 71% women.

Employment status. among women who are owners of agricultural land, there are (18) women who are full time employed in public or municipal institutions or companies, (13) women employed in private companies owned by other persons, (1) woman who is employer in her own business with employees, women who are family workers (2) in family business, (24) women who work on farm and (7) women who are self- employed as farmers. The survey included women who are registered owners of agricultural land and/ or employed in agriculture.

The **unemployed**, are registered owners of land The 13 unemployed women do not look for employment. There are five (5) women who are unemployed and not even registered in the system as unemployed. Only four (4) are registered in the public employment agency. The rest do not report themselves and refuse to respond on the question. The statistical calculation of the reported **44 working hours per week**, does not include working hours of: women who work as full-time homemaker, women who are working on family farms as unpaid jobs, women who declare that they do not work but they are involved in the activities on family farms. This is because they have not declared and do not calculate their working time. This indicates that there are a lot of hours remaining as unpaid job for women, but not only in the household, but also unpaid hours during the work in agricultural activities on family farms.

Majority of women refused to declare the income gained from the activities related to agriculture and diversified activities. However, those who reported the **net monthly income** gained in the last year within the families, from the ADEA where women are also involved, are not obviously managing to secure substantial income during the year. This is due to the fact that there are only 3 women who declared income higher than 1000 Euro per month in the last year in the family. Majority declared income between 500-1000 Euro per month.

The survey also determined the active or passive role of women and if women have paid or unpaid work. The factor of primary and secondary source of income activities also determinates the work as paid or unpaid.

The results show that the 50% of women who are actively working in ADEA as primary source of income for families are not paid for their work. 38 % are paid and 13 % state they are just helping, which means that they are not paid as well for the hours spent on the ADEA activities. There is significant number of women who haven't reported if they have social and pension benefits paid monthly. The survey results show that 43% of the women have not confirmed paid social and pension benefits on monthly basis every month during last year

However, they have health insurance paid either on their own name or receive it through the insurance of the husband.

However, this does not leave only the women behind, but also a proportion of men involved in ADEA. There is significant number of persons who have not responded to this question at all. The figures of the overall farmers' analyses indicate that 56% of the total number of interviewed farmers including women have paid social and pension benefits, However, there is a significant number of 44% in total who do not receive or don't know. They either do not receive (8%) payments, or fall in category that refused to respond / don't know. This indicates a serious indication of further investigation and analyses of the situation of farmers in general in regards to their social and health benefits, employment and unemployment benefits.

In line with the above statement the type of employment is the reason why the farmers and women involved in agriculture and diversification activities are not covered with regular social and pension benefits. Only seven (7) persons are registered at the employment agency.

In regard to the **income** there is not sufficient response rate to define the average income due to the fact that 23 respondents refused to respond on the question. Only 3 women and 5 men provided information about their income. The rest refused to respond. This indicates that the women in farming do not want to report the income due to the fact that either they don't know the exact value, or they do not want to report the income in order not to lose the social benefits (only 3 women declared that they receive financial aid from the state).

In regard to the **health insurance** only the proportion of women who have health insurance is higher. The survey analyses show that 71 % of women are covered with health insurance in their own name. This percentage includes women who are registered in the employment agency as unemployed, those working in other sectors than agriculture and those registered as employed in agriculture officially. Two women who are in age for pension do receive age pensions and only one received family pension. The rest are in their active (under 62 years of age).

Unemployed women (women who are out of work, are homemakers, do informal jobs and other unpaid work) registered as owners of land, who are not registered in the employment agency as job seekers and are without health insurance are left behind due to their socioeconomic status as major risk factor. These are women who are doing unpaid jobs at family farms, and do not include the option of being employed in agriculture due to low reported income, which is not allowing them to pay the social benefits. Usually, they are paid for the husband.

In addition to the socioeconomic risk factor the geography is also a major factor that increase their vulnerability as they are all living in rural areas.

4.4. Living standard of men and women in agriculture and diversified economic activities

Farmers do have better living standard than the families with children with disabilities and persons with disabilities In regards to **housing** the families live in the dwellings owned by

household members. Only 14% of women who own the agricultural land are owners of the dwellings where they live.

Only 1% reported **food insecurity** once in the last month, and the reported protein deficiency is among 45% of the farming families, in spite of the fact that 64% reported that they can afford a week holiday away from home and 100% reported access to internet and home computers. Majority 90 % of the farmers consider the family as **economically safe** in comparison of 7% who consider the family as economically unsafe, 3% did not responded to the question The required minimum living costs for family of farmers is 536 Euros per month. The minimal wage for which one farmer or woman in ADEA would work for full time (40 hours a week) is 440 Euros which is almost double than a person with disability.

Farmers are vulnerable to environmental shocks as 78% of the famers consider that there are problems with **environment**, both as pollution but also as climate change effects. This is in line with the reported shortages of water which are reflecting the geography as risk factor, since there are 65% of the persons who reported shortages of water. In regards to safety 89 % consider the living environment as safe, without violence.

The access to **services is in average of 20 minutes and the farmers including women farmers** need 20 minutes to get there. Buses are reached by car (for those reaching the bus station in Resen). Centre for social work, agency for employment, kindergartens and primary schools are declared as spots with low frequency of visits, but those farmers who do visit these services access them by car (25%).

Men and women in ADEA are vulnerable to environmental shocks due to water scarcities which are reported in 65% of the cases and environmental problems reported by 78% of the farmers. Their vulnerability to economic shocks is not reflected as in the case of children, dependants and adult persons with disabilities since there is only 1% that reported food insecurity, and 90% reported economic safety. There is a mismatch with the data collected on protein deficiency which indicates that 45% of farmer can't afford protein meals every second day. There are 86% of women in who are owners of agricultural land but are not owners of dwellings where they live.

4.5. Child care provision by farmers

Farmers hadn't reported usage of care services for their children. Child care among farmers and women in ADEA is provided by grandparents in 31%. The rest is provided by parents.

The development of children among farmers (57%) is done through consultations with medical staff regarding health and development of the children. There is also small portion of farmers who consult social worker/ health worker in the community 1,3%. There are 4% who think that they do not need support on this matter and 5 % who refuse to respond.

The average monthly cost for schooling of children is 20 euros. This cost is divided as: 10 EUR for clothes and 11 EUR for materials (pencils, notebooks). Other costs for care are not reported.

5. Discrimination among three target groups

Discrimination among children/persons with disabilities who have guardians is reported in 44% of the cases. The reported discrimination is because of disability in 38% of the cases, and in 13% due to their ethnic origin as Albanian, Turk and Roma. Discrimination among **persons with disabilities** is felt due to disability in 32% of the case ethnic or migrant origin in 9% of cases and gender in 4% of cases. In terms of discrimination among adult women with disabilities, there aren't women with disabilities who are owners of dwellings. Discrimination among **men and women in ADEA** is declared by six persons (10%). Some of them feel

discriminated due to more than one reasons among which sex, ethnicity, sexual orientation and age.

