



LNOB Social Mapping Report

Municipality of Štip

Author: PhD Marija Risteska

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Report on LNOB Social Mapping in Municipality of Štip



Social Mapping Results Report Template:

Social Mapping for identification of needs for social services for elderly and feeble people; disabled elderly people; Roma-women (victims of domestic violence) in Municipality Štip

**Municipality Štip; CRPM Consulting
PhD Marija Risteska
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Executive summary

Target group / LNOB group

The target groups for the survey were determined by officials from Municipality of Štip, based on their needs to improve the municipality's Social Plan and social services provided at local level. Their assumptions and perceptions on each population were noted and applied in the preparation process for social mapping. In that context, for each target group the objective was to define the potential focus, based on their vulnerability, disadvantages and limitations they face, risks of isolation, deprivations and discriminations in their community and other risks which in essence are in line with the LNOB factors. The social mapping focused on identifying the needs for social and health services at local level among the marginalized and vulnerable groups in the community:

- *Elderly and feeble people;*
- *Disabled elderly people;*
- *Roma-women (victims of domestic violence).*

- **Justification that the targeted populations are LNOB groups**

After the initial meeting at which the possible target groups were discussed, a brief analysis in order to justify that the targeted populations are LNOB groups was conducted.

LNOB factor geography consider persons who are at risk of isolation or social exclusion due to their settlement location and living standard (access to transport, technology, internet access etc.). Elderly and feeble people, as well as disabled elderly people due to frail health or lack of means and personal assistance might face difficulties to socialize and to live decent life. Moreover, Roma women are also affected by this risk because of poverty and poor living conditions compared to non-Roma women and most of them are from ghettoized settlements such as “Radanski pat” in Štip.

LNOB factor socio-economic status is important because economic security, sufficient monthly income and proper living conditions are valuable precondition for wellbeing of all citizens. Those who do not meet minimal living conditions and standard, have low or no income, face extreme poverty, and are one of the most vulnerability groups in the labour market (with informal employments and precarious jobs) are affected by risks of isolation and limited access to social services at the local level due to their socio-economic status. The initial assumption was that the elderly and feeble people, disabled elderly people and Roma-women face high probability to be vulnerable in this regard than other and to be left behind.

LNOB factor Discrimination consider groups that involve people who face discrimination on the basis of assumed or ascribed identity or status. The social mapping in Štip in this regard analysed the preconditions and situation of disabled elderly persons and Roma-women due to their higher risk for discrimination compared to elderly and feeble people. Namely, disabled persons in their life have high probability to face any kind of discrimination (at their workplace, accessing the public services, etc.), while Roma-women are doubly discriminated – as women in their home and as Roma in their community.

LNOB factor Vulnerability to shocks includes conflict, climate and environmental as risks that affect populations or places. Roma women in this regard are most vulnerable to economic

shocks because they are much more likely to be part of the informal economy or are unemployed - which is due to the traditional role of women in the home, many of them are unable to work and be economically independent which makes them more vulnerable. Their well-being can also be affected by the environment, as they often live in unsafe neighbourhoods, i.e., places where there is high level of crime.

LNOB factor Governance consider using the existing means for active participation in social and political life on local level, which as suggested by the elderly feeble people, disabled elderly people and Roma-women is at very low level. They rarely participate in social life at local level and do not support petitions or civil protests. Furthermore, as citizens they are quite passive in that regard and very often do not take any actions to protect their interests. It is especially noticeable that the Roma-women are not well informed about the political processes at the local level and almost none of them has met with a representative of the political and municipal structures from their municipality.

- **Summary of secondary data analysis**

Target group 1 - Elderly and feeble people - Population ageing is a common issue in many countries. The aged population is currently at its highest level in human history. Globally, the population aged 65 and over is growing faster than all other age groups. According to the data from World Population Prospects, by 2050, one in six people in the world will be over age 65, up from one in eleven in 2019.¹ In N. Macedonia ageing is an issue that is discussed both at national and local level. The data of the State Statistical Office for 2020, shows that in the country the population over 65 years consist 14.6% of the total population.² This suggest that ageing generates problems for the sustainability of the social security systems, but also poses a challenge for the public institutions because their number increases faster than the available resources for care and assistance. Yet, they are not just statistical number in the data bases and as elderly each one of them has own story. In order to cope with every day activities and to live fruitful and normal life in the community they need support and personal assistance.

Public policies and strategies at local level have objectives for integration of these populations in order to improve quality and quantity of their life. in the In Municipality of Štip, the number of elderly persons is slightly higher than the state average. Namely, 7,971 people aged over 65 live in Štip, which expressed in percentage of the total population of the Municipality is 16.4%.³ According to the data from the Pension and Disability Insurance Fund, as of May 2020, there are 9,000 pensioners in the Municipality, most of them beneficiaries of a retirement (age) pension. Many of those pensioners live dynamically and are not excluded or isolated, as a more vulnerable sub-group of the elderly persons are those with frail health who receive a lower amount of funds (or non) and cannot satisfy their own existential needs.

Furthermore, the available data from the public institutions in the Municipality show that 94 people are recipients of the right to social security for the elderly persons, which can clearly lead to the conclusion that many of the people aged over 65 have no income - are not recipients of pension and are not financially secured.⁴ Obviously, these people need support, but also personal assistance in their home. This is worth to mention due to the fact that the patronage service in Štip in the first half of 2020 visited 63 people who live alone. The service

¹ United Nations. Global issues – Ageing. Online source: <https://www.un.org/en/global-issues/ageing>

² State Statistical Office. 2020. Population in the Republic of Macedonia on 30.06 by specific age groups

³ State Statistical Office. 2020. Population in the Republic of Macedonia on 30.06 by specific age groups

⁴ Municipality of Štip. 2020. Social Plan of Municipality of Štip 2021 – 2024.

itself often suggests that these people need a regular visit and help at home, as well as other types of social and health services.

Target group 2 - Disabled elderly people – As disadvantaged and vulnerable category of citizens disabled people are relatively well organized. They are members of associations and most of them are under the “Association of disability organizations” which presents “umbrella” organization with around 2.500 members that are persons with intellectual disability, persons with physical disability, deaf, blind persons, civil war invalids and invalids of labour. Some of these people receive certain benefits, but in general the current public policies are not yet at the desired level – they still do not cover all those who need help, support or personal assistance. Although they are one of the categories of vulnerable categories of citizens who are better organized, they still face disadvantages, vulnerability or even discrimination. Disabled people consist one of the most vulnerable categories of workers in the labour market, with low level of employed persons with certain disability.⁵ This may indicate that many of them face difficulty in securing sufficient means of subsistence throughout their lives, but they also need help to perform daily tasks in and out of the home. Based on the available data 342 people use the right to disability.⁶ In addition, previous research has shown that for these populations health services are limited, inaccessible or inadequately adapted to their needs, even some services are not available in the region where they live. As for social services, when they are available very often are not enough to cover all of them.⁷

Target group 3 - Roma-women (victims of domestic violence) - Domestic violence is a serious social problem that is of concern in terms of prevalence. Every second woman in the country is a victim of psychological violence, every fifth woman faces some form of physical violence, while sexual violence between two partners is still a topic that is rarely discussed in our environment.⁸ Roma-women are discriminated in the family and in the community. Domestic violence is often tolerated in relationships where the traditional perception of the family and its values still prevails. Roma-women are responsible for maintaining the home and taking care of the children, while Roma men are expected to earn and provide for the family. Those who experience domestic violence face more difficulties due to poverty, social exclusion and lack of social services in the areas where they live.⁹ Previous research also show us that Roma women who report their husbands or partners at the authorities, but continue to share the same household with them, face even more violence.

- **Summary of consultations with the municipal officials**

Consultations about target group 1 – the initial assumptions by the municipal services in Štip is that the elderly and feeble people have limited access to the social and health services on local level. This is due to the fact that many of these individuals depend on the support in daily activities on others, both inside and outside their households, as well as the lack of additional help and support. Moreover, the expectations of the research team were that these

⁵ Tomislav Ortakovski. OSCE and MLSP. Analysis for evaluation of national programs and measures for employment of persons with disabilities.

⁶ Municipality of Štip. 2020. Social Plan of Municipality of Štip 2021 – 2024.

⁷ Resource Center for parents of children with special needs. Mapping the needs of children and people with disabilities in the Bitola region - Report and analysis after a survey. 2018.

⁸ Association for Emancipation, Solidarity and Equality of Women - ESE. Guide for Victims of Domestic Violence. 2017.

⁹ UNDP. Nowhere to turn – Gender-based violence against Roma women. Report of a field study of Roma communities in Albania, Montenegro and the former Yugoslav Republic of Macedonia. 2018.

individuals are likely to face living conditions that are not appropriate for their needs and frail health, hence the research questions focused on the support they have in terms of personal assistance, assistance if there is a need for food or care in appropriate public institutions, etc. The performed analysis to determinate the possible LNOB factor for each group focused the survey on three of them socio-economic status; geography and governance. It also gathered data on identification the risks for their well-being. access and need for health and social services and living in times of worldwide pandemic.

Consultations about target group 2 – In line with the arguments from the secondary data and the analysis for determination based on the LNOB factors the initial estimation by the official from Municipality of Štip was that this group of citizens faces limited access to certain social and health services on local level due to their disability. Namely, the initial assumptions and information indicated that these citizens need professional care at home. They are often left alone, without personal assistance to make their lives easier. Hence, the survey for this group of citizens was focused on four fields that can pose a risk to their well-being: access and need for health and social services, housing and living in times of a worldwide pandemic, research fields that are in line with the following LNOB factors: Discrimination; Geography; Governance and Socio-economic status.

Consultations about target group 3 – Based on the secondary data and preconditions for LNOB factors within the consultation process with the Municipality officials it was concluded that in general, Roma women within the country face various challenges, have difficulty to meet equal access to social and health services, are often discriminated, neglected by the institutions and many of them are victims of domestic violence. As women they are discriminated in the household and as Roma in the community. Hence, this target groups were in the focus of the research to identify their needs for social services and protection, as well as the need for creation of better employment opportunities, education, and normal life in time of global pandemic. The research was in line with the five LNOB factors.

Background and Objectives

- **Brief information about Municipality of Štip**

The Municipality of Štip is located in the Eastern Statistical Region of N. Macedonia. It covers an area of 556 km², with 71 settlements. Borders with seven municipalities: Radovich, Konce, Negotino, Gradsko, Lozovo, Sv. Nikole and Karbinci. More than 90% of the total population in the municipality of Štip lives in the urban areas making Štip the largest urban agglomeration in this part of the country. It is well connected serving as the economic, industrial, entertainment and educational focal point for the surrounding municipalities.

The basic feature of the economy in Štip is the textile industry. According to the number of employees in the textile industry, Štip can be considered as one of the leading textiles centres in the region. In addition to the textile industry and clothing, the presence of the leather, food, wood and metal industries is significant, along with the other sectors such as transport services and wholesale and retail trade.

According to the estimates by State Statistical Office in 2020 in Municipality of Štip live 48.517 people, out of which 49.8% are men, and 50.2% are women. As it is common in whole country, young people are increasingly leaving the country permanently or temporary in the Western European countries, mostly due to economic reasons. Given this, it is assumed that the elderly population is constantly growing above the number of young people and in 2020 the elderly

people over 65 years consist over 16% of the total population, which is increase for several percentage compared to the census estimations from 2002. Population ageing is a “game changer” for health and social care services. While many people remain active and make a major contribution to local communities, increasing age also brings increasing chance of long-term conditions, frailty, disability, dependence or even social isolation.

- **Social Plan of the Municipality of Štip**

Social protection is a system of policies and measures that help to prevent and overcome social risks among citizens. The goal is to reduce social exclusion and improve the quality of life of people from vulnerable categories through their inclusion in social life in the municipality. In 2020, the Municipality adopts the Social Plan for 2021-2024. The document provides a clear overview of the existing services provided to citizens, but also stands for providing funds and means to introduce a number of new ones. Namely, in order to alleviate poverty and support the vulnerable categories of citizens and to promote the independent and decent living of the citizens, the provision of quality social services at the local level is envisaged.

The overall assessments suggests that the current social and health services that are implemented do not provide support for certain categories of citizens who are vulnerable or are on the margins in the community. In this context, previous analysis indicates that in every community there are citizens that are “left behind” within the process of creating public policies, consequently their needs and interests are not clearly defined and took into account, nor as citizens they are covered with the planned services. Without specifically tailored services based on their needs they remain vulnerable and left on their own. Hence, there is a clear need to document their needs and examine which social and health services should be provided to them at the local level, services for which the municipality has competencies in order to improve their quality of life and integrate them in the social life.

- **Objectives of the survey**

In March 2021, CRPM Consulting was hired to conduct social mapping on the territory of Municipality of Štip, based on previously developed methodology by GIZ GmbH and in coordination with representatives from Municipality of Štip. The objective of the survey was to identify the needs for social and health services at local level among the marginalized and vulnerable groups in the community – in particular the needs of elderly and feeble people; disabled elderly people and Roma-women (victims of domestic violence). Based on the obtained data from the research presented in this report, the Social Plan of the Municipality of Štip will be amended with proper services according to the needs of the target groups. The social mapping for each of the target groups was focused in different fields identifying different LNOB risk factors and vulnerabilities. The goal is to improve the quality of life of these people by introducing services that will contribute to their greater involvement in social life within their community.

For this activity, CRPM C took into consideration the United Nations commitment and goals to transform the world contained in the Sustainable Development Agenda 2030, applying the "leave no one behind" (LNOB) principle. GIZ has upgraded this concept by integrating the Leave No One Behind principle (LNOB) in its current methodology within the SoRi II project. The expectations of this upgraded methodology are that it will enable municipalities and other institutions to understand not only who are the vulnerable groups, but also what are their needs (in order to better address them) and furthermore to understand which of the risk factors affect them mostly. By understanding the root causes of complex social issues municipalities could

then propose more targeted measures and focus on the most urgent issues. In this respect, the activities performed within this offer and specifically its outputs will contribute to the realization of the specific objective (2) of the project "Regional Learning for Implementation of Agenda 2030 in the Western Balkans (with particular focus on North Macedonia and Kosovo)" which is to promote the localization of Agenda 2030 and its objectives, in particular, the principle (Leave no One Behind - LNOB) at the municipal level.

Overall, the objectives of the survey are:

1. To contribute towards better design of social protection policies for vulnerable groups – document and analyse the needs for social and health services of the target groups (recommendations for alignment of the Social Plan 2021-2024)
2. To identify elderly feeble people and disabled elderly people on the territory of Municipality of Štip who left on their own without security, support of facility members, who are isolated or at risk of exclusion due to location (Geography)
3. To identify the needs for social services of Roma-women who are victims of domestic violence (Vulnerability, Discrimination)
4. To identify the level of information for social services at local level

Methodology

According to the timeframe set in the Action Plan, the social mapping in Municipality of Štip was **conducted in June 2021**. **Target populations** of the social mapping were three groups of people: **elderly and feeble people; disabled elderly people; and Roma women** (victims of domestic violence) For each of the target groups, the emphasis was on identifying those who are more vulnerable and face severe and/or intersecting deprivations and disadvantages or multiple forms of discrimination. Thus, regarding the first target group the focus was in particular on those people who live alone and in poor conditions without support / assistance from other persons or family members, while as a sub-group of the disabled elderly people we identified the risks for those who need personal assistance. The social mapping also focused on identifying the needs of social services for Roma women who are victims of domestic violence and face several risks such as exclusions due to their place of residence, socio-economic status, discrimination, etc. In terms of survey's **spatial resolution**, the mapping process covered the whole territory of the Municipality of Štip, with most of the participants concentrated in the urban area of the town Štip.