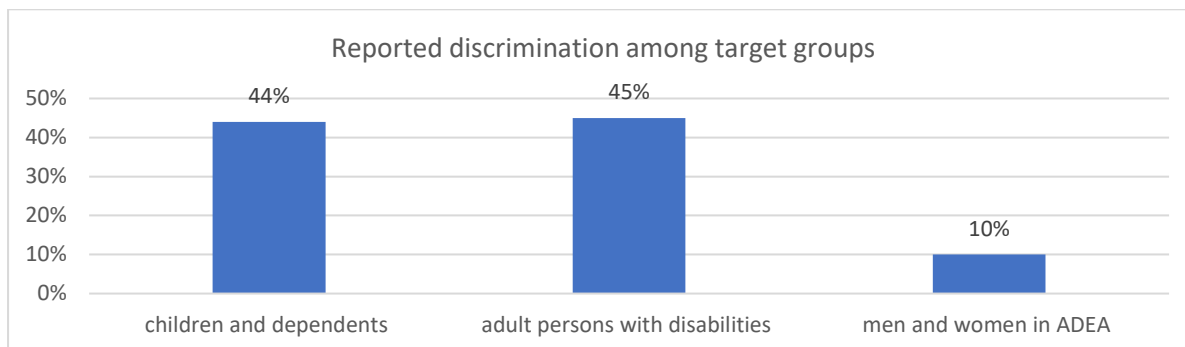


Figure 9 Reported discrimination among target groups

The discrimination can be seen among men and women even if it is not declared, if there are analyses of the **ownership status**. In spite of the big number of agriculture land ownership among women, only seven women are owners of the dwellings where they live. The rest of the women live in dwellings owned by the member of their household. Half of the male farmers are living in dwelling possessed by the member of the family (they are all in younger age which indicates that the dwellings are possession of parents). Discrimination is seen in the provision of health services as 12 women have not received the necessary medical examination. The reasons why that happened are not stated, although four (4) of them declared that they do not have medical insurance.

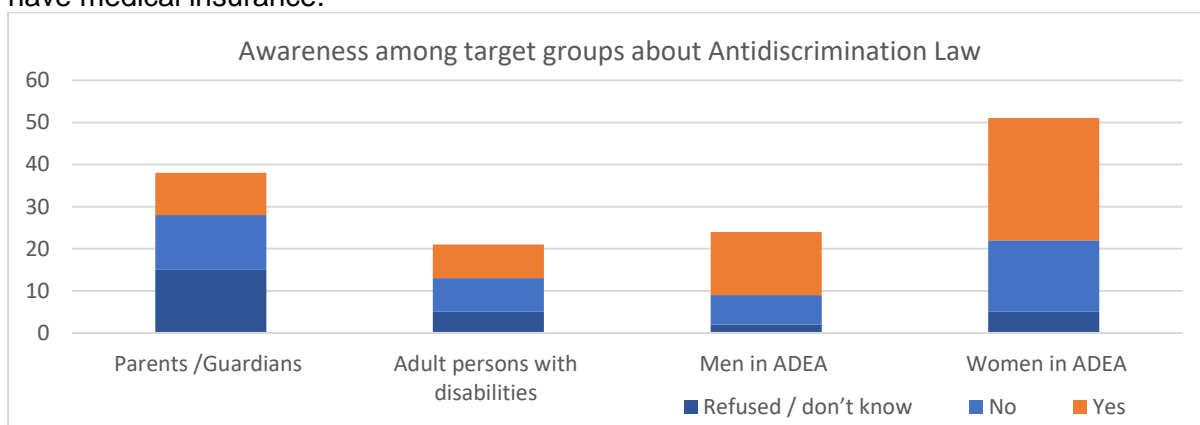


Figure 10 Awareness about antidiscrimination law among target groups

There are 71% of the parents and guardians who don't know or think that there is not antidiscrimination law in the country. There are 22% of adult persons with disabilities who don't know about the law, and 36% think that such law does not exists.

6. COVID 19 effects on the target groups

In order to respond to the factor vulnerability to shocks the survey included questions in regards to the latest crises with COVID 19. The results are summarised from the three target groups together in order to see the effects of the pandemics and how it affected the children and dependants, adult persons with disabilities and the farmers. The COVID 19 conditions apparently have not much affected the persons with disabilities. During the survey the parents and guardians of children and dependants were particularly asked to respond on these questions for themselves.

In general terms the pandemic has changed the situation of persons with disabilities where the working hours were reduced. In terms of the financial effects on the families, COVID 19 affected the most family income of (21% of parents and guardians reported decrease of income) of children and persons with disabilities. Income of five percent (5%) of the families of persons with disabilities who personally responded to the survey was affected. Least affected was the income of families of women involved in agriculture and diversification activities (10%).

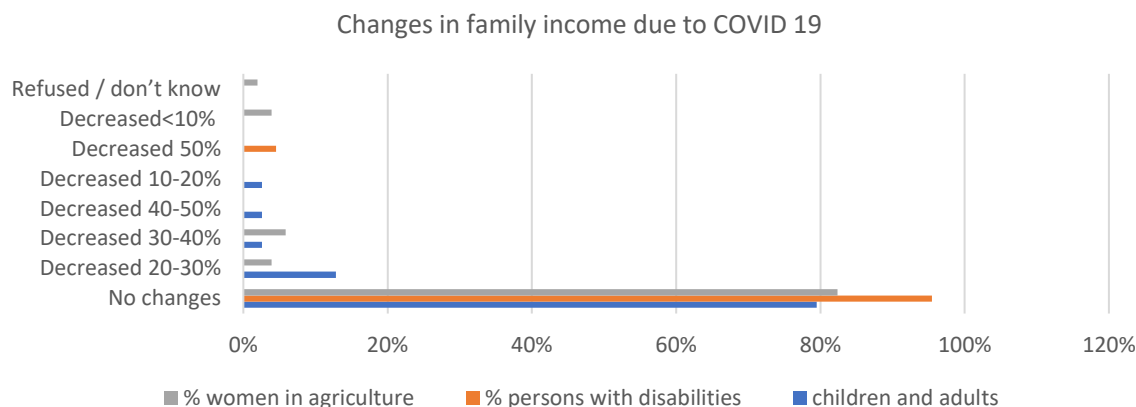


Figure 11 Changes in family income due to COVID 19

The families of children and adults with disabilities were most vulnerable during the COVID 19 crises due to the decrease of family income and parents' guardian's reduction of working hours. This situation affected the care for children which was additionally part of the survey. Least affected were parents/ guardian of children and persons with disabilities since they take care of the children on everyday basis. The care increased for women and men in agriculture and for persons with disabilities who were left out of job.

7. Usage and improvements in local services/ Governance

One of the survey objectives was to identify the frequency and quality of local services for target groups. In regards to **frequency**, parents/ use the most administrative services, while adult persons with disabilities and farmers use utility services. Persons with disabilities don't use municipal services as often as man and women involved in ADEA.

To determine the **needs for improvement of local services** in line with the needs of the persons with disabilities the survey collected responses on the same questions from all three target groups. The prioritised needs for improvement of the local services in line with the needs of the persons with disabilities are different among the target groups. While farmers put local infrastructure first, persons with disabilities, put the provision of social services and social activities- in terms of expanding the existing social services in type, capacities and scale, as well and formation of body/ provision of support to existing NGOs for persons with disabilities in order to maintain always open and inclusive for all club for socialisation, trainings delivery, as first priorities. Their second priority include support for inclusive cultural activities and cultural events which indicates again that the socialisation of the children and persons with disabilities is not on a satisfying level and contributes to their exclusion. Third prioritisation is given to improvement of access to administrative services on local level.

Most important for the purpose of this mapping process, are the priorities set by parents/ guardians of children and dependants The priorities for children and dependants are related to their socialisation and include:

- Improvement of social services and social activities in terms of expanding the existing social services (in type, capacities and scale),
- Formation of consultative body/ supporting existing NGOs for persons with disabilities to maintain an inclusive and always open club for socialisation or trainings delivery, etc
- Improved conditions for sport and recreation of persons with disabilities
- Support of inclusive cultural activities and cultural events
- Adjusted accessibility of offices that provide administrative services (for both physical and intellectual disabilities)
- Improvements of education related services (preschool, primary and secondary school activities)
- Local infrastructure (local streets, roads, etc)

There is a 100% agreement among the respondents about the need of public investments in improving the services on local level. The findings about the **conditions of the public space** (conditions of architectural accessibility, availability of green and public areas, and public space that provide opportunities for social /recreation/sport activities) and issues specifically linked to persons with disabilities, correspond with the findings in the questions related to the local services.

- The summary of conclusions from three groups identified: Architectural barriers as condition that affect the public space usage by children and adults with disabilities and lack of adjusted space for inclusive activities
- Adult persons with disabilities identified: Lack of inclusive space for inclusive activities and inclusive playground and inclusive recreational spot; Bad conditions of public space that is crucial for the outdoor activities; Lack of green public space; Architectural solutions to the local infrastructure
- Parents/ guardians evaluated the public space as not architecturally inclusive putting priority to physical accessibility including: Sidewalks of local streets; Lack of elevators and ramps; Lack of inclusive public space for inclusive activities; Lack of inclusive playground and inclusive recreational spot; Bad signalisation; Lack of green and public space

8. Current position and possibilities for future involvement of persons with disabilities in agriculture and diversification activities

This section will include the analyses which are clearly related to the situation of persons with disabilities, children and their guardians' parents in the agriculture and diversification activities. Aim of these findings will be to map the current involvement and investigate the possible interest and willingness for inclusion in this sector. Due to the nature of the agriculture activities the respondents in the survey responded predominantly for agricultural activities in fruit growing. The analyses show the different perspectives on the matter by the three survey target groups. The situation and possibilities for inclusion in other agriculture sectors are also noted in the analyses of focus group recommendations.

8.1. Situation and possibilities for inclusion of parents/ guardians and dependants in ADEA

There is one person who has reported involvement in agriculture as employment sector. Almost one third of the families (31%) report involvement in agriculture. There are fruit growers (21%), livestock breeders (8%), beekeeper (3%) and crop producer (3%).

Agriculture is primary source of income for the 20% of the families where children and persons with disabilities who have guardians live. Agriculture is also additional source of income for 11% of the families.

The mean/ average of the reported income from selling of agricultural products is around 63 Euros per month in the last year.

The involvement of the children and persons with disabilities who have guardians in ADEA is categorised as just helping for one 42 years old woman and a 14 years old boy.

There are two boys (aged 7-18) who are active and engaged in the family farm work but of course do not receive payments for their work in the farm. The rest of children and dependants are not involved in agriculture activities.

Those who are involved, are not trained for it, apart from the 42 years old woman for whom is reported that she has obtained the knowledge thorough helping on farm.

Majority (17%) of the parents and guardians do not know how it will be, or refuse to respond about possibility for provision of trainings to their dependents for possible involvement in the agriculture activities if they express interest. They are sceptic about the possible involvement of dependants in agriculture activities since only 8% think that it is possible to be involved and 10% think it's impossible to involve dependants in Agriculture.

The remaining parents and guardians who did not provide responses to the questions are parents and guardians of persons who are officially assessed as unemployable.

Families of children with disabilities are not involved in diversified economic activities. There are 11% of parents and guardians consider that there is possibility to include the dependents in the agriculture and diversified economic activities.

8.2 Situation and possibilities for involvement in ADEA of adult persons with disabilities

There is one person with combined disability, aged 22, who is involved as paid worker in agricultural activities.

Initially only two families of persons with disabilities identified agriculture as additional income activity. However, the responses provided in next section related to agriculture as additional income generation activity, show that 32% of the respondents confirm that their families are involved in agriculture related activities. To be more interesting in the later definitions of income generation and involvement in agriculture sector the number rise to 37% out of which 32% are involved in fruit growing and 5% in vegetables production. At the end the responses declare agriculture is primary source of income for 9% of the survey respondents while its additional income for 28%.

The role of persons with disabilities in the families where the agriculture is primary source of income is that they are just helping. The role of persons with disabilities in families where agriculture is additional source of income is same, they are just helping. There is only one person in this category that is actively working and not being paid for his work.

There is one person with disability who obtained vocational education in agriculture from the high school in Resen. There are not evidenced cases about persons who are trained to work on farm except one person who declares that he has learned how to do agriculture work while working on the farm. There is expressed will for education among persons with disabilities to learn and gain additional skills so they can contribute to the agriculture activities on farm, especially those who claim that are not involved or just helping on farms.

In relation to diversified economic activities there is just one person that declares involvement in food processing as diversified activity on farm, and is involved in both agricultural and diversification activities. There are 50% of persons who provided responses to the question about the possible involvement in ADEA if they express interest. The rest have not provided any responses. From those who responded there are 32% who consider possibilities for

involvement in agriculture and diversification activities, while 18% consider that they can't get involved.

Persons with disabilities do not report incomes and family incomes gained through ADEA.

8.3 Perceptions of farmers for possible inclusion of persons with disabilities in agriculture and rural development activities.

There are 93% of the farmers who think that if there is suitable training for persons with disabilities, they might get involved in activities on the farms:

- 40% of them consider agriculture as activity where persons with disabilities can get involved
- 28% consider that persons with disabilities can be included in both agriculture and diversification activities
- 5% consider that only diversification activities might be possible for involvement of persons with disabilities.

There are 7% of the farmers (both man and woman) who don't know or refuse to respond to the question about the possible involvement of persons with disabilities in ADEA.

The nature of the diversified economic activities that are practiced among farmers include:

- 24% are processing food on farm
- 11% are renting rooms
- 3% own a small restaurant
- 9% do other things defined as work on projects, selling honey, production and serving of traditional food

In spite of the reserved position of parents, guardians and the adult persons with disabilities about possibilities for involvement in ADEA, farmers are more optimistic about possibilities for engagement of persons with disabilities in ADEA. Agriculture in Municipality of Resen is primarily seen as fruit growing. Once the farmers took a look of other agriculture sectors in the questionnaires, there is increased rate of positive responses in favour of involvement of persons with disabilities in ADEA

9. Main findings from the survey and focus group analyses

9.1 Groups that are left furthest behind as result to the survey¹⁴ and focus group analyses

Children and dependants with disabilities who live in economically unsafe families where parents or guardians do not have stable source of income are socially excluded. In spite of the fact that the parents obtain employments in various sectors there are cases of families which report that grandparents’ pensions as the only stable income in the families. Children who live in families where parents are not employed and there are no grandparents are the group that is most affected. Parents and guardians of dependants’ report food insecurity, unaffordable heating, protein deficiency and lack of funds to buy medical supplies for the children with disabilities.