The **survey mode** consisted of face-to-face interviews / surveys and focus group discussions. For that purpose, three different questionnaires were developed (one for each target group), while the methodology included three focus group discussions, two of which with Roma women victims of domestic violence and one with service provider representatives from Municipality of Štip. Two different scenarios were developed for the focus group discussions.

This LNOB-focused social mapping involved **hard-to-reach populations** as target groups. Therefore, for the **sampling** CRPM C followed the steps and advices presented at the social mapping training that are in-detail described in the Training Guide for TSM. Considering that these groups are difficult to locate due to their characteristics as a small population and geographically dispersed in relation to the general populations or there is stigma attached to the disadvantaged groups, non-probability (non-random) sampling methods were selected to draw the samples for each group. For these groups it was not possible to create representative sample, also there was not a relevant list of the members of these target groups that are

created by public institutions or NGOs. Thus, **for targeting the elderly and feeble people** CRPM C applied the targeted sampling, which combines various sampling methods. This is suitable for hard-to-reach groups whose members are not particularly closely interlinked or organized. With assumption that these people occasionally or constantly need help because they are immobile or isolated in their places of residence CRPM C established cooperation with organizations that provide services in this field. Therefore, we used the support from the Red Cross to identify these people and along with the support from the Visiting (Nursing) Service in the Municipality of Štip a list of 20 relevant persons from this target group was compiled. **For targeting the disabled elderly people**, CRPM C applied the snowball sampling method, which is suitable for populations that are difficult to reach but whose members are well networked with each other. Individual members and representatives of organizations were asked to recruit further group members and create a list of 20 relevant people that will participate in the social mapping survey. Given the society stigma attached to victims of domestic violence and other risks that Roma-women face at daily basis, as well as their fear to present their personal trauma and experience it was challenging to identify people from such sub-group. CRPM C applied similar approach as for the elderly and feeble people and **for targeting the Roma-women victims of domestic violence** cooperated with EHO Štip (a well-recognized organization from Štip in the field of protection of women victims of violence). Thus, 20 relevant Roma-women participated in the survey.

Finally, twenty representatives from each target group were included in the field survey (60 persons in total), and due to the sensitivity of the issue, **two focus groups were organised with Roma women victims of domestic violence**, with a total of 8 participants.

Three different **questionnaires** were developed (one for each target group) while the methodology included three focus group discussions, two of which with Roma women victims of domestic violence and one with service provider representatives from Municipality of Štip. Two different scenarios were developed for the focus group discussions. In the process of developing the survey questionnaires the characteristics of each of the groups were taken into account and emphasis was placed on identifying who is left behind and to what degree based on the factors of LNOB, their vulnerability and their needs for social services at local level. In practice these hard-to-reach populations are more likely to face more than one kind of deprivation or disadvantage related to the five factors, therefore for each group several of them were examined.

The official start of the research was preceded by a period of **testing and adjustment** of the questionnaires according to the initial answers from representatives of the target groups. Data were processed with SPSS using descriptive statistics, while due to the wide approach to using research methods and the size of the samples for each group allowed application of qualitative methods. The **limitations** were present regarding the identification of members of the LNOB groups, considering that they belong in the category hard-to-reach populations. The challenge was to find appropriate approach in particular for Roma-women who have experienced trauma due to domestic violence. Many disabled elderly people refused to participate in the research, and among the elderly and feeble were other limitations such as they were hard to locate due outdated address.

LNOB results

This chapter is based on the findings obtained within the research activities conducted on territory of Municipality of Štip. The results are presented separately for each target group mainly following the survey structure. Each questionnaire was composed of several chapters

aimed to examine the risks and vulnerability in line with the LNOB factors. Main findings for each LNOB group are explained in detail with relevant data presented in charts and tables.

Analysis of geo-tagging of available socio-economic resources

Social services are often designed to provide assistance in meeting the non-financial needs of citizens and help them in realization of personal development or completing daily tasks. They are referred as personal social services, humane social services or social care because meeting the financial needs of vulnerable groups of citizens is crucial, but does not necessarily mean providing a satisfactory level of wellbeing and social functioning. In Municipality of Štip for the vulnerable categories of citizens several social services are introduced. They are grouped as social services for information and referral; professional assistance and support service; counselling services; in-home social services; and community-based social services. Several services are provided by NGO organizations. Below are briefly explained the existing social services in the Municipality divided by the institution that provides them.

Municipality of Štip within the Municipal Utility Program introduced two in-home social services:

- Help and care at home provides assistance in performing basic daily life activities of up to 80 hours per month, for people with reduced functional capacity who cannot take care of themselves. This service is implemented in order to enable the user to continue living in their own home and to lead an independent community life. Users of the service are: persons with the most severe disability, i.e., combined disability with the highest degree, completely blind persons, the elderly and other persons who need support and care at home. For that purpose, the Municipality organized *mobile teams to assist these categories of citizens*. Since the beginning of the crisis with COVID-19, about 300 people from Municipality of Štip have used this service. Mobile teams were also formed by the Red Cross to distribute oncology therapy. Services provided by the mobile teams have not been established but have been piloted through the Program.
- Services for the elderly and feeble people and disabled people in-home and outside the home cover assistance at home in performing / facilitating daily tasks and social activities (procurement of groceries, assistance in going to the doctor or on cultural events etc.). These services have not been established but have been piloted through the Program.
- Day centre for people with physical or intellectual disabilities – currently cares for 14 individuals. This service is financed by the Ministry of Labour and Social Policy.
- Municipality of Štip in cooperation with Church Sv.Nedela provide free care for 11 homeless people.

PI Inter municipal social work centre Štip is responsible for implementation of several social services:

- Information and referral services consist activities for informing citizens about social protection rights and available social services, initial assessment and referral to other institutions, in order to achieve unhindered access to rights and services.
- Professional assistance and support services are provided by this public institution. These services are tailored for individuals and families and include assistance and support for overcoming individual and family problems through assessment, planning, interventions for protection and evaluation, as well as monitoring the situation after the completion of interventions, in order to strengthen the target groups and promote their

development, ensuring and maintaining well-being and independence and their long-term training for overcoming social problems on their own.

- Counselling services are provided in order to prevent, mitigate and overcome the consequences of social problems of individuals and families, as follows: preparation for marriage, family life, parenting, family planning, marriage / partner counselling etc.
- Counselling for victims of domestic violence - Beneficiaries are victims of domestic violence who have previously given their written consent to their involvement.
- Day care centre for children with autism - currently cares for 9 children with autism.

Municipal Centre for Social Services is responsible for providing information-advisory services, case management for the realization of citizen's social rights, free legal aid and other services in terms of social protection.

The Republic Centre for Support of Persons with Intellectual Disabilities – Poraka operates with the Day centre for people with intellectual disabilities (over 18 years old) and this institution currently cares for 15 individuals. Associate and a psychologist work with them.

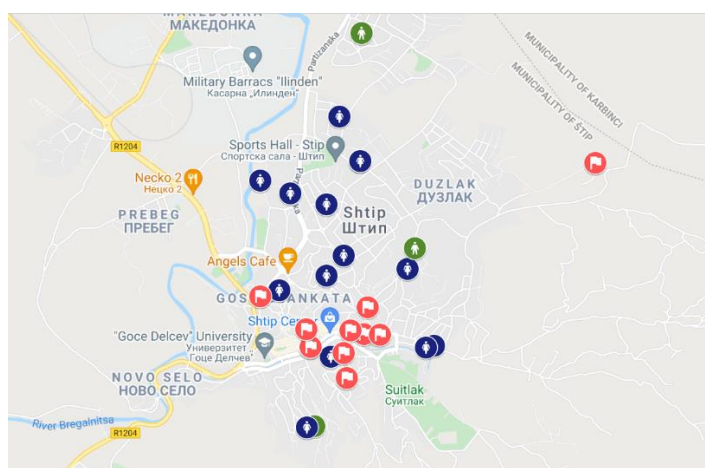
Educational Humanitarian Organization EHO provides the free legal aid to women and girls victims of gender-based and domestic violence. This service also covers assistance and support in their integration and economic strengthening, with appropriate referral to relevant institutions regarding the solution of each of their problems.

Association for Roma Rights provides free legal aid through counselling, informing for the procedure and legal representation in particular for the Roma community.

The Association of pensioners of Štip and Karbinci has opened 8 clubs for the elderly in several settlements. People use the clubs to socialize, play board games, etc. The clubs are managed and financed by the association itself. The association also owns 12 studios that are rented for living of pensioners from vulnerable categories who for some reason are left homeless.

Other relevant institutions that provide health and social services: Medical Centre Panche Karagjozov (Visiting (nursing) services are under authority of the Medical Centre); Red Cross Štip, Clinical Hospital Štip and the Centre for Public Health.

- Geo-tagging of elderly and feeble people and access to services



From the map it can be noticed that the old and feeble people are mostly concentrated in the urban area of the municipality, i.e., in the city of Štip. Due to their location, they have easy access to almost all institutions that provide appropriate services for their needs. Namely, the person who lives beyond the “downtown” with transportation by car can reach the desired public institution in no more than 10 minutes. With personal assistance or using the public transport they will need a longer

period of time, but not more than 30 minutes. This map is also useful for any relevant institution. The persons that need help are mapped and, in this manner, they are easily accessible to all institutions that provide social and care services. **Note:** Two people are at a greater distance from the city centre, one is from the village of Lakavica.

You can find the link to the map here:

- Geo-tagging of disabled elderly people and access to services



The situation on the terrain in terms of access and the probability of locating disabled elderly people is the same as with the first target group. Mostly they are concentrated in the city area, with several people living in more remote settlements in the municipality. In general, the institutions have the opportunity to access these people through a detailed overview of the map from the map they can gather initial details of the current health of those who are desperate for help.

LNOB group 1 – Elderly and feeble people

- Location and risks of isolation considering the living conditions / Geography

Social isolation and loneliness are serious public health risk that can affect a significant portion of the older populations. Elderly people are more likely to experience many of the risk factors that can cause social isolation or loneliness such as living alone, loss of family or friends, chronic illness and sensory impairments. During their life social isolation may be episodic or chronic depending on and individual's circumstances and perceptions. For many elderly and feeble people this is not just a perception, but reality considering that their health and immobility mostly impacts of their social life and wellbeing. The survey covered elderly and feeble people who are living in the urban area in the town Štip and only one man was from the village Lakavica. Although they are not geographically isolated based on their living location yet most of them or 65% feel lonely due to their physical separation from other people (they are living alone). Their living circumstances have significant effect on their further isolation, as well as the absence of personal assistance. Many of them are in extremely poor living conditions, constantly emphasizing the lack of food, means to cover the costs of living and sometimes are left without the needed medication.

About 65% of the elderly feeble people that were part of the survey live on the ground floor, while the rest are on the higher floor of a house or residential building. A constraint on their movement and mobility are stairs that they need to climb to leave or enter in their home. No older residential building in Štip has elevator (at least no that is functioning), and as many as

85% say that climbing stairs is difficult for them. Lack of personal support to perform daily tasks outside the home and to normally participate in the social life in the municipality is one of the key limitations for these people in terms of their isolation. In addition, they have limited access to information that increases the risk of being left behind. Although most of them have TV and are satisfied with the available channels, while it is concerning that that 30% of the elderly and feeble people have TV that is barely useful and 15% do not have any. The limitations regarding the access to information through internet is even greater, thus 95% of them do not have internet or they cannot afford this kind of services.

It is clear that this group of people are one of the most vulnerable but the data showed that among them there are people who face severe disadvantages that make them likely left furthest behind. We have noticed that some citizens are completely left behind mostly due to their poor health (dementia, strokes, paralysed, partially or completely impaired vision), location of residence, economic status or because they are left without daily assistance and support. Often, they are not able

Elderly and feeble woman lives in a dwelling with “adapted” conditions, which in essence is a basement of and apartment building. She is worried for her safety because she does not even have a functional front door.

Paralyzed women live with her son who has the same condition; a person with almost complete blindness lives in a garage.

or do not how to ask for help or care at the competent institutions. The consequence of all of these circumstance for them is living in substandard living conditions in which they do not feel safe, cannot maintain hygiene, and in some cases due to feebleness, but also due to lack of toilets some of them defecate in their wheelchairs.

Summary:

Geography by itself is not a risk factor in term of isolation based on the living location considering the fact that majority of elderly and feeble people that were interviewed live in urban or populated area. But there is need for proving preconditions for socialization within the community in order to integrate them which would further have positive result on their health. Currently they are excluded based on their poor health and lack of personal assistance because they are not mobile and socialized with other elderly people or neighbours. Additionally due to their living conditions they face several limitations and lack of information.

- Socio-economic status of elderly and feeble people

Most of the participants in the survey were women or 75% and 25% were men. Regarding their family status 60% are widower/widow; 25% are separated while 10% are married. One of them is unmarried.

Most of the participants in the survey are beneficiaries of pension, while 25% use the right to social security for the elderly persons, which according to the Law on Social Security for the

elderly amounts to MKD 6.000 per month.¹⁰ Beneficiaries of the right to social security, as well as most of the others live on the edge of their existence i.e., 55% of the respondents have a monthly income of less than MKD 12.000. This is especially worrying if we take into account that the value of the Trade Union Minimum Basket for June 2021 is MKD 34.212.¹¹ As a result as many as 85% think that their budget does not meet the basic needs. According to their estimations 77.7% say that they need from MKD 12 to 24,000 to meet their needs, 16.7% need from MKD 25 to 30,000, while one individual considers that in order to cover his monthly expenses, he needs over MKD 30.000. It is worth noting that elderly and feeble people are often left alone in terms of finances, so only three people receive financial support from their children, distant relatives or from the Red Cross. Additionally, four people say they have support from the state, although this may refer to the income they already have in form of pension or the right to social security.

Summary:

Most of the participants in the survey were women and 90% are alone - do not have partner or husband/wife. Generally live on the edge of existence and their monthly income is not enough to enable normal life rather they cut from many things in order to afford things that desperately are in need for (food, medicaments, paying bills, etc.). Only a few people receive financial support from their children or the immediate family. All are recipients of some financial benefits from the state, but most affected by the socio-economic risk and left behind are those with poor living conditions and low income – e.g., a woman who receives social assistance and lives in a basement without proper conditions and another person whose has no means for medicine and food.

- Living standards of elderly and feeble people

Many of the elderly and feeble people live in dwellings that are in their own property or of some of their family members or relatives. Four individuals live in dwelling that is property of someone who is not their relative, one is secured by collective housing, one in social housing and what is worrying is that one individual is living in dwelling that is illegal construction. In terms of the living circumstances, it should be noted that not everyone has satisfying conditions to maintain regular hygiene, prepare food or even feel warm in the cold days. Namely, 40% say that they do not have heating in the home, and a few people do not have electricity, bathroom or kitchen located inside the home.