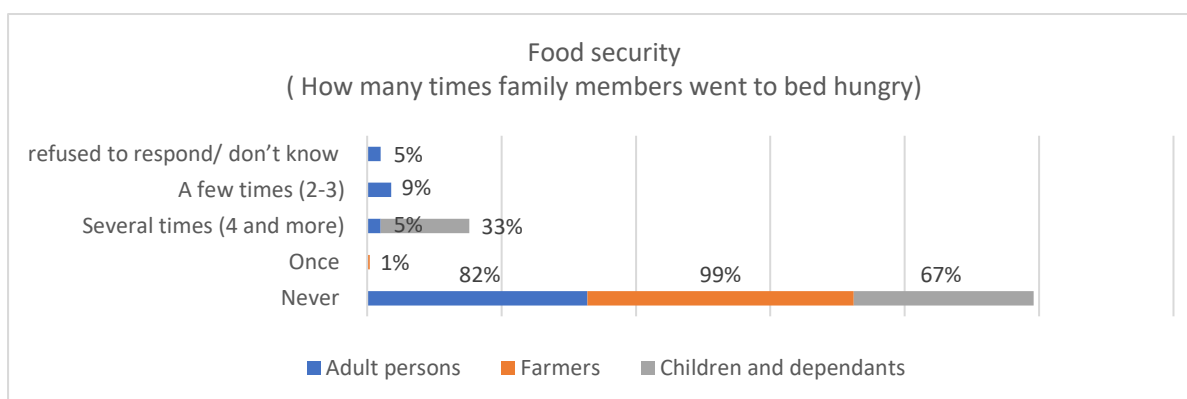


Figure 12: Received responses on the question: In the past month did you or anyone in your household ever go to bed hungry because you couldn't afford enough food for them?

There are children whose disability requires attendance at special schools in other municipalities, for whom parents dedicate time and funds to secure transportation and food. For some of them the schooling of children is reported as burden. There are children who do not have home computers and access to IT due to economic reasons, which prevents them from continuous participation in education which leads to discrimination.

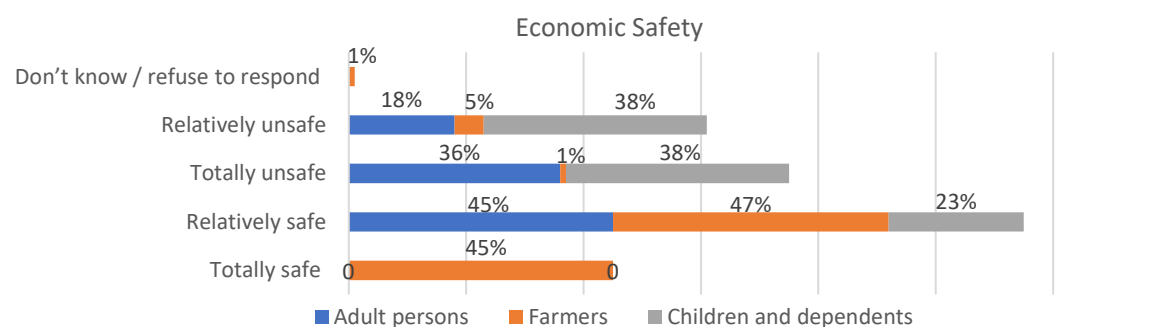


Figure 13: Economic safety as declared per target groups

¹⁴ The survey was carried out with three target groups as survey with specific focus. The comparative analyses are carried out for the three target groups and the farmers, The comparison with data for general population is excluded as general population was not included in the survey.

Dependants with disabilities who are aged over 26 year and do not have any education or use the municipal day care services and are about to lose aging parents/ guardians are potential most excluded groups for the future. (Socioeconomic status and governance). The group of furthest left behind children and dependants include:

- Children from villages who do not attend any education neither attend day care centre
- Children with disabilities of unemployed parents living in families that do not have stable income
- Children and dependants with disabilities who do not have health insurance
- children with disabilities for whom the primary education is not available in Municipality of Resen due to their disability
- dependants (aged 26+) who do not have any education or do attend day care services
- Unemployed dependants officially assessed as employable
- Children and dependents whose interests and situation are not considered in this social mapping process due to refusals from parents/ guardians to take participation in it.

The immediate cause for children's situation is socioeconomic status due to parents' unemployment and therefore lack of stable family income.

The underlying causes include lack of caregiving services and possibilities for parents to get employed. This in turn is a direct consequence of the lack of accessible architectural solutions which would improve accessibility of education activities and continuous provision of assistance in the education cycle.

The root causes are linked to lack of policy measures specifically directed to these categories of children (children that need to attend education in other municipalities, and children who live in families which face economic vulnerability).

For the children with disabilities for whom education cycle has to be undertaken in specialised schools outside municipality Resen immediate causes include additional burdens to family budgets and time consumption for transportation provided by parents. The underlying cause is unavailable school transport provision and the root cause is lack of policy interventions in national and local policies and laws for enabling parents to fulfil their legal rights and provide education for the children

(For the third category linked to the uneducated dependants who are unemployable and taken care of their parents, siblings, or themselves there is a need for evidencing them and putting them in the social system for care in order to be able to use the benefits of the denationalisation process. This is not part of the municipality of Resen, but may serve as guidance for the deconcentrated national institutions.)

Among the **adult persons with disabilities** those without education who have rare employment possibilities. Those who are well educated and unemployed due to the fact that they invested in their education and passed the process and they are again vulnerable to economic shocks in similar terms as those without any education.

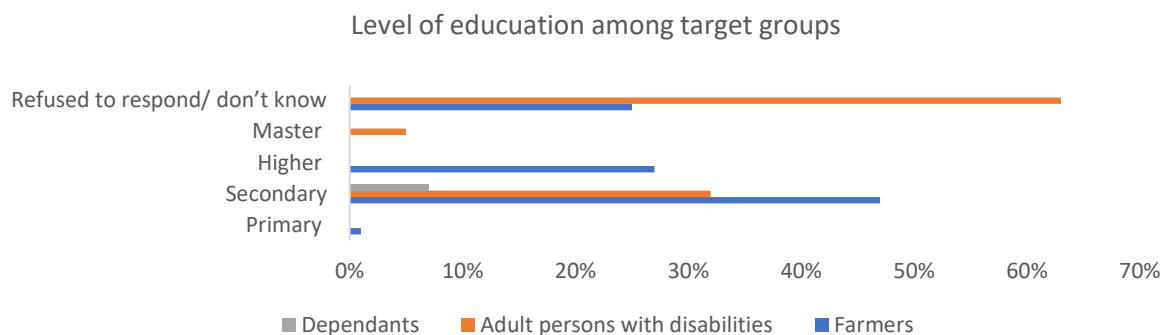


Figure 14: Reported level of education among target groups excluding children aged below 18 years.

Adult persons who have not undergone official employability assessment, lose the opportunity to get employed in line with their functionality. This sub-group reports bad living conditions in terms of vulnerability of shocks due to the fact that their nutrition is poor, there are persons who can't afford to pay bills and buy medicines. Persons with disabilities involved in informal sector, lack health insurance and are excluded from medical care.

Furthermore, women with disabilities are also left behind. There is no evidence of adult women with disabilities being an owner of the dwelling. Men with disabilities who live in families with senior parents also do not identify themselves neither as household owners nor as head of households, which is also a case of male farmers where they are also not reporting as owners of dwellings or head of households.

Adult persons with disabilities without education fall in the category of the LNOB due to the socioeconomic status as a major risk factor which is reflected in their employment status and living conditions.

The groups that are left furthest behind from this category are:

- Children of unemployed persons with disabilities are identified as a new group that is left behind.
- Children of employed persons with disabilities, as they live in reportedly economically unsafe families. The most reported sources of income of adult persons with disabilities are social/care benefits which they receive and in some cases are below 50 Euro per month, or if employed salaries lower than national average.