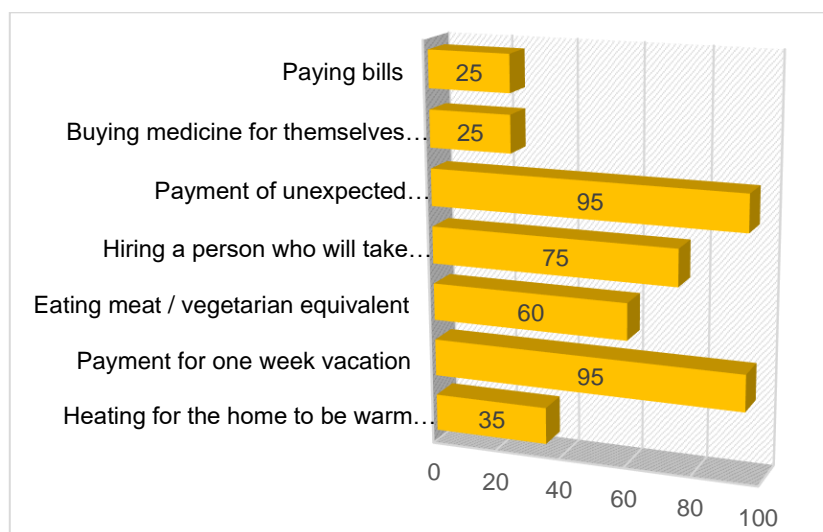
The poor economic power of the elderly and feeble individuals imposes a number of constraints that significantly affect their well-being. About 60% of them cannot afford to eat meat or its vegetarian equivalent. Some of them often cannot afford a meal nor have enough amount drinking water. Thus, 75% say that in the last month they did not have enough drinking water when they needed it, and for a significant part of these people we can undoubtedly conclude that they "go to bed" hungry. Namely, 35% of them say that in the last month more

¹⁰ Article 6 of the Law on Social Security for the Elderly ("Official Gazette of RNM" No. 104 of 23.05.2019).

¹¹ Federation of Trade Unions of Macedonia. The value of the TUMB for June 2021.

than four times they could not afford a meal, and in 10% it happened two to three times a month.

Graph 1 - % of Elderly and feeble persons who cannot afford to:



Covering unforeseen expenses or vacation is far from possible for this category of citizens. While often their hunger needs are not met, they also are not financially strong enough to hire a person to provide personal assistance even when his help is more than needed. It is also worrying that as many as five people are struggling to pay their bills and five of them are unable to afford the necessary medicines.

Most of the participants in the survey or 70% are not satisfied with the living conditions and do not have everything they need for a normal life. Due to the poor conditions in which 40% find themselves, they say that they would like to be taken care in competent institutions, partly due to the fact that they are too lonely. Social mapping process identified several people who are far more vulnerable than the rest of the group regarding the living conditions. Namely, care in competent institutions is requested by as many as 8 individuals, of which 5 are the more affected by this risk factor i.e., 1 person is paralysed; 1 person does not have enough food and is hungry; 1 person is in a wheelchair (not able to use toilet and bath); 1 person lives in a basement and in extremely poor conditions (without door and kitchen); 1 person has poor living conditions and frail health and is not able to take selfcare.

Summary:

This vulnerable group of people cannot satisfy their basic needs, they are hungry, they cannot pay their bills, they do not have heating in cold days and are not even able to pay for social services such as personal assistance. Overall elderly and feeble people are not satisfied with their living conditions and do not have everything that they need. They do not have economic safety and due to their socio-economic status are very vulnerable and at risk.

- Service (social care and health) needs assessment

In order to examine the needs for social and health services at local level for elderly and feeble people, an assessment was made of their current health status. It is worth noting that all

participants in the survey have **health insurance**, but while many people remain well engaged an active into social life, increasing age also brings long-term medical conditions, frailty, dementia, disability, dependence or social isolation. Only two individuals have a health condition that can be assessed as decent or very good, **seven of them have a bad health condition**, and as many as **eleven assess their health condition as very bad**. This include persons who are completely or partially paralysed, a person with a permanent disability, a blind person, a person in a wheelchair, a person with dementia and a person with one side of the body that is dysfunctional.

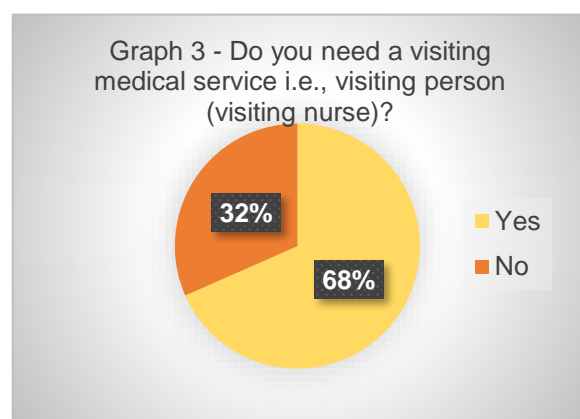
As many as 85% of the elderly and feeble participants say that they have physical or mental illnesses that they expect to last for a period of six months or permanently, while 90% say that for more than a year their ability to perform daily activities is reduced. More than 85% are facing loss of independence and their mobility is quite limited – those who are not completely left on their own ask for assistance from family members or neighbours. But dependence for mobility is not the only limitation and for some is necessary to have support to prevent other problems such as taking wrong medications etc.



According to the answers of the participants in the survey in **Municipality of Štip are available larger number of health services** (there are general practitioner; dentist, ophthalmologist, dermatologist, gynaecologist etc.) and 45% have clinic near their place of residence (at distance of up to 2km). Some services they cannot afford financially or due to mobility, this in particular is problem for those who are fully dependent of personal assistance. As older people and

with frail health they often need to visit a doctor, thus 40% go to see a doctor once a week, 35% once a month and the most worrying answer came from one person who reported that he is unable to go to the doctor. That every activity presents a challenge for them is not hard to notice because 90% said that they would like to be able to call someone for help or assistance in their daily activities.

For most of the or 68.4% it is better to get medical examinations at home, because it is increasingly difficult to go to see a doctor. Therefore, 70% have received visiting medical service from medical personnel and 15.8% receive this service on regular basis. Generally, they are satisfied with the treatment, considering that the average evaluation grade given by those who received visiting medical service is 4.8 on a scale from 1 to 5.



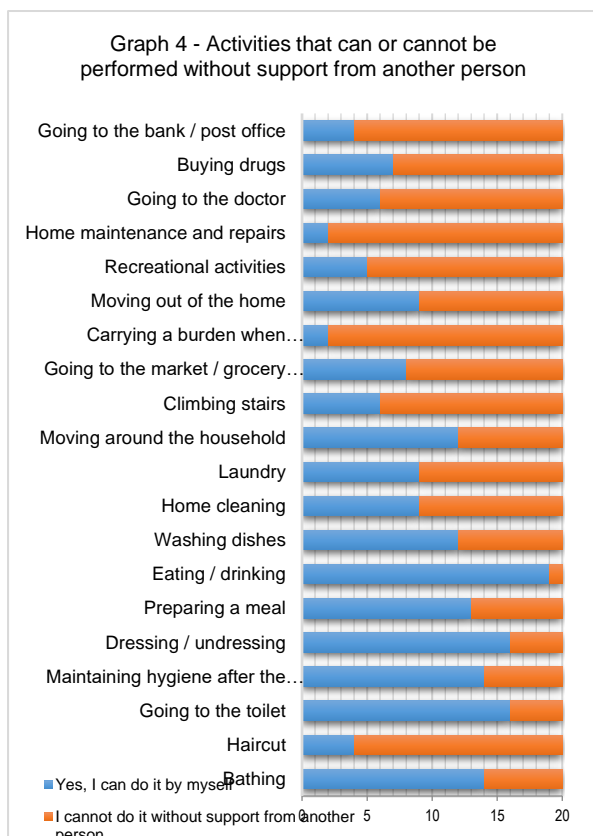
CRPM C analysed the need for devices and objects (items) that can make elderly and feeble people’s life easier and would make them feel safer. More than 63% consider that they need a smart bracelet to monitor blood pressure, pulse, and to use the device alarm as a reminder for taking medications etc. **Two elderly and**

feeble people need a wheelchair with adaptation for toilet use and this is especially important because a woman due to her condition often defecates in chair or in her wheelchair. An easily portable toilet seat is an item that would make life easier for three people, and even eleven people need a waterproof chair or an object for sitting in the shower. Uncertainty about their health and the need to call health services immediately necessitates the introduction of a personal emergency call system for three people, while eleven people need a reading magnifying glass. Four people need a hearing device, and one person needs a white stick.

Summary:

All participants in the survey have health insurance, which is a relief, but the health condition of most of them is worrying. In their municipality they have all the health services they need, but they are difficult to access because of limited mobility. Given that most live in an urban area, access to a clinic is easy and in a short period of time. It is important to notice that this group of people need personal assistance to perform some of the daily tasks while some of them need to be taken care of in a proper institution. The patronage service does its work well and most of the participants in the research, due to their condition, prefer medical examinations in their home.

- Service (social care and health) needs assessment at home



When designing social services, it should be taken into account that 40% of the elderly are not assisted or cared by other persons during the day. Those who receive help, it is usually from the immediate family or neighbours. If their health deteriorates 40% would turn to the members of their family; 25% to their children who will come to help even though they do not live together; 15% consider that they can turn to their neighbours and friends for such help; 10% would ask for help from distant relatives or from the person who sometimes provides assistance. **Only one elderly and feeble individual has no one to turn to for help.** From the data presented in the graph below (Graph 4) it can be noticed that for most elderly and feeble persons the need for help increases when leaving home, and this is for activities such as buying medicine, shopping, walking outside the home, etc. Regarding the activities that take place in their dwelling, the difference is slightly lesser with the fact that it is important to note that 4 examined elderly and feeble people need help and support from another person even to go to the toilet.

Most of them need help with activities such as: grocery shopping, house cleaning, buying medicine, going to the bank, washing clothes, going to the doctor, walking and meeting with friends or relatives, and this kind of help is needed at least once a week. It is worth noting that although some of them would like to be cared for in proper institutions, they say that even if they had free rooms in their home, they would not feel comfortable sharing it with a person who would provide assistance for them in their daily activities. Only 30% are comfortable with sharing their dwelling with a person who will help them.

Only two individuals use the **personal assistance service** which includes help and support in order to enable independent and self-sufficient living and give the highest evaluations for it. Fifteen people do not receive this service, and fourteen reported that they need such kind of help/service for normal living in and out of their dwelling.

The cross-tabulation of the data showed that among the elderly and feeble people who need personal assistance there is a group that is left behind and do not use the available services due to their mobility limitations. Namely, when asked in which way they usually go to see a doctor two persons with serious health problems (a person with dementia and a paralysed person) say that they never go to such places. When it comes to going to the pharmacy, these two people also say they never go, but another person is added to this list - a person who lives on the edge of existence and has a shortage of food, so it can be considered that this is due to a lack of funds to provide medicines. Basically, these people do not go anywhere (not even to the market, supermarket or park), actually they never leave their dwelling and this is a serious problem for their mental health. They are totally isolated.

It is worth noting that as the importance of the place in terms of their health decreases, so does their ability and need to leave their home. Namely, only two people with assistance by other go to the theatre or museum.

Summary:

The elderly and feeble people need personal assistance at home, but also to complete most of the daily tasks outside of their home. When it is necessary, they walk to the locations they need, but say that for many of the responsibilities that they have (such as: grocery shopping, house cleaning, buying medicine, going to the bank, washing clothes, going to the doctor etc.) very often at least once a week they need help. Many of them do not have someone to turn to in need of help and those whose health is frail cannot even go to see a doctor because there is no way for them alone to leave their dwelling. These people are isolated from everything that is happening in the community due to the fact that even those who are able are leaving their home only when it is necessary.

- Service (social care and health) needs assessment at local level

In regards to the social service needs assessment in the local community, the respondents were asked about the availability of a **short stay in a day centre** if needed. The majority or 72.2% are not aware that such a service exists or where they can turn to get this kind of service, while 22.2% consider that there is such a service, but do not know how to contact them if they need it. Most of the respondents would use these services because they feel lonely, but also because some of them need recreational activities.

Only 25% of the elderly and feeble people are informed that there are **clubs in the municipality that provide socializing, entertainment and recreation for the elderly**, and 20% consider that such clubs exist, but do not know how to get involved in their activities. Most of them or 55% are not aware that such ways of socialization exist in their municipality. Only one person has used this service and is generally satisfied with it, while 50% say that they would use this social service because they feel lonely or need recreational activities.

More than 52% of the elderly and feeble people say that they are familiar with **servicing food in the soup kitchen** that provides services for vulnerable categories of citizens or the elderly and feeble, although only two people have used this service. If have access to this service, 40% say that they would use it because they are not able to prepare their own meal, while 50% say that they would like food delivery at their home several times in the month instead of going to the soup kitchen where the food is served. It is worrying that the most vulnerable among elderly and feeble people are mostly unfamiliar with this type of service in their municipality or they do not know how to involve there and use this kind of services.

Survey participants were asked if there is an **institution in the municipality that provides day care** which includes day care, social, cultural and recreational activities, social support for people and other related activities for the elderly and feeble individuals. Most of them or 80% are not informed about such institution while 15% consider that in the municipality this kind of service is available. Half of the elderly and feeble people say that they would use this kind of services if they are provided for them.

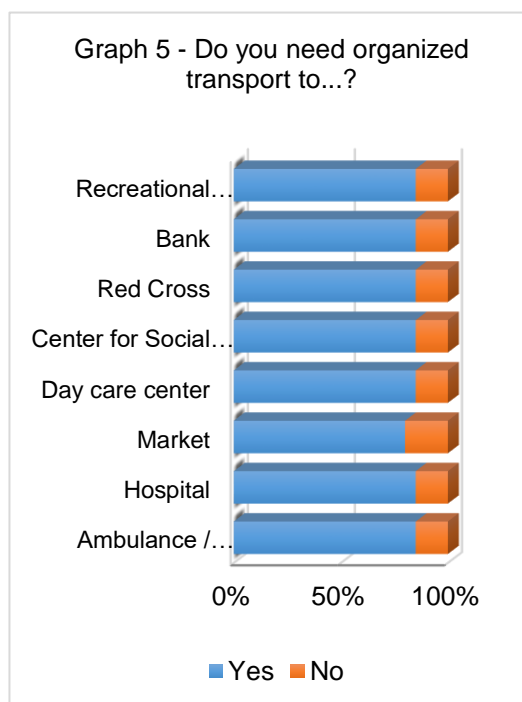
Three individuals do not have opportunity to be accommodated because their pension is low and cannot cover the cost for care in suitable institution.

In general, 85% believe that there is not or they are not informed that in Municipality of Štip is functioning **institution that provides services for temporary residence** – that provides protection and professional help for overcoming the condition of crisis. Only 10% consider that there is such an institution, and if it is available to them 55% say that they would use it, in particular if they need help.

Only 25% of the elderly and feeble people

say that there is an institution in the municipality that provides care and professional support for nutrition, clothing and health care if the person does not have conditions for independent living. Three persons recognize the Red Cross as an institution that would provide these kinds of social services and believe that they have provided proper conditions for care for the elderly and feeble. Others have never used such services while 60% would use this type of social services if it is available to them.

Due to their limited mobility the **need for transportation at local level** to several important locations was examined. The Municipality does not provide this kind of social services which in essence are crucial for them. Therefore, up to 85% of the participants in the survey say that they need organized transport to the following locations: clinic; hospital; Centre for Social Work; Day Care Centre; Red Cross; bank, as well as transport to location for recreation. Slightly less or 80% of the elderly and feeble people need organized transport to a marker or a grocery shop.



There is no SOS telephone line in the Municipality for support of elderly and feeble people. Uncertainty about their health and the need to call the health services immediately necessitates the introduction this service which could be useful.

Summary:

In the Municipality, according to the needs of the elderly and feeble people certain social services that would facilitate their daily life should be introduced. In particular this refers to services for providing hot meals on daily basis and transportation to important locations. Most of them would accept accommodation in a proper institution that will be in line with their pension and will take into account the necessity of care for them. It is important to notice that they are not well informed on the existing social services.

- Governance as factor / participation in social and political life

In terms of governance, the involvement of the elderly and feeble people in political and social life at local level was briefly examined. Many of them or 65% regularly follow political affairs in the country and are informed on a daily basis, while 20% say that they are informed periodically during the month. However, the main issue is that no individual pleaded that takes any action at local level to protect their interest. None of them has ever met with representatives of the Municipality, did not support any protest, civil movement or initiatives. Their inaction as citizens is probably caused by their isolation within the dwelling due to limited mobility. As a result of that this vulnerable group cannot use the instruments available to them as citizens to influence on adoption of public policies that can improve their lives. Most of them or 60% say that in the past three years at local level no public policies have been adopted that are of interest to elderly people. This perception may be due to the fact that public policies do not cover them as group because they are left behind and for them there is no data.

Summary:

Their inaction as citizens is probably caused by their isolation within the dwelling due to limited mobility. As a result of that this vulnerable group cannot use the instruments available to them as citizens to influence on adoption of public policies that can improve their lives. The perception that in the past years no policies were specifically tailored for elderly people may be result of the fact that public policies often do not cover them as a group because they are left behind and for their needs there is no relevant data.

- Influence of global virus pandemic / COVID-19

The outbreak of the virus has changed the way of life for many around the world, and poses a serious threat to the lives especially for elderly with chronic illness. Measures were taken to restrict the movement of people, and some of them included complete isolation and lockdowns. Still very little is known about the effects that social distancing can have on the elderly people.

Although all age groups are at risk of the virus, older people face significant risk of developing severe illness if they contract the disease due to physiological changes that come with ageing and potential underlying health conditions. Therefore, 80% of them mostly stayed isolated and do not leave their dwellings as before the pandemic. As a result, the pandemic even worsened their state of emotional loneliness, with 85% saying that they missed the loved ones, while 75% at the start of the pandemic lost contact with close relatives and friends. Whole situation had a significant impact on their mental health, and given the circumstances in which they find themselves and the necessity for personal assistance, it is not surprising that 90% need help to protect themselves from the virus.

Considering the previously presented data on the financial situation of this category of citizens it is worth to note that as other citizens they were additionally exposed to unplanned expenses, while the pension in a time of pandemic is not enough. For 90%, assistance from the municipality is always welcome in terms of providing means of protection against infection, because the same percentage of them do not have savings that they can use to more easily cope with the problems caused by the coronavirus. As many as eight people have taken on

debt to cope with the financial situation caused by the virus, and four of them are people with extremely frail health and poor living conditions, in fact these people are even more affected by these risks than the others.

Living in times of global pandemic have negative effects on the psychological health. Namely, five people need psychological support to deal with the stress and fear they feel, and for some, a conversation that will give them hope and encouragement will suffice. Their life at the moment is not easy, and this was confirmed by the field surveyors who were practically asked to stay a little longer so that they have someone to talk to. Regarding the need for financial support, 90% would prefer additional funds to provide groceries and they can be awarded as vouchers for supermarkets.

All participants in the survey agree with the statement that as elderly and feeble people in time of pandemic remained on the margins within their community. In their perception of the current situation, not every citizen has the same opportunity to receive the necessary health treatment, and 85% believe that those with higher incomes and better socio-economic status in society have a better chance of protection and can use the services of private clinics.

The pandemic restricted personal contact with people, but communication continued via computer and telephone using the widespread access of internet. In order to identified the needs for digital literacy training (use of device, social networks and etc.) participants were asked what will make their lives and communication easier. All respondents reported that they need training to use a mobile phone, and they do not need training to use a computer or tablet. Additionally, no one needed training to use social media or Internet.

Summary:

The virus worsened the condition of these people, as it further isolated them from the relatives and the community. Their financial situation was already far from stable and their income is barely enough to cover the basic expenses, so in a time of pandemic the pension is not enough to cope with the new expenses. As elderly people, they say that are left on the margins of their community, and believe that not everyone has equal access to health services - those with better socio-economic status are more privileged in our society. They need psychological support and conversation, and in terms of finances, extra funds to buy groceries. They do not use the Internet and social media, and it is worrying that even for using a mobile phone they require training in order to stay connected with other people at a time when they cannot make physical contact.

- Recommendations

The social mapping presented relevant information on the current situation in which are the elderly and feeble people in Municipality of Štip. Namely, they are living alone without personal assistance, they have low-income and barely have funds for existence, and some of them are constantly at risk for their safety due to their poor living conditions. Many of them are hungry and cannot provide the prescribed medications. These categories of citizens must be visited on daily basis by professional services or they should be accommodated in proper institutions such as nursing homes. Some of them probably need hospital care rather than social, because they fight to survive from day to day.

- Taking into consideration the new Social Plan of the Municipality of Štip (2021 - 2024), one of the planned social services is Help and care in the home, which will cover a total of 40 persons (out of which 20 elderly and feeble individuals and 20 elderly individuals with disability). This service includes Mobile assistance teams for the elderly and feeble, persons with disabilities and other vulnerable categories, and Services for the elderly and feeble, persons with disabilities in and outside of the home. The conducted social mapping indicates the need for greater diligence and action of professional teams in the field, especially for the most vulnerable categories. It is needed to detect the necessary resources to act on the plan, as well as the reasons why these people are left out of the society.
- It is necessary to adapt the dwelling of the elderly and feeble individuals for their unhindered movement and performance of daily activities or the introduction of daily support by the services for realization of their daily activities and needs.
- It is necessary to provide personal assistance for carrying out daily activities. (Suppling of groceries, medicines, doctor's visit, socialization and other activities). The introduction of this social service can encourage the employment of people who are long-term unemployed or have difficulty in entering the labour market. Some of the persons who provide this social service in practice can be engaged on a voluntary basis.
- Strengthening the human resources in the Nursing (Visiting) Service to enable daily visits of the elderly who need professional help and support in taking medicines (elderly people with dementia, diabetes and other chronic diseases are detected, who need assistance from a medical professional).
- Providing devices for facilitating daily life (bracelet - for blood pressure monitor, pulse, medication alarm; wheelchair with adaptation for going to the toilet, easily portable toilet seat, shower stool, magnifying glass, and hearing device).
- Socializing in the home - These people often feel lonely and need socializing with other people, but are unable to leave their home due to limited mobility.
- Improving the municipal services for information and referral/assistant information services. Most elderly persons are not informed about the existence of day care centres for short-term stays, socialization clubs, an institution that provides care and professional support for nutrition clothing and health care.
- Providing organized transportation once a week / month to the following locations: ambulance, hospital, market, social work centre, day care centre, Red Cross, bank, as well as transportation for recreational activities.
- The fact that a large percentage of respondents are hungry, supplemented by their health condition, indicates the need to provide food in their homes every day.
- Training is needed for the elderly to use a mobile phone, so that they can be in contact with their family or police / ambulance / fire department.

LNOB group 2 – Disabled elderly people

- Location and risks of isolation considering the living conditions

All participants in the social mapping live in the urban area of Štip and they are not at risk of being isolated due location. However, 36.8% find it difficult to live separated from other people – they need professional help and care. Most of them are living in residential buildings in

relatively good condition (52.4%), while 38.1% in a house. One person lives on the second floor of a family house, and one person lives in an older house that is in poor condition. However, their dwellings meet the basic living conditions. Given their general condition, little relief that can increase their mobility is that 71.4% live on the ground floor. A constraint on their movement and mobility are stairs that they need to climb to leave or enter in their home. No older residential building in Štip has elevator (at least no that is functioning), and for as many as 68.4% climbing stairs is a difficulty and its worrying that 47.6% cannot do that without support from other person.

Summary:

All participants in the social mapping live in the urban area of Štip and they are not at risk of being isolated due location. However, some of them find it difficult to live separated from other people. A constraint on their movement and mobility are stairs that they need to climb to leave or enter in their home. No older residential building in Štip has elevator (at least no that is functioning), and for as many climbing stairs is difficulty and its worrying that 47.6% cannot do that without support from other person.

- Socio-economic status of disabled elderly people

In the survey more participants or 57.1% were women and 42.9% man. Regarding their family status 38% are married, 28.6% are unmarried, 19% are widowed, while 14.3% are divorced. Most of them have completed secondary education, while a smaller percentage are those who are university educated, as well as those with primary education.

More than half of the elderly persons with disabilities who participated in the research are pensioners who receive disability pension, four persons are with age pension, three persons use the right to financial assistance from social protection due to their disability, and two persons are full-time employed persons. Almost 43% have a monthly income in the amount of MKD 20 to 24.000 denars, 23.8% have income from MKD 12 to 20.000 and what is important to note is that more than 14% have a monthly budget less than MKD 12.000. **Eight respondents reported that their income does not meet the basic needs of the month, while most of them manage to cover all expenses.** This is especially worrying if we take into account that the value of the Trade Union Minimum Basket for June 2021 is MKD 34.212.¹² If they need it, they receive financial support from their parents or spouses. At first in might be confusing but yes, parents still help them. In fact, they are elderly people who take care of their children and help in all possible ways. More than half say they receive financial support from the state, which may relate to the benefits they have already established.

Summary:

Eight individuals reported that their income does not meet the basic needs.

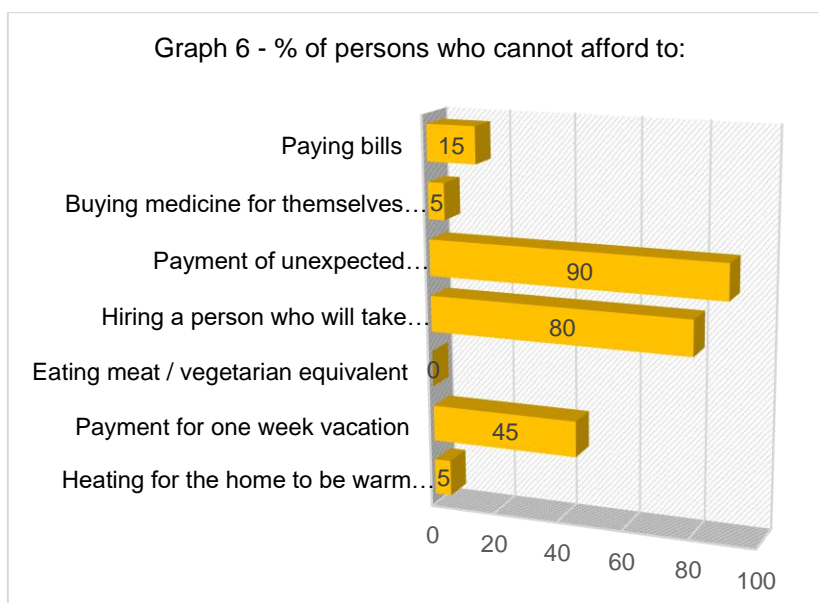
¹² Federation of Trade Unions of Macedonia. The value of the TUMB for June 2021.

- Living standards of disabled and elderly people

Many of the disabled elderly people live in dwellings that are in their own property (42.9%) or of some of their family members or relatives (38.1%). Two individuals leave with their parents. One of the most significant problems is access to the home. Namely, 67% reported that their residence does not have adequate access for people with disabilities (people who use crutches or a wheelchair). Almost 89% live in apartment buildings without elevators and adapted conditions for their needs. Due to their health condition, 50% of the respondents move less and they need assistance i.e., 30% of them are supported by their family or neighbours, while 20% move less, but believe that they still do not need help.

Their households have all the necessary elements and devices for living. With the social mapping it is not recorded that any household of the adult persons with disabilities faced a lack of sufficient amounts of drinking water or food, so they as group of citizens are in lower financial risk compared to the elderly and feeble persons covered with this research, although as persons with disabilities on a daily basis face a number of other problems.

From the graph we can notice that most of the participants in the survey can afford to have meat in their meal, can warm their home and can buy the necessary medicines for themselves or relatives. But their economic power is reduced to living a modest life within the available budget is pointed with the following data - 90% cannot afford to go on vacation, and 80% cannot hire a person who will help them. What mostly concerns are that 15% cannot pay bills.



It is generally difficult to assess their level of satisfaction with living conditions. Namely, 85% say that they are satisfied with the living conditions, but they need someone who will take care of them. None of the participants stated that they want to be taken in a proper institution, while several of them need assistance at home.

Summary:

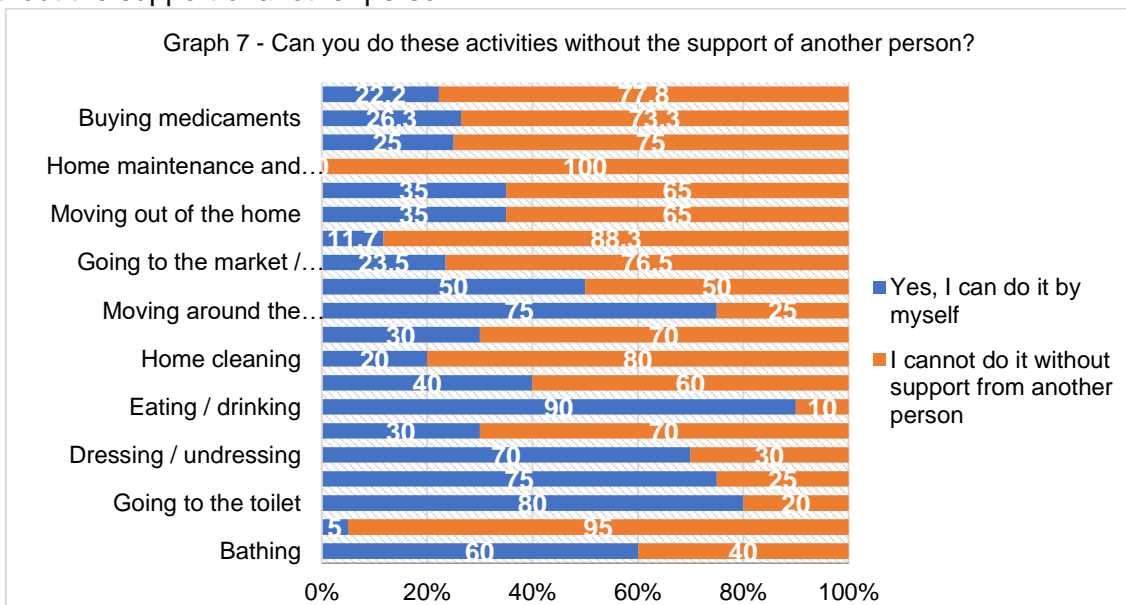
Many of the disabled elderly people live in dwellings that are in their own property (in houses or apartmentst) and 67% reported that their residence does not have adequate access for people with disabilities (people who use crutches or a wheelchair). Almost 89% live in

apartment buildings without elevators and adapted conditions for their needs. Their households have all the necessary elements and devices for living. Most of the participants in the survey can afford to have meat in their meal, can warm their home and can buy the necessary medicines for themselves or relatives. But their economic power is reduced to living a modest life within the available budget is pointed with the following data - 90% cannot afford to go on vacation, and 80% cannot hire a person who will help them. What mostly concerns are that 15% cannot pay bills.