Immediate cause of why unemployed persons with disabilities are left behind is the low living standard.

The **underlying cause** is the low personal income (reported as social benefits for care and in some cases family pensions). This affects the unemployed persons who are not assessed formally as unemployable as they are also not carriers of part of the benefit system due to the limitation and determination of their employability. The social mapping survey also indicated that there is scepticism about **involvement of dependents and persons with disabilities in ADEA**. There are 10% of parents and guardians who believe that training and involvement in ADEA for children and dependents is possible and will be successful.

The **root causes** are more: *social stigma* is one of the factors that left these persons behind from early age, when they were themselves children with disabilities. The other root cause why this occurs is lack of social activities for the children with disabilities which still prevails, and limited access to education that requires efforts from parents as one of the main conditions for children's education. The parents remained main care providers of children also due to lack of adjusted education facilities as well and lack of assistance during the overall education cycle (from early age to end of secondary education). The limited access to high school

education (due to lack of assistants) makes the children study remotely which adds to their socialisation and isolation. The last and major root cause is governance in particular low level of institutional and public trust is also indicated as a major root cause problem among persons with disabilities because half of the identified adult persons with disabilities refused to participate in the survey.

Women in agriculture and diversified economic activities. In spite of the notable number of women in Resen who are either employed or registered farmers (own the land), both groups do not identify themselves as major providers for homes in spite the fact that the average reported working hours are 44 per week. **There are 86% of women in who are owners of agricultural land but are not owners of dwellings where they live.** This reveals unequal power sharing in the households in favour of men, but also indicates self-perception of women as being less important or lack of awareness about their rights. Unemployed women (women who are out of work, are homemakers, do informal jobs and other unpaid work) registered as owners of land, who are not registered in the employment agency as job seekers and are without health insurance are left behind due to their socioeconomic status as major risk. There is a need for improvement of contribution to social and pension schemes.

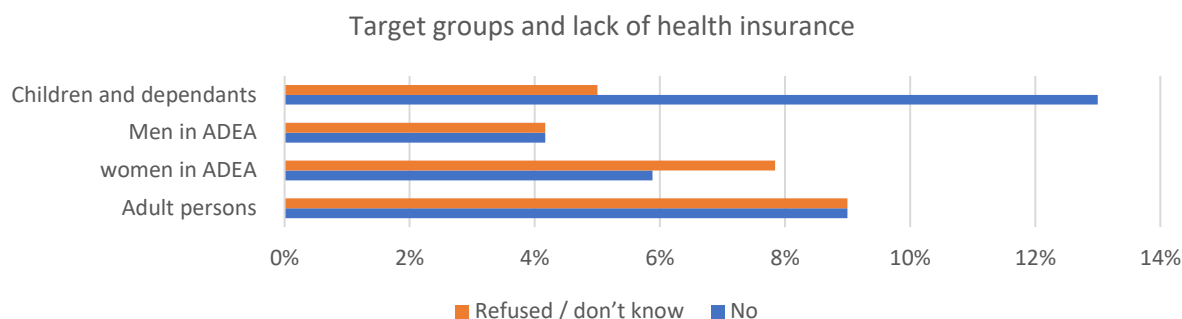


Figure 15: The indicated lack of health insurance among target groups

The qualitative survey showed that this occurs as a consequence of lack of financial resources that are usually flowing in the family budgets during sale of crops, which prevents the families to pay the social and pension benefits both for men and women. In this regard the women fall behind the men. The survey indicated that general reported coverage with social benefits (both of men and women) in ADEA in Municipality of Resen is 56%. Women in ADEA whose level of education is left on primary education (18%) are excluded due to the socioeconomic risk factor. In spite of the fact that education is linked to the discrimination factor is not possible to confirm it as it's not clear what were the reasons why they have not obtained higher education. Women in ADEA are vulnerable to environmental shocks due to water scarcities which are reported in 65% of the cases and environmental problems reported by 78% of the farmers.

- Unemployed women with primary education working on family farms and not being employed as farmers, in spite of the fact that they are owners of the land.
- Women who contribute in social benefits system as farmers, do not have right to have paid maternity leave. In spite of the fact that this issue is not subject for policies on local level it's important to address it in order to take place in the national level setup.

This makes women in agriculture (specifically the category that is owner of land, but not registered as employee in agriculture, neither is employed by another employer) specifically vulnerable.

The immediate causes are lack of education and employment

The underlying cause is low participation in the social benefits system, and obtaining support from it, because of doing unpaid jobs.

The fact that the women do not declare themselves as head of households is additional factor that puts them in vulnerable category due to income and management of personal funds.

The root causes for this are the traditional family system that requires societal cultural change and understanding the role of women even among the women leaders (i.e., Instead of encouraging rural women to follow a traditional role model as cooks during the different events and festivals on Municipal level, more effort should be invested to motivate them to undertake role as equal partners in discussions and policy negotiation processes)

Farmers are also most vulnerable to environmental shocks due to reported scarcities of drinking water due to governance as risk factor

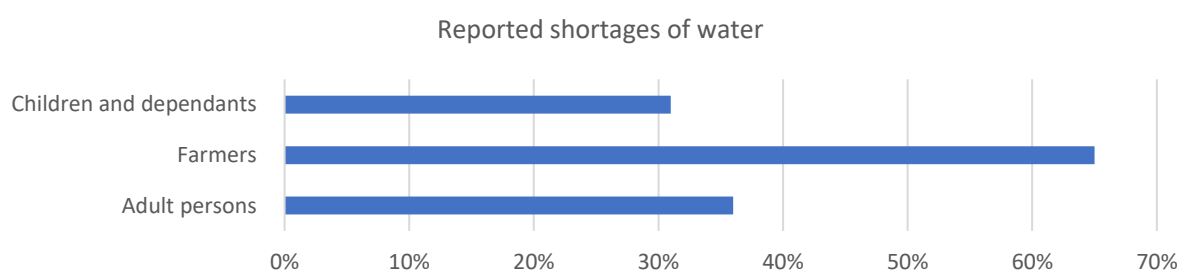


Figure 16: Reported water shortages during May 2021 among target groups

10. Focus groups findings and analysis

Education of the persons and children with disabilities face obstacles. The major obstacle in participation in education process include:

- Lack of educational and personal assistants who will accompany the child (one assistant for one child during the whole cycle) during the whole education cycle of the child (usually they are temporary and project based, they are changing and children have to get acquainted with more than one person¹⁵)
- Lack of adequate inclusive architecture for accessibility to schools
- Lack of inclusive facilities within schools (most affected are girls with disabilities during their periods)

In regard to socio-economic status:

- Children with disabilities face poverty issues because their parents/ guardians face status of long-term unemployed. This is because of their engagement in providing care for the children (including acting as personal assistant during the schooling time)
- Persons with disabilities face discrimination based on their disability for obtaining employment
- Persons with disabilities do not always and regularly report at Agency for employment

¹⁵ Parents reported changed assistants, mistrust, difficulty for kids to adapt to new persons at their age and situation. (i.e., A Mother explained that her daughter with physical disability in spite of having assistant she never felt comfortable to change the menstruation pad in the unadjusted toilet with the assistant)