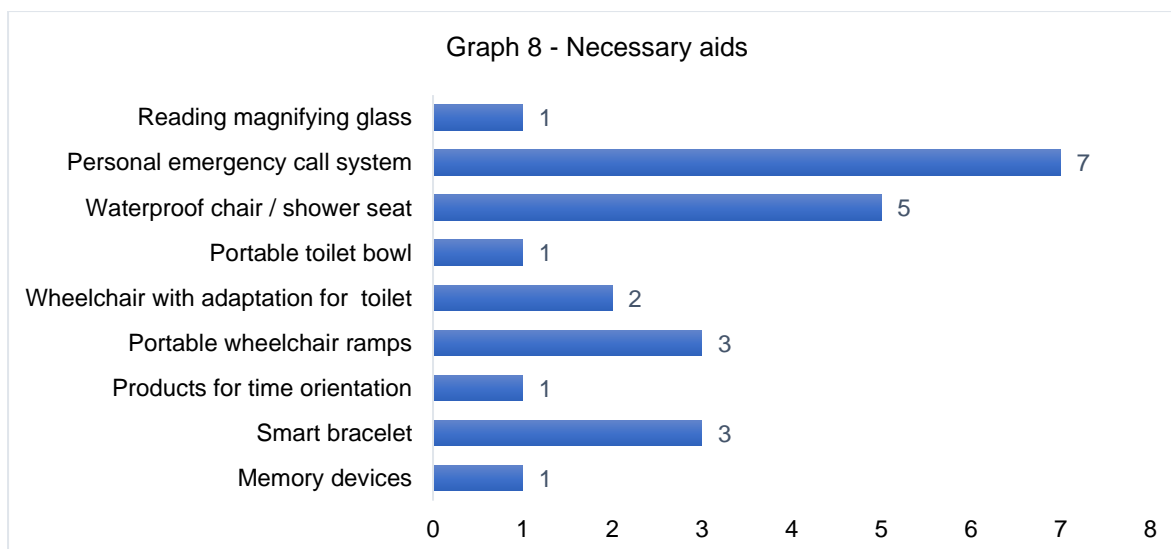
- Service needs assessment

The participants in the survey reported that all the health services they need are available in the municipality (clinic, hospital, private clinic, dental services, etc.). Going to doctor examination for 42.1% of disabled elderly people often presents a burden, so they prefer to use a visiting (nursing) service - to have a service from medical professional who will visit them in their home. When asked about services they lack, 14.3% say that they need delivery of the necessary medicines in their home, while 38.1% consider that in the municipality there is lack of transportation for the elderly to the health and social institutions. More than 9% of the respondents say that they need a person who will help provide assistance, and 4.8% need physical therapy.

For performing daily tasks 40% of them do not receive help or assistance while the rest are taken care by their parents, spouse, children, grandchildren or other relatives. Most often the closest family persons are those who help them in performing daily activities. Due to their condition, most of the daily activities that take place outside the home cannot be performed without the support of another person



In order to make life easier for certain people who participated in the research, they need devices and or other items/objects. The graph below shows the number of people who need a suitable device or aid (Graph 8).



If their health condition seriously deteriorates or they cannot leave their home due to their health condition, they usually turn to those family members who live with them (60%). Others would first turn to their parents, children, distant relatives, neighbours, or friends. **One person does not have who to call in case of necessary need for help/assistance.** Most persons with disabilities prefer to have someone to turn to if they need home care, while only two persons do not have such need because they are helped by their relatives. Only two receive the personal assistance service that enables independent and self-sufficient living, while the other 17 persons do not receive this service. **A person who has reached the age of 65 has no right to use this service.** They say that if it is available to them, they would use it, because for most of them or 55% such assistance is necessary.

According to the answers of the survey participants, there are institutions in the Municipality that provide daily care and accommodation for persons with disabilities, such as the Daily Centre for Persons with Disabilities (Poraka) and the Daily Centre for Autism. Three persons who have used the services of these institutions reported that they provide adequate conditions for persons with disabilities, although one respondent is not satisfied. Others consider that they would use these kinds of services if they needed to. In general, most people with disabilities need institutions of this type only if they face an exceptional situation in which they will not be able to perform their daily activities.

For 35% there are no street in their place of residence that are accessible to persons with disabilities. When asked which streets are not accessible, 9 people answered that actually all the streets in the city are not accessible, 5 people reported the streets in their neighbourhood (which can be located based on their place of residence), and several persons list the following settlements: Tri Ceshmi, Block 70 and Senjak 4. These streets lack tactile paving, traffic lights with sound signal, lowered sidewalks, pedestrian crossings and access to wheelchair ramps in all public institutions.

Summary:

For performing daily tasks 40% of them do not receive help or assistance while the rest are taken care by their parents, spouse, children, grandchildren or other relatives. Most often the closest family persons are those who help them in performing daily activities. Due to

their condition, most of the daily activities that take place outside the home cannot be performed without the support of another person. Most persons with disabilities prefer to have someone to turn to if they need home care, while only two persons do not have such need because they are helped by their relatives. Only two receive the personal assistance service that enables independent and self-sufficient living, while the other 17 persons do not receive this service. A person who has reached the age of 65 has no right to use this service. They say that if it is available to them, they would use it, because for most of them or 55% such assistance is necessary. Almost all streets in the city area are not accessible for them.

- Discrimination and governance as risks factors

Disabled persons in their life have high probability to face any kind of discrimination (at their workplace, accessing the public services, etc.). Therefore, within the survey was examined their perception of the exposure to the risk factor discrimination. Four individuals who participated in the survey believe that the state and the laws do not protect them from discrimination. Most of them or 68.4% consider that their rights are not respected (60%) and it is worth to note that in the last 12 months 20% of them felt discriminated.

The number of those who were discriminated in the workplace, when looking for a job, in a shop, on public transport, or even at the clinic is small. However, the prevailing fact is that as many as 50% say that they have felt discriminated in the relations with other people.

Summary:

Disabled persons in their life have high probability to face any kind of discrimination. The number of those who were discriminated in the workplace, when looking for a job, in a shop, on public transport, or even at the clinic although is low, these issues need to be addressed. However, the most concerning is fact that as many as 50% say that they have felt discriminated in the relations with other people.

- Influence of global virus pandemic (COVID-19)

The outbreak of the virus has changed the way of life for many around the world, and poses a serious threat to the lives especially for elderly. Measures were taken to restrict the movement of people, and some of them included complete isolation and lockdowns. Still very little is known about the effects that social distancing can have on the elderly people.

The pandemic has had a profound effect on the everyday life of the disabled elderly people. Namely, with the outbreak of the coronavirus, as many as 95% say that they did not want to leave their home because they are risk category that must be isolated. For most of the participants in the survey, the pandemic affected their relations with other people, so many miss contact with their loved ones. It is worrying that almost everyone has reduced their physical activity as a result of measures to prevent the spread of the coronavirus. The pandemic also put a financial burden on the back of the disabled elderly people. During a pandemic, the pension of 61.1% is not enough to cover the expenses and 70% have no savings they can use to relieve themselves. They say they received financial assistance from the state and they do not need psychological advice on how to cope with living in a pandemic.

Half of the participants in the survey agree with the statement that as disabled elderly people in time of pandemic remained on the margins within their community. In their perception of the current situation, not every citizen has the same opportunity to receive the necessary health treatment, and 94.7% believe that those with higher incomes and better socio-economic status in society have a better chance of protection and can use the services of private clinics.

The pandemic restricted personal contact with people, but communication continued via computer and telephone using the widespread access of internet. In order to identified the needs for digital literacy training (use of device, social networks and etc.) participants were asked what will make their lives and communication easier. For several participants there is need for training on how to use smartphone, tablet, internet, or even how to use the social media.

Summary:

The outbreak of the virus has changed the way of life for many around the world, and poses a serious threat to the lives especially for elderly. For most of the participants in the survey, the pandemic affected their relations with other people, so many miss contact with their loved ones. It is worrying that almost everyone has reduced their physical activity as a result of measures to prevent the spread of the coronavirus. The pandemic also put a financial burden on the back of the disabled elderly people. Half of the participants in the survey agree with the statement that as disabled elderly people in time of pandemic remained on the margins within their community. In their perception of the current situation, not every citizen has the same opportunity to receive the necessary health treatment, and 94.7% believe that those with higher incomes and better socio-economic status in society have a better chance of protection and can use the services of private clinics.

- Recommendations

The social mapping of persons with disabilities has brought to the surface the everyday challenges they face as citizens when leaving their homes. Although they do not face the risk in terms of housing and living conditions as the elderly and feeble people, they are still often "left behind" in most of the infrastructure activities undertaken locally i.e. their needs and interests are not taken into account when repairing or opening new streets and sidewalks, building new traffic solutions: roundabouts are not practical for use by the blind persons and the movement on pedestrian crossings is not marked with a tactile paving, wheelchair ramps are often not properly made and therefore they are rarely or not used at all. Additionally, there are no adequate elevators in buildings and institutions, and there is lack of support and personal assistance that will make their life easier, but also the life of their family members who take care for them on a daily basis etc. Sometimes, a small change may mean a world to someone.

- It is necessary to provide adequate access for persons with disabilities in the municipality, because the respondents answered that no street in the place of residence is accessible for them.
- In order to facilitate their movement, they lack a tactile paving, traffic lights with sound signal, lowered sidewalks on pedestrian crossings and access ramps in all public institutions.

- It is necessary to provide adequate access conditions for persons with disabilities in their homes, because almost all buildings in the municipality are without elevator or/and are not adapted to their needs.
- is necessary to provide personal assistance service for most of the daily activities that take place outside the home, because they cannot perform them without the support of another person (going to bank / post office, buying medicine, going to the doctor, maintenance and repairs at home, house cleaning, meal preparation, etc.)
- Providing aids (devices) to make their life easier (smart bracelet for blood pressure monitor, pulse, alarm for taking medications, wheelchair with adaptation for going to the toilet, portable toilet bowl, waterproof chair for sitting in the shower, portable wheelchair ramps, reading magnifier, hearing aid)
- Persons over 65 years of age are not entitled to use personal assistance. This MUST be discussed at a higher level, as it is a discriminatory act.

LNOB group 3 – Roma women (victims of domestic violence)

Roma women face discrimination and social exclusion on the grounds of ethnicity/race, gender, class and education. Most often, they face discrimination on multiple grounds, thus experiencing intersectional discrimination. Roma women in general live in poor and remote communities and have less formal education. They experience more than one of the deprivations and disadvantages among the five factors. Roma women, victims of domestic violence are group left furthest behind, having in mind that they experience deprivations and disadvantages related to all five factors. As defined in the Istanbul Convention, violence against women is understood as a violation of human rights and a form of discrimination against women and shall mean all acts of gender-based violence that result in, or are likely to result in, physical, sexual, psychological or economic harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life. As defined in the Istanbul Convention, domestic violence means all acts of physical, sexual, psychological or economic violence that occur within the family or domestic unit or between former or current spouses or partners, whether or not the perpetrator shares or has shared the same residence with the victim.

Domestic violence is a serious social problem that is of concern in terms of prevalence. Every second woman in the country is a victim of psychological violence, every fifth woman faces some form of physical violence, while sexual violence between two partners is still a topic that is rarely discussed in our environment.¹³ Roma-women are discriminated in the family and in the community. Domestic violence is often tolerated in relationships where the traditional perception of the family and its values still prevails. Roma-women are responsible for maintaining the home and taking care of the children, while Roma men are expected to earn and provide for the family. Those who experience domestic violence face more difficulties due to poverty, social exclusion and lack of social services in the areas where they live.¹⁴ Previous research also show us that Roma women who report their husbands or partners at the

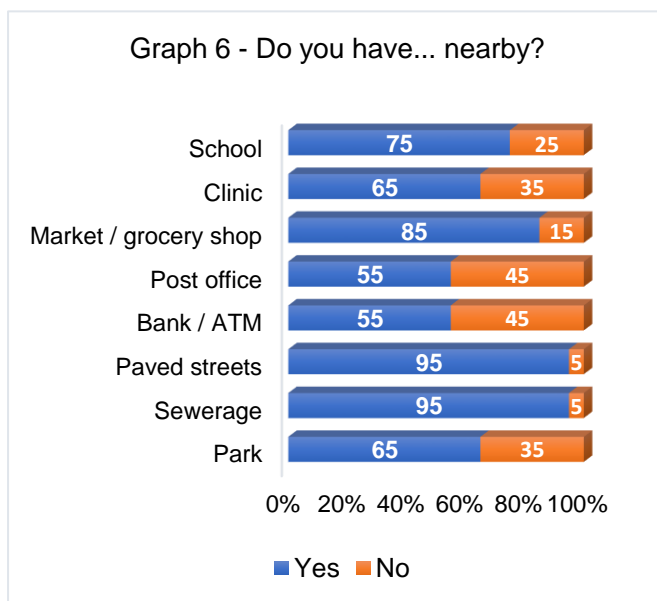
¹³ Association for Emancipation, Solidarity and Equality of Women - ESE. Guide for Victims of Domestic Violence. 2017.

¹⁴ UNDP. Nowhere to turn – Gender-based violence against Roma women. Report of a field study of Roma communities in Albania, Montenegro and the former Yugoslav Republic of Macedonia. 2018.

authorities, but continue to share the same household with them, face even more violence. Poverty in Roma communities is both a consequence and a determinant of a lack of access to education.

- Location and risks of isolation considering the living conditions / Geography

Among other risks for social exclusion Roma women often face vulnerability based on the location of living and the living standards. Most of the Roma women who participated in the survey or 60% live in city area in the Municipality of Štip, while 30% in settlements that are quite populated. Two of them live in an isolated dwelling. It is worth to note is that these women (a widow and a woman separated from her partner) care for their children in isolated areas.



Considering that most of the participants in the survey live in city areas usually they are not isolated and excluded from services and near their dwelling they got: school (75%); clinic (65%); market (85%); post office (55%); bank / ATM (55%). In the neighbourhoods where 95% of the Roma women live, the streets are paved and there is sewerage, while 65% say that there is a recreation park nearby.

In order to determine the circumstances in which they live, their environment was examined, i.e., the settlement in which they live. Most Roma women know their neighbours well and can turn to them for

help. All of them believe that their neighbourhood is safe for living, although this contradicts the claim that as many as 30% of them were in danger in their neighbourhood.

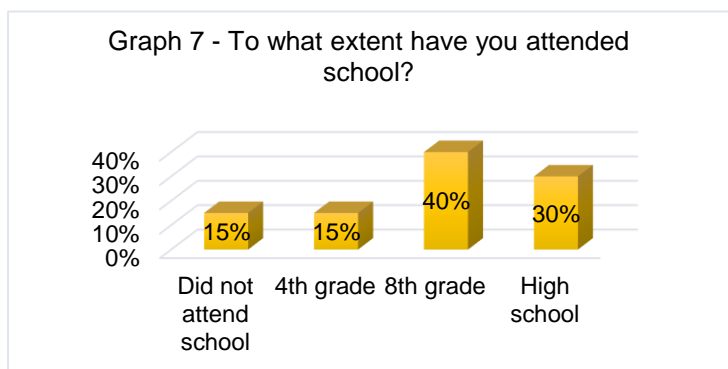
Roma women face a general problem in terms of location. Namely, most of the Roma population lives in the “ghettoized” settlement “Radanski Pat”. In this neighbourhood the police rarely control the security of its residents, and visiting the settlement by non-Roma persons is no safe. In such circumstances women are in worse position compared to man, given that in Roma communities the traditional perceptions of marriage prevail, where the role of the women is in the household. Therefore, the initial assumptions were in that context i.e., Roma women experience disadvantages in particular at their starting position in the community compared to the non-Roma women from the Municipality. Even in case of domestic violence they can hardly be protected due to the location of residence. Mostly “ghettoized”, they are socially excluded. In terms of this LNOB factor, the most at risk are those who do not have a partner, live alone and live with children in isolated environments. They are more likely to be socially excluded and given the circumstances to be left furthest behind.

Summary:

The Roma women that participated in the survey live in the city area, even some of them own the property where they live. Those in "isolated" settlements are more vulnerable compared to Roma and non-Roma women who live in the other parts of the city, because they face much more risks due the fact that their security is at lower level. Therefore, probability of social exclusion for them is greater.

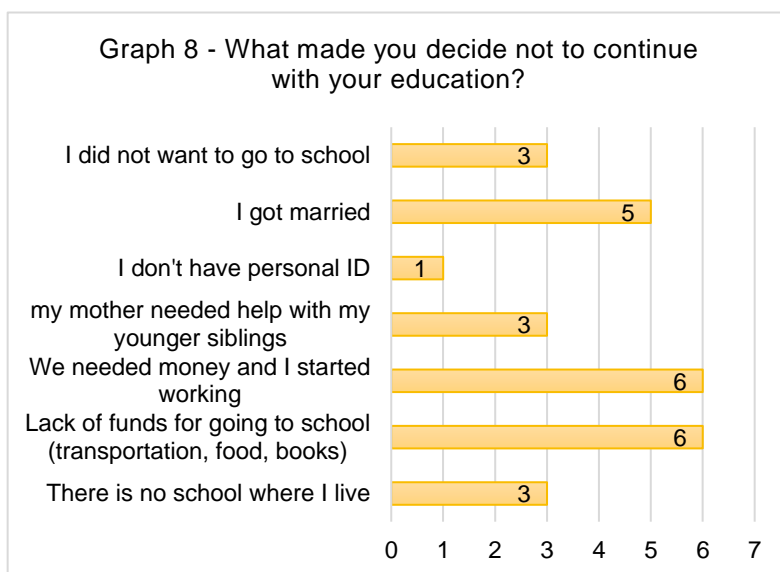
- Socio-economic status of Roma women

According to their marital status, more than half or 55% are married, 20% are separated from their partner, 15% are widows, and 5% live in an extramarital union. One woman is unmarried. Most of them met their husband/partner by themselves, and in one case their families arranged their marriage. All participants in the survey have large families (with many children).



The relatively low level of education is worrying, with as many as 15% of Roma women did not attend school at all, the same percentage dropped out of education at 4th grade. Most of women or 40% had completed primary education with 8th grade, while 30% had finished secondary education.

If Roma women are integrated in the formal educational process they usually drop out of school before or after they complete primary school. This decision later in life leads to many challenges for which they might not be aware as young people. Low level of education implies low paid and precarious employment or probably informal employment without paid contributions for health and social security. The chances for employment in competitive labour market for those who are illiterate (did not attend school) are even lower. In this way they are at risk of complete economic dependence on their partner, husband or family. Even if they are aware of this, the decision to continue the education or not is not a decision they always made by themselves. The most common reasons why Roma women drop out of school before or after completing primary school are economic. They are related to lack of funds to support the costs and for them this usually means of them it is expected to find a job in order to contribute to the family budget. For some is necessarily to support their families, but also there are those who



do not want to go to school. It should be noted that as many as 25% say they dropped out of school because they got married, and 20% say there is no school near their place of residence.

In regard to education the degree to which the participant's partners completed their education was also examined. Thus, it is worth mentioning that higher percentage of man (46.7%) compared to women finished primary education, but a significantly lower percentage of them managed to complete secondary education – only 6.7% which is 23.3% less compared to their partners or wives.

Regarding the economic status 40% of Roma women are full time employed, while 35% are beneficiaries of social assistance within the system for social protection. Those who are unemployed are registered in the records of the Employment Agency, only one of them is not. Unemployed consider that in order to find a job, they need support and additional training or education that will make them more competitive. The Employment Agency implements measures aimed at helping the unemployed persons to find job and as vulnerable category of citizens they are one of the target groups, although none of the unemployed Roma women uses this kind of support and one woman is not informed about these employment policies. This is probably a result of the low level of information and awareness for these kind of employment opportunities. Taking care of the children and the household is a challenge if they are employed, so some of them need services such as kindergartens or service of other persons to take care of the children while they are at work.

In the last month, most of the Roma women or 75% earned income. Although full time and formally employed, mostly in the private sector, Roma women live on the edge of poverty. Thus, 55% have a monthly income of less than MKD 12.000, and 30% have between 12 and MKD 20.000. The remaining 15% have slightly higher incomes, and one has a monthly income of over MKD 30.000. This is especially worrying if we take into account that the value of the Trade Union Minimum Basket for June 2021 is MKD 34.212.¹⁵ In that context for 85% of Roma women the budget does not meet the basic needs and according to their estimations almost 58% need from MKD 24 to 30.000. Currently, when they describe the financial situation in the household, as many as 50% say that the income they have is not even enough for providing food on the table, while for 40% the providing of food is not a problem, but they cannot afford other necessary things such as clothes. Only one Roma woman manages to save some money, but her estimates are that it is not enough to equip the household with all the necessary things.

Summary:

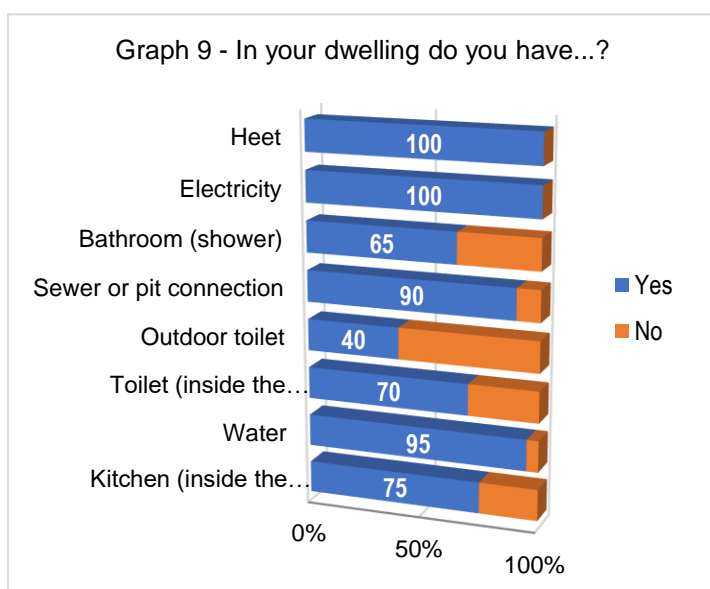
Roma women in Municipality of Štip are highly affected by the socio-economic risk factor due to their unsatisfactory level of education and their low monthly income. Most of them drop out of school after completing primary school, and some might be illiterate because they did not go to school. That decision to stop the education process usually is not solely theirs and is due to economic reasons. They need to work to contribute financially to the household budget or care for younger family members. One of the participants in the survey did not complete her education because she married. Less than half of Roma women are employed, others although registered in the records of the Employment Agency as

¹⁵ Federation of Trade Unions of Macedonia. The value of the TUMB for June 2021.

unemployed persons, do not use active employment measures. Their monthly income is not enough to cover all expenses. In addition to the socioeconomic risk factor the geography and vulnerability to shocks are also major factors that increase their status as left behind population.

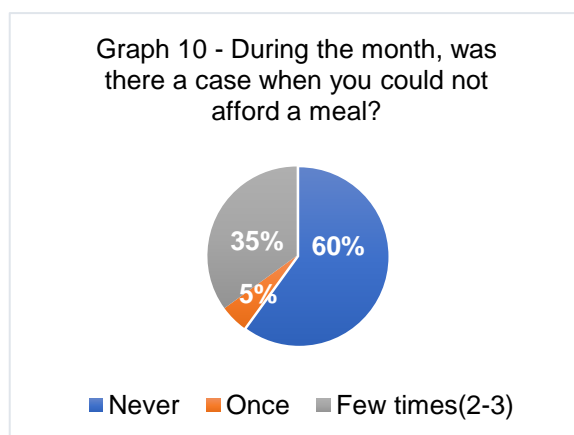
- Living standards of Roma women

Most of Roma women or 65% live in houses that are in relatively good condition, other in apartments in a residential building, while 25% have modest living conditions in an older house that is in poor condition. Usually, they are not the owners of the dwelling there they live – only 20% are owners of the property, but they also live alone. The rest live in dwellings owned by the husband, father-in-law / mother-in-law, parents or close relatives and friends. It is worrying that one Roma woman does not have proper documentation for the place where she lives.



As stated in the previous chapter, the financial situation is reflecting on their living standards. Hence, some of the participants are facing various difficulties, for example, they don't possess telephone, refrigerator, TV, or even kitchen in their homes. The number of Roma women that are lacking necessity devices in the home are presented on Graph 9. It is worrying that 5 Roma women do not have a kitchen (inside the home), 6 do not have a toilet, and 12 do not have a bathroom inside the home. Even 2 Roma women do not have a water supply in their home.

It is worrying that the financial challenges affect the general well-being, way and quality of Roma women's life. Thus, more than half or 55% have a monthly income of less than MKD 12.000 so the fact that some Roma women cannot afford a meal several times a month is not surprising at all. Namely, 35% have reported that they couldn't afford a meal several times a month. Regarding the shortage of drinking water, three women say that in the last month they have faced a shortage of drinking water when they needed it.



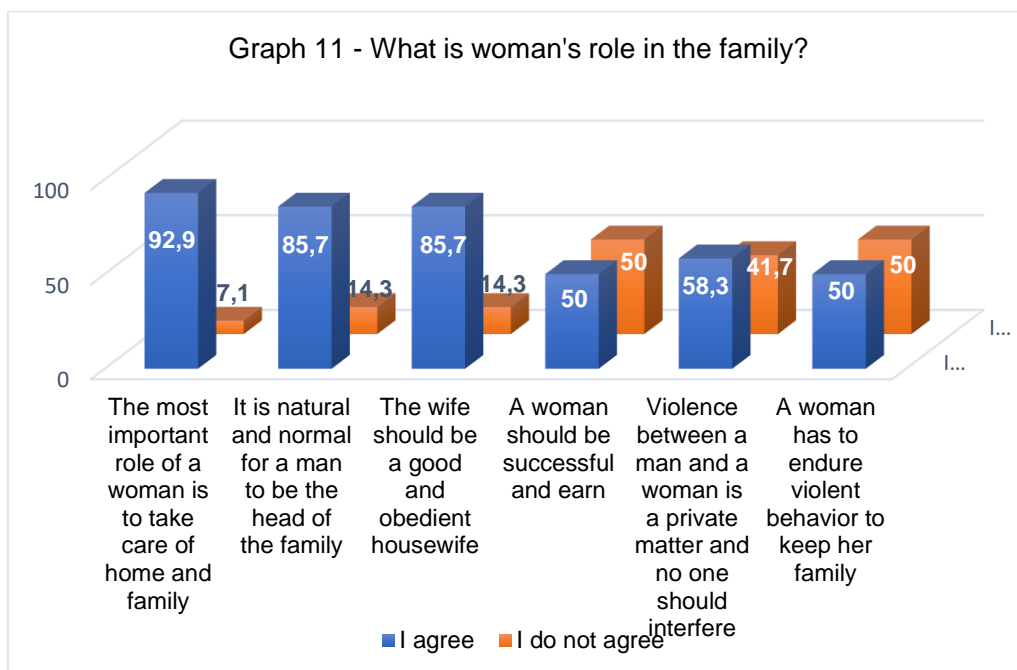
It is worrying that as many as 55% of Roma women do not own a computer or other tech device such as a laptop, tablet, etc. in their household. Additionally, 15% cannot afford to use the Internet.

Summary:

Roma women do not meet minimal living standards. Their economic status is relatively low, they face extreme poverty, cannot satisfy their basic needs and 35% of the participants in the survey could not afford a meal few times in a month. It is worrying that the financial challenges affect the general well-being, way and quality of Roma women’s life. In addition to the socio-economic risk factor the geography and vulnerability to shocks are also major factors that increase their status as left behind population.

- Domestic violence assessment

Considering that the Roma community members have different perception of women’s and men’s role within the family, Roma women were asked to state whether they agree with some statements. CRPM C find quite worrying perceptions about these issues. Almost 93% of Roma women who answered agree that the most important role of the women is to take care of home and family and for 85.7% it is common and normal the male (partner or husband) to be head of the family. Regarding to similar gender-sensitive statements, Roma women responded in a similar context in which according to their perceptions the woman has an inferior role and position in the family in relation to the man. Namely, 85.7% believe that the woman should be good housewife and to obey her husband.



Significant differences in perceptions occur for equality issues. A worrying fact is that many Roma women would tolerate domestic violence as a result of the environment in which they grew up. Thus, when it comes to the statement that a woman should be independent, successful and employed only 50% agreed – same percentage also agreed with the statement that the man and woman should have equal authority in the family. However, the most worrying are the answers to the following two statements. Namely, violence between a man and a woman is a private matter and no one should interfere – this is a statement with which half of the Roma women who answered agreed. Additionally, it is very important to state that

50% also agreed with the statement that a woman should suffer violent behaviour in order to keep her family. (Graph 11).

When they have disagreement with their husbands four Roma women are constantly at risk of being victims of domestic (psychological or physical) violence.

The presented data gives us a clear landscape of Roma women perceptions who find themselves in a subordinate role in family relationships and are willing to tolerate violence from their husband or partner in order to keep her family instead to build a perception on their equal role and to work on their self-esteem and to develop in strong and independent women in their community. Examining whether there has ever occurred domestic violence, the option "refuses to answer" is very often the chosen answer, which may be a result of participant's fear of answering the question honestly. That answer may suggest that

these women are also more likely to be among those who often face domestic violence. When asked if any events have occurred or recurred, such as whether the husband or partner uses physical force when they have a disagreement, 28.6% of Roma women who answered say that it happens all the time. The answers to the question whether the husband/partner throws objects during a fight, with the intention to hurt her and whether he threatens to hurt her are identical. Only two Roma women reported domestic violence to the police and to the Educational-Humanitarian Organization - EHO, and the outcome was different. In one case it had no effect and the person continued with the same violent behaviour, and in the second case the person stopped to be aggressive toward his partner or wife. In both cases, legal proceedings were instituted against the husband / partner.

Summary:

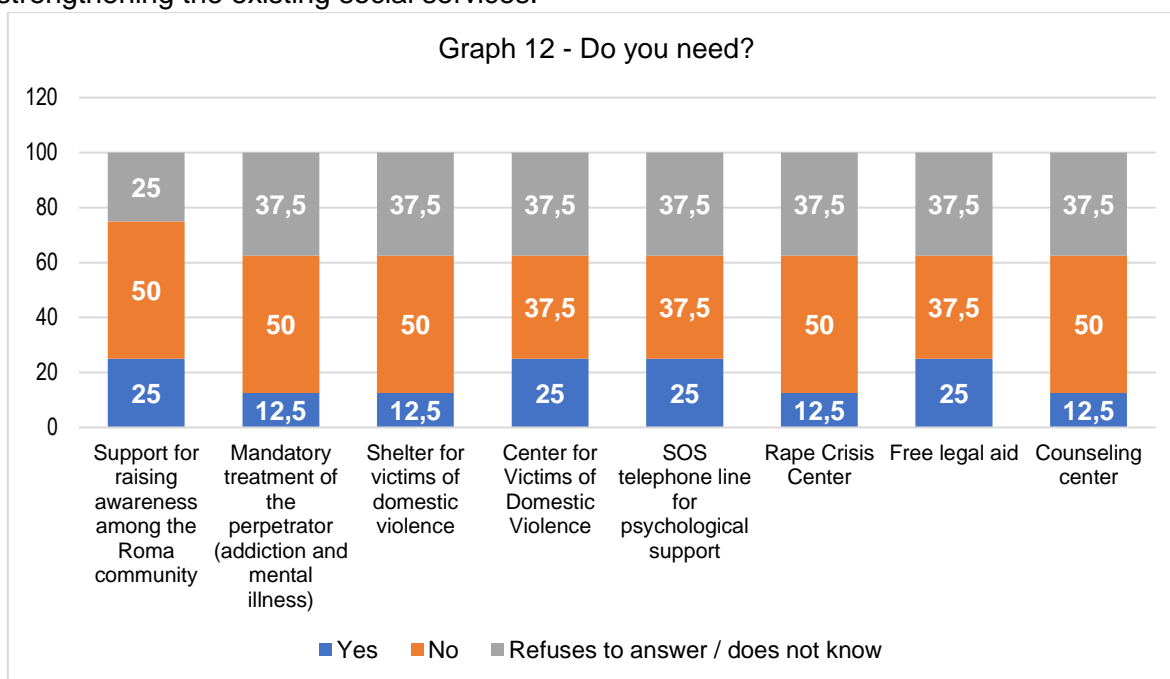
The traditional social roles are dominant in the Roma community with perceptions of Roma women as housewives, and their husband/male partners as head of the family and breadwinner. This perception on gender roles often leads to domestic violence toleration, where victims are not just the wives, but the children as well. They consider it as private matter that no one should interfere, thus many of the respondents refuse to answer all questions related to domestic violence.