- The health services are available through the health centre in Resen. There is a need for improvements in internal architecture accessibility of the health centre (elevators, ramps)
- Children and persons with disabilities have public based health insurance available.
- Children with disabilities face difficulties to socialisation in the community due to (lack of spots for play and recreation where they can be with other children- apart from school activities)

Governance

- Persons and parents/guardians of children with possibilities do not have full opportunity to participate in the local activities for consultation of citizens during decision making processes. This is due to the inaccessibility of the premises of municipal office where most of the consultation processes take place. The major space is on the second floor, and adequate inclusive facilities in the building (i.e., Toilets) are missing.
- The representation is low also due to lack of human capacities of the persons in the one NGO Humana Prespa, to represent the interests of children and persons with physical disabilities. In addition, there is no formal mechanism for advocacy and lobbying on behalf of persons with intellectual disabilities with the aim to advance their rights (during focus group discussions, 30% of participants discussed the needs of the persons with physical disabilities)
- There aren't inclusive cultural facilities on the territory of Municipality Resen
- Lack of adequate inclusive architecture for accessibility to schools
- Lack of inclusive facilities within schools (most affected are girls with disabilities who are in their period cycle)

In regard to women in agriculture and diversified economic activities, major focus group findings include that woman in Municipality Resen, have advantageous position than women in agriculture and diversification in other rural municipalities.

- Their involvement in agriculture and rural development is predominantly seen as a supporting role and they do not have a leading role on the farm.
- Women involved in agriculture and diversification activities have in general secondary education. Those having university education are employed in other sectors and are included in agriculture and diversification activities as additional source of income. Diversification activities (Catering, renting rooms, rural tourism, food processing on farm, etc.) are perceived as women's business (they cook, they serve).
- Climate change affect the women to shift their engagement to a more income secure sectors. They obtain industrial employments. The reasons for this are the climate change (effects on the harvest and income) and low prices of produced crops.
- Women are not included in the overall decision making in relation to domestic budgeting and financial planning, apart from the section related to grocery shopping, everyday food, and home related expenditures.
- Women who contribute in social benefits system as farmers, do not have right to have paid maternity leave. In spite of the fact that this issue is not subject for policies on local level it's important to address it in order to take place in the national level setup. This makes women in agriculture (specifically the category that is owner of land, but not registered as employee in agriculture, neither is employed by another employer) specifically vulnerable.

10.1 Focus group and interview findings in regard to Involvement of persons with disabilities in agriculture and diversification activities

The focus groups findings and interviews conclusions are that there isn't participation of persons with disabilities in agriculture and diversification activities, and there is lack of understanding among the general population about what inclusion persons with disabilities in the process means. The focus groups understood agriculture a primarily as apple growing. Diversification activities needed additional elaboration.

- There is open door and agreement that persons with disabilities need to be included in the agriculture and diversification activities
- There is a need for establishment of linkages between the farmers and persons with disabilities
- There is a need for discussion and consent from parents/ guardians to involve persons with disabilities.
- There is a need for including and other agricultural sectors (gardening including flower growing where persons with disabilities may participate)
- There is a need for training for inclusion of persons with disabilities in diversification activities
- Possibilities for inclusion of persons with disabilities in catering services may provide other vulnerable groups with food and might be supported as providers of food for municipal service providers (kindergarten, schools, day care centre, etc)
- There is a need for trainings of farmers and women involved in agriculture and diversification activities on how to include the persons with disabilities in the economic activities
- The job positions that they may contribute are assistance in cooking, preparation, serving of food, etc.
- There are elaborated project ideas of persons with disabilities for tourism related projects and their inclusion in the existing value chains (one for crafts, one for touring and manifestation, both carries out by persons, children and parents/ guardians with disabilities). Its idea of NGO Humana Prespa who consider that if they have space, they need a printing and embroidery machines so they can provide the value chain with relevant branded clothes and souvenirs. There is idea about prequalification for the employments in IT, work at on farm economic activities.
- There is a need for assessment of possible skills that can be developed and are linked to agriculture and diversification on farms (evidence on farm, accounting, digital skills in marketing)
- Persons with disabilities may contribute to tourism activities as guides, organising visits, organisation of cultural events for tourists and visitors like theatres, organisation of joint cultural activities with children and persons with disabilities from other countries on cross-border level.
- There is a need for space where the trainings and practice will be held.
- There is a need for support in facilitation of dialogue, agreements (person/ organisation who/ which will manage and coordinate the activities)
- There is a need for establishment of systematic approach to the process.

Recommendations and conclusion

Analyses with the Five Factors of the LNOB in comparison to the findings and definition of the priority SDGs where most urgent actions are needed are as follow:

1. Generalised conclusions and recommendations related to reduction of the **discrimination**:
 - Conclusion: there is a need for improvement of situation with the cross-cutting nature of discrimination (exclusion, inability to participate in social life with the community by playing, socialising etc) faced by children and persons with disabilities on the territory of municipality Resen.
Recommendation: To eliminate identified discrimination gaps in social life and education, employment and other sectors that cause these situations. To improve infrastructural barriers including accessible infrastructure and inclusive playgrounds and inclusive spots, where children can spend more time socialising with community..
 - Conclusion: There is lack of awareness and therefore lack of existing capacity building activities for the public about the discrimination on local level
Recommendation: To introduce trainings, campaigns and other capacity building activities with social and inclusive character on local level (including enabling accessibility and openness for LNOB groups to secure their involvement and participation in those along with other community members)
 - Conclusion: The lack of education and personal assistants in secondary education leads to exclusion of the children with disabilities to participate as regular students with peers in the education process. They rather continue secondary education as remote (vonredni) students.
Recommendation: There is a need for introduction/ continuation of the same personal/ education assistants in the secondary education cycle to enable children to continue with education and their social life with the peers in the schools. This is recommendation for policy intervention on national level.
 - Conclusion: There is a need for raising awareness among men and women about the what unpaid work mean, what is a pay gap.
Recommendation: To design and implement education activities where women and men will become aware what unpaid work and pay gaps are. Specific attention should be given to women who are also included in ADEA. The activities should include practical exercises and efforts to put the knowledge in action in the frame of the training activities.
 - Conclusion: Women in agriculture and diversified economic activities need support to start participating in the income distribution in the home gained though their agricultural activity on family farms.
Recommendation: There is a need for skills development among women and men in ADEA what income distribution and investments decisions are. This will improve their economy on farm and improve involvement of women into decision making about investments.
 - Conclusion: There is a problem for women who are employed in agriculture and pay benefits and do not receive maternity leave.
Recommendation: There is a need for finding appropriate systematic cross sectoral solution on national level (agriculture, social affairs and health) to Improve the status of women in ADEA in relation to maternity leave and other social benefits
 - Conclusion: There is lack of understanding of what Inclusion is among the community.
Recommendation: There is a need for more local based actions (building inclusive spaces, playgrounds, adjusted toilets, as well and capacity building activities) in order

to enable the inclusion and at the same time to acknowledge local community about importance of the inclusion.

- Conclusion: There is a need for attention to adult persons with disabilities who loose their parents and guardians due to age and are unable to take care of themselves
Recommendation: The intensified cooperation between national bodies should provide on time care for these persons who are out of jobs or unemployable. There is a proposal for adjustments and utilisation of their properties (houses) as family homes that as proposal need more legal attention.
2. Generalised conclusions and recommendations related to **geography**:
- Conclusion: The accessibility to public services requires improvements in infrastructure means.
Recommendation: To Improve local infrastructure, transportation, and/or public services. This will reduce limitation of the choices, mobility and opportunities for people with disabilities on the whole territory of town Resen. The should be put to areas and for villages where persons with disabilities live.
 - Conclusion: There is lack of wastewater treatment in the villages.
Recommendation: To connect villages to the waste water treatment system. This applies for the villages where it is not available.
 - Conclusion: There is a need for introduction and improvement for public transport facilities to serve all age groups of persons with disabilities.
Recommendation: To introduce inclusive public transport facilities (vans, access to stops in the villages etc) that will serve the persons with disabilities (not just the users of the day care centre and students)
3. Generalised conclusions and recommendations for decreasing **vulnerability of shocks**
- Conclusion: There is identified water supply deficiency among the LNOB groups.
Recommendation: There is a need for experts' assessment and projection of water supply for the future as well improvement of current water supply principles, to secure sufficient and constant quantity of drinking water, on the whole territory of the municipality of Resen.
 - Conclusion: Farmers in Resen face climate change challenges with negative effects on crops and yields which quality and quantity is affected to environmental shocks caused by climate change.
Recommendation: upgrade the national support systems for farmers and women affected by climate shocks (heil, frost)
 - Conclusion: Decreasing of Prespa Lake is affecting the diversified economic activities in specific the tourism sector.
Recommendation: There is a need for undertaking relevant activities (revision of concepts, structures and target groups) to restructure/ realign tourism-based activities (related to diversification) in line with the constant decreasing of Prespa Lake water level, on national and local level.
 - Conclusion: There is identified pollution among LNOB target groups.
Recommendation: Continuation and work on preserving environmental standards by provision of adequate services on local level for protection of the environment including air, water and nature.
4. Improvement of local **governance**:

- Conclusion: The day care center and the space of Humana Prespa is not fully used by all persons with disabilities (this was also stressed for the period of pandemics, where persons with disabilities couldn't utilise the premises of Humana Prespa)
Recommendations: There is a need for raising awareness among persons with disabilities about better utilisation of the public care services and space of Humana Prespa. There is also need for improvements in means of expansion of facilities, and organisation of time and mode for usage time in order to be available and accessible to all.
 - Conclusion: Parents of children with disabilities that need special education are affected by higher costs for education of the children. They spend more resources on transport for children who are attending special schools that are not placed on the territory of municipality of Resen
Recommendation: The municipality and the national care/ education system should provide support for school transportation costs (free lunch for children with disabilities in primary schools and transportation costs for children who must attend special schools outside municipal borders)
 - Conclusion: The parents and adults with disabilities do not fully participate in local decision-making processes (consultations, drafting strategic documents on local level)
Recommendation: The Inclusion of the interests of children with disabilities through guardians and parents in decision making municipal processes is essential to enable their socialisation and inclusion.
 - Conclusion: There is a need for appointment of municipal administrator who will be contact person for the LNOB groups including adults and children with disabilities, so they can proceed the ongoing issues faster to municipal decision makers.
Recommendation: There is a need for appointment of contact person from municipal administration who will provide support and communication between the LNOB groups and the municipal council
 - Conclusion: There is not full inclusion of interest of LNOB groups children and adults with disabilities and women in ADEA in municipal budgeting processes.
Recommendation: There is a need for introduction of steady LNOB based budgeting process (not just gender based)
 - Conclusion: The LNOB groups are not well informed about the processes on local level.
Recommendation: There is a need for improved transparency measures in the municipality to increase possibilities for including of persons with disabilities and parents/ guardians of children and dependants with disabilities in the local activities (consultations for inclusion in public life, cultural events, local economy and education).
 - Conclusion: Parents/ guardians and adults with disabilities feel partially invisible to the community.
Recommendation: There is a need for better inclusion of needs of persons with disabilities in visible activities of municipality, by improving the accessibility and infrastructure such as ramps, elevators and access to the local events and processes.
 - Conclusion: Persons with disabilities lack representative capacities on local level.
Recommendation: There is a need to support LNOB groups to voice their concerns by capacity building and sustainable organisation, identified as body that will be representing their needs, or club where they can organise and define the needs and demands.
5. General conclusions and recommendations for Improvement of **socio-economic status** (access to health services, available but not fully utilised system of social services and education, social support and employment)

- Conclusion: The parents of children with disabilities face socioeconomic hardship to provide food security to children with disabilities. The most affected are parents in long term unemployment and families that declare grandparents' pensions as only steady income.
Recommendations: There is a need for involvement of parents of children with disabilities in economic activities on local level, including possibilities for their involvement in ADEA/ care related/economic activities (i.e mentorships) that will also enable them to spend the quality time with their dependants and children. That might be done through the adult education in order to secure modes and models for their employment and reduction of their long-term unemployment; To provide incentives – where possible for inclusion of the parents/guardians and persons with disabilities to access decent jobs on local level.
- Conclusion: There is lack of events and activities where children with disabilities can socialise, integrate and spend time with their peers, including inclusive playgrounds and spots.
Recommendation: Develop a systematic approach for improved social involvement and integration from early age in community (sports and culture events, social events, cultural activities for children and adults)
- Conclusion: The socioeconomic situation of persons with disabilities is caused also by lack of capacities on local level to enable its improvement according the nature of the area.
Recommendation: To introduce and start capacity building activities for relevant stakeholders about importance of the socioeconomic development and inclusion of target groups in the local economic activities including agriculture and diversified economic activities in rural areas. This is to be done along with available programmes and projects on national, local level but also with donor community
- Conclusion: Persons with disabilities need to go through employability assessments in order to improve their employment status and possibilities for obtaining relevant/ work related qualifications.
Recommendations: Performance of accessible service for assessment of employability for persons with disabilities to detect their status and open possibilities of on job trainings and employments in the future There is a need for provision of trainings and activities for integration of persons with disabilities according their functionality in the economic and agriculture and diversified economic activities (gardening, flowers, tourism, catering, IT related occupations /sector, on farm economy and accounting were mentioned as possibilities both in focus groups survey and interviews) to improve their socioeconomic status and wellbeing.
- Conclusion: Health Center in Resen is working in favour of the LNOB groups through various efforts (regular home visit, provision of services and mobile ambulances) to bring closer the health services to the LNOB groups. However, there are limitations that are related to the accessibility expressed by the persons with disabilities for the inner part of the Health Center.
Recommendation: There is a need for continued cooperation with Ministry of Health/ local health centre in order to enable easy access to the available specialistic health services on municipal territory to all. There is a need for introduction of ramps/ elevators within the health centre for better access to specialistic practices.
- Conclusion: There are limitations of the capacities among local stakeholders in economy sector about the status of persons with disabilities.
Recommendations: There is a need for overall capacity building activities among local stakeholders in economy sector including men and women in ADEA about possibilities for inclusion of persons with disabilities in their businesses. There is a need for

establishment of permanent linkages among the local business sector and persons with disabilities or their guardians and parents to improve their employability and socioeconomic status.

The table below presents the problems identified and their linkage to the respective Sustainable Development Goal. It also includes priorities which are results of the social mapping process which are aligned with the particular SDG indicator by their effect.

Problem identification	SDG ¹⁶	High effect	Medium effect	Low effect	Key institutions
	SDG 1. End poverty in all its forms everywhere	SDG Indicator: 1.3 Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable) 1.3.1 Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, newborns, work-injury victims and the poor and the vulnerable			
Parents/ guardians and persons with disabilities face poverty issues		Recommendation 1: Improve the provision of quality day care services (spatial expansion of day care centre) and adequate education facilities (accessible infrastructure and in- building facilities, and permanent assistance) for children and dependants to enable parents/guardians			Municipality Resen (Ministry of labour and social policy, Agency for employment)

¹⁶ Here 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.

		participation in the labour market.			
Lack of common activities for parents/guardians and children with disabilities in ADEA			Recommendation 2: Support parents and guardians in activities related to ADEA (tourism, crafts, cooking, etc) where they can work together with their children and persons they care of.		Municipality Resen Non formal education providers Donor community
Women in ADEA do not receive maternity leave benefits		Recommendation 3: Provision of support for women who have been excluded from the social care system in terms of receiving maternity leave benefits			GORNM: Ministry of Agriculture Forestry and Water Economy (MAFWE) Ministry of Social Policy Ministry of health through the fund for health insurance
Unemployed women working in agriculture sector only who are without any employment face discrimination due to low income		Recommendation 4: Provision of training for women in agriculture to develop skills in various diversification activities in order to increase their income, and meet the minimal requirements for			Non formal education system ADEA programmes internationally funded (donors Ipad) and national measures through MAFWE

		participation in social /health system			
Lack of accessible infrastructure at local schools	SDG 4. Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all	SDG Indicator: 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 4.a.1 Proportion of schools offering basic services, by type of service			
Lack of standardised accessible architectural solutions to and in schools and care facilities		Recommendation 1: Introduction of inclusive accessible architecture to (traffic infrastructure, ramps, etc.) and inside (toilets, elevators, etc.) the education and care facilities			Municipality Resen (Ministry of education and science)
Day care centre has only one room and need additional space to accommodate more persons in comfortable way		Recommendation 2: Expansion of space for day care activities (adjustment of existing municipal building for day care service and additional indoor activities)			Municipality Resen (Ministry of education and science)

<p>Lack of school transportation for access to specialised schools</p>		<p>Recommendation 3: Provide support for transportation of children to specialised schools in neighbouring municipalities.</p>			<p>Municipality Resen Ministry of Education of RNM</p>
<p>Low level of involvement and possibilities for treatment and involvement of persons with disabilities in ADEA</p>	<p>SDG 2. End hunger, achieve food security and improved nutrition and promote sustainable agriculture</p>	<p>SDG Indicator 2.3 By 2030, double the agricultural productivity and incomes of small-scale food producers, in particular women, indigenous peoples, family farmers, pastoralists and fishers, including through secure and equal access to land, other productive resources and inputs, knowledge, financial services, markets and opportunities for value addition and non-farm employment</p>			
<p>Food insecurity and protein deficiency among children and persons with disabilities</p>		<p>Recommendation 1: Improve protein nutrition and food security among families with children and persons with disabilities by enhancing support (training, linkages, facilities) for parents/ guardians' employment. <u>Recommendation 2:</u> Expand municipal services care services, support parents to get jobs</p>		<p>Recommendation 3: Support for protein-based meals for children in schools</p>	<p>Municipality Resen Local Actors Ministry of labour and social policy International projects</p>

		to be able to provide food on long term.			
Lack of training related to agriculture and diversified economic activities adjusted to the functionality of persons with disabilities (in line with SDG 4)		Recommendation 4: Provision of capacity development activities for DEA in rural areas for persons with disabilities	Recommendation 5: Access to land for interested persons with disabilities who do not own land - to get involved in ADEA		International projects (i.e SEDRA) Ministry of Agriculture Forestry and Water Economy Municipality Resen
Women in agriculture face discrimination in relation to income distribution		Recommendation 6: Provision of trainings for long term unemployed women in agriculture to obtain skills for diversified economic activities			International projects (i.e SEDRA)
Pay gaps in ADEA		Recommendation 7: Improve awareness about unpaid work and pay – gaps among women in agriculture in Municipality Resen Recommendation 8: Build capacities on municipal level in terms of			Local actors, Municipality, international projects and organisations

		discrimination in ADEA			
Women in ADEA excluded from employment benefits		Recommendation 1: Evaluation and proposal of legal regulations adequate to the local circumstances to improve level of participation in social system (pension and health care schemes) for women in agriculture and diversification activities			Local actors Ministry of Agriculture Forestry and Water Economy Ministry of labour and social policy
Women employed (and insured) in ADEA excluded from maternity leave benefits		Include maternity leave payments for women employed in agriculture. Cross check which of the other benefits are not applied for women in agriculture on state level.			Ministry of labour and social policy Ministry of Agriculture Forestry and Water Economy
	SDG 11. Make cities and human settlements inclusive, safe,	SDG Indicator: 11.7 By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for 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 women and children, older persons and persons with disabilities)			

	resilient and sustainable				
Lack of accessible architecture (ramps, lowered sidewalks, toilets, and other facilities) in schools, municipal buildings overall and public areas		Recommendation 1: Improve the access to and facilities within existing municipal buildings. Redesign green and public spaces in inclusive manner (make the public space inclusive everywhere by integrating inclusive architecture)			Municipality Resen
Stigmatisation of persons and children with disabilities. Lack of spots for socialisation and inclusive interaction within community		Recommendation 2: Define and construct new inclusive spots where socialisation of children/ persons with disabilities with the community will take place (inclusive playgrounds, inclusive recreational area)			Municipality Resen
	SDG 10. Reduce inequality within and among countries	SDG Indicator: 10.2. By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status 10.2.1 Proportion of people living below 50 per cent of median income, by sex, age and persons with disabilities			

<p>Poor representation of the interests of adult persons and children with disabilities in the local decision-making processes</p>		<p>Recommendation 1: Support/ involve/ invite LNOB groups representatives to participate in the local decision making (make their voices heard) Recommendation 3: Support formation or enable existing NGOs to become voice of the LNOB target groups in municipal decision making</p>	<p>Recommendation 2: Appoint a responsible person in the municipal administration to communicate the interests of LNOB groups to municipal council</p>		<p>Municipality Resen</p>
<p>Poor living conditions for families of children and persons with disabilities</p>		<p>Recommendation 4: Improve the regulations for employability of persons with disabilities (qualifications, inclusion policies, education, recognition of families' efforts to educate children with positive discrimination practices for employment of</p>			<p>GORNM Business sector Municipality Resen</p>

		<p>persons with disabilities with academic degrees; - Put emphasis on giving priorities for parents /guardians employments (qualification, positive discrimination measures)</p>			
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List of appendices:

Appendix 1: Survey Questionnaires:

Appendix 1.1 [Parents. / Guardians of children and persons with disabilities](#)

Appendix 1.2 [Persons with disabilities](#)

Appendix 1.3 [Farmers \(men and women in ADEA\)](#)

Appendix 2: Detailed narrative of survey results as embedded word document



Appendix 3: Survey data raw reports (as attachments)

Appendix 3.1 Data reports (raw) from the survey with Parents/ Guardians of children and persons with disabilities in Macedonian and English (excel files)

Appendix 3.2 Data reports (raw) in excel from the survey with Parents/ Guardians of children and persons with disabilities in Macedonian and English (excel files)

Appendix 3.3 Data Reports (raw) in excel from survey made with Farmers (excel files)

Appendix 4: Draft report from focus groups and interviews embedded to this document as word file



Microsoft Word
Document

Appendix 5: Local development strategy inputs (embedded as word document)



Intervention to LDS