- Social services need assessment

Providing social services at municipal level is of crucial importance which can contribute to reducing domestic violence and also is supporting vulnerable and marginalized groups to have independent and decent living standard. Roma women are not aware of whether there is a shelter for women victims of domestic violence, nor did they have used such services. One of the respondents has reported that she would often use these kinds of services, because she has to leave her home in situation of domestic violence. Opinions are divided on the question whether children should be also cared with the mother, so two women consider that children are always in need of their mother, while one woman stated that is not necessary for her children to go in shelter, because her husband/partner does not behave violently to them. Based on their previous experiences as victims of domestic violence who are looking for a way out and for protection, they estimate that it would take about 12 or more months to return

back home again after the violent situation. The other participants could not make their own assessment or refused to answer this question.

To the question whether SOS telephone line for victims of domestic violence is available at municipal level, only two women answered positively, while six are not informed. Three Roma women stated that there is a counselling centre in the Municipality that provides psychological counselling or free legal aid, and four were not informed about these social services. One Roma woman would often use psychological counselling while legal assistance for them as victims absolutely is needed. Graph 12 lists the needs of Roma women for protection, assistance and support. From presented it can be noticed the high degree of refusal to answer some of the questions, and a smaller number of answers the need for providing new or strengthening the existing social services.



Summary:

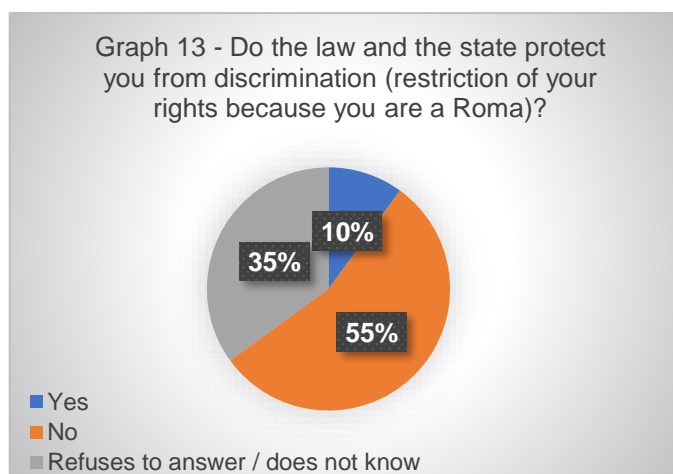
There is evident lack of information and awareness among Roma women for the existing social services at local level. According to their experiences of trauma and the estimate for the time they should not be near the husband / partner there is urgent need for opening Shelter Centre for victims of domestic violence within the Municipality of Štip. It is also necessary to increase the scope of the services that are provided such as the free legal aid and psychological counselling.

- Discrimination of Roma women

Engrained discrimination and extreme social exclusion prevent Roma women from an adequate and equal access to education, health, social protection, employment, housing and

accommodation. Therefore, within the survey was examined their exposure to the risk factor discrimination in the Municipality of Štip.

More than half or 55% of the Roma women who participated in the survey believe that the state and the laws do not protect them from discrimination. They consider that Roma people are not respected (60%) and it is worth to note that in the last 12 months 50% of them felt neglected (discriminated).



Roma women's perceptions of discrimination in terms of employment opportunities were examined. Thus, three participants in the survey agree with the statement that it is difficult for them to find a decent job due to prejudice, and two Roma women consider that they cannot keep their job for the same reasons. The experiences of several Roma women show that in their life they felt discriminated in everyday situations such as at their workplace, clinic, supermarket, in theatre, cinema, and even in their relationships with other people.

Summary:

Engrained discrimination and extreme social exclusion prevent Roma women from an adequate and equal access to education, health, social protection, employment etc. The role of municipalities is to improve the quality of life of people even with small things, to make their everyday life easier and even happier. So local authorities should work on raising awareness among non-Roma populations while constantly improving the quality of life of Roma women, because some of them are left behind in terms of the risk factor discrimination.

- Governance as factor / participation in social and political life

In terms of governance, the involvement of Roma women in political and social life at local level was briefly examined. Many of them or 75% do not follow the political affairs in the country and are not informed on a daily basis, while 20% say that they are informed periodically during the month. However, the main issue is that no individual pleaded that takes any action at local level to protect their interest. None of them has ever met with representatives of the Municipality, did not support any protest, civil movement or initiatives. Their inaction as citizens is probably caused by their isolation, dissatisfaction as well as discrimination. As a result of that this vulnerable group cannot use the instruments available to them as citizens to influence on adoption of public policies that can improve their lives. Most of them or 50% say that in the past three years at local level no public policies have been adopted that are of interest to the Roma community. This perception may be due to the fact that public policies do not cover them as group because they are left behind and for them there is no data. Its worth to mention that on this question 45% of Roma women did not answer.

Summary:

Their inaction as citizens is probably caused by their isolation, dissatisfaction as well as discrimination. As a result of that this vulnerable group cannot use the instruments available to them as citizens to influence on adoption of public policies that can improve their lives and the lives of Roma population. The perception that in the past years no policies were specifically tailored for Roma community may be result of the fact that public policies often do not cover them as a group because they are left behind and for their needs there is no relevant data.

- Influence of global virus pandemic / COVID-19

The outbreak of the virus has changed the way of life for many around the world, and poses a serious risk in many ways for Roma women. Measures were taken to restrict the movement of people, and some of them included complete isolation and lockdowns. Women who were not registered as employed but were active on the labour market engaging in informal work, abruptly lost their jobs and their income. Roma women in particular faced the greatest difficulties. They mostly worked as housekeepers, cleaners, or market vendors. Hence, due to the fact that open markets were closed, then with people staying home during the lockdown, maintaining their households by themselves, Roma women as informal workers were left jobless. Three participants in the survey reported that they cannot earn enough money or they lost their job as a consequence to the outbreak of the virus.

Traditional gender roles are strongly held by nearly half of women, especially the ones belonging to non-majority communities. Roma women it meant that during the lockdown they provided most for their children, handling the raise in household chores and time spent on cooking, cleaning and child / elderly care. Quarantine also provoked increase in domestic violence. Two women that participated in the survey reported that in the period of lockdowns their partner / husband was violent and no one was able to protect them.

Considering the previously presented data on the financial situation of this population in time of a pandemic they are on the edge of existence. Namely 50% say that neither she nor her family can be fed – they were poor and hungry before the pandemic, now the situation is worse. The gathered data on the financial situation of Roma women is worrying. Almost all of them or 90% have no savings that can be used in times of crisis and 45% have gone into debt. State financial assistance received 50% of the participants but probably that was not enough because 95% say that in this crisis all they need is financial support. Psychological support is neglected, and the woman who assesses that she needs it prefers to get support how to deal with stress, but also how to return life to normal.

The pandemic restricted personal contact with people, but communication continued via computer and telephone using the widespread access of internet. That's not the case with 55% of Roma women who do not own computer or another device such as laptop or tablet. Most of them have access to internet connection, still, some of them face limitations because they cannot afford to pay for this kind of services. In order to identified the needs for digital literacy training (use of device, social networks and etc.) participants were asked what will make their lives and communication easier. Roma women recognized the need for training for using digital devices in order to make their lives easier. For 45% of the participants there is need for training on how to use personal computer, also the interest for training for tablet and

internet use is high. Additionally, they need support in gaining knowledge on how to use Facebook (35%) and how to use smart phone for communication through Viber (25%).

Summary:

The virus worsened the economic situation of these people. Measures were taken to restrict the movement of people, and some of them included complete isolation and lockdowns. Roma women in particular faced the greatest difficulties. They mostly worked as housekeepers, cleaners, or market vendors. Hence, due to the fact that open markets were closed, then with people staying home during the lockdown, maintaining their households by themselves, Roma women as informal workers were left jobless. Three participants in the survey reported that they cannot earn enough money or they lost their job as a consequence to the outbreak of the virus. Everyone needs financial support to cope with the crisis, especially given the fact that some of them are hungry. In order to stay in touch with other people at a time when physical contact is limited, they want to learn new (digital) skills that will make their everyday lives easier. They need training to use a smartphone, tablet, computer, internet, but also training to use social networks.

• Recommendations

The social mapping presented relevant information on the current situation in which are the Roma women in Municipality of Štip. Roma women face discrimination and social exclusion on the grounds of ethnicity/race, gender, class and education, health, social protection, employment and accommodation. Most often, they face discrimination on multiple grounds, thus experiencing intersectional discrimination. Roma women in general live in poor and remote communities and have less formal education. They experience more than one of the deprivations and disadvantages among the five factors. Roma women, victims of domestic violence are group left furthest behind, having in mind that they experience deprivations and disadvantages related to the LNOB factors.

- Additional employment measures and support are needed, as well as skills training. Encouraging the employment of Roma women with secondary education and facilitating the process of further education of those with primary education.
- Opening centres for education, further education and labour skills training of Roma women and girls, for economic empowerment in order to enable them to have an independent life.
- More intensive awareness-raising campaigns for Roma women to reduce the rate of interruption of the formal education process due to premature marriage.
- Provide training in digital literacy, use of digital devices and social networks in order to make Roma women's life easier.
- Introduce positive measures to eliminate gender role differences between women and men that result in gender inequality.
- Introduce measures to reduce poverty, having in mind that Roma women mostly live on the edge of poverty and cannot afford a meal even several times during a month.
- Support in purchasing basic devices for normal living and providing drinking water in homes (refrigerator, stove, toilet, water connection).
- Raising awareness among Roma women about domestic violence and ways to report domestic violence. Implement the Law on Prevention and Protection from Violence against Women and Domestic Violence, without discrimination, prejudice and

stereotyping by relevant stakeholders. The majority of Roma women do not report domestic violence precisely because of the high level of discrimination and special attention needs to be paid to resolving this type of discrimination in order to gain back the trust in the institutions.

- Providing regular training of police officers for non-selective treatment of citizens from minority ethnic communities (Roma). Detailed acquaintance with the Law on Prevention and Protection against Discrimination and the obligations imposed on police officers.
- Raising gender awareness and provide education on the forms of gender-based violence for the police officers. Regular upgrading of the knowledge and training for appropriate treatment of women and children victims of domestic violence as a vulnerable category of citizens is more than needed.
- Strengthened measures to prevent discrimination in public institutions.
- More stringent measures to punish the perpetrators. Counselling and financial assistance and support.
- Increasing awareness among Roma women about the already available social and health services.
- Awareness rising for information and counselling services for victims of domestic violence.
- Opening a crisis centre for victims of domestic violence that will accommodate women and their children urgently when reporting domestic violence in a period of 2 to 7 days, until they settle for long-term.
- Opening of a functional shelter for women and children victims of domestic violence in which they would be accommodated for a period of 3 to 9 months, i.e. until the period of their economic strengthening.
- Gender sensitization of health professionals and training for appropriate treatment, when working with Roma women victims of domestic violence.

Focus group analysis – Roma women victims of domestic violence

Due to the challenge of approaching Roma women victims of domestic violence through the field survey, primarily due to the sensitivity of research questions, as well as the likelihood of limited openness and honesty in the providing answers, because of the presence of others (including the husband/partner that committed domestic violence), two focus group discussions were conducted with victims of domestic violence. In close cooperation and in coordination with the NGO EHO from Štip, at an appropriate and safe location, in compliance with the protection measures against SARS-CoV-2. The focus groups were held with Roma women who during their life survived and reported domestic and / or intimate partner violence in some of the existing competent institutions (police, the Centre for social affairs, health institutions and / or non-governmental organizations). All participants were separated or divorced from their partners, i.e., husbands and they all have children. One of the respondents has no home and lives on the street.

The main objective of the focus groups was to determine the functionality and quality of existing local services and services for victims of domestic violence for women from marginalized communities as well as to determine the need of new social and health services. The main conclusions drawn from the focus groups are the evident necessity of opening shelter for victims of domestic violence within the municipality of Štip, because the nearest one that the Centre for social affairs is proposing is located in Strumica, approx. 50 km from

Štip. Moreover, it must be acted upon the improper treatment that Roma women victims of domestic violence get when reporting their cases to the local authorities (police station, centre for social affairs, health institutions). Law enforcement officials must at all times fulfil the duty imposed upon them by law, by serving the community and by protecting all persons against illegal acts, consistent with the high degree of responsibility required by their profession.

The focus group scenarios are provided in Annex 4.

Table 1: The social and economic structure of the respondents is as follows:

Age	Family status	Children	Level of education	Living conditions
27	Separated/Divorced	Yes – 6, 3 living with their father, 3 living with their mother	Primary education up to 3rd grade	Village, in one small rented room
41	Separated/Divorced	Yes	Completed high school	Urban area, dwelling with adapted living conditions
53	Separated/Divorced	Yes	Primary education up to 4th grade	Urban area, dwelling with good living conditions
24	Separated/Divorced	Yes	Completed primary education	Urban area, dwelling in bad conditions
35	Unmarried couple	Yes	Never attended school	Urban area, dwelling in bad conditions
/	Separated/Divorced	Yes	Started high school but never finished	Urban area, dwelling in bad conditions
34	Separated/Divorced	Yes	Completed high school	Urban area, dwelling with good living conditions
33	Separated/Divorced	Yes, 4 children	Completed primary education	Homeless, lives on streets

Table 2. Available services and services for victims of domestic violence in the municipality of Štip

Available services and services for victims of domestic violence in the municipality of Štip	State institution	NGO
	√-Available / X- Not available	
Police station	√	
Centre for social affairs	√	
Health institutions	√	
Crisis centre for victims of violence	X	
Shelter centre for victims of domestic violence	X	
Free legal aid	X	√
Psycho-social counselling	X	√
SOS line	X	√
Centre for victims of sexual violence	X	
Red cross		√
Centre for education, job training and economic empowerment	X	X

During the Covid-19 pandemic, some of the victims received social packages of food and hygiene items from the municipal Red Cross and the Centre for Social Affair.

Prioritization of necessary services to get out of a violent environment

Roma women victims of violence were asked to prioritize the existence and availability of several services they need in order to leave the violent environment more simply and easily. The services that were offered to them for ranking in importance are the following:

- Economic empowerment and creating conditions for financial independence
- Opening a counselling centre for victims of domestic violence
- Free legal aid
- Free psychological support
- Longer stay outside the home
- Enhanced controls by social services

Out of a total of 8 women who ranked the services by importance, the following list was obtained where the first ranked is the most important service, and the fifth ranked the least important service according to Roma women victims of violence:

1. Economic empowerment and creating conditions for financial independence
2. Longer stay outside the home
3. Opening a counselling centre for victims of domestic violence
3. Free legal aid
4. Free psychological support
5. Intensified controls by the social services

...with her ribs broken, she asked for help and the social services sent her to shelter in Strumica. Unfortunately, she could not leave the city with her two children, because she works in Štip. Currently, she lives with them on streets.

According to above ranked needs, it can be noticed that Roma women are aware of their need for empowerment as get away from violent environment. Unfortunately, currently there is no such centre within the Municipality of Štip and similar activities are only organising as part of donors' projects, which in most cases are with highly limited recourses. It is necessary for the municipality to provide such services that will offer Roma women space for empowerment and will provide them with skills which will enable their finance independence.

..."We Roma women are ashamed to talk, but here I will gather courage to say it, we have been raped many times by our own husbands. Beaten and abused. We have nowhere to turn to...no one to tell."

Also, longer stay outside their homes is highly ranked as instant get away, but not as permanent solution. There in no Shelter centre for victims of violence available within the municipality, which presents a tremendous problem for the victims, not just a challenge. They are forced to go

The victim's daughter got married at the age of 14 only to escape home and to save herself from the abusive father

back in violent environment and be a victim. It causes both, physical and psychological suffering. It is common for the victims to have suicidal thoughts, but their children give them strength to fight. Also, depression, anxiety and other trauma-related mental conditions are resulting from the violence. Some of the victims say out loud that they urgently need psychological counselling and not for them only, but also for their children as well, because in most of the cases, the children themselves are being abused. Physical and emotional violence is often accepted as a form of discipline for children and is a part of traditional family culture. That is the main reason why the child violent is rarely being reported to the social centre or the police.

Domestic sexual violence is stigma and victims therefore have fear of retribution and fear of harassment to report such cases. Even though, they were brave enough to tell their personal stories. There is evident need of raising the awareness among Roma women and encouraging them not to tolerate domestic sexual violence, despite the fact it comes from their life partners and to report such cases to the police and social centres.

Quality of services

	First report of domestic violence	Quality of service	Second report of domestic violence	Quality of service	Third report of domestic violence	Quality of service	Fourth report of domestic violence	Quality of service	Fifth report of domestic violence	Quality of service
Victim No.1	Police station in Kriva Palanka	Unprofessional approach; physical assault on the victim and attempted sexual assault - abuse of official duty	Centre for social affairs Kriva Palanka	Improper approach and reaction; persuading the victim to stay with the abuser; rejection of the request for protection and placement of the victim in a shelter center	Police station in Kriva Palanka	Appropriate approach: took a statement from the victim, made a report and initiated a procedure - The application is withdrawn from the victim and the procedure was stopped	SOS line	The operator instructs her to report the perpetrator to the police and get a medical certificate to initiate a procedure	NGO EHO Štip	Free legal aid - mediate in the divorce from the abuser and obtaining personal documents of the victim (citizenship)
Victim No.2	Police station Kumanovo	Inappropriate, discriminatory and unprofessional behaviour by a police officer during the first attempt to report violence, using racial insults. The victim is 15 years old at the time of reporting	Health institution	Improper treatment – after the delivery there is no heartbeat of the infant with reasonable suspicion of fetal death in the 9th month of pregnancy. Instead of an emergency CS, they the victim had naturally						

				delivered endangering her health and life. After the victim collapses, the dead infant is removed with CS.						
Victim No.3	Police station Štip	Mistreatment and refusal to accept the report under the pretext that domestic violence is a "family problem"	Centre for social affairs Štip	Appropriate treatment, hearing and assistance to the victim and her children. Convening the perpetrator for a conversation after the reports, but not initiating further procedure	Police station Štip	Appropriate handling of a report of domestic violence after divorce. The perpetrator was arrested several times, but was released again after 24 hours. They do not initiate court procedure.	Health institution Štip	Providing medical assistance after injuries caused by domestic violence. The victim did not cover up how the injuries occurred due to threats. Doctors do not report "suspected domestic violence" ex officio		
Victim No.4	Police station Štip	Proper handling of the police. Makes minutes and detains the perpetrator several times after reporting domestic violence;	Police station Štip	Improper treatment from the police officials when reporting evicting her and her children from home. They considered as	Court/Prison	Appropriate treatment and imprisonment of the perpetrator three times after committing domestic	Centre for social affairs Štip	Social workers visited the victim's home after reporting domestic violence. Her child allowance has been revoked	Health institution	The health workers acted appropriately when receiving the victim with injuries from domestic violence. They reported to the

		Insufficient permanent protection by the police.		family problem that they do not have the authority to solve.		violence. After serving his prison sentence, the perpetrator returns home and repeats the crime.		due to her employment. They do not approve the application for social apartment.		police and the CSA, i.e., established cooperation with the competent institutions.
Victim No.5	Police station Štip	The police officers act accordingly within their competencies, arrest the perpetrator within 24 hours, but then released him and he repeated the violence again. They do not provide permanent protection to the victim.	Centre for social affairs Štip	Appropriate treatment from the social workers. They offered accommodation in the available shelter in Strumica, but the victim due to her work cannot leave the city of Štip	Health institution Štip	Appropriate treatment from the health workers. They reported the domestic violence to police.	Centre for social affairs Štip	Inappropriate and unprofessional behaviour of the director of CSA Štip. They take only regular and not urgent measures, even though there is a danger to the victim's life.	Police station Štip	They do not impose a measure to deny access even though there is a serious threat to the life of the victim.
Victim No.6	Police station Štip	They did not act properly after a reporting abduction of a baby (deprivation of her infant from by her mother-in-law)	Centre for social affairs Štip	The social workers from CSA Štip and CSA Bitola acted appropriately and professionally and accompanied	Health institution Štip	Improper treatment by health professionals due to the charge for free health care.	NGO	Providing free legal aid in divorce case		

				the victim when taking back her child from the husband's family.						
Victim No.7	/	/	/	/	/	/	/	/	/	/
Victim No.8	Centre for social affairs Štip	The law allows granting of only one type of social assistance per person	Centre for social affairs Štip	Rejected request to use a social apartment. There are no publicly available registers for the allocation of social housing. No publicly available information.	Employment agency	Misbehaviour during the pandemic and not answering the phone. Courses are available for further education and job training, but the compensation is low.				

- General conclusions

Roma women that are victims of domestic violence is a group that is left furthest behind, having in mind that they are constantly being at high risk by all five factors. Roma women face discrimination and social exclusion on the grounds of ethnicity/race, gender, class and education. Most often, they face discrimination on multiple grounds, thus experiencing intersectional discrimination. They are being constantly discriminated by the general public, state and local institutions, local authorities, labour market etc. Governance: victims are not properly being treated by local officials and law enforcements. They are not included in policy and decision-making processes due to their level of education and their inclusion in the society. They are vulnerable to multiple diverse shocks in their everyday life: environmental – due to their humble dwellings and living conditions; violence – they suffer domestic violence on daily basis; crime – most of them live on the margins of the society, making them vulnerable to crime; economic – most of the Roma women economically depend on their partners. Geography – having in mind that they live in the community margins, their neighbourhoods are isolated and literally cutted-off from the urban area, usually without basic living conditions, such as drinkable water, sewerage system, heating, indoor toilet, kitchen...The socio-economic status of Roma women who experience domestic violence is challenging because they face more difficulties due to poverty, social exclusion and lack of social services in the areas where they live.

Victims:

- Roma women victims of domestic violence who have reported their cases to the police and were mistreated, convicted and discriminated against by police officers, lost confidence in the police and returned to their homes where they continued to suffer violence without reporting again.
- The children of Roma women, especially their daughters, often have trauma and psychological illness due to the domestic violence they witnessed and / or suffered during their childhood.
- Early marriages of Roma girls in most cases occur in order to escape the violent environment in which they live.
- Marriage rape is a phenomenon that often occurs among Roma women, but they are silent about it due to stigma, traditional beliefs and shame.
- Roma women who have had support from their parents leave the violent environment in the first case of violence and return to their parents' home whether they have children or not.
- Roma women who are economically independent, i.e., have a permanent job, find it easier to decide to leave the violent environment.
- The consequences of the COVID-19 pandemic have affected and still affect the socio-economic status of the victims.
- Roma women victims of violence need more financial support from social services, as most of them have few children.
- Most of the perpetrators do not pay alimony for their children, in case of divorce.
- Roma women victims of violence recognize the need for psycho-social support for them and their children, after leaving the violent environment.
- There is a general feeling and perception among Roma women that they are constantly being discriminated in society and they are not treated equally by the state and local institutions.

Police:

- An inappropriate treatment often occurs after the first report of domestic violence by police officers including gender and ethnic discrimination. Police officers often use ethnic and sexist insults and prejudices when domestic violence is reported by Roma women.
- In most cases, police officers, after several consecutive reports of domestic violence by the victim that is with major visible physical injuries, act in accordance with the law, make a report, initiate a procedure and detain the perpetrator at the police station for a period of 24 hours.
- In each of the cases, after 24 hours of detention, the perpetrators return home and repeat the acts, and the police do not provide long-term permanent protection to the victims.
- After serving prison sentences (for the crime of domestic violence or other crime), the perpetrators return home and repeat the acts, and the police do not provide long-term protection to the victims.
- Police officers do not have sufficient competencies under the Law on appropriate action and proper long-term protection of victims of domestic violence.
- Abuse of official duty, i.e., physical assault and attempted sexual violence, as well as unprofessional action in reporting domestic violence by police officers was noted.
- In most of the cases, gender insensitivity of police officers is used, who use gender stereotypes and prejudices and inappropriately treat vulnerable and marginalized groups of Roma women and girls.
- Unprofessional behaviour of police officers creates unsafe environment, instils fear, discourages them and encourages non-reporting of domestic violence.
- Roma women do not trust the police officers and are afraid of reporting domestic violence due to further abuse by the police officers

Centre for Social Affairs:

- Mostly, an appropriate action has been established in cases of reporting domestic violence by the CSA, i.e., hearing the victim and convening the perpetrator for a consultation.
- In several cases, social workers did not act properly and persuaded the victim to stay at the abuser's home. This unprofessional, inappropriate and gender-sensitive behaviour of social workers discourages the victim and allows violence against the victim to continue.
- Social workers monitor and visit the homes of victims who have reported violence, but respondents who have been visited find this inappropriate and useless.
- Roma women victims of violence who applied to the CSA for accommodation in a shelter for victims of violence together with their children did not receive it under the pretext of not having enough space in the available centres.
- Accommodation in a shelter for women victims of violence was offered to one of the respondents, but in the city of Strumica, due to the lack of a shelter in Štip.
- None of the female victims received a positive response to the request for social housing.
- There is no publicly available information on the persons who are granted social housing.
- Social assistance in the form of child allowance was taken away from Roma women victims of violence due to employment.

- The Centre for Social Affairs provided social packages for Roma women victims of violence during the pandemic and this was assessed as a positive measure by the respondents.

Health institutions:

- Health workers report domestic violence only if the victim with injuries emphasizes that the injuries occurred during domestic violence.
- In most cases, the health workers acted appropriately in providing care for the patients victims of domestic violence.
- The health officers do not recognize and report domestic violence independently ex officio, without being explicitly stated or reported by the victim.
- In most of the cases, health care workers charge the regular gynaecological examinations (PAP test, mammography, examinations during pregnancy), even though by law they are free of charge.
- Contraceptives are too expensive for the vulnerable category of Roma women-victims of violence.
- There is a suspicion of forced sterilization of a Roma woman after performing an abortion procedure.
- Inadequate treatment when admitting a Roma patient with reasonable suspicion of stillbirth in the ninth month of pregnancy, health professionals strive for natural childbirth, which puts the life of the woman at risk.
- Lack of centre for victims of sexual violence in the health institutions within the Municipality of Štip.

NGOs:

- Properly and efficiently provide free legal aid in case of divorce from the perpetrator and mediate in obtaining documentation-CSO EHO- Štip.
- Provide appropriate support and encourage women victims to leave the violent environment - CSO EHO- Štip.
- Roma women are satisfied with the approach and believe that they have received and still receive adequate assistance and support from non-governmental organizations (EHO Štip) when reporting domestic violence.
- Provide appropriate and accurate information and guidance on the process of reporting domestic violence through the SOS line.
- Lack of shelter for women victims of violence and their children led by a civil organization on the territory of the municipality of Štip.
- Lack of specialized psycho-social counselling for women victims of violence and their children led by a civil organization on the territory of the municipality of Štip.

- Taking action

Police:

- Gender sensitization and education on the forms of gender-based violence for police officers. Regular upgrading of knowledge and training for appropriate treatment of women and children victims of domestic violence as a vulnerable category of citizens.
- Training for effective interpretation and monitoring of the obligations of police officers arising from the Law on prevention and protection from violence against women and domestic violence.

- Regular training of police officers for non-selective treatment of citizens from minority ethnic communities (Roma).
- Training for effective interpretation of the Law on prevention and protection against discrimination and monitoring of the duties of police officers.
- Regular annual assessment of police officers' perceptions and attitudes about gender equality, gender-based violence and discrimination.
- In accordance with the results, holding additional and appropriate trainings in cooperation with the civil society sector.
- Appropriate and professional action by police officers. Regular recording of reports of any form of violence against women and domestic violence regulated by national legislation and the Istanbul Convention and initiating proceedings. Removing the abuser from the home and guaranteeing the safety of the victim through regular controls after the abuser returns home.
- Appropriate sanctions for police officers who do not act ex officio and abuse their job position.
- Amendment of the legislation governing the conduct of the police in cases of violence against women and domestic violence, in accordance with the obligations of the Istanbul Convention.

Centre for Social Affairs:

- Opening centres for education, further education and training for Roma women and girls for their economic empowerment to enable their financial independency.
- Opening a crisis centre for victims of domestic violence that will accommodate women and their children urgently when reporting domestic violence in a period of 2 to 7 days, until finding long-term accommodation.
- Opening of a functional shelter for women and children victims of domestic violence in which they would be accommodated in the long run for a period of 3 to 9 months, ie until the period of their economic empowerment.
- Changing the legislation and long-term removal of the perpetrator from the home when committing domestic violence. The victim and the children should remain living in the home.
- Introduction / opening of a mandatory counselling centre for perpetrators of domestic violence where they will work on behaviour change, anger / rage management, addiction treatment, economic empowerment through job training and employment assistance. Implementation of such a program in the prison institutions in order to change the behaviour and non-repetition of the crime of domestic violence after the execution of the prison sentence.
- Increase and strengthen the cooperation of the CSA with the civil sector in the municipality, in order to provide effective and comprehensive support to Roma women victims of violence.

Health institutions:

- Gender sensitization of health professionals and training for appropriate treatment, when admitting Roma women victims of violence.
- Regular training of health professionals to identify women victims of domestic violence and to report suspicion of domestic violence in accordance with official duty.
- Opening a centre for protection and reporting of sexual violence.
- Adequate provision of sexual and reproductive services for Roma women and provision of free services were allowed by law.

CSOs:

- Providing adequate education for recognising and reporting of gender-based violence for Roma women.
- Provide funds for opening functional shelter and all necessary services for women victims of violence on the territory of the city of Stip.
- Establishing and maintaining cooperation with local institutions.
- Reporting cases of discrimination against Roma women by submitting complaints to the relevant bodies.
- Reporting inappropriate operations and actions by civil servants to the relevant inspection services.

Recommendations and conclusion

[recommendations for next steps, e.g. argue with the Five Factors of LNOB¹⁶ and identify 3-5 priority SDGs where most urgent action is needed and also structure recommendations by high effect, medium effect, low effect)

Problem identification	SDG ¹⁷	High effect	Medium effect	Low effect	Key institutions
	SDG				
	Recommendation 1				
	Recommendation 2...				
	SDG				
	Recommendation 1				
	Recommendation 2...				
	SDG				
	Recommendation 1				
	Recommendation 2...				

¹⁶ For more on five factors of LNOB please visit the UNSDG guidelines on [“Leave No One Behind. A UNSDG operational guide for UN Country Teams”](#), pp. 13

¹⁷ 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.

	SDG				
	Recommendation 1				
	Recommendation 2...				
	SDG				
	Recommendation 1				
	Recommendation 2...				

Appendix

- Survey Questionnaire
- (Additional) survey